



APA-2  
6/93

**ALABAMA STATE BOARD  
OF MEDICAL EXAMINERS**

**NOTICE OF INTENDED ACTION**

AGENCY NAME: Alabama State Board of Medical Examiners

RULE NO. & TITLE: 540-X-19, Appendix B. Renewal Application

INTENDED ACTION: To repeal and replace the rule appendix

SUBSTANCE OF PROPOSED ACTION: Modification of form for online renewal

TIME, PLACE, MANNER OF PRESENTING VIEWS: All interested persons may submit data, views, or arguments concerning the proposed new rule(s) and regulation(s) in writing to: Patricia E. Shaner, General Counsel, Alabama State Board of Medical Examiners, Post Office Box 946, Montgomery, Alabama 36101-0946, by mail or in person between the hours of 8:30 a.m. and 4:30 p.m., Monday through Friday, until and including Wednesday, July 5, 2017. Persons wishing to obtain copies of the text of this rule and submit data, views, or comments or arguments orally should contact Patricia E. Shaner by telephone (334-242-4116) during said period in order to set up an appointment for a hearing respecting such oral data, views, or arguments. The rule amendment will also be available at the Board's web site, [www.albme.org](http://www.albme.org).

FINAL DATE FOR COMMENT AND COMPLETION OF NOTICE: July 5, 2017

CONTACT PERSON AT AGENCY: Patricia E. Shaner



Norris W. Green, Executive Director



NEW

**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?\*
- No            Yes  
 (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.