

APA-3
10/91

**CERTIFICATION OF ADMINISTRATIVE RULES
FILED WITH THE LEGISLATIVE REFERENCE SERVICE
JERRY L. BASSETT, DIRECTOR**

(Pursuant to Code of Alabama 1975, §41-22-6, as amended).

I certify that the attached is a correct copy of rules as promulgated and adopted on the 19th day of July, 2017, and filed with the agency secretary on the 19th day of July, 2017.

AGENCY NAME: Alabama State Board of Medical Examiners

_____ Amendment _____ X _____ New _____ X _____ Repeal

Rule No. 540-X-19, Appendix B

(If amended rule, give specific paragraph, subparagraphs, etc., being amended)

Rule Title: Alabama Pain Management Registration Renewal Application

ACTION TAKEN: No comments were received. The appendix was adopted without changes from the proposed.

NOTICE OF INTENDED ACTION PUBLISHED IN VOLUME XXXV, ISSUE NO. 8, AAM,
DATED MAY 31, 2017.

Statutory Rulemaking Authority: *Code of Alabama* 1975, §34-24-53(a) and §34-24-293(a).

(Date Filed)
(For LRS Use Only)

REC'D & FILED

JUL 20 2017

LEGISLATIVE REF SERVICE



Certifying Officer or his or her Deputy

20XX Application for Renewal of Alabama Pain Management Registration

Deadline: December 31, 20XX

Under Alabama law, this document is a public record and if requested it will be provided in its entirety.

Licensee's Name

Primary License Number

Location Name

Location Address

1. Do you provide pain management services at a hospital? Yes No
In the past year, have either you or the owner(s) of each location where you provide pain management services been convicted of or pled nolo contendere to a felony or an offense that constitutes a misdemeanor, the facts of which relate to the distribution or illegal prescribing of any controlled substance? * Yes
No (If yes, please include a detailed explanation)

**Any applicant who has been convicted of a crime described in this paragraph may request an interview before the Board, after which the Board, in its discretion, may approve or deny the registration.*

2. Does the location listed above at which the above licensee provides pain management services have a medical director as required by Board Rule 540-X-19-.04? Yes No

I understand and agree that by typing my name, I am providing an electronic signature that has the same legal effect as a written signature pursuant to Ala. Code §§ 8-1A-2 and 8-1A-7. I attest that the foregoing information has been provided by me and is true and correct to the best of my knowledge, information and belief.

Knowingly providing false information to the Alabama Board of Medical Examiners could result in disciplinary action.

Author: Alabama Board of Medical Examiners

Authority: Ala. Code § 34-24-53

History: Amended/Approved: May 17, 2017. Effective date: September 5, 2017.