

**BOARD OF NATUROPATHIC MEDICINE**  
Professional and Vocational Licensing Division  
Department of Commerce and Consumer Affairs  
State of Hawaii

**MINUTES OF THE MEETING**

The agenda for this meeting was filed with the Office of the Lieutenant Governor as required by Hawaii Revised Statutes ("HRS") section 92-7(b).

Date: Friday, September 7, 2012

Time: 2:30 p.m.

Place: King Kalakaua Conference Room  
King Kalakaua Building, 1<sup>st</sup> Floor  
335 Merchant Street  
Honolulu, Hawaii 96813

Present: Kevin Gibson, N.D., Chairperson  
David R. Kern, N.D., Vice Chairperson  
Rodney Chun, N.D., Member  
Audrey Ng, Member  
Candace Ito, Executive Officer  
Rodney J. Tam, Deputy Attorney General ("DAG")  
Faith Nishimura, Secretary

Excused: L. Martin Johnson, Psy.D., Member

Call to Order: There being a quorum present, the meeting was called to order by Chairperson Gibson at 2:40 p.m.

Introduction of New Board Member: Chairperson Gibson introduced and welcomed the Board's newest member, Dr. Rodney Chun, who is serving as an industry member.

Additions and Revisions to the Agenda: None.

Approval of May 11, 2012 Meeting Minutes: It was moved by Dr. Kern, seconded by Ms. Ng, and unanimously carried to approve the May 11, 2012 meeting minutes with the following amendments:

On page 2 under a. Scope of Practice – Psychotherapy, the second sentence in the second paragraph should read as follows:

"She provided the Board with a definition of psychotherapy from two references, **Dorland's** Illustrated Medical Dictionary and the American Psychological Association ("APA") Concise Dictionary for their review:"

On page 3 the first topic should read as follows:

**Dorland's** Illustrated Medical Dictionary

On page 6 under c. Practice of homeopathy, the last sentence should read as follows:

**"He also related that Hawaii is the only state that requires licensure as a naturopathic physician to practice homeopathy. Other states that regulate naturopathic medicine allow homeopathy to be practiced by non-NDs."**

New Business: None.

Unfinished Business:

a. Practice of Homeopathy

At its May 11, 2012 meeting, the Board reviewed and discussed a letter dated April 18, 2012 from Mohan Magotra requesting to practice homeopathy without being licensed as a naturopathic physician. The Board informed Mr. Magotra that it had deferred further discussion on his request to practice homeopathy without being licensed as a naturopathic physician until today's meeting and invited him to attend this meeting. The Board did not receive a response from Mr. Magotra.

The Executive Officer related that at its May 11, 2012 meeting, the Board agreed that homeopaths should not purport to diagnose and treat diseases and that defining the practice of homeopathy would provide a clear delineation between naturopathy and homeopathy.

Members reviewed information distributed by Chairperson Gibson regarding the history and philosophy of homeopathic medicine; and Arizona's Homeopathic and Integrated Medicine Board. Chairperson Gibson noted that Arizona requires homeopathic physicians to be licensed medical or osteopathic physicians. He also noted that the Arizona homeopathic physician statute has an exemption for unlicensed homeopaths.

The Board felt that the representations on Mr. Magotra's website are problematic because it appears that he is diagnosing and treating diseases. The Board agreed that a homeopath cannot diagnosis and treat disease. However, Dr. Gibson and Dr. Kern do not believe that all homeopaths are practicing naturopathic medicine. There are highly qualified homeopaths that are just practicing homeopathy (treating symptoms).

DAG Tam asked the Board to review the definition of "naturopathic medicine", "naturopathic formulary" and "homeopathic" to determine whether homeopathy is in the naturopathic physician scope of practice. Dr. Chun related that homeopathy is within a naturopathic physician's scope of practice and that treating symptoms that are described by the consumer is considered diagnosing. Ms. Ng added that it could be misleading to consumers because a layperson probably would not make the distinction between describing their symptoms and diagnosing.

The Board discussed other situations where unlicensed individuals that could be practicing naturopathic medicine, i.e. retail salesperson recommending nutritional supplements and individuals recommending certain foods to treat a condition. The Board agreed that salespeople should not be recommending nutritional supplements to treat conditions. With regard to nutritionists and dieticians, if the patient is referred by a physician, they are working under the supervision of the physician. However, if the nutritionist or dietician is working alone (without physician supervision) and recommends a specific diet for a certain condition, then that could be considered as diagnosing and treating within the scope of naturopathic medicine.

Dr. Chun related that unlicensed activity could cause consumer harm because the unlicensed individual may miss other health problems. Naturopathic physicians learn all aspects of the human body and incorporate that knowledge when they examine and treat patients. A delayed diagnosis or treatment may cause harm.

DAG Tam noted that it does not appear that the training that a homeopath receives would meet the requirements for licensure as a naturopathic physician. He asked the Board what is the potential harm of an unlicensed individual performing homeopathy? Chairperson Gibson related that homeopathic treatment in itself would not cause patient injury. There may be potential harm in a life threatening omission from a missed diagnosis. Dr. Kern related that he is not personally aware of any homeopath causing patient

injury. He knows of homeopaths that are well qualified and expressed concern that they may no longer be able to practice even though there may be no incidence of patient injury.

The Executive Officer raised a concern that the consumer may be misled when visiting the office of a homeopath because there may be a perception or expectation of a diagnosis and treatment from the homeopath. Whereas a consumer visiting a nutritional supplement store would not have the same perception or expectation from a salesperson. The Board believes that going to a homeopath's office to be treated is no different than going to a nutritional supplement store and receiving treatment from the salesperson because the salesperson could appear to be knowledgeable and authoritative in treating conditions. Consumers probably would not perceive a visit to a homeopath's office any differently than going to a nutritional supplement store and receiving treatment.

After much discussion the Board did not find a definition of the practice of homeopathy that would provide a clear distinction between naturopathy and homeopathy. The Board discussed the possible avenues for homeopaths: (1) Share overlapping jurisdiction and allow unlicensed individuals to practice homeopathy; (2) Homeopaths could introduce legislation for licensure; (3) Licensure under the HRS chapter 455 to avoid the need for a sunrise report; and (4) Amend HRS section 455-1.5 to include an exception for homeopaths.

The Executive Officer related that a sunrise report would probably be required even if the licensure of homeopaths were placed in HRS chapter 455. It appears that a statutory exception would be needed for unlicensed individuals to practice homeopathy. There are other areas with overlapping jurisdiction; however these examples involve licensed professions. The Executive Officer has not found examples of a licensed profession sharing its scope of practice with unlicensed individuals without a statutory exemption.

It was moved by Ms. Ng, seconded by Dr. Kern, and unanimously carried to confirm the Board's position in its letter to Mr. Magotra dated April 26, 2012, which states that homeopathy falls within the scope of the practice of naturopathy and that any person who practices naturopathy (including homeopathy) in this State must be licensed as a naturopathic physician.

Hawaii  
Administrative  
Rules:

- a. Proposed amendments to examination requirements for licensure

At its May 11, 2012 meeting, the Board approved Draft #1 of the proposed administrative rules.

The proposed amendments are currently being reviewed by DAG Tam.

Naturopathic  
Formulary:

None.

Correspondence:

- a. Scope of practice – minor surgery, IV Therapy, prolotherapy, and trigger point injections  
b. Scope of practice – aspiration of autologous adipose tissue

As Mr. Scherer's and Dr. Davison's inquiries are similar, in that it pertains to parenteral therapy procedures, the Board combined its discussion on both inquiries.

The Board reviewed and discussed an email and inquiry from: (a) Sean Scherer dated August 5, 2012 regarding minor office procedures, IV therapy, prolotherapy and trigger point injections; and (b) Dr. Kevin Davison dated August 14, 2012 regarding aspiration of autologous adipose tissue.

The Executive Officer responded to Mr. Scherer's questions on minor office procedures and IV therapy on August 6, 2012.

The Executive Officer asked the Board to describe prolotherapy and trigger point injections. The Board responded that prolotherapy is also known as proliferation therapy. This treatment uses substances to activate the body's natural healing process in tissues outside the body cavity, i.e. tendons, ligaments and joints. Substances injected into tendons, ligaments and joints cause inflammation which stimulates cell growth in tendons and ligaments.

A trigger point injection quiets or reduces a muscle spasm by injecting substances from the naturopathic formulary in the muscle.

The Board related that the phases of prolotherapy are therapeutic injections of natural substances in ligaments, tendons and joints and has expanded to include injections of platelets and fat tissue.

With regard to Dr. Davison's inquiry, the Executive Officer asked the Board to describe the procedure for the aspiration of autologous adipose tissue. The Board explained that this procedure involves injecting an emulsifying fluid in subcutaneous fat tissue, then drawing out the emulsifying fluid and fat tissue. This procedure is non-invasive because it is performed subcutaneously outside out the body cavity.

After discussion, the Board came to a consensus that the aspiration of autologous adipose tissue is a minor office procedure within the scope of practice of a naturopathic physician.

The Executive Officer asked if autologous adipose tissue is in the naturopathic formulary. The Board related that autologous adipose tissue is not on the naturopathic formulary, thus a naturopathic physician can perform the procedure to withdraw autologous adipose tissue, but cannot administer this substance.

Dr. Davison's email also discusses using platelet rich plasma ("PRP") to treat connective tissue injuries. PRP is derived from a patients own blood. The patients blood is centrifuged which causes the platelets to separate from the serum. PRP has been shown to stimulate tissue growth. The Board noted that PRP is also not on the naturopathic formulary, thus cannot be administered by a naturopathic physician.

The Executive Officer noted that HAR section 16-88-56 limits parenteral therapy to subcutaneous, intramuscular and intravenous injection and asked the Board to clarify the category for tendons, ligaments and joints. The Board related that parenteral therapy for tendons would be an intramuscular injection. Injection of substances in ligaments and joints is not subcutaneous, intramuscular or intravenous parenteral therapy pursuant to HAR section 16-88-56.

After a discussion, the Board came to a consensus to inform Mr. Scherer and Dr. Davison that it is reviewing the issues in their emails.

c. Naturopathy formulary – controlled substances

The Board reviewed and discussed an e-mail from Dr. Myron Berney dated June 1, 2012 pertaining to the use of controlled substances.

Applications:           a.     Licensure – Denisa Hrcirk

The applicant answered “no” to the question “Are you a U.S. citizen, a U.S. national, or an alien authorized to work in the United States?” on the application for licensure. Members reviewed Denisa Hrcirk’s application.

The Executive Officer related that some Boards issue a “Conditional Approval of Licensure” letter which notifies the applicant that they have met the education, training and examinations requirements; however, they will not be issued a license unless they provide documentation from the United States Citizenship and Immigration Services (“USCIS”) that they are either a United States (“U.S.”) citizen, a U.S. national, or an alien authorized to work in the U.S. Some applicants (in other professions) have related that a “Conditional Approval of Licensure” is necessary to obtain authorization to work in the U.S. and/or their social security number (“SSN”).

Members reviewed a draft “Conditional Approval of Licensure” letter generated by the Licensing Branch. DAG Tam explained that HRS section 436B-10 and federal law require an applicant for a professional or vocational license to be either a U.S. citizen, a U.S. national, or an alien authorized to work in the U.S. Thus an individual cannot maintain their license once they are no longer authorized to work in the U.S. He recommended that the Board clarify that it will issue a conditional license, if the applicant’s authorization to work is temporary and/or has an expiration date.

The Board came to a consensus to issue “Conditional Approval of Licensure” letters to qualified applicants; and if documents submitted indicate that the qualified applicant’s authorization to work in the U.S. is temporary, issue conditional licensure that will allow the licensee to practice only during the time they are authorized to work in the U.S.

After a discussion, it was moved by Ms. Ng, seconded by Dr. Kern, and unanimously carried to approve the application subject to receipt of the applicant’s authorization to work in the U.S. and SSN; provided that if documents indicate that the applicant’s authorization to work in the U.S. is temporary, issue a conditional license that will allow the licensee to practice only during the time the licensee is authorized to work in the U.S.

DAG Tam left the meeting at 4:05 p.m.

- b. Licensure/Authorization to administer parenteral therapy/ authorization to perform minor office procedures

None.

- c. Ratifications

It was moved by Dr. Kern, seconded by Dr. Chun, and unanimously carried to ratify the following applications for licensure:

- Semanie, Heidi
- Allen, Zachary P.

It was moved by Dr. Kern, seconded by Ms. Ng, and unanimously carried to ratify the following applications for authorization to administer parenteral therapy:

- McLeod, Margarethe R.
- Semanie, Heidi
- Davison, Kevin J.

It was moved by Dr. Kern, seconded by Ms. Ng, and unanimously carried to ratify the following application for authorization to perform minor office procedures:

- Semanie, Heidi

- Announcements: a. October 24, 2012 Board Member Orientation Meeting

Last December, Board Chairpersons attended an orientation meeting which featured representatives from various agencies who explained its agency's function as it pertains to Boards and Commissions. This year, all board members are invited to attend a similar orientation meeting on October 24, 2012.

Next Meeting Date: Friday, November 9, 2012  
2:30 p.m.  
King Kalakaua Conference Room  
335 Merchant Street, 1<sup>st</sup> Floor  
Honolulu, Hawaii 96813

Adjournment: There being no further business to discuss, the meeting was adjourned at 4:20 p.m.

Taken and recorded by:

/s/ Faith Nishimura  
Faith Nishimura  
Secretary

Reviewed and approved by:

/s/ Candace Ito  
Candace Ito  
Executive Officer

CI:fn

10/5/12

Minutes approved as is.

Minutes approved with changes. See Minutes of \_\_\_\_\_.