

STATE AND CONSUMER SERVICES AGENCY . GOVERNOR FOMUND G. BROWN JR

#### CALIFORNIA BOARD OF OCCUPATIONAL THERAPY 2005 Evergreen Street, Suite 2050, Sacramento, CA 95815-3827

P [916-263-2294] F [916-263-2701] | www.bot.ca.gov



### TELECONFERENCE PRACTICE COMMITTEE **MEETING NOTICE & AGENDA**

**Department of Consumer Affairs** Donner Lake Room

2005 Evergreen Street Sacramento, CA 95815

For Directions ONLY (916) 263-2294

4040 Grandview Blvd., #43 Los Angeles, CA 90066

For Directions ONLY

**Loma Linda University** OT Department Nichol Hall, Room A909

Loma Linda, CA 92350

For Directions ONLY (909) 810-7807

30622 Via Pared Thousand Palms, CA 92276

For Directions ONLY

Kaiser Permanente French Campus

4131 Geary Blvd., Room 308 San Francisco, CA 94118

For Directions ONLY (415) 833-3955

321 Soderberg Road, D12

Allyn, WA 98524

For Directions ONLY (415) 833-3955

### **Tuesday, July 17, 2012**

#### 4:00 pm - Practice Committee Meeting

The public may provide comment on any issue before the committee at the time the matter is discussed.

- A. Call to order, roll call, and establishment of a quorum.
- B. Approval of the August 25, 2011, Committee meeting minutes
- C. Approval of the November 4, 2011, Committee meeting minutes
- D. Review and discussion of Practice Committee's Roles and Responsibilities and consideration of recommending changes to the Board
- E. Discussion and consideration of revising Title 16, Division 39, California Code of Regulations, Section 4123, Limited Permit.
- F. Discussion and consideration of amending Title 16, Division 39, California Code of Regulations, Sections 4150 – 4155, relating to advanced practices.
- G. Discussion and review of post-professional education courses submitted by providers.
- H. Discussion and review of courses submitted by licensees in response to a continuing competency audit.
- I. Future agenda items.

Practice Committee July 17, 2012 Page Two

- J. Public comment on items not on agenda.
- K. Adjournment.

# ALL TIMES ARE APPROXIMATE AND SUBJECT TO CHANGE ACTION MAY BE TAKEN ON ANY ITEM ON THE AGENDA; ITEMS MAY BE TAKEN OUT OF ORDER

Questions regarding this agenda should be directed to Heather Martin, Executive Officer, at the Board's office in Sacramento. Meetings of the California Board of Occupational Therapy are open to the public except when specifically noticed otherwise in accordance with the Open Meeting Act. A quorum of the board may be present at the committee meeting. Board members who are not members of the committee may observe but not participate or vote. Public comment is appropriate on any issue before the workshop at the time the issue is heard, but the chairperson may, at his or her discretion, apportion available time among those who wish to speak. The meeting is accessible to individuals with disabilities. A person who needs disability related accommodations or modifications in order to participate in the meeting shall make a request to Tabatha Montoya at (916) 263-2294 or 2005 Evergreen Street, Suite 2050, Sacramento, California, 95815. Providing at least five working days notice before the meeting will help ensure the availability of accommodations or modifications.

## AGENDA ITEM B

## APPROVAL OF THE AUGUST 25, 2011, COMMITTEE MEETING MINUTES.

The draft minutes are attached for review.



#### STATE AND CONSUMER SERVICES AGENCY . GOVERNOR EDMUND G. BROWN JR

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# TELECONFERENCE PRACTICE COMMITTEE MINUTES MEETING NOTICE & AGENDA

Committee Members Present
Linda Florey, Committee Chair
Richard Bookwalter, OT
Mary Kay Gallagher, OT
Didi Olson, OT
Sharon Pavlovich, OTA
Christine Wietlisbach, OT

Board Staff Present
Heather Martin, Executive Officer

Committee Members Absent None

Thursday, August 25, 2011

A. Call to order, roll call, and establishment of a quorum.

Linda Florey called the meeting to order at 1:05. Heather Martin called the roll. A quorum of the Committee was established.

- B. Approval of the February 17, 2011, Committee meeting minutes.
  - ❖ Christine Wietlisbach moved to approve the February 17, 2012, meeting minutes.
  - Didi Olson seconded the motion.

Roll Call Vote
Linda Florey
Richard Bookwalter
Mary Kay Gallagher
Didi Olson
Sharon Pavlovich
Christine Wietlisbach
Aye
Aye
Aye
Aye
Aye

- The motion was adopted.
- C. Approval of the April 7, 2011, Committee meeting minutes.
  - ❖ Christine Wietlisbach moved to approve the April 7, 2012, meeting minutes.
  - \* Richard Bookwalter seconded the motion.

Roll Call Vote	
Linda Florey	Aye
Richard Bookwalter	Aye
Mary Kay Gallagher	Aye
Didi Olson	Aye
Sharon Pavlovich	Aye
Christine Wietlisbach	Aye

The motion was adopted.

# D. Review and discussion of Practice Committee's Roles and Responsibilities and consideration of recommending changes to the Board.

The Committee reviewed the Roles and Responsibilities document, which had not been reviewed since 2006.

- Christine Wietlisbach moved to add a new #9 to the document, including "Assist staff with responding to practice-related questions."
- Sharon Pavlovich seconded the motion.

After further discussion, the Committee felt the item regarding assisting staff was covered in the current version of the Roles and Responsibilities document.

❖ Christine Wietlisbach rescinded the motion.

# E. Discussion and consideration of revising Title 16, Division 39, California Code of Regulations, Section 4123, Limited Permit.

Heather Martin explained that staff proposed amending Section 4123, California Code of Regulations, relating to the issuance of limited permits to address an on-going problem. First, Business and Professions Code (BPC) Section 2570.5, the law authorizing the issuance of a limited permit, states that an applicant who meets the qualifications to be admitted to the examination required for licensure, and is "waiting to take the examination or awaiting the announcement of the results of the examination" may be granted a limited permit.

When an applicant applies for a limited permit but has already taken and passed the exam, Board staff advise the applicant of their eligibility for licensure. However, official transcripts evidencing completion of the requisite educational program is required for licensure; transcripts are not required in order for a limited permit to be issued.

Thus, an applicant who takes and passes the examination right away after graduation, may not be able to provide their transcripts (due to no fault of their own; the college or university may be experiencing delays in the issuance of the transcripts). Therefore, the applicant is disadvantaged because they are ineligible for license (can't produce transcripts) and ineligible for a limited permit (already taken/passed the examination).

After further discussion, the Committee tabled this item for a future meeting.

# F. Discussion and consideration of adding Title 16, Division 39, California Code of Regulations, Section 4171, Notification to Consumers.

The Committee reviewed draft regulatory language presented, regarding a notice to consumers, which meets the statutory of BPC Sections 138, 680, and 680.5. The Committee discussed those exempt from the requirement to wear a name tag with specified font size, including the licensee's first and last name, license type and number, and the highest level of academic degree, include those in home health, schools, and several other health facility types, as specified.

- Christine Wietlisbach moved to recommend the Board approve the draft regulatory language as presented.
- \* Richard Bookwalter seconded the motion.

Roll Call Vote	
Linda Florey	Aye
Richard Bookwalter	Aye
Mary Kay Gallagher	Aye
Didi Olson	Aye
Sharon Pavlovich	Aye
Christine Wietlisbach	Aye

❖ The motion was adopted.

#### G. Future agenda items.

No additional items were requested.

### H. Public comment on items not on agenda.

No public comment provided.

#### I. Adjournment.

The meeting adjourned at 2:14 pm.

## AGENDA ITEM C

## APPROVAL OF THE NOVEMBER 4, 2011, COMMITTEE MEETING MINUTES.

The draft minutes are attached for review.

## AGENDA ITEM D

REVIEW AND DISCUSSION OF THE PRACTICE COMMITTEE'S ROLES AND RESPONSIBILITIES.

# California Board of Occupational Therapy PRACTICE COMMITTEE

## **Roles & Responsibilities**

- 1. Review and provide recommendations to Board staff on *Applications* for *Advanced Practice Post-Professional Education* received from course providers;
- 2. Review and provide recommendations to Board staff on initial applications for licenses/certificates received from individuals who have not been engaged in the practice occupational therapy for five years;
- Review and provide recommended responses to the Board on various practice issues/questions submitted by licensees and consumers;
- 4. Provide guidance on continuing competency audits, including reviewing and providing recommendations on audit responses, if necessary;
- 5. Review and provide recommendations to Board staff on applicants for the Expert Reviewer Program;
- 6. Review and provide recommendations to Board staff on revisions to various applications and forms used by the Board;
- 7. Review and provide recommendations to the Board on practice related proposed regulatory amendments.
- 8. Establish resource pool of Expert Reviewers to review and provide recommendations to Board staff on *Applications for Advanced Practice Approval* in hand therapy, physical agent modalities, and swallowing assessment, evaluation, or intervention.

### BPC Section 2570.5.

- (a) A limited permit may be granted to any person who has completed the education and experience requirements of this chapter.
- (b) A person who meets the qualifications to be admitted to the examination for licensure under this chapter and is waiting to take the examination or awaiting the announcement of the results of the examination, according to the application requirements for a limited permit, may practice as an occupational therapist or as an occupational therapy assistant under the direction and appropriate supervision of an occupational therapist duly licensed under this chapter. If that person fails to pass the examination during the initial eligibility period, all privileges under this section shall automatically cease upon due notice to the applicant of that failure and may not be renewed.
- (c) A limited permit shall be subject to other requirements set forth in rules adopted by the board.

### CCR Section 4123. Limited Permit.

- (a) To qualify for a limited permit, a person must have applied to the National Board for Certification in Occupational Therapy (NBCOT) to take the licensing examination within four (4) months of completing the education and fieldwork requirements for licensure or certification and request NBCOT provide their examination score report be forwarded to the Board.
- (1) Upon receipt from NBCOT, the applicant must forward to the Board a copy of the Authorization to Test (ATT) letter.
- (2) The applicant must provide documentation or other evidence to the Board, to prove that the applicant requested their examination score be sent from NBCOT to the Board, before a limited permit may be issued.
- (3) A limited permit shall only be valid for three (3) months from the date of issuance by the Board, upon receipt of a failing result, or two (2) weeks following the expiration of the applicants' eligibility to test period, whichever occurs first.
- (4) The limited permit holder must immediately notify the Board of the results of the examination.
- (5) The limited permit holder must provide to the Board the name, address and telephone number of his or her employer and the name and license number of his or her supervising occupational therapist (OT). Any change of employer or supervising OT must be provided to the Board, in writing, within 10 days of the change.
- (b) A limited permit shall not be denied to an applicant that has completed the fingerprint, education and examination requirements yet is unable to provide transcripts due to the college or university's inability to make the transcripts available in a timely manner. A limited permit issued pursuant to this section shall only be valid for three (3) months from the date of issuance by the Board.
- (b) (c) The limited permit will be cancelled, and the fee forfeited, upon notification to the Board or the limited permit holder by the test administrator that the holder failed to pass the first examination.

Note: Authority cited: Sections 2570.5 and 2570.20, Business and Professions Code. Reference: Sections 2570.5, 2570.6, 2570.7, 2570.9, 2570.16 and 2570.26, Business and Professions Code; and Sections 4100, 4102, 4110, 4111, 4112, 4114, 4120 and 4130, California Code of Regulations.

## AGENDA ITEM E

## AGENDA ITEM F



**Herman Ostrow School of Dentistry** of USC

Division of Occupational Science and Occupational Therapy

### **Statement to CBOT Practice Committee**

Heather Martin -To:

heather.martin@dca.ca.gov

From: Ianice D. Rocker, MS, OTR/L, CHT

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Hand Therapy/Physical Agent Modalities (HT/PAM) Accreditation Regulations Re:

**Date:** October 28, 2011

At the October 2011 Annual OTAC Conference in Sacramento, I had the pleasure of meeting and discussing HT/PAM accreditation regulations with Mary Everett, Christine Wietlisbach, and Heather Martin. Per their recommendations, I also had a follow-up conversation with Luella Grandgaard. Based upon everyone's suggestions, I am writing to request that CBOT place the guidelines for accreditation on the upcoming agenda in order to clarify the regulations. Specifically, the following sections need further specification:

Regulation 4150 (b): "Post professional education and training' means education and training obtained subsequent to the qualifying degree program or beyond current ACOTE standards for the qualifying degree program."

With respect to regulation 4150 (B), we interpret the clause "or beyond current ACOTE Standards for the qualifying degree program" to indicate that courses taken in partial fulfillment of the professional degree, but which go beyond current ACOTE standards, can be counted toward HT/PAM accreditation. The rationale for this interpretation is that ACOTE Standards reflect the minimum requirements for program accreditation. However, programs such as ours include advanced practice courses that contain content equivalent to or in some cases more advanced than that routinely offered in post-professional or continuing education courses.

Regulation 4151 (a)(2): "Training: Completion of 480 hours of supervised on-the-job training, clinical internship or affiliation, which may be paid or voluntary, pertaining to hand therapy."

With respect to Regulation 4151 (a)(2), since the terms "clinical internship or are typically used to signify clinical experiences obtained during professional education in occupational therapy, we assume that a Level II fieldwork experience containing HT/PAM experiences would count toward the practice hours requirement for accreditation.

We believe, assuming our interpretation of the regulations is correct, and this interpretation is accepted as a clear-cut guideline, the process of determining whether or not an individual meets the requirements will be straightforward and enhance consistency of judgment across applications.

Thank you for your willingness to consider our input.

#### **ARTICLE 6. ADVANCED PRACTICES**

### § 4150. Definitions

For the purpose of this article:

- (a) "ACOTE" means the Accreditation Council for Occupational Therapy Education.
- (b) "Post professional education and training" means education and training obtained subsequent to the qualifying degree program or beyond current ACOTE standards for the qualifying degree program.
- (c) "Contact hour" means sixty (60) minutes of coursework or classroom instruction.
- (d) "Semester unit" means fifteen (15) contact hours.
- (e) "Quarter unit" means ten (10) contact hours.
- (f) "Rehabilitation of the hand, wrist, and forearm" as used in Code section 2570.2(I) refers to occupational therapy services performed as a result of surgery or injury to the hand, wrist, or forearm.
- (g) "Upper extremity" as used in Code section 2570.3(e) includes education relating to the hand, wrist, or forearm.
- (h) "Swallowing" as used in Code section 2570.3 is the passage of food, liquid, or medication through the pharyngeal and esophageal phases of the swallowing process.
- (i) "Instrumental evaluation" is the assessment of any aspect of swallowing using imaging studies that include, but are not limited to, endoscopy and videofluoroscopy
- (1) "Endoscopic evaluation of swallowing" or "endoscopy" is the process of observing structures and function of the swallowing mechanism to include the nasopharynx, oropharynx, and hypopharynx.
- (2) "Videofluoroscopic swallowing study" or "videofluoroscopy" is the fluoroscopic recording and videotaping of the anatomy and physiology of the oral cavity, pharynx, and upper esophagus using a variety of bolus consistencies to assess swallowing function. This procedure may also be known as videofluorography, modified barium study, oral-pharyngeal motility study and videoradiography.

Note: Authority cited: Sections 2570.3 and 2570.20, Business and Professions Code. Reference: Sections 2570.2 and 2570.3, Business and Professions Code.

## § 4151. Hand Therapy

- (a) Hand therapy services may be performed only when an occupational therapist has demonstrated to the Board that he or she has met the post professional education and training requirements established by this section as follows:
- (1) Education: Completion of 45 contact hours in the subjects listed in Code section 2570.3(e), including 30 hours specifically relating to the hand, wrist, and forearm.
- (2) Training: Completion of 480 hours of supervised on-the-job training, clinical internship or affiliation, which may be paid or voluntary, pertaining to hand therapy.
- (b) An occupational therapist providing hand therapy services using physical agent modalities must also comply with the requirements of section 4152. A maximum of 8 contact hours and 60 hours of supervised on-the-job training, clinical internship or affiliation, paid or voluntary, completed under section 4152 will be credited toward the requirements of this section.

(c) An occupational therapist may provide only those hand therapy services he or she is competent to perform.

Note: Authority cited: Sections 2570.3 and 2570.20, Business and Professions Code. Reference: Sections 2570.2 and 2570.3, Business and Professions Code.

## § 4152. Physical Agent Modalities

- (a) Physical agent modalities may be used only when an occupational therapist has demonstrated to the Board that he or she has met the post professional education and training requirements established by this section as follows:
  - (1) Education: Completion of 30 contact hours in the subjects listed in Code section 2570.3(f).
  - (2) Training: Completion of 240 hours of supervised on-the-job training, clinical internship or affiliation, which may be paid or voluntary, pertaining to physical agent modalities.
  - (b) An occupational therapist may use only those physical agent modalities he or she is competent to use.

Note: Authority Cited: Sections 2570.3 and 2570.20, Business and Professions Code. Reference: Sections 2570.2 and 2570.3, Business and Professions Code.

## § 4152.1. Use of Topical Medications

- (a) As used in this section, "topical medications" means medications applied locally to the skin or underlying tissue where such medications require a prescription or order under federal or state law. The following medications are applicable to the practice of occupational therapy and may be used by an occupational therapist:
- (1) Bacteriocidal agents;
- (2) Debriding agents;
- (3) Topical anesthetic agents;
- (4) Anti-inflammatory agents;
- (5) Antispasmodic agents; and
- (6) Adrenocortico-steroids.
- (b) An occupational therapist shall apply or administer topical medications in accordance with this subsection.
- (1) Any topical medication applied or administered shall have been ordered on a specific or standing basis by a practitioner legally authorized to order or prescribe such medication pursuant to Business and Professions Code section 2571(a).
- (2) An occupational therapist may administer a topical medication by the use of a physical agent modality, only if the occupational therapist is approved by the Board in the advanced practice area of physical agent modalities.
- (3) An occupational therapist shall follow written protocols in applying or administering topical medications The protocols shall:
- (A) Be prepared by the facility within which the topical medications are being applied or administered;
- (B) Be approved by the medical director or equivalent of the facility;
- (C) Include a description of each medication, its actions, its indications and

contraindications, and the proper procedure and technique for application;

- (D) Require that the administration be consistent with the manufacturer's guidelines for any equipment to be used in the administration of the topical medication; and
- (E) Be based on research and evidence-based practice, pharmaceutical standards of practice and known desired outcomes.
- (4) Supervision of the application or administration of topical medications by an occupational therapy assistant under this section shall be in accordance with Article 9.
- (c) Under no circumstance does this section authorize an occupational therapist or occupational therapist assistant to administer a medication via injection.

Note: Authority cited: Sections 163.5 and 2570.20, Business and Professions Code. Reference: Section 2571, Business and Professions Code.

## § 4153. Swallowing Assessment, Evaluation, or Intervention

- (a) The role of an occupational therapist in instrumental evaluations is to observe structure and function of the swallowing mechanism in order to assess swallowing capability and determine swallowing interventions. The occupational therapist may not perform the physically invasive components of the instrumental evaluation.
- (b) Swallowing assessment, evaluation or intervention may be performed only when an occupational therapist has demonstrated to the Board that he or she has met the post professional education and training requirements established by this section as follows:
- (1) Education: Completion of 45 contact hours in the following subjects:
- (A) Anatomy, physiology and neurophysiology of the head and neck with focus on the structure and function of the aerodigestive tract;
- (B) The effect of pathology on the structures and functions of the aerodigestive tract including medical interventions and nutritional intake methods used with patients with swallowing problems;
- (C) Interventions used to improve pharyngeal swallowing function.
- (2) Training: Completion of 240 hours of supervised on-the-job training, clinical internship or affiliation, which may be paid or voluntary, pertaining to swallowing assessment, evaluation or intervention. An occupational therapist in the process of completing the training requirements of this section may practice swallowing assessment, evaluation or intervention under the supervision of an occupational therapist who has been approved under this article, a speech language pathologist with expertise in this area, or a physician and surgeon.
- (c) An occupational therapist may provide only those swallowing assessment, evaluation or intervention services he or she is competent to perform.

Note: Authority cited: Sections 2570.3 and 2570.20, Business and Professions Code. Reference: Sections 2570.2 and 2570.3, Business and Professions Code.

## § 4154. Post Professional Education and Training

- (a) Post professional education courses shall be obtained at any of the following:
- (1) College or university degree programs accredited or approved by ACOTE;
- (2) College or university degree programs accredited or approved by the Commission on Accreditation in Physical Therapy Education;

- (3) Colleges or universities with Speech and Hearing Programs accredited or approved by the Council on Academic Accreditation in Audiology and Speech-Language Pathology;
- (4) Any approved provider. To be approved by the Board the provider shall submit the following:
- (A) A clear statement as to the relevance of the course to the advanced practice area.
- (B) Information describing, in detail, the depth and breadth of the content covered (e.g., a course syllabus and the goals and objectives of the course) particularly as it relates to the advanced practice area.
- (C) Information that shows the course instructor's qualifications to teach the content being taught (e.g., his or her education, training, experience, scope of practice, licenses held, and length of experience and expertise in the relevant subject matter), particularly as it relates to the advanced practice area.
- (D) Information that shows the course provider's qualifications to offer the type of course being offered (e.g., the provider's background, history, experience, and similar courses previously offered by the provider), particularly as it relates to the advanced practice area; or
- (5) A provider that has not been approved by the Board, if the applicant occupational therapist demonstrates that the course content meets the subject matter requirements set forth in sections 2570.3(e) or 2570.3(f) of the Code, or section 4153 of these regulations, and submits the following:
- (A) Information describing, in detail, the depth and breadth of the content covered (e.g., a course syllabus and the goals and objectives of the course) particularly as it relates to the advanced practice area.
- (B) Information that shows the course instructor's qualifications to teach the content being taught (e.g., his or her education, training, experience, scope of practice, licenses held, and length of experience and expertise on the relevant subject matter), particularly as it relates to the advanced practice area.
- (b) Post professional training shall be supervised which means, at a minimum:
- (1) The supervisor and occupational therapist have a written agreement, signed and dated by both parties prior to accruing the supervised experience, outlining the plan of supervision and training in the advanced practice area. The level of supervision is determined by the supervisor whose responsibility it is to ensure that the amount, degree, and pattern of supervision is consistent with the knowledge, skill and ability of the occupational therapist, and appropriate for the complexity of client needs and number of clients for whom the occupational therapist is providing advanced practice services.
- (2) The supervisor is readily available in person or by telecommunication to the occupational therapist while the therapist is providing advanced practice services.
- (3) The supervisor does not have a co-habitative, familial, intimate, business, excluding employment relationships, or other relationship that could interfere with professional judgment and objectivity necessary for effective supervision, or that violates the Ethical Standards of Practice, pursuant to section 4170.
- (c) Post professional education and training must be completed within the five years immediately preceding the application for approval in each advanced practice area.

Note: Authority cited: Sections 2570.3 and 2570.20, Business and Professions Code. Reference: Sections 2570.2 and 2570.3, Business and Professions Code.

## § 4155. Application for Approval in Advanced Practice Areas

In order to provide any of the advanced practice services set forth in Code section 2570.3(d), an occupational therapist shall apply to the Board and receive approval in that advanced practice area.

- (a) To apply for approval, an occupational therapist shall submit to the Board an application as specified in subsections (1), (2), or (3), along with the required documentation.
- (1) Applicants seeking approval in the area of Hand Therapy shall submit the Application for Advanced Practice Approval in Hand Therapy (Form APH, Rev. 10/09), hereby incorporated by reference;
- (2) Applicants seeking approval in the use of physical agent modalities shall submit the Application for Advanced Practice Approval in Physical Agent Modalities (Form APP, Rev. 10/09), hereby incorporated by reference;
- (3) Applicants seeking approval in the area of Swallowing Assessment, Evaluation, or Intervention shall submit the Application for Advanced Practice Approval in Swallowing (Form APS, Rev. 10/09), hereby incorporated by reference;
- (b) The documentation must include the following:
- (1) Documented proof of attendance and completion of each course (i.e., certificate of completion or transcript).
- (2) Evidence of the number of contact hours completed for each course for courses that are not Board approved.
- (3) Outline or syllabus of each course for courses that are not Board approved.
- (4) Information describing, in detail, the depth and breadth of the content covered (e.g., a course syllabus and the goals and objectives of the course) as it relates to the advanced practice area.
- (5) Resume or credentials of each instructor for courses that are not Board approved.
- (6) Verification of completion of supervised on-the-job training, clinical internship or affiliation reflecting the nature of the training and the number of hours. Such verification must be signed by the supervisor(s) under penalty of perjury.
- (c) An advanced practice application not completed within six months of receipt or notification of deficiency, whichever is later, shall be deemed abandoned.
- (d) An application submitted subsequent to the abandonment of a previous application shall be treated as a new application.

Note: Authority cited: Sections 2570.3 and 2570.20, Business and Professions Code. Reference: Sections 2570.2 and 2570.3, Business and Professions Code.