

CHAPTER 35

BOARD OF MEDICAL EXAMINERS

Authority

N.J.S.A. 45:9-2.

Source and Effective Date

R.1999 d.356, effective September 20, 1999.
See: 31 N.J.R. 1742(a), 31 N.J.R. 3117(a).

Executive Order No. 66(1978) Expiration Date

Chapter 35, Board of Medical Examiners, expires on September 20, 2004.

Chapter Historical Note

Chapter 35, Board of Medical Examiners, was filed and became effective prior to September 1, 1969.

Chapter 35, Board of Medical Examiners, was repealed and Chapter 35, Board of Medical Examiners, was adopted as new rules by R.1983 d.314, effective August 1, 1983. See: 15 N.J.R. 503(a), 15 N.J.R. 1255(a).

Subchapter 7, Chiropractic Practice, was adopted as R.1984 d.533, effective November 19, 1984. See: 16 N.J.R. 686(a), 16 N.J.R. 3208(a).

Pursuant to Executive Order No. 66(1978), Chapter 35, Board of Medical Examiners, was readopted as R.1989 d.532, effective September 21, 1989. See: 21 N.J.R. 2226(b), 21 N.J.R. 3307(a).

Subchapter 6A, Declarations of Death upon the Basis of Neurological Criteria, was adopted as R.1992 d.309, effective August 3, 1992. See: 23 N.J.R. 3635(a), 24 N.J.R. 2731(c).

Subchapter 2A, Limited Licenses: Certified Nurse Midwifery, was adopted as R.1992 d.332, effective Subchapter 8, 1992. See: 23 N.J.R. 3632(a), 24 N.J.R. 3094(a).

Subchapter 9, Acupuncture, was adopted as R.1993 d.299, effective June 21, 1993. See: 24 N.J.R. 4013(a), 25 N.J.R. 2689(c).

Subchapter 10, Athletic Trainers, was adopted as R.1993 d.546, effective November 1, 1993. See: 25 N.J.R. 265(a), 25 N.J.R. 4935(a), 26 N.J.R. 483(a).

Pursuant to Executive Order No. 66(1978), Chapter 35, Board of Medical Examiners, was readopted as R.1994 d.522, effective September 19, 1994, and Subchapter 7, Chiropractic Practice, was repealed by R.1994 d.522, effective October 17, 1994. See: 26 N.J.R. 2526(a), 26 N.J.R. 4195(a).

Subchapter 2B, Limited Licenses: Physician Assistants, was adopted as R.1994 d.538, effective November 7, 1994. See: 25 N.J.R. 5099(b), 26 N.J.R. 4411(b).

Subchapter 11, Alternate Resolution Program, was adopted as R.1995 d.339, effective June 19, 1995. See: 27 N.J.R. 1363(a), 27 N.J.R. 2412(a).

Subchapter 7, Prescription, Administration and Dispensing of Drugs, was adopted as R.1997 d.475, effective November 3, 1997. See: 29 N.J.R. 842(a), 29 N.J.R. 4706(a).

Subchapter 4A, Surgery, Special Procedures, and Anesthesia Services Performed in an Office Setting, was adopted as R.1998 d.294, effective June 15, 1998. See: 29 N.J.R. 2238(a), 30 N.J.R. 2236(b).

Petition for Rulemaking. See: 30 N.J.R. 740(c), 1642(a).

Pursuant to Executive Order No. 66(1978), Chapter 35, Board of Medical Examiners, was readopted as R.1999 d.356, effective September 20, 1999. See: Source and Effective Date. See, also, section annotations.

Law Review and Journal Commentaries

How New Jersey Regulates Doctors. Theodosia Tamborlane, 132 N.J.L.J. No. 15, S24 (1992).

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SUBCHAPTER 1. MEDICAL SCHOOLS, COLLEGES, EXTERNSHIPS, CLERKSHIPS AND POST-GRADUATE WORK**13:35-1.1 Observership program**

(a) "Observer" shall mean an undergraduate medical student of an allopathic or osteopathic school accredited either by the Liaison Committee on Medical Education or the American Osteopathic Association or a foreign medical school listed in the World Health Organization Directory and whose graduates are accepted by the New Jersey Board

of Medical Examiners as eligible to sit for the licensure examination. Observerships are limited to the student's vacation period in an extra-curricular professional experience as delineated in this section.

(b) An observership program shall be limited to:

1. Observation of operative procedures;
2. The taking of histories;
3. The performance of physical examinations;
4. The performance of non-invasive procedures under the direct supervision of and in the immediate presence of the supervising licensed physician; and
5. The participation in patient rounds and other organized patient care activities of the supervising physician.

(c) At no time shall the observer be delegated any responsibility for the care of the patient, the patient's diagnosis or any aspect of the patient's treatment, including the prescription of medication for the patient. An observer shall make no entries on the patient's permanent record.

(d) The observer shall at all times of patient contact wear an identifying badge inscribed "Medical Student."

(e) Prior to commencing participation in an observership program, the student shall have obtained written permission from the Chief of Staff and the Administration of the participating hospital and shall retain such letter.

(f) Under no circumstances shall the performance of any of the duties listed in (b) above by an observer, while engaged in such a program, be construed as the practice of medicine.

(g) The time spent in an observership program shall not be considered as part of or credited toward fulfillment of any statutory academic or clinical requirements for licensure.

Amended by R.1999 d.356, effective October 18, 1999.
See: 31 N.J.R. 1742(a), 31 N.J.R. 3117(a).

Substituted references to observers for references to externs and substituted references to observerships for references to externships throughout; in (a), substituted "delineated in this section" for "hereafter delineated" at the end; and in (f), substituted "duties listed in (b) above" for "above duties" following "any of the".

13:35-1.2 Fifth Pathway

(a) The Board shall accept application for licensure from an applicant who does not meet the usual statutory prerequisites for educational background, in the following circumstances to be known as the Fifth Pathway:

1. The applicant has completed the entirety of the academic curriculum in residence at a medical school in a foreign country located outside of the United States, Puerto Rico or Canada or in a school-authorized clinical training program;

2. The medical school was approved throughout the applicant's period of education by the government of the country of domicile to confer the degree of Doctor of Medicine and Surgery or its equivalent, and was listed in the World Health Organization Directory;

3. The applicant has satisfactorily completed all the requirements for a matriculated student of that foreign medical school to receive a diploma, except for internship and/or social service;

4. The applicant has achieved a passing score on a screening examination acceptable to the Educational Commission on Foreign Medical Graduates (ECFMG) even though not eligible for ECFMG certification; and

5. The applicant has had his or her academic record reviewed and approved by a medical school approved by the Liaison Committee on Medical Education, which school has accepted the applicant in a one-academic-year program of supervised clinical training under its direction, and the applicant has satisfactorily completed that program as evidenced by receipt of a certificate issued by the sponsoring medical school.

(b) The applicant meeting the requirements in (a) shall thereafter be deemed by the Board to be eligible to enter a graduate training program approved by the Accreditation Council for Graduate Medical Education (ACGME) or the American Osteopathic Association (AOA). Upon satisfactory completion of the three years of post-graduate training required by N.J.A.C. 13:35-3.11, the applicant may apply for licensure in this State.

Amended by R.1989 d.532, effective October 16, 1989.
See: 21 N.J.R. 2226(b), 21 N.J.R. 3307(a).
Rule deleted and replaced with new text.

13:35-1.3 Postgraduate training

Postgraduate training shall be taken under the auspices of a hospital or hospitals accredited for such training by the Accreditation Council for Graduate Medical Education (ACGME) or by the American Osteopathic Association (AOA) or by the American Podiatric Medical Association (APMA), as applicable to the profession. The program shall further be acceptable to the Board, which shall take into account the standards adopted by the Advisory Graduate Medical Education Council (AGMEC).

Amended by R.1989 d.532, effective October 16, 1989.
See: 21 N.J.R. 2226(b), 21 N.J.R. 3307(a).
Rule deleted and replaced with new text.

Case Notes

Reasonable regulation of advertising. Att'y Gen. Form Op. No. 20 (1977).

13:35-1.4 Military service in lieu of M.D. or D.O. internship or postgraduate training

The Board may grant a license to practice medicine and surgery to any person who shall furnish proof, satisfactory to the Board, that such person has fulfilled all of the formal requirements established by law, and who has served at least two years in active military service in the United States Army, Air Force, Navy, Marine Corps, Coast Guard or the U.S. Public Health Service as a commissioned officer and physician and surgeon in a medical facility which the Board determines constitutes the substantial equivalent of the approved internship or residency training program required by law; provided, however, that such military service actively occurred subsequent to graduation from an approved medical school.

Amended by R.1989 d.532, effective October 16, 1989.
See: 21 N.J.R. 2226(b), 21 N.J.R. 3307(a).

Reference to N.J.S.A. deleted and replaced with word "law".

13:35-1.5 Registration and permit requirements for graduate medical education programs in medicine or podiatry

(a) The following words and terms shall have the following meanings unless the context in this section indicates otherwise:

"Applicant" means a graduate of a medical or podiatric school, unlicensed in this State, seeking authorization to engage in the practice of medicine or podiatry as a resident in a graduate medical education program. A registration applicant is seeking authorization to participate in the first year of a graduate medical education program. A permit applicant is seeking authorization to participate in his or her second year (or beyond) of a graduate medical education program.

“Director” means a physician holding a plenary license to practice medicine and surgery in New Jersey who is responsible for the conduct of a graduate medical education program at a hospital licensed in this State and whose responsibilities shall include generally overseeing the selection, training and evaluation of residents. With respect to graduate medical education programs in podiatry, the director shall be a podiatric physician licensed to practice podiatry in New Jersey.

“Graduate Medical Education Program” means an education program, whether denominated as an internship, residency, or fellowship, which is accredited by the Accreditation Council on Graduate Medicine Education (ACGME) or by the American Osteopathic Association (AOA) in which the graduates of medical schools participate for a limited period of time under the supervision of plenary licensed physicians. With respect to podiatry, “Graduate Medical Education Program in Podiatry” means an education program, whether denominated as an internship, residency, or fellowship, which is accredited by the Council on Podiatric Medical Education of the American Podiatric Medicine Association (APMA) in which the graduates of podiatric schools participate for a limited period of time under the supervision of a licensed podiatric physician.

“Master list” means a list prepared by the director setting forth the name of each person seeking to practice medicine or podiatry in that graduate medical education program in New Jersey, designating the date of birth and medical or podiatric schools attended.

“Permit” means a document issued by the New Jersey State Board of Medical Examiners authorizing the holder to engage in the practice of medicine or podiatry in the second year of a graduate medical education program (or beyond) in medicine or podiatry in this State, subject to the limitations set forth in this rule.

“Permit holder” means a person authorized to engage in the practice of medicine or podiatry, as appropriate, while in the second year or beyond of a graduate medical education program in medicine or podiatry in the State of New Jersey, subject to the limitations set forth in this rule.

“Registered resident” means an applicant granted authorization to engage in the practice of medicine or podiatry in the State of New Jersey in the first year of a graduate medical education program, subject to the limitations set forth in this rule.

“Registration” means authorization to engage in the practice of medicine or podiatry in this State in the first year of a graduate medical education program subject to the limitations set forth in this rule.

“Resident” means a participant in training in a graduate medical education program in medicine or in podiatry at a licensed hospital in this State. For purposes of this rule,

persons serving in internships and fellowships shall be deemed residents.

(b) No unlicensed person shall engage in the practice of medicine or podiatry in the first year of a graduate medical education program unless and until he or she is registered with the Board. No unlicensed person shall engage in the practice of medicine or podiatry in the second year of graduate medical education or beyond unless or until he or she has been issued a permit by the Board.

(c) A registration applicant shall certify that he or she:

1. Has attained the preliminary educational prerequisites for licensure, including:

i. Completion of at least 60 undergraduate level credits, at a college or university attained prior to medical or podiatric school. With respect to medical residents, the credits shall include at least one course each in biology, chemistry and physics.

ii. With respect to medical residents, graduation from a medical school which, during each year of attendance, was either accredited by the Liaison Committee on Medical Education (LCME) or the American Osteopathic Association (AOA) or listed in the World Directory of Medical Schools. If the applicant has attended more than one medical school, he or she shall certify that each school attended was accredited or listed in the World Directory of Medical Schools during the same time he or she was matriculated and that the didactic training was completed in the jurisdiction where the school is authorized to confer a medical degree.

iii. With respect to podiatry residents, graduation from a college of podiatric medicine accredited by the Council on Podiatric Medical Education (CPME) of the American Podiatric Medicine Association (APMA). If the applicant has attended more than one college of podiatric medicine, he or she shall certify that each school attended was accredited or listed.

iv. Attendance at medical or podiatric school for at least 32 months prior to graduation.

v. With respect to medical students, where clinical clerkships have been completed away from the site of a medical school not approved by the LCME or AOA, satisfactory completion of clinical clerkships of at least four weeks duration each in internal medicine, surgery, obstetrics and gynecology, pediatrics and psychiatry at hospitals which maintained at the time of the clerkship a graduate medical education program in that field accredited by the LCME or the AOA;

2. Has never:

i. Been the subject of an administrative disciplinary proceeding by any state professional licensing agency;

ii. Been convicted of a criminal offense of any grade or admitted to a pre-trial diversionary program;

iii. Been denied licensure eligibility to sit for an examination or eligibility to participate in a postgraduate training program in this or any other state;

iv. Had privileges at a hospital terminated or curtailed for cause;

v. Been asked to resign from a graduate medical education program or hospital staff;

vi. Had privileges to prescribe controlled dangerous substances curtailed or limited by any regulatory authority; and

vii. Had privileges to participate in any state or Federal medical assistance program (Medicare, Medicaid) curtailed or limited by any regulatory authority;

3. Is not, at the time that the certification is executed, the subject of an administrative disciplinary proceeding by any state professional licensing agency, or other Federal or state regulatory authority (such as the U.S. Drug Enforcement Agency, Medicare or Medicaid), or the subject of any criminal proceeding (under arrest, indictment or accusation);

4. Is not physically or mentally incapacitated to a degree which would impair his or her ability to practice medicine or podiatry, as applicable, and is not at the time of application habituated to alcohol or a user of any controlled dangerous substance except upon good faith prescription of a physician; and

5. Has obtained ECFMG or Fifth Pathway certification, if he or she is a graduate of a foreign medical school.

(d) The Director shall obtain a registration form from each registration applicant and shall retain those forms, which may be subject to review by the Board. The Director shall certify that he or she has personally reviewed the registration form of each registration applicant who has accepted an offer of employment to ascertain that the registration applicant has certified that he or she has attained the prerequisites set forth in (c) above and that the Director is unaware of any information which would contradict any of the representations contained in that registration application form. If the Director shall have reason to question the veracity or reliability of those representations, he or she shall direct the registration applicant to supply the supporting documentation. The Director shall prepare a master list which contains the names of all registration applicants and the names and addresses of the institutions from which the applicants graduated and shall submit the master list to the Board, along with his or her certification, no later than one month before the registration applicants are to begin participating in the graduate medical education program.

(e) The Board shall review the Director's certification, and shall issue to the Director a list of residents registered to engage in the practice of medicine or podiatry in the first year of the graduate medical education program conducted by that hospital. The Board shall provide to the Director a permit application for dissemination to each registered resident.

(f) A registration applicant unable to certify that he or she has attained the prerequisites set forth at (c) above shall state on the registration application form the reason that he or she is unable to so certify. The Director seeking to offer employment to a registration applicant unable to certify that he or she has attained all the prerequisites, may seek from the Board a waiver which would enable the applicant to participate in the first year of a graduate medical education program. The Board, in its discretion, may grant or withhold such waiver for good cause. However, in no event may the applicant begin participating until the waiver for good cause request has been granted and the individual's name included on the list of registered residents or temporary authorization has been granted pursuant to (g) below.

(g) In the event that a registration applicant has been unable to submit the required certification in a timely manner, the Director may grant that applicant temporary authorization to participate in the first year of a graduate medical education program, which will allow him or her no more than 30 days to complete the application process, provided that notice of such a grant is provided to the Board within five working days.

(h) A registered resident may engage in the practice of medicine or podiatry provided that such practice shall be confined to a hospital affiliated with the graduate medical education program and outpatient facilities integrated into the curriculum of the program, under the supervision of licensed plenary physicians or licensed podiatric physicians, as appropriate. All prescriptions and orders issued by registered residents in the inpatient setting shall be countersigned by either a licensed physician or a licensed podiatric physician, as applicable; or a permit holder at the minimum upon the patient's discharge, or sooner if the Director so requires. All prescriptions issued by registered residents in the outpatient setting which are to be filled in a pharmacy outside a licensed health care facility shall be signed by either a licensed physician or licensed podiatric physician, as appropriate.

(i) The Board may refuse to register a registration applicant if he or she has not certified that the prerequisites set forth in (c) above have been satisfied or if the Board is in possession of any information contradicting the representation made in the registration application form. The Board shall give the Director and the registration applicant notice of its refusal, allowing the submission of documentary evidence in rebuttal. Upon a showing of good cause the applicant will be granted an appearance before a committee of the Board.

(j) In addition to any practice declared to be a basis for sanction, pursuant to P.L. 1978, c.73 (N.J.S.A. 45:1-14 et seq.), the practices listed below, upon proof, shall also provide a basis for the withdrawal of the authorization to engage in the practice of medicine or podiatry as a registered resident. Upon receipt of the notice of proposed withdrawal, the registered resident may request a hearing, which shall be conducted pursuant to the Administrative Procedure Act, N.J.S.A. 52:14B-1 et seq.

1. Termination or withdrawal from the graduate medical education program.
2. Failure to advise the Board of a termination or withdrawal from a graduate medical education program.
3. Engaging in any act or practice beyond the scope of those authorized pursuant to (h) above.

(k) Upon a duly verified application of the Attorney General, alleging a violation of any act or regulation administered by the Board, which palpably demonstrates that the resident's continued practice would constitute a clear and imminent danger to the public health, safety and welfare, upon notice, the Board may enter an order temporarily suspending the resident's authority to engage in the practice of medicine or podiatry pending a plenary hearing on the charge.

(l) A permit applicant shall submit to the Director a permit application form certifying that he or she has attained the prerequisites set forth in (c) above, and, in addition, shall forward to the appropriate individuals requests for the production of the documentation listed below. The documentation sought by the permit applicant shall be sent directly to the director by the certifying individual. The permit applicant shall also submit to the director a check or money order in the sum of \$50.00 made payable to the New Jersey State Board of Medical Examiners.

1. Registrar's certification of attendance or college transcript from each college attended;
2. Registrar's certification of attendance or school transcript from each medical or podiatric school attended;
3. With respect to medical residents, ECFMG or Fifth Pathway certification, if applicable;
4. Certification of successful performance during the first year of a graduate medical education program to date.

(m) The Director shall obtain from the permit applicant the application form and the \$50.00 fee and shall also receive and retain certified documentation, set forth in (l) above. No later than four months before the date on which the applicant is scheduled to begin participating in the second year of a graduate medical education program (or beyond), the Director shall submit to the Board a complete application packet for each person to whom an offer of employment has been extended. The packet shall include:

1. Permit application, completed by the applicant.
2. Registrar's certification for each college attended or college transcript for each college attended.
3. Registrar's certification for each medical or podiatric school attended, or medical or podiatric school transcript for each medical or podiatric school attended and the jurisdiction in which the didactic training was conducted.
4. With respect to medical residents, ECFMG or Fifth Pathway certification, if applicable.
5. Certification of successful performance during the first year of graduate medical education to date.
6. Permit fee of \$50.00 in the form of check or money order made payable to the New Jersey State Board of Medical Examiners.

(n) The Director shall certify that he or she has offered a position to the applicant and has personally reviewed the permit application form and all supporting documentation and is unaware of any information which would contradict any of the representations in that application form or in any of the supporting certifications. If the Director shall have reason to question the veracity or reliability of those representations, he or she shall direct the permit applicant to supply the supporting documentation.

(o) Upon receipt of the permit application packet, the Board shall review each permit packet and if it is satisfied that the permit applicant has the necessary prerequisites, it shall issue to the applicant a permit authorizing that person to engage in either the practice of medicine or the practice of podiatry, as appropriate, in the second year (or beyond) of a graduate medical education program.

(p) A permit applicant unable to certify that he or she has attained the prerequisites set forth at (c) above shall state on the permit application form the reason that he or she is unable to so certify. In addition, if he or she is unable to produce the supporting documentation set forth at (m) above, an explanation must be provided. A permit applicant who has been unable to certify that he or she has attained all the prerequisites, or unable to produce the required supporting documentation, may seek from the Board a waiver which would enable the person to be issued a permit. The Board, in its discretion, may grant or withhold such waiver for good cause shown. However, in no event may the permit applicant begin to participate in the second year (or beyond) of a graduate medical education program until the program waiver request has been granted and the permit issued or a temporary permit issued.

(q) In the event that a permit applicant has been unable to submit the required certification or supporting documentation in a timely manner, the Director may grant the permit applicant a temporary permit, which will allow him or her to participate in the graduate medical education program for no more than 60 days, to allow for the completion of the application process provided that notice of such a grant is provided to the Board within five working days.

(r) A permit holder may engage in the practice of medicine or podiatry provided that such practice shall be confined to a hospital affiliated with the graduate medical education program and outpatient facilities integrated into the curriculum of the program, under the supervision of licensed plenary physicians or licensed podiatric physicians, as appropriate. Prescriptions and orders may be issued by permit holders in the inpatient setting without countersignature. All prescriptions issued by permit holders in the outpatient setting which are to be filled in a pharmacy outside a licensed health care facility shall be signed by a licensed physician or licensed podiatric physician, as appropriate.

(s) The Board may refuse to issue a permit to a permit applicant if he or she has not certified that the prerequisites set forth in (c) above have been satisfied, if the supporting documentation set forth in (l) above has not been produced or if the Board is in possession of any information contradicting the representations made in the permit application form or supporting documentation. The Board shall give the Director and the applicant notice of its refusal, allowing the submission of documentary evidence in rebuttal. Upon a showing of good cause the applicant will be granted an appearance before a committee of the Board.

(t) In addition to any practice declared to be a basis for sanction, pursuant to P.L. 1978, c.73 (N.J.S.A. 45:1-14 et seq.), the practices listed below, upon proof, shall also provide basis for the termination or suspension of a permit. Upon receipt of the notice of proposed termination or suspension the permit holder may request a hearing which shall be conducted pursuant to the Administrative Procedure Act, N.J.S.A. 52:14B-1 et seq.

1. Termination or withdrawal from a graduate medical education program.
2. Failure to advise the Board of a termination or withdrawal from a graduate medical education program.
3. Engaging in any act or practice beyond the scope of those authorized pursuant to (r) above.

(u) Upon a duly verified application of the Attorney General alleging a violation of any act or regulation administered by the Board which palpably demonstrates that the resident's continued practice would constitute a clear and imminent danger to the public health, safety and welfare, the Board may enter an order temporarily suspending the resident's permit to engage in the practice of medicine or podiatry pending a plenary hearing on the charge.

(v) A permit shall be valid for the duration of the graduate medical education program in which the permit holder is participating. If the permit holder seeks to change programs, he or she must submit a transfer application form. All transfer applications must be accompanied by a certification from the Director of the graduate medical education program in which the applicant has been or is currently participating, attesting to successful performance in the program.

(w) Each hospital offering a program(s) in medicine shall designate one physician who would qualify as a Director to fulfill the responsibilities set forth in this rule. Each hospital offering a podiatry program shall designate one podiatric physician who would qualify as a Director of a podiatry program to fulfill the responsibilities set forth in this rule. The Director may delegate to individual program directors these responsibilities, so long as the Director retains ultimate responsibility for the conduct of the program, except that the Director may not delegate the authority to issue temporary authorizations. In addition to the responsibilities placed upon any Director by this rule, he or she shall:

1. Implement procedures to assure that all prescriptions and orders issued by residents are countersigned or signed in accordance with the requirements of this rule.
2. Provide broad oversight of the activities of all program participants.
3. Report to the Board any conduct by a resident which, if proven, would represent cause for the withdrawal of registration or the suspension of a permit.
4. Report to the Board if any resident is granted a leave of absence for any reason, relating to a medical or psychiatric illness or to medical competency or conduct which would represent cause for the withdrawal of the authority to practice, providing an explanation.

(x) The authorization granted to an unlicensed person to participate in the first year of a graduate medical education program shall not be construed to imply that that person will be deemed eligible for the issuance of a permit or a license. The issuance of a permit similarly should not be construed to imply that the permit holder will be deemed eligible for licensure.

(y) This rule shall be effective upon publication as an adopted rule in the New Jersey Register. With respect to the first year during which this rule is in effect, Directors shall be required to submit a master list. Registration application forms and permit application forms will be made available after the publication of the rule. Unlicensed residents intending to participate in a graduate medical education program on or after July 1, 1988 may, if they so choose, seek registration or a permit, as may be applicable for the year beginning on July 1, 1988. Registration and permits will be required, as applicable, for participants in the second year (or beyond) of a residency training program which begins on or after July 1, 1989.

New Rule, R.1988 d.203, effective May 2, 1988.
 See: 19 N.J.R. 2243(a), 20 N.J.R. 986(a).
 Amended by R.1994 d.522, effective October 17, 1994.
 See: 26 N.J.R. 2526(a), 26 N.J.R. 4195(a).
 Amended by R.1999 d.356, effective October 18, 1999.
 See: 31 N.J.R. 1742(a), 31 N.J.R. 3117(a).

In (a), inserted a reference to words in the introductory paragraph, and inserted a reference to medicine in "Resident"; rewrote (c); in (d), rewrote the last sentence; in (f), substituted a reference to the Director for a reference to the Board in the introductory paragraph; and in (m)3, added "and the jurisdiction in which the didactic training was conducted" at the end.

SUBCHAPTER 1A. STANDARDS FOR NEW JERSEY CLINICAL TRAINING PROGRAMS SPONSORED BY MEDICAL SCHOOLS NOT ELIGIBLE FOR EVALUATION AND NOT APPROVED BY THE L.C.M.E., THE A.O.A. OR OTHER AGENCY RECOGNIZED BY THE NEW JERSEY STATE BOARD OF MEDICAL EXAMINERS

13:35-1A.1 Definitions and principles of responsibility

(a) For the purpose of this subchapter, the term medical school or parent medical school shall mean a medical school approved by its country of domicile and listed in a current World Health Organization Directory, but which medical school is not currently eligible for evaluation and not approved by the Liaison Committee on Medical Education, the American Osteopathic Association or other group or agency recognized by the New Jersey State Board of Medical Examiners.

1. The term affiliate institution shall mean a licensed hospital in the State of New Jersey approved by the Accreditation Council on Graduate Medical Education, the American Osteopathic Association, or any other equivalent group or agency recognized by the New Jersey State Board of Medical Examiners, for the purpose of conducting therein one or more postgraduate training programs in specific medical specialties.

(b) A medical school offering or conducting a clinical training program in the State of New Jersey shall secure the prior approval of such program by the New Jersey State Board of Medical Examiners. Following receipt of approval for a specific program, the medical school (referred to hereinafter sometimes as the parent medical school) shall be responsible for the education, clinical training program and faculty performance at the affiliate institution in the State of New Jersey. The affiliate institution must have a current accredited postgraduate training program in the subject matter of the clinical training proposed for the program.

(c) The clinical programs as well as adequate supervision of the students assigned to such programs shall be planned and evaluated by the parent medical school and administered in close cooperation with representatives of the affiliate institution. Supervision shall include periodic onsite inspection by a member of the parent medical school's central administration.

13:35-1A.2 Administration of the clinical training program

(a) A director of the clinical medical education program at and acceptable to the affiliate hospital shall be appointed by and be responsible to the administrative head of the parent medical school. The affiliate institution must demonstrate to the Board's satisfaction that the Director possesses the academic credentials and experience sufficient to assure competent performance of the program director's function. The position of program director shall be half-time or more, proportionate to the number of students approved by the Board and sufficient to assure comprehensive planning and supervision of the program.

(b) The clinical program of the affiliate institution with respect to instruction and faculty assignments shall be coordinated with the overall educational program of the parent medical school.

(c) The parent medical school shall file with the New Jersey State Board of Medical Examiners a certified copy of the written agreement between the parent and affiliate institution(s) establishing responsibility for the planning, financing, conduct and monitoring of the clinical program at the affiliate(s).

(d) Financial provision shall be made by the parent medical school to assure completion of each semester program at the affiliate hospital.

13:35-1A.3 Faculty

(a) The affiliate institution must demonstrate to the Board's satisfaction that all clinical faculty possess academic credentials and experience sufficient to assure competent performance of the instructional assignment.

(b) The program director shall be responsible for filing with the Board a syllabus for each course of instruction.

13:35-1A.4 Education program

(a) Student eligibility for participation in the program shall be subject to the following:

1. The parent medical school shall establish academic eligibility criteria for student participation in the clinical training program. The criteria shall include minimum academic performance as demonstrated by maintenance of no less than a passing grade for all academic course work preceding entry into the clinical program, as shown on a certified copy of the transcript submitted directly by the medical school to the director of the clinical program at the affiliate institution.

2. In addition, the academic eligibility requirement for those students participating in clinical training programs equivalent to the final two semesters or fourth year of a United States medical school curriculum shall include proof that each student has successfully completed clinical training equivalent to the fifth and sixth semesters or

third year of a United States medical school curriculum through a program approved for this purpose by the parent medical school. If conducted in New Jersey, such prior clinical training is limited to those fifth and sixth semester programs approved by the State Board of Medical Examiners. Such record of prior clinical training shall include a certificate issued by the director of the clinical program to each student, noting the dates and describing the type and length of each service and the date issued. The record of prior clinical training shall also include proof of the program's supervision by the parent medical school and proof that the teaching hospital has been approved by the ACGME, the AOA or another equivalent organization recognized by the New Jersey State Board of Medical Examiners for the conduct of one or more post-graduate training programs in specific medical specialties. If the teaching hospital in which the prior clinical training took place is outside the geographical jurisdiction of the above said accrediting organizations, the record of prior clinical training must include proof that the hospital and training program have been approved by the parent medical school.

3. Preparedness of each student applying for the clinical training program shall in addition be demonstrated by achievement of either of the following:

- i. A passing grade on Part I of the National Board of Medical Examiners Examination; or
- ii. A passing grade on USMLE—Step 1.

4. Students who have satisfied (a)1, 2 and 3 above and who are permanent residents of the State of New Jersey shall be given preference in placement in New Jersey affiliate institutions, insofar as is practicable.

(b) Educational criteria for the program follows:

1. The clinical training program shall be limited to students entering a level of education equivalent to the final four semesters or the equivalent of the third and fourth years of clinical experience in a United States medical school curriculum.

2. The parent medical school shall be approved by the State Board of Medical Examiners for the purpose of placing students in New Jersey hospitals for clinical training. The Board shall conduct an academic review of the parent medical school in conjunction with expert authorities of higher education as recognized by the Board. The didactic elements of the medical education shall have been completed in the country of domicile authorized to confer the degree or certificate.

3. The student-faculty ratio of the program at each affiliate institution shall bear a reasonable relationship to the availability of service of the program director, the budget proposed, faculty and facilities available, all subject to final approval of the Board.

4. A certificate shall be issued by the director of the clinical training program to each enrolled student recording the dates, type and length of each service and an evaluation of the student's accomplishment, and the date the certificate was issued.

As amended, R.1983 d.549, effective December 5, 1983.

See: 15 N.J.R. 1444(a), 15 N.J.R. 2044(a).

In (a)2, added "equivalent to the final two semesters or fourth year of a U.S. medical school curriculum" and "approved by the parent medical school. If conducted in N.J. such training is limited to those fifth and sixth semester programs approved by the Board of Medical Examiners". In (b)1., changed final "two" to "four" semesters and "final year" to "third and fourth years".

Amended by R.1985 d.564, effective November 4, 1985.

See: 17 N.J.R. 2010(a), 17 N.J.R. 2670(a).

(a) substantially amended.

Amended by R.1994 d.522, effective October 17, 1994.

See: 26 N.J.R. 2526(a), 26 N.J.R. 4195(a).

Amended by R.1999 d.356, effective October 18, 1999.

See: 31 N.J.R. 1742(a), 31 N.J.R. 3117(a).

Rewrote (b)2.

13:35-1A.5 Facilities

(a) For the purpose of clinical training, the parent medical school shall propose an affiliate institution which must be a licensed hospital approved by the Accreditation Council on Graduate Medical Education, the American Osteopathic Association or other group acceptable to the Board for postgraduate training in subject area(s) of the proposed clinical training program, or which institution is part of such a program through affiliation(s) approved by the above bodies. The affiliate shall provide to the Board a certified copy of the approval(s).

(b) No hospital accredited for postgraduate training programs shall be under any obligation by virtue of these regulations to accept medical students in clinical programs, and any medical school or hospital accredited for postgraduate training programs may impose standards for admission to the clinical programs which exceed the standards set forth in this regulation.

13:35-1A.6 Request for approval

(a) At least six months prior to the anticipated start of the clinical program, two copies of a detailed outline of the entire proposed program shall be submitted to the Board on a form provided by the Board. The application shall include the certified copies of hospital approvals described in N.J.A.C. 13:35-1A.5(a) and shall be signed by the administrative heads of both the parent medical school and the affiliate institution.

(b) The original application for Board approval as well as any request for renewal thereof shall be accompanied by an agreement signed by a school representative duly authorized to do so, consenting to financial responsibility for all reasonable costs incurred by the Board in performing the administrative review and monitoring of the program.