

# **TITLE 845 BOARD OF PODIATRIC MEDICINE**

## **ARTICLE 1. PODIATRISTS**

### **Rule 1. Definitions**

#### **845 IAC 1-1-1 Definitions**

Authority: IC 25-29-2-11

Affected: IC 25-1-5-3; IC 25-29-1-16

Sec. 1. The following definitions apply throughout this title:

- (1) "Board" means the board of podiatric medicine.
- (2) "Bureau" means the health professions bureau established by IC 25-1-5-3.
- (3) "Diagnosis" means the examination of a patient, parts of a patient's body, or materials taken or removed from a patient's body, or materials produced by a patient's body, to determine the source or nature of a disease or other physical or mental condition relating to ailments of the human foot.
- (4) "Drug or medicine" means any medicine, compound, or chemical or biological preparation intended to be used for the diagnosis, cure, mitigation, or prevention of diseases or abnormalities of man or woman which are recognized in the Physician's Desk Reference, 47th Edition, 1993, or otherwise established as a drug or medicine, by federal or state law. The term shall include local anesthetics as defined in subdivision (5).
- (5) "Local anesthetics" means a drug or gas that produces a partial or total loss of the sense of pain or touch that is limited in use to an area of the body around the site of its application and is induced to permit performance of a surgical procedure.
- (6) "Mechanical treatment of ailments of the human foot" means to prescribe, direct, order, or designate the use of, or manner of using an orthotic, orthotic device, orthosis, prosthetic device, prosthesis, or casting of the foot for devices or custom shoes for corrective treatment. The casting of the feet for orthoses, appliances, braces, and custom shoes may be permitted on the prescription of a practitioner licensed to do so in Indiana. It is not the intent of this article to prohibit the sale of noncustom built shoes or inserts that are commonly sold by merchants in commercial establishments.
- (7) "Medical treatment of ailments of the human foot" means to prescribe, direct, order, or designate the use of, or manner of using, a drug, medicine, or treatment by spoken or written words or other means, except for the systematic or regular, continuous, long term treatment of systemic diseases affecting the human foot and the administration of general anesthesia.
- (8) "Surgical treatment of ailments of the human foot" means the incision, excision, or disarticulation of parts of the foot and related structures to treat a disease, deformity, or ailment of the foot, excluding the amputation of an entire foot. A podiatrist may disarticulate an entire toe if performed according to IC 25-29-1-16.

*(Board of Podiatric Medicine; 845 IAC 1-1-1; filed Apr 12, 1984, 8:28 a.m.: 7 IR 1529; filed Aug 5, 1987, 4:30 p.m.: 10 IR 2723; filed Dec 8, 1994, 5:08 p.m.: 18 IR 1281; readopted filed Jun 13, 2001, 11:45 a.m.: 24 IR 3823; readopted filed Jul 19, 2007, 12:55 p.m.: 20070808-IR-845070056RFA; readopted filed Nov 25, 2013, 9:19 a.m.: 20131225-IR-845130275RFA; readopted filed Nov 12, 2019, 9:11 a.m.: 20191211-IR-845190075RFA) NOTE: Transferred from the Medical Licensing Board of Indiana (844 IAC 8-1-1) to the Board of Podiatric Medicine (845 IAC 1-1-1) by P.L.33-1993, SECTION 76, effective July 1, 1993.*

### **Rule 2. Accreditation of Schools (*Repealed*)**

*(Repealed by Board of Podiatric Medicine; filed Dec 8, 1994, 5:08 p.m.: 18 IR 1285)*

### **Rule 3. Admission to Practice**

#### **845 IAC 1-3-1 Licensure by endorsement**

Authority: IC 25-29-2-11

Affected: IC 25-29-5-1

Sec. 1. (a) The board may issue a license by endorsement to an applicant who:

- (1) submits an application upon oath or affirmation in proper form;
- (2) submits the fee specified in 845 IAC 1-6-8;

- (3) presents satisfactory evidence that he or she has not been the subject of a disciplinary action by the licensing or certification agency of another state or jurisdiction on the grounds that the applicant was not able to practice podiatric medicine without endangering the public;
- (4) presents satisfactory evidence that he or she does not have a conviction for a crime that has a direct bearing on the applicant's ability to practice competently;
- (5) is a graduate of a college or school of podiatric medicine approved by the Council on Podiatric Medical Education;
- (6) submits a certified copy of a current license in good standing in any state, territory, or possession of the United States;
- (7) submits examination scores from the state from which the applicant is endorsing and presents satisfactory evidence that the examination is equivalent to the examination given under IC 25-29-4 [*IC 25-29-4 was repealed by P.L.180-2018, SECTION 38, effective July 1, 2018.*];
- (8) submits official notice from the National Board of Podiatry Examiners that the applicant has passed all areas of the examination given by the National Board of Podiatry Examiners;
- (9) submits a statement from the board in each state where the applicant is licensed, or has been licensed, certifying whether his or her license has been the subject of any final or pending disciplinary action;
- (10) submits proof of being in the practice of podiatric medicine for five (5) years in another state;
- (11) submits evidence of proper medical malpractice insurance;
- (12) submits proof of completion of a progressive graduate podiatric medical education training program that is at least twelve (12) months in length and meets the requirements of the Council on Podiatric Medical Education; and
- (13) meets all other minimum requirements specified in IC 25-29-5.

(b) According to IC 25-29-5-1(b)(2), if ten (10) years have elapsed since passing a medical licensing examination, the board may require an applicant to submit to the examination approved by the board. (*Board of Podiatric Medicine; 845 IAC 1-3-1; filed Apr 12, 1984, 8:28 a.m.: 7 IR 1530; filed Aug 5, 1987, 4:30 p.m.: 10 IR 2724; filed Dec 8, 1994, 5:08 p.m.: 18 IR 1281; readopted filed Jun 13, 2001, 11:45 a.m.: 24 IR 3823; filed Oct 6, 2003, 4:45 p.m.: 27 IR 526; readopted filed Dec 1, 2009, 9:13 a.m.: 20091223-IR-845090780RFA; readopted filed Nov 13, 2015, 11:22 a.m.: 20151209-IR-845150246RFA; readopted filed Oct 21, 2021, 8:31 a.m.: 20211117-IR-845210259RFA*) NOTE: Transferred from the Medical Licensing Board of Indiana (844 IAC 8-3-1) to the Board of Podiatric Medicine (845 IAC 1-3-1) by P.L.33-1993, SECTION 76, effective July 1, 1993.

#### **845 IAC 1-3-2 Licensure by examination**

Authority: IC 25-29-2-11

Affected: IC 25-29-3

Sec. 2. (a) The board may issue a license by examination to an applicant who:

- (1) submits an application upon oath or affirmation in proper form;
- (2) submits the fee specified in 845 IAC 1-6-8;
- (3) presents satisfactory evidence that he or she has not been the subject of a disciplinary action by the licensing or certification agency of another state or jurisdiction on the grounds that the applicant was not able to practice podiatric medicine without endangering the public;
- (4) presents satisfactory evidence that the applicant does not have a conviction for a crime that has a direct bearing on the applicant's ability to practice competently;
- (5) is a graduate of a college or school of podiatric medicine approved by the Council on Podiatric Medical Education;
- (6) submits official transcripts from the National Board of Podiatry Examiners certifying applicant's passing scores in all areas of the National Board of Podiatry Examiners examination;
- (7) successfully completes, under IC 25-29-4 [*IC 25-29-4 was repealed by P.L.180-2018, SECTION 38, effective July 1, 2018.*], an examination provided by the board;
- (8) submits proof of proper medical malpractice insurance within thirty (30) days of licensure;
- (9) submits proof of completion of a progressive graduate podiatric medical education training program that is at least twelve (12) months in length and meets the requirements of the Council on Podiatric Medical Education; and
- (10) meets all other minimum requirements specified in IC 25-29-3.

(b) An applicant who fails the examination given by the committee may be reexamined at least once within six (6) months of any such failure or denial. A candidate who has not passed every section of the examination may retake the examination on a

regularly scheduled examination date. If a candidate has failed more than one (1) section of the examination or if a candidate fails any section three (3) times, the committee shall reexamine the candidate on all sections of the examination. If a candidate has failed only one (1) section of the examination but retakes the remaining failed section(s) of the examination on its next regularly scheduled date, the committee shall give the candidate credit for the section(s) which the candidate previously passed. Otherwise, the committee may not give credit to a candidate who passes less than all of the sections of the examination.

(c) An applicant who has failed the examination provided by the committee three (3) times shall not be allowed to retake the examination until such time as the applicant provides evidence of an additional one (1) year of postgraduate training in a program approved by the committee.

(d) The deadline for making any application for the examination provided by the committee shall be sixty (60) days prior to the examination date, except that where such dates are Saturday, Sunday, or a legal holiday, the deadline shall be the next business day immediately following such date. (*Board of Podiatric Medicine; 845 IAC 1-3-2; filed Apr 12, 1984, 8:28 a.m.: 7 IR 1530; filed Aug 5, 1987, 4:30 p.m.: 10 IR 2725; filed Dec 8, 1994, 5:08 p.m.: 18 IR 1282; readopted filed Jun 13, 2001, 11:45 a.m.: 24 IR 3823; filed Oct 6, 2003, 4:45 p.m.: 27 IR 526; readopted filed Dec 1, 2009, 9:13 a.m.: 20091223-IR-845090780RFA; readopted filed Nov 13, 2015, 11:22 a.m.: 20151209-IR-845150246RFA; readopted filed Oct 21, 2021, 8:31 a.m.: 20211117-IR-845210259RFA*) NOTE: Transferred from the Medical Licensing Board of Indiana (844 IAC 8-3-2) to the Board of Podiatric Medicine (845 IAC 1-3-2) by P.L.33-1993, SECTION 76, effective July 1, 1993.

#### **845 IAC 1-3-3 Progressive graduate podiatric medical training defined**

Authority: IC 25-29-2-11

Affected: IC 25-29-3-1; IC 25-29-3-2; IC 25-29-5-1

Sec. 3. (a) As used in IC 25-29-3-1(4), "satisfactorily completed at least twelve (12) months of progressive graduate podiatric medical training" means completion of an established residency program that is no less than twelve (12) months in duration.

(b) An applicant who has enrolled in a twenty-four (24) month residency program must complete the entire residency program before becoming eligible for licensure under IC 25-29-3-1 and IC 25-29-5-1. (*Board of Podiatric Medicine; 845 IAC 1-3-3; filed Oct 6, 2003, 4:45 p.m.: 27 IR 527; readopted filed Dec 1, 2009, 9:13 a.m.: 20091223-IR-845090780RFA; readopted filed Nov 13, 2015, 11:22 a.m.: 20151209-IR-845150246RFA; readopted filed Oct 21, 2021, 8:31 a.m.: 20211117-IR-845210259RFA*)

### **Rule 4. License Renewal (*Repealed*)**

(*Repealed by Board of Podiatric Medicine; filed Dec 8, 1994, 5:08 p.m.: 18 IR 1285; errata filed Feb 21, 1995, 2:15 p.m.: 18 IR 1837*)

### **Rule 4.1. License Renewal**

#### **845 IAC 1-4.1-1 Mandatory renewal; time**

Authority: IC 25-29-2-11

Affected: IC 25-29-6

Sec. 1. Every podiatrist holding a license issued by the board shall renew such license with the board every two (2) years. (*Board of Podiatric Medicine; 845 IAC 1-4.1-1; filed Dec 8, 1994, 5:08 p.m.: 18 IR 1283; readopted filed Jun 13, 2001, 11:45 a.m.: 24 IR 3823; filed Oct 6, 2003, 4:45 p.m.: 27 IR 527; readopted filed Dec 1, 2009, 9:13 a.m.: 20091223-IR-845090780RFA; readopted filed Nov 13, 2015, 11:22 a.m.: 20151209-IR-845150246RFA; readopted filed Oct 21, 2021, 8:31 a.m.: 20211117-IR-845210259RFA*)

#### **845 IAC 1-4.1-2 Mandatory renewal; notice**

Authority: IC 25-29-2-11

Affected: IC 25-29-6

Sec. 2. On or before April 30 every two (2) years, the board, or its duly authorized agent, shall notify each licensee that the licensee is required to renew with the board. The board, or its agent, shall furnish a licensee a form to be completed for renewal.

*(Board of Podiatric Medicine; 845 IAC 1-4.1-2; filed Dec 8, 1994, 5:08 p.m.: 18 IR 1283; readopted filed Jun 13, 2001, 11:45 a.m.: 24 IR 3823; filed Oct 6, 2003, 4:45 p.m.: 27 IR 527; readopted filed Dec 1, 2009, 9:13 a.m.: 20091223-IR-845090780RFA; readopted filed Nov 13, 2015, 11:22 a.m.: 20151209-IR-845150246RFA; readopted filed Oct 21, 2021, 8:31 a.m.: 20211117-IR-845210259RFA)*

**845 IAC 1-4.1-3 Mandatory renewal; oath**

Authority: IC 25-29-2-11

Affected: IC 25-29-6

Sec. 3. Applications for all renewals must be made under oath or affirmation. *(Board of Podiatric Medicine; 845 IAC 1-4.1-3; filed Dec 8, 1994, 5:08 p.m.: 18 IR 1283; readopted filed Jun 13, 2001, 11:45 a.m.: 24 IR 3823; readopted filed Jul 19, 2007, 12:55 p.m.: 20070808-IR-845070056RFA; readopted filed Nov 25, 2013, 9:19 a.m.: 20131225-IR-845130275RFA; readopted filed Nov 12, 2019, 9:11 a.m.: 20191211-IR-845190075RFA)*

**845 IAC 1-4.1-4 Mandatory renewal; fees (*Repealed*)**

Sec. 4. *(Repealed by Board of Podiatric Medicine; filed Oct 6, 2003, 4:45 p.m.: 27 IR 528)*

**845 IAC 1-4.1-5 Delinquent renewal (*Expired*)**

Sec. 5. *(Expired under IC 4-22-2.5, effective January 1, 2002.)*

**845 IAC 1-4.1-6 Address; change of name**

Authority: IC 25-29-2-11

Affected: IC 25-29-6

Sec. 6. (a) Each licensee shall inform the board, in writing, of all changes in address or name within fifteen (15) days of the change.

(b) A licensee's failure to receive notification of renewal due to failure to notify the board of a change of address or name shall not constitute an error on the part of the board or the bureau, nor shall it exonerate or otherwise excuse the licensee from renewing such license. *(Board of Podiatric Medicine; 845 IAC 1-4.1-6; filed Dec 8, 1994, 5:08 p.m.: 18 IR 1283; readopted filed Jun 13, 2001, 11:45 a.m.: 24 IR 3823; readopted filed Jul 19, 2007, 12:55 p.m.: 20070808-IR-845070056RFA; readopted filed Nov 25, 2013, 9:19 a.m.: 20131225-IR-845130275RFA; readopted filed Nov 12, 2019, 9:11 a.m.: 20191211-IR-845190075RFA)*

**845 IAC 1-4.1-7 Inactive status**

Authority: IC 25-29-2-11

Affected: IC 25-29-6

Sec. 7. Any podiatrist who has retired from practice and wants to retain his or her license may do so for half of the usual renewal fee as required by 845 IAC 1-6-9, provided that he or she does not maintain an office for the practice of podiatric medicine and does not charge for any podiatric medical services that he or she might render. A podiatrist whose license is inactive may submit a written request to the board of podiatric medicine to reinstate his or her license by paying the full renewal fee. *(Board of Podiatric Medicine; 845 IAC 1-4.1-7; filed Dec 8, 1994, 5:08 p.m.: 18 IR 1283; readopted filed Jun 13, 2001, 11:45 a.m.: 24 IR 3823; filed Oct 6, 2003, 4:45 p.m.: 27 IR 527; readopted filed Dec 1, 2009, 9:13 a.m.: 20091223-IR-845090780RFA; readopted filed Nov 13, 2015, 11:22 a.m.: 20151209-IR-845150246RFA; readopted filed Oct 21, 2021, 8:31 a.m.: 20211117-IR-845210259RFA)*

**Rule 5. Continuing Education**

**845 IAC 1-5-1 Credit hours required**

Authority: IC 25-29-2-11

Affected: IC 25-29-6-4

Sec. 1. (a) A licensee who renews a license as a podiatrist shall complete no less than thirty (30) hours of continuing podiatric medical education in courses or programs approved by any of the approved sponsors found in 845 IAC 1-5-3 [section 3 of this rule] in each two (2) year renewal period.

(b) A podiatrist is not required to complete continuing education requirements for the year in which the initial license is issued.

(c) Continuing podiatric medical education acquired in any area other than podiatric medicine will not be accepted.

(d) Continuing education credit units or clock hours must be obtained within the renewal period and may not be carried over from one (1) licensure period to another.

(e) The continuing education requirement shall not be increased or decreased until this section is duly amended and all licensees are notified in writing at the date of their license renewal that the subsequent renewal will require an increased or decreased number of hours. (*Board of Podiatric Medicine; 845 IAC 1-5-1; filed Apr 12, 1984, 8:28 a.m.: 7 IR 1531; filed Aug 5, 1987, 4:30 p.m.: 10 IR 2725; filed Dec 8, 1994, 5:08 p.m.: 18 IR 1283; readopted filed Jun 13, 2001, 11:45 a.m.: 24 IR 3823; filed Oct 6, 2003, 4:45 p.m.: 27 IR 527; readopted filed Dec 1, 2009, 9:13 a.m.: 20091223-IR-845090780RFA; readopted filed Nov 13, 2015, 11:22 a.m.: 20151209-IR-845150246RFA; readopted filed Oct 21, 2021, 8:31 a.m.: 20211117-IR-845210259RFA*) NOTE: Transferred from the Medical Licensing Board of Indiana (844 IAC 8-5-1) to the Board of Podiatric Medicine (845 IAC 1-5-1) by P.L.33-1993, SECTION 76, effective July 1, 1993.

**845 IAC 1-5-2 Reporting credit (Repealed)**

Sec. 2. (*Repealed by Board of Podiatric Medicine; filed Oct 6, 2003, 4:45 p.m.: 27 IR 525*)

**845 IAC 1-5-2.1 Reporting continuing education credit; audit**

Authority: IC 25-29-2-11; IC 25-1-4-3

Affected: IC 25-29-6-4

Sec. 2.1. (a) The licensee shall provide the board with a sworn statement signed by the licensee that the licensee has fulfilled the continuing education requirements required by the board.

(b) The licensee shall retain copies of certificates of completion for continuing education courses for three (3) years from the end of the licensing period for which the continuing education applied. The licensee shall provide the board with copies of the certificates of completion upon the board's request for a compliance audit.

(c) Every two (2) years the board shall randomly audit for compliance more than one percent (1%) but less than ten percent (10%) of the licensees required to take continuing education courses. (*Board of Podiatric Medicine; 845 IAC 1-5-2.1; filed Oct 6, 2003, 4:45 p.m.: 27 IR 525; readopted filed Dec 1, 2009, 9:13 a.m.: 20091223-IR-845090780RFA; readopted filed Nov 13, 2015, 11:22 a.m.: 20151209-IR-845150246RFA; readopted filed Oct 21, 2021, 8:31 a.m.: 20211117-IR-845210259RFA*)

**845 IAC 1-5-3 Approval of continuing education programs**

Authority: IC 25-29-2-11

Affected: IC 25-29-6-4

Sec. 3. To receive credit for continuing education programs, the program must be sponsored, accredited, or approved by any of the following organizations:

- (1) American Association of Podiatric Physicians and Surgeons.
- (2) American Medical Association (programs related to podiatric medicine).
- (3) American Society of Podiatric Dermatology.
- (4) American Society of Podiatric Medicine.
- (5) Council on Podiatric Medical Education.
- (6) American Podiatric Medical Association.

- (7) A national, regional, state, district, or local organization that operates as an affiliated entity under the approval of any organizations listed in subdivisions (1) through (6).
- (8) Any of the colleges of podiatric medicine accredited by the Council on Podiatric Medical Education.
- (9) A federal, state, or local government agency that coordinates or presents continuing education programs related to podiatric medicine.

*(Board of Podiatric Medicine; 845 IAC 1-5-3; filed Apr 12, 1984, 8:28 a.m.: 7 IR 1531; filed Aug 5, 1987, 4:30 p.m.: 10 IR 2726; filed Dec 8, 1994, 5:08 p.m.: 18 IR 1284; readopted filed Jun 13, 2001, 11:45 a.m.: 24 IR 3823; filed Oct 6, 2003, 4:45 p.m.: 27 IR 528; filed Apr 18, 2005, 2:30 p.m.: 28 IR 2716; readopted filed Nov 22, 2011, 12:16 p.m.: 20111221-IR-845110368RFA; readopted filed Dec 1, 2017, 1:53 p.m.: 20171227-IR-845170404RFA) NOTE: Transferred from the Medical Licensing Board of Indiana (844 IAC 8-5-3) to the Board of Podiatric Medicine (845 IAC 1-5-3) by P.L.33-1993, SECTION 76, effective July 1, 1993.*

## **Rule 6. Standards of Professional Conduct**

*NOTE: 845 IAC 1-6 was transferred from 844 IAC 8-6. Wherever in any promulgated text there appears a reference to 844 IAC 8, substitute 845 IAC 1.*

### **845 IAC 1-6-1 Standards of professional conduct and practice**

Authority: IC 25-29-1-3

Affected: IC 25-29

Sec. 1. A podiatrist shall: (a) Maintain the confidentiality of all knowledge and information regarding a patient, including, but not limited to, the patient's diagnosis, treatment and prognosis, and of all records relating thereto, about which the podiatrist may learn or otherwise be informed during the course of, or as a result of, the patient-practitioner relationship. Information about a patient shall be disclosed by a podiatrist when required by law, including, but not limited to, the requirements of IC 34-4-12.6-1 [*IC 34-4 was repealed by P.L.1-1998, SECTION 221, effective July 1, 1998.*], and IC 16-4-8-1 [*IC 16-4 was repealed by P.L.2-1993, SECTION 209, effective July 1, 1993.*], and any amendments thereto, or when authorized by the patient or those responsible for the patient's care.

(b) Give a truthful, candid and reasonably complete account of the patient's condition to the patient or to those responsible for the patient's care, except where a podiatrist reasonably determines that the information is or would be detrimental to the physical or mental health of the patient, or in the case of a minor or incompetent person, except where a practitioner reasonably determines that the information is or would be detrimental to the physical or mental health of those responsible for the patient's care.

(c) Give reasonable written notice to a patient or to those responsible for the patient's care when the podiatrist withdraws from a case so that another practitioner may be employed by the patient or by those responsible for the patient's care. A podiatrist shall not abandon a patient.

A podiatrist who withdraws from a case, except in emergency circumstances, shall, upon written request, and in conformity with the provisions of IC 16-4-8-1 [*IC 16-4 was repealed by P.L.2-1993, SECTION 209, effective July 1, 1993.*] through IC 16-4-11 [*IC 16-4 was repealed by P.L.2-1993, SECTION 209, effective July 1, 1993.*], and of any subsequent amendment or revision of said statute, make available to his patient or to those responsible for the patient's care, all records, test results, histories, x-rays, radiographic studies, diagnoses, files and information relating to said patient which are in the podiatrist's custody, possession or control, or copies of such documents.

(d) Exercise reasonable care and diligence in the treatment of patients based upon generally accepted and approved scientific principles, methods, treatments, and current professional theory and practice.

(e) Not represent, advertise, state or indicate the possession of any degree recognized as the basis for licensure to practice podiatric medicine and surgery unless the podiatrist is actually licensed on the basis of such degree in the state(s) in which he practices.

(f) Obtain consultation whenever requested to do so by a patient or by those responsible for a patient's care. Further, the podiatrist shall refer a patient to another practitioner in any case where the referring podiatrist does not consider himself qualified to treat the patient, and may refer the patient to another practitioner where the referring podiatrist is unable to diagnose the illness or disease of the patient.

(g)(1) A podiatrist who has personal knowledge based upon a reasonable belief that another podiatrist has engaged in illegal, unlawful, incompetent or fraudulent conduct in the practice of podiatry shall promptly report such conduct to a peer review or similar

body, as defined in IC 34-4-12.6-1(c) [*IC 34-4 was repealed by P.L.1-1998, SECTION 221, effective July 1, 1998.*], having jurisdiction over the offending podiatrist and the matter. This provision does not prohibit a podiatrist from promptly reporting said conduct directly to the committee of podiatric medicine. Further, a podiatrist who has personal knowledge of any person engaged in, or attempting to engage in, the unauthorized practice of podiatric medicine, osteopathic medicine or medicine shall promptly report such conduct to the committee of podiatric medicine.

(2) A podiatrist who voluntarily submits himself/herself to, or is otherwise undergoing a course of treatment for, addiction, severe dependency upon alcohol or other drugs or controlled substances, or for psychiatric impairment, where such treatment is sponsored or supervised by an impaired podiatrists committee of a state, regional or local organization of professional health care providers, or where such treatment is sponsored or supervised by an impaired podiatrists committee of a hospital, shall be exempt from reporting to a peer review committee as set forth in subsection (g)(1) or to the committee of podiatric medicine for so long as:

(A) the podiatrist is complying with the course of treatment;

(B) the podiatrist is making satisfactory progress.

If the podiatrist fails to comply with, or is not benefitted by, the course or treatment, the podiatrist chief administrative officer, his designee, or any member of, the impaired podiatrists committee shall promptly report such facts and circumstances to the committee of podiatric medicine. This subsection shall not, in any manner whatsoever, directly or indirectly, be deemed or construed to prohibit, restrict, limit or otherwise preclude the committee of podiatric medicine from taking such action as it deems appropriate or as may otherwise be provided by law.

(h) A podiatrist may administer local anesthesia.

(i) Podiatrists may prescribe and administer drugs necessary in the practice of their profession if they apply to a primary condition or disease of the foot.

A podiatrist with staff privileges within a hospital, medical or health care facility may prescribe such drugs, medicines, or treatments to maintain the health of the patient in conjunction and cooperation with the co-admitting physician, the patient's physician, or the medical director (M.D. or D.O.) of the facility.

(j) The podiatric surgeon of record is responsible for maintaining the health of the patient pre-operatively, operatively, and post-operatively until the patient is discharged from his service, except for the regular long-term or systematic control of systemic diseases that are under the care of a medical or osteopathic physician.

(k) A podiatrist shall not attempt to exonerate himself from or limit his liability to a patient for his personal malpractice, except that a podiatrist may enter into agreements which contain informed, voluntary releases or waivers of liability in settlement of a claim made by a patient or by those responsible for a patient's care.

(l) A podiatrist shall not attempt to preclude, prohibit or otherwise prevent the filing of a complaint against him by a patient or other practitioner for any alleged violation of IC 25-29, 844 IAC 8, or any other law. (*Board of Podiatric Medicine; 845 IAC 1-6-1; filed Apr 12, 1984, 8:28 a.m.: 7 IR 1531; filed Aug 5, 1987, 4:30 p.m.: 10 IR 2726; readopted filed Jun 13, 2001, 11:45 a.m.: 24 IR 3823; readopted filed Jul 19, 2007, 12:55 p.m.: 20070808-IR-845070056RFA; readopted filed Nov 25, 2013, 9:19 a.m.: 20131225-IR-845130275RFA; readopted filed Nov 12, 2019, 9:11 a.m.: 20191211-IR-845190075RFA*) NOTE: Transferred from the Medical Licensing Board of Indiana (844 IAC 8-6-1) to the Board of Podiatric Medicine (845 IAC 1-6-1) by P.L.33-1993, SECTION 76, effective July 1, 1993.

#### **845 IAC 1-6-2 Fees for services**

Authority: IC 25-29-1-3

Affected: IC 25-29-1-6.1

Sec. 2. (a) Fees charged by a podiatrist for his professional services shall be reasonable and shall reasonably compensate the podiatrist only for services actually rendered.

(b) A podiatrist shall not enter into an agreement for, charge, or collect an illegal or clearly excessive fee. Factors to be considered in determining the reasonableness of a fee include, but are not limited to, the following:

(1) the difficulty and/or uniqueness of the services performed and the time, skill and experience required;

(2) the fee customarily charged in the locality for similar practitioner services;

(3) the amount of charges involved;

(4) the quality of performance;

(5) the nature and length of the professional relationship with the patient; and

(6) the experience, reputation and ability of the practitioner in performing the kind of services involved.

(c) A podiatrist shall not divide a fee for professional services with another practitioner who is not a partner, employee, or shareholder in a professional corporation, unless:

(1) the patient consents to the employment of the other practitioner after a full disclosure that a division of fees will be made; and

(2) the division of fees is made in proportion to actual services performed and responsibility assumed by each practitioner.

(d) A podiatrist shall not pay, demand, or receive compensation for referral of a patient, except for a patient referral program operated by a podiatry association which is approved by the board.

(e) A podiatrist shall not charge a separate and distinct fee for the incidental, administrative, nonmedical service of securing admission of a patient to a hospital or other medical or health care facility.

(f) A podiatrist shall not base his fee upon the uncertain outcome of a contingency, whether such contingency be the outcome of litigation or any other occurrence or condition which may or may not develop, occur or happen. (*Board of Podiatric Medicine; 845 IAC 1-6-2; filed Apr 12, 1984, 8:28 a.m.: 7 IR 1533; readopted filed Jun 13, 2001, 11:45 a.m.: 24 IR 3823; readopted filed Jul 19, 2007, 12:55 p.m.: 20070808-IR-845070056RFA; readopted filed Nov 25, 2013, 9:19 a.m.: 20131225-IR-845130275RFA; readopted filed Nov 12, 2019, 9:11 a.m.: 20191211-IR-845190075RFA*) NOTE: Transferred from the Medical Licensing Board of Indiana (844 IAC 8-6-2) to the Board of Podiatric Medicine (845 IAC 1-6-2) by P.L.33-1993, SECTION 76, effective July 1, 1993.

#### **845 IAC 1-6-3 Responsibility for employees**

Authority: IC 25-29-1-3

Affected: IC 25-29-1-6.1

Sec. 3. A podiatrist shall be responsible for the conduct of each and every person employed by the podiatrist (whether such employee is a podiatrist, nurse, or other specific professional health care provider employed by the podiatrist) for every action or failure to act by said employee or employees in the course of said employee(s) relationship with said podiatrist; provided, however, that a podiatrist shall not be responsible for the actions of persons he may employ whose employment by the podiatrist does not relate directly to the podiatrist's practice of podiatric medicine or surgery. (*Board of Podiatric Medicine; 845 IAC 1-6-3; filed Apr 12, 1984, 8:28 a.m.: 7 IR 1533; readopted filed Jun 13, 2001, 11:45 a.m.: 24 IR 3823; readopted filed Jul 19, 2007, 12:55 p.m.: 20070808-IR-845070056RFA; readopted filed Nov 25, 2013, 9:19 a.m.: 20131225-IR-845130275RFA; readopted filed Nov 12, 2019, 9:11 a.m.: 20191211-IR-845190075RFA*) NOTE: Transferred from the Medical Licensing Board of Indiana (844 IAC 8-6-3) to the Board of Podiatric Medicine (845 IAC 1-6-3) by P.L.33-1993, SECTION 76, effective July 1, 1993.

#### **845 IAC 1-6-4 Advertising**

Authority: IC 25-29-1-3

Affected: IC 25-29-1-6.1

Sec. 4. (a) A podiatrist shall not, on behalf of himself, a partner, associate, shareholder in a professional corporation, or any other practitioner or specific health care provider affiliated with the podiatrist, use, or participate in the use of, any form of public communication containing a false, fraudulent, misleading, deceptive or unfair statement or claim.

(b) In order to facilitate the process of informed selection of a podiatrist by the public, a podiatrist may advertise services through the public media including, but not limited to, a telephone directory, podiatrist's directory, newspaper or other periodical, radio or television, or through written communication not involving personal contact, provided that the advertisement is dignified and confines itself to the existence, scope, nature and field of practice of the podiatrist.

(c) If the advertisement is communicated to the public by radio, cable, or television, it shall be prerecorded, approved for broadcast by the podiatrist, and a recording and transcript of the actual transmission shall be retained by the podiatrist for a period of five (5) years from the last date of broadcast.

(d) If the podiatrist advertises a fee for a service, treatment, consultation, examination, radiographic study, or other procedure, the podiatrist must render that service or procedure for no more than the fee advertised.

(e) Unless otherwise specified in the advertisement, a podiatrist who publishes or communicates fee information in a publication that is published more frequently than one (1) time per month shall be bound by any representation made therein for a period of thirty (30) days after the publication date. A podiatrist who publishes or communicates fee information in a publication that



is published once a month or less frequently shall be bound by any representation made therein until the publication of the succeeding issue. A podiatrist who publishes or communicates fee information in a publication which has no fixed date for publication of a succeeding issue shall be bound by any representation made therein for one (1) year.

(f) Unless otherwise specified, a podiatrist who broadcasts fee information by radio, cable or television shall be bound by any representation made therein for a period of ninety (90) days after such broadcast.

(g) Except as otherwise specified in this section, a podiatrist shall not contact or solicit individual members of the public personally or through an agent in order to offer services to such person or persons unless that person initiated contact with the podiatrist for the purpose of engaging that podiatrist's professional services.

(h) Any advertisement for podiatric medical treatment shall include the name(s) of the licensed podiatrist(s) associated with such treatment facility or employed by the treatment facility or employed by another podiatrist.

(i) A podiatrist must include the title "Chiropodist" or "Podiatrist", in any advertisement. (*Board of Podiatric Medicine; 845 IAC 1-6-4; filed Apr 12, 1984, 8:28 a.m.: 7 IR 1533; filed Aug 5, 1987, 4:30 p.m.: 10 IR 2728; readopted filed Jun 13, 2001, 11:45 a.m.: 24 IR 3823; readopted filed Jul 19, 2007, 12:55 p.m.: 20070808-IR-845070056RFA; readopted filed Nov 25, 2013, 9:19 a.m.: 20131225-IR-845130275RFA; readopted filed Nov 12, 2019, 9:11 a.m.: 20191211-IR-845190075RFA*) NOTE: Transferred from the Medical Licensing Board of Indiana (844 IAC 8-6-4) to the Board of Podiatric Medicine (845 IAC 1-6-4) by P.L.33-1993, SECTION 76, effective July 1, 1993.

#### **845 IAC 1-6-5 Referrals**

Authority: IC 25-29-1-3

Affected: IC 25-29-1-6.1

Sec. 5. A podiatrist may, whenever the podiatrist believes it to be beneficial to the patient, send or refer a patient to a qualified specific professional health care provider's scope of practice. Prior to any such referral, however, the podiatrist shall examine or consult with the patient to insure that a condition exists in the patient which would be within the scope of practice of the specific professional health care provider to whom the patient is referred or sent. (*Board of Podiatric Medicine; 845 IAC 1-6-5; filed Apr 12, 1984, 8:28 a.m.: 7 IR 1534; readopted filed Jun 13, 2001, 11:45 a.m.: 24 IR 3823; readopted filed Jul 19, 2007, 12:55 p.m.: 20070808-IR-845070056RFA; readopted filed Nov 25, 2013, 9:19 a.m.: 20131225-IR-845130275RFA; readopted filed Nov 12, 2019, 9:11 a.m.: 20191211-IR-845190075RFA*) NOTE: Transferred from the Medical Licensing Board of Indiana (844 IAC 8-6-5) to the Board of Podiatric Medicine (845 IAC 1-6-5) by P.L.33-1993, SECTION 76, effective July 1, 1993.

#### **845 IAC 1-6-6 Discontinuance of practice**

Authority: IC 25-29-1-3

Affected: IC 25-29-1-6.1

Sec. 6. (a) A podiatrist, upon his retirement, or upon discontinuation of the practice of podiatric medicine or surgery, or upon leaving or moving from a community, shall not sell, convey [*sic.*] or transfer for valuable consideration, remuneration or for anything of value, patient records of that podiatrist to any other practitioner.

(b) A podiatrist, upon his retirement, or upon discontinuation of the practice of podiatric medicine or surgery, or upon leaving or moving from a community, shall notify all of his active patients in writing, or by publication once a week for three (3) consecutive weeks in a newspaper of general circulation in the community, that he intends to discontinue his practice of podiatric medicine and surgery in the community, and shall encourage his patients to seek the services of another practitioner; provided, however, that this subsection shall not apply to persons solely engaged in internship, residency, preceptorship, fellowship, teaching or other postgraduate medical education or training programs. The podiatrist discontinuing his practice shall make reasonable arrangements with his active patients for the transfer of his records, or copies thereof, to the succeeding practitioner or to a program conducted by a podiatry association approved by the committee.

(c) As used in this section, "active patient" means a person whom the podiatrist has examined, treated, cared for, or otherwise consulted with, during the two (2) year period [*sic.*] to retirement, discontinuation of the practice of podiatric medicine or surgery, or leaving or moving from a community.

(d) Nothing provided in this section shall preclude, prohibit or prevent a podiatrist from conveying or transferring the podiatrist's patient records to another licensed practitioner who is assuming a practice, provided that written notice is given to all

patients as specified in this section. (*Board of Podiatric Medicine; 845 IAC 1-6-6; filed Apr 12, 1984, 8:28 a.m.: 7 IR 1534; filed Aug 5, 1987, 4:30 p.m.: 10 IR 2728; readopted filed Jun 13, 2001, 11:45 a.m.: 24 IR 3823; readopted filed Jul 19, 2007, 12:55 p.m.: 20070808-IR-845070056RFA; readopted filed Nov 25, 2013, 9:19 a.m.: 20131225-IR-845130275RFA; readopted filed Nov 12, 2019, 9:11 a.m.: 20191211-IR-845190075RFA*) NOTE: Transferred from the Medical Licensing Board of Indiana (844 IAC 8-6-6) to the Board of Podiatric Medicine (845 IAC 1-6-6) by P.L.33-1993, SECTION 76, effective July 1, 1993.

**845 IAC 1-6-7 Violation of standards**

Authority: IC 25-29-1-3

Affected: IC 25-29

Sec. 7. Failure to comply with the standards of professional conduct and competent practice of podiatry specified in 844 IAC 8-6 may result in disciplinary proceedings against the offending podiatrist. Further, all podiatrists licensed in Indiana shall be responsible for having knowledge of the standards of conduct and practice established by IC 25-29 and 844 IAC 8. (*Board of Podiatric Medicine; 845 IAC 1-6-7; filed Apr 12, 1984, 8:28 a.m.: 7 IR 1535; readopted filed Jun 13, 2001, 11:45 a.m.: 24 IR 3823; readopted filed Jul 19, 2007, 12:55 p.m.: 20070808-IR-845070056RFA; readopted filed Nov 25, 2013, 9:19 a.m.: 20131225-IR-845130275RFA; readopted filed Nov 12, 2019, 9:11 a.m.: 20191211-IR-845190075RFA*) NOTE: Transferred from the Medical Licensing Board of Indiana (844 IAC 8-6-7) to the Board of Podiatric Medicine (845 IAC 1-6-7) by P.L.33-1993, SECTION 76, effective July 1, 1993.

**845 IAC 1-6-8 Licensure fees (Repealed)**

Sec. 8. (*Repealed by Board of Podiatric Medicine; filed Oct 6, 2003, 5:00 p.m.: 27 IR 529*)

**845 IAC 1-6-9 Licensure fees**

Authority: IC 25-1-8-2; IC 25-29-2-11

Affected: IC 25-29-1-3; IC 25-29-1-5

Sec. 9. (a) A candidate for examination shall purchase the examination directly from the examination service.

(b) The application/issuance fee for a license to practice, as a doctor of podiatric medicine, by examination is one hundred fifty dollars (\$150).

(c) The application/issuance fee for a license to practice, as a doctor of podiatric medicine, by endorsement is one hundred fifty dollars (\$150).

(d) The fee for verification of a license to another state or jurisdiction is ten dollars (\$10).

(e) The fee for a duplicate wall certificate is ten dollars (\$10).

(f) The fee for a temporary permit or limited license is fifty dollars (\$50).

(g) The fee for renewal of the license to practice is one hundred dollars (\$100) every two (2) years.

(h) The fee for renewal of the license that is in inactive status is fifty dollars (\$50) every two (2) years.

(i) The fees are subject to change in accordance with the health professions bureau fee schedule.

(j) All application fees are nonrefundable. (*Board of Podiatric Medicine; 845 IAC 1-6-9; filed Oct 6, 2003, 5:00 p.m.: 27 IR 529; readopted filed Jul 19, 2007, 12:55 p.m.: 20070808-IR-845070056RFA; readopted filed Nov 25, 2013, 9:19 a.m.: 20131225-IR-845130275RFA; readopted filed Nov 12, 2019, 9:11 a.m.: 20191211-IR-845190075RFA*)

**Rule 7. Reinstatement to Practice**

NOTE: 845 IAC 1-7 was transferred from 844 IAC 8-7. Wherever in any promulgated text there appears a reference to 844 IAC 8, substitute 845 IAC 1.

**845 IAC 1-7-1 Evidence for reinstatement (Expired)**

Sec. 1. (*Expired under IC 4-22-2.5, effective January 1, 2020.*)

**845 IAC 1-7-2 Petitions for reinstatement (*Expired*)**

Sec. 2. (*Expired under IC 4-22-2.5, effective January 1, 2020.*)

**845 IAC 1-7-3 Duties of suspended licensees**

Authority: IC 25-22.5-2-7

Affected: IC 25-29

Sec. 3. In any case where a person's license has been suspended, said person shall:

(1) Within thirty (30) days from the date of the order of suspension, file with the committee of podiatric medicine an affidavit showing that:

(A) All active patients then under the licensee's care have been notified in the manner and method specified by the committee of the licensee's suspension and consequent inability to act for or on their behalf in a professional capacity. Such notice shall advise all such patients to seek the services of another licensee of good standing of their own choice.

(B) All hospitals, medical and health care facilities where such licensee has privileges or staff status have been informed of the suspension order.

(C) Reasonable arrangements were made for the transfer of patient records, radiographic studies, and test results, or copies thereof, to a succeeding licensee employed by the patient or those responsible for the patient's care.

(2) Notify in writing, by first class mail, the following organizations and governmental agencies of the revocation of licensure:

(A) Indiana department of public welfare;

(B) Social Security Administration;

(C) the podiatric licensing board(s), or equivalent state agency, of each state in which the person is licensed;

(D) Drug Enforcement Administration;

(E) Indiana hospital association;

(F) state podiatric medical association;

(G) Indiana pharmacists association;

(H) American Podiatric Medical Association.

(3) Proof of compliance with this section shall be a condition precedent to reinstatement.

(*Board of Podiatric Medicine; 845 IAC 1-7-3; filed Aug 5, 1987, 4:30 p.m.: 10 IR 2730; readopted filed Jun 13, 2001, 11:45 a.m.: 24 IR 3823; readopted filed Jul 19, 2007, 12:55 p.m.: 20070808-IR-845070056RFA; readopted filed Nov 25, 2013, 9:19 a.m.: 20131225-IR-845130275RFA; readopted filed Nov 12, 2019, 9:11 a.m.: 20191211-IR-845190075RFA*) NOTE: Transferred from the Medical Licensing Board of Indiana (844 IAC 8-7-3) to the Board of Podiatric Medicine (845 IAC 1-7-3) by P.L.33-1993, SECTION 76, effective July 1, 1993.

**845 IAC 1-7-4 Protection of patients' interest (*Expired*)**

Sec. 4. (*Expired under IC 4-22-2.5, effective January 1, 2020.*)

**Rule 8. Temporary Permits (*Repealed*)**

(*Repealed by Board of Podiatric Medicine; filed Dec 8, 1994, 5:08 p.m.: 18 IR 1285*)

**Rule 8.1. Temporary Permits**

**845 IAC 1-8.1-1 Temporary permits; licensure by endorsement**

Authority: IC 25-29-2-11

Affected: IC 25-29-5-2

Sec. 1. Persons holding a valid podiatric medical license or certificate to practice podiatric medicine in a state, territory, or possession of the United States who seek licensure in Indiana may be granted a temporary permit where the applicant meets the requirements of 845 IAC 1-3-1. The permit shall remain in effect until the license by endorsement for which application has been

made is issued or denied by the board. The nonrefundable fee for a temporary permit as required under 845 IAC 1-6-8 must be paid at the time application is made. (*Board of Podiatric Medicine; 845 IAC 1-8.1-1; filed Dec 8, 1994, 5:08 p.m.: 18 IR 1285; readopted filed Jun 13, 2001, 11:45 a.m.: 24 IR 3823; readopted filed Jul 19, 2007, 12:55 p.m.: 20070808-IR-845070056RFA; readopted filed Nov 25, 2013, 9:19 a.m.: 20131225-IR-845130275RFA; readopted filed Nov 12, 2019, 9:11 a.m.: 20191211-IR-845190075RFA*)

**845 IAC 1-8.1-2 Limited license; postgraduate program**

Authority: IC 25-29-2-11

Affected: IC 25-29-5-3

Sec. 2. (a) A limited license may be issued to an applicant who wishes to train in an educational institution or hospital as specified in IC 25-29-5-3. Such applicant must submit the following:

(1) A completed application supplied by the board. This application is to be accompanied by the nonrefundable fee specified in 845 IAC 1-6-8.

(2) Proof of all academic requirements for the degree of doctor of podiatric medicine from a school approved by the Council on Podiatric Medical Education.

(3) Satisfactory evidence that he or she has not been the subject of disciplinary action by a licensing or certification agency of another state or jurisdiction on the grounds that the applicant was not able to practice podiatric medicine without endangering the public.

(4) Satisfactory evidence that he or she does not have a conviction for a crime that has a direct bearing on the applicant's ability to practice competently.

(5) A completed certification form showing evidence that the applicant has been accepted into a postgraduate program approved by the board.

(b) Approved postgraduate training programs are those approved by the Council on Podiatric Medical Education.

(c) Limited licenses issued under this section shall limit the applicant's practice of podiatric medicine to the postgraduate education program approved by the board in which the applicant is employed, assigned, or enrolled. This limitation shall be stated on the face of the limited license. (*Board of Podiatric Medicine; 845 IAC 1-8.1-2; filed Dec 8, 1994, 5:08 p.m.: 18 IR 1285; readopted filed Jun 13, 2001, 11:45 a.m.: 24 IR 3823; readopted filed Jul 19, 2007, 12:55 p.m.: 20070808-IR-845070056RFA; readopted filed Nov 25, 2013, 9:19 a.m.: 20131225-IR-845130275RFA; readopted filed Nov 12, 2019, 9:11 a.m.: 20191211-IR-845190075RFA*)

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