

Written Comments Received on the Sunrise Proposal - Part 3

3/13/2024

Ron Swensen,  
MD  
Gynecologic  
Oncologist

Oppose

I am writing in opposition to the proposed expansion of the scope for naturopathic practice in the state of Washington. The proposal includes allowing naturopathic physicians to prescribe scheduled narcotic drugs as well as a certified statements as a primary care physician.

The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have.

The proposal would also modify the current “minor office procedure” provision within the naturopathic practice act to include “primary care services” and “procedures incident thereto of minor injuries” without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform “injections.” These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained.

The proposal would also modify the current “minor office procedure” provision within the naturopathic practice act to include “primary care services” and “procedures incident thereto of minor injuries” without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform “injections.” These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained.

The state of Washington is currently suffering from the consequences of overzealous narcotic prescriptions. This is certainly not the fault of naturopathic physicians. Nevertheless, expanding the pool of certified healthcare providers who prescribe controlled substances only expands the risk of inappropriate prescribing. Naturopathic physicians excel in providing natural, nonpharmacologic means of managing stress and pain. By requiring naturopathic physicians to cooperate with other healthcare providers when prescribing these medications, it enhances the likelihood of patients receiving appropriate team-based care for these long-term problems.

Authorizing naturopathic physicians to sign forms and other certifications currently limited to primary care providers essentially expands the scope of a naturopathic physician to that of a primary care provider. I recommend that patients continue to see a primary care provider depending upon naturopathic physicians to provide the care they are trained in and skilled at.

Teddi McGuire, Oppose  
Program  
Manager,  
Government  
Affairs, WA

On behalf of Providence, thank you for the opportunity to submit feedback on the sunrise review on the scope of practice for naturopaths. Providence is a not-for-profit Catholic health care ministry committed to providing for the needs of the communities it serves – especially for those who are poor and vulnerable. In 2022, Providence and our partners provided \$839 million in community benefit, including \$575 million in unfunded costs of Medicaid and other government programs and \$117 million in free and discounted care for Washingtonians who could not afford to pay. Together, we are working to improve quality, increase access and reduce the cost of care in all the communities we serve. The proposed expansion of scope of naturopaths is very concerning to Providence. In Washington state, Providence and our secular affiliated partners – Swedish Health Services, Pacific Medical Centers and Kadlec – comprise 15 hospitals, physician clinics, senior services, supportive housing, hospice and home health programs, care centers and diverse community services. We are acutely aware of the potential for medical errors to occur in the absence of adequate training and supervision. Clinicians need years of supervised training to become competent to perform procedures and need peer standards to knowledgeably prescribe medications. If misused, some of these medications can cause lifetime harm through addiction, or death from overdose. Naturopaths do not have this level of training, guidance and oversight to responsibly provide the level of medical care outlined in this bill. A 2018 study evaluated opiate prescribing patterns in Oregon. The study found a greater percentage of high-risk opiate prescribing patterns among naturopaths (dose, number of prescribers/patient, co-prescriptions of benzodiazepines) (Opioid Prescribing Patterns and Patient Outcomes by Prescriber Type in the Oregon Prescription Drug Monitoring Program - PMC (nih.gov)). Expanding opiate prescribing authority to naturopaths could undermine the progress Washington has made in reducing prescription opiate death since passage of House Bill 1427 in 2018. Additionally, physicians receive 12,000-17,000 hours of supervised training after graduating medical school. This allows them the opportunity to gain skills needed not just to perform procedures, but also to manage complications as they arise. There is no requirement for post graduate supervised residency training for naturopaths and they only receive 1,200 hours of clinical observation training in naturopath school. Providence supports efforts to increase access to high quality care, especially in the primary care field, but do not believe this bill will achieve that goal. Please do not advance this proposal. Thank you for the opportunity to provide feedback.

A. A.  
Golombek, MD

Oppose

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in Child and Adolescent psychiatry and am board-certified in both General and Child and Adolescent Psychiatry. I completed medical school, 5 years of General and Child and Adolescent Psychiatry residency, and about another 2 years worth of nights and weekends, then passed 2 sets of written and oral boards. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. It's important to understand that naturopathy and medical training are fundamentally different, from acceptance requirements and rigor to the approach to clinical care to the understanding of evidence and the assessment of illness, treatment, and the risk of both. While naturopath's education often excels in areas not well-covered in medical school (e.g., nutrition), it is fundamentally different in orientation and the knowledge base, training, and acuity levels of patient care are not comparable. After meeting very high standards for acceptance with most applicants rejected, all medical students take a minimum of 2 years of clinical rotations during medical school then pass a series of 3 standardized USMLE exams. They then complete, minimally, an additional 3 years of residency training beyond that and often more. These programs are intense, with work-hours typically exceeding well-beyond 60 hours a week. They involve nights and weekends and involve a high level of acuity and responsibility for making difficult clinical decisions under stressful situations, up to an including those literally of life and death. This training reinforces both the knowledge and the limitations of our knowledge and reminds us that while we can heal, we can also harm. While the knowledge acquired in medical school is a first step in becoming a physician, it's only through extensive and intensive residency training that one becomes a safe and effective competent physician. In contrast, naturopaths are not required to complete a residency and those that exist are typically a year or so. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.

Jim Hedrick,  
State  
Government  
Affairs,  
Washington  
State  
Radiological  
Society  
(WSRS)

Oppose

Thank you for the opportunity to provide comments concerning the Washington State Department of Health's (DOH) sunrise review of naturopathic scope of practice. The Washington State Radiological Society (WSRS) is a diverse community of more than 800 radiology professionals throughout Washington State. Our members include diagnostic radiologists, interventional radiologists, radiation oncologists, nuclear medicine specialists and medical physicists in private practices, hospitals, hospital system-based practices and academia. SRS is dedicated to advancing radiology and radiologists and promoting the highest standards of quality, safety and public health. As leaders in the practice of radiology, WSRS members are at the forefront of health care delivery, demonstrating daily that radiology matters. WSRS and its members, in conjunction with the Washington State Medical Association (WSMA), are OPPOSED to the proposed expanded scope of practice as submitted by the Washington Association of Naturopathic Physicians. Our rationale is as follows; first, the education and medical training of naturopathic physicians is not equivalent to that of medical physicians. Naturopathic education focuses on philosophical principles and not evidence-based practices and methods required of physicians in their medical training. Second, a naturopath is not qualified to accurately diagnose patients in all circumstances and provide the medical treatment under consideration in the proposed scope of practice. Third, it is imperative for the delivery of health care that healthcare providers have the appropriate education and training to diagnose and treat patients effectively and safely. Fourth, naturopaths do not have the education for the proposed significantly expanded drug prescription authority (inclusion of controlled substances in Schedule II-V) without any additional education and training requirements. Lastly, WSRS is concerned the expanded scope of practice under consideration does not ensure the appropriate oversight for the naturopathic profession. The proposed expansion only defers to the Board of Naturopathy to "potentially" put additional training and education requirements in place. A board made up of non-clinicians and naturopathic providers is not sufficient to determine appropriate oversight and determine clinical outcomes. For these reasons and others WSRS recommends the DOH to reject the Washington Association of Naturopathic Physicians scope of practice expansion proposal in its entirety. For additional information and a more comprehensive discussion why this proposal should be rejected, WSRS urges the DOH to fully review the letter dated November 14 submitted by the WSMA Board on this matter.

Jamison S  
Nielsen, DO,  
MBA, MCR,  
FACS, FAWM

Oppose

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in Tacoma, Washington. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the COMLEX, I spent 5 years completing a residency where I learned to perform my duties safely and effectively (in addition to 3+ years of subspecialty training). By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.

Deborah A.  
Hall, MD

Oppose

I strongly oppose any increase in scope of practice of naturopaths in the state of Washington. The care I have seen of patients in this state by naturopaths compared to other states (California, Colorado and New Mexico) in which I've practiced has been appalling. I have seen inappropriate use of steroids, thyroid hormones, antibiotics and other medications. This has resulted in serious health outcomes and huge costs to patients and the healthcare system since most of these practitioners are selling many of these products along with unregulated supplements. They absolutely should not be allowed to prescribe any controlled substances, sign and attest to any certification cards or forms such as disability determinations or to be considered primary care practitioners. They do not have the training commensurate for this. SB5411 will only set back care of people in our state and in my local community.

Dr. Shipowick  
MD

Oppose

If there is 1 thing that we do not need at this time of opioid crisis, it is an expansion of those who are prescribing opioids. If naturopaths want this privilege then they should go to medical school and get the proper qualifications.

Even medical doctors, either MDs or Dos, only prescribe opioids on their own after 4 years of medical school and then 3 years minimum of residency sometimes as many as 6-8 years of residency.

I can not really understand why naturopaths, who purport to practice natural medicine would want to be prescribing narcotics anyway. They are supposed to be the ones who are suggesting alternative methods to allopathic treatments.

If they want to practice medicine then let them join the medical profession.

I give a positive, NAY, on the expansion of these privileges that our proposed by the association of Naturopathic practitioners--- not physicians.

I propose that they be required to drop the term 'physician' from their title. They are not physicians. When a lay person sees the term physician they think of a medical doctor—formerly just MDs but now both MDs and Dos.

Charles L.  
Wilson , M.D.

Oppose

I write in opposition to expanding Naturopathic scope of practice, and I specifically oppose allowing vasectomy. My 35 year surgical career has been dedicated to improving the safety and outcomes of vasectomy in the US and globally in order to advance acceptance of vasectomy by men and relieve the burden on women. I am now retired from surgical practice, having performed over 23,000 vasectomies and taught vasectomy techniques to thousands of physicians. Please recognize that NO VASECTOMY IS A MINOR PROCEDURE. Also, a minimally invasive vasectomy is much more difficult than an open surgical procedure. While some of us can make it look so easy, and almost routine, the risks are substantial. The prolonged, painful, nightmare scenarios of the unprepared and unqualified practitioners are tragically infamous. Proper preparation and management of the procedure demands the best of training, clinical judgment, and surgical experience. I urge the utmost caution against any provider attempting vasectomy without having proven competency in advanced surgical skills and judgment to avoid complications. Are naturopaths fully trained and experienced and the ones you would choose to operate on your loved one? I advise that the proposed expansion of naturopathic scope of practice be rejected in its entirety.

Ira P. Monka,  
DO President,  
AOA (American  
Osteopathic  
Association)

Oppose

The American Osteopathic Association (AOA) is writing to express our strong opposition to a sunrise review of Naturopathic physician scope of practice and SB 5411. We extend our sincere gratitude to the Washington State Department of Health for providing the opportunity to share our concerns and insights through public comments on the Naturopathic physician scope of practice and Senate Bill (SB) 5411. The AOA represents more than 186,000 osteopathic physicians (DOs) and medical students (OMSs) nationwide. The AOA promotes public health, encourages scientific research, and serves as the primary certifying body for DOs. More information on the AOA can be found at [www.osteopathic.org](http://www.osteopathic.org). SB 5411 seeks to expand naturopathic physicians' ability to prescribe federally controlled substances, namely, to prescribe Schedule II drugs. Compared to those physicians in Washington State with M.D. or D.O. degrees, Naturopathic physicians do not have the same level of training and education in pharmacology, nor the same level of clinical training. The requirements for licensure as a DO or an allopathic physician (MD) in the United States are substantially similar, and include: - Four years of medical school, which includes two years of didactic study totaling upwards of 750 lecture/practice learning hours just within the first two years, plus two more years of clinical rotations done in community hospitals, major medical centers and doctors' offices. - A comprehensive, three-part licensing examination series designed to test their knowledge and ability to safely deliver care to patients before they are granted a license to independently practice medicine. - 12,000 to 16,000 hours of supervised postgraduate medical education ("residencies") completed over the course of three to seven years, during which DO and MD physicians develop advanced knowledge and clinical skills relating to a wide variety of patient conditions. Naturopathic education: - Varies by school. There are seven naturopathic schools accredited by the Council on Naturopathic Medical Education (CNME) in the United States. - Traditionally focuses on holistic and nontoxic approaches to therapy with a strong emphasis on disease prevention and optimizing wellness. - May not include any residency training. While opportunities for one- to two-year residencies exist, this training is still optional and standard residency curriculum, rotations or experiences do not exist. There is no universal postgraduate training requirement for Naturopathic physicians. In fact, many Naturopaths begin practicing medicine with a full license immediately after finishing their four-year medical school programs. M.D.s and D.O.s are not granted their full medical licenses until they have completed their post-graduate training programs and thus have more training and perhaps more importantly practical experience on the job in medicine, including pharmacology, than their Naturopath counterparts. As we collectively work to reduce the burden of opiate dependency and addiction with your constituents in Washington State, we should ensure that only those with the highest level of education and practical experience are licensed to prescribe federally controlled substances. If our Naturopathic colleagues wish to prescribe these substances, then they should, at minimum, receive the same education and experience prior to licensure. We hope you can appreciate the gravity of this issue and will join us in ensuring we continue the fight against opioid addiction and protect your constituents and their children for generations to come from the dangerous effects of this disease. Naturopaths have not completed similar education and training physicians, which allows them to safely deliver the services described in this bill. For these reasons, the AOA urges you to not approve the scope of practice expansion for Naturopathic physicians.

Grant Bludorn,  
DO

Oppose

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in Battle Ground, WA. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the COMLEX, I spent 3 years completing a residency where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Also, I would like to add that I have seen numerous patients be prescribed unnecessary treatments from Naturopaths, which I then have to prove to the patient that they are unnecessary, which often requires more testing and more expense to the medical system. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.



Stephanie  
Cramer, MD,  
President  
Washington  
Academy of  
Eye Physicians  
& Surgeons

Oppose

The Washington Academy of Eye Physicians & Surgeons (WAEPS), representing over 150 ophthalmologists across the state, appreciates the opportunity to provide comments on the Department of Health's Sunrise Review regarding the naturopathic scope of practice. WAEPS remains committed to upholding the highest standards of medical and surgical eye care in Washington. We express our concerns regarding the Washington Association of Naturopathic Physicians' (WANP - "applicant") proposal to broaden their scope of practice, allowing prescription of scheduled II-V drugs and expanding into advanced invasive surgeries. We echo the Washington State Medical Association's detailed presentation on educational disparities and wish to emphasize philosophical and ophthalmological concerns. Naturopathic medicine, defined by principles, notably the commitment to "Do No Harm," should prioritize the most natural and least invasive therapies. Granting access to highly regulated schedule II drugs contradicts this principle and poses risks due to the lack of clinical experience and training among naturopaths. The principle of "The Healing Power of Nature" is incongruent with the WANP's request for advanced procedures, such as surgery and injections, which deviate from natural healing processes. Ophthalmologically, the vague term "injections" raises serious safety concerns, as delicate eye structures require specialized anatomical and procedural knowledge acquired through surgical training. WAEPS recalls a naturopathic complication involving an eye puncture during a demonstration, underscoring existing risks to patients. Approval of this Sunrise Review would magnify these risks significantly. Naturopathic aspirations to perform ill-defined procedures, including eyelid surgery, neglect the nuanced training required for such delicate structures. WAEPS urges the Department of Health to champion ACGME accredited residency training as the Gold Standard for medical practice and surgery. We vehemently oppose this naturopathic proposal, emphasizing the threat it poses to patient safety, contradicting national naturopathic philosophy, and highlighting the imprudence of non-surgically educated practitioners.

Tyler Baker,  
MD

Oppose

I am writing to express my significant and severe concern over the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. My biggest area of concern is the proposal to allow naturopathy to prescribe controlled substances (class ii-IV medications). I am already concerned when I see them prescribing antiarrhythmic medications without proper training. I have already seen MANY cases of osteoporosis, atrial fibrillation, liver failure and other complications from overprescribed/overdosed medications by naturopaths such as thyroid medications and antifungals. At a time when opiates, benzodiazepines, and stimulants are already over prescribed and more people are becoming addicted to these types of medications, i cannot understand why anyone would even consider allowing inadequately trained naturopathic doctors to prescribe these and feel it would only lead to patient harm. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the USML , I spent 3 years completing a residency where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.

Judy Chen,  
MD, American  
College of  
Surgeons,  
Washington  
State Chapter  
President

Oppose

On behalf of the Washington State Chapter of the American College of Surgeons and its 1,000 members in Washington State, I am writing to express our concerns regarding the Department of Health's sunrise review of naturopathic scope of practice. We are committed to ensuring high-quality care for all Washingtonians, which is why we strongly oppose the Washington Association of Naturopathic Physicians' (WANP) proposal to broaden naturopaths' scope of practice without the training and experience required to safely perform those tasks. Naturopathic training does not equip practitioners to accurately diagnose and treat patients with the requested expansion. Naturopaths are allowed to practice without any post-graduate training and are required to obtain only 60 hours of continuing education credits to maintain a license. Allopathic and osteopathic physicians have thousands of additional hours of post-graduate training and are required to obtain 200 hours of continuing education credits to maintain a license. Despite this, the WANP claims that their training is equivalent to allopathic and osteopathic physicians. The WANP proposal under review would expand a naturopath's prescriptive authority to include controlled substances in Schedules II-V. This is a significant increase in prescriptive authority, allowing naturopaths to prescribe high doses of narcotics, tranquilizers, sedatives, stimulants, and non-narcotic analgesics. This is particularly concerning for patients because naturopaths do not receive the same level of education and training as allopathic and osteopathic physicians in pharmacology or the treatment of pain. At a time when the opioid crisis has led to restrictions on providers' abilities to prescribe opioids, it is counterintuitive to expand prescribing authority to people with less training and experience. Patients deserve to have their care provided by professionals who have the necessary education and training to safely and effectively prescribe medications. Patients also deserve accountability and protection from harm. The WANP does not require its members to carry professional liability insurance. When a naturopath injures a patient, the patient may have difficulty recovering fair compensation, especially if they suffered a severe harm from an improperly performed procedure or inappropriately prescribed Schedule II drug. In recent years, the WANP has become increasingly aggressive in its efforts to expand its scope of practice to include treatments, procedures, and independent authority inconsistent with its education and training. For example, last year, the WANP sought to expand its scope of practice to include abortions and vasectomies. Naturopaths are not trained to be surgeons or perform even minor procedures. This jeopardizes the safety and quality of health care delivered to patients. Surgeons are held to very high standards by regulatory agencies for education, continued training, and quality to maintain safe surgical settings and processes for surgical procedures with known complications. Those regulations exist to protect and benefit patients, ensuring the highest levels of patient safety. The same standards for training and quality should apply to every medical professional performing a surgical procedure. In conclusion, the Washington Chapter of the American College of Surgeons strongly opposes the WANP's proposal to expand naturopaths' scope of practice because it will jeopardize the safety and quality of health care delivered to patients. Please contact me with any questions or concerns. We appreciate your consideration.

Nancy Sapiro

Oppose

I write today on behalf of the American College of Obstetricians and Gynecologists (ACOG) – WA Section. By way of this email we wish to indicate our support of the attached comments, submitted by the Washington State Medical Association (WSMA), regarding the Department of Health's sunrise review of the naturopathic scope of practice.

Please let me know if you have any questions.

Dr. Mitchell  
Sauder, PGY-2  
UW Psychiatry  
Residency  
Trainee

Oppose

I am an osteopathic physician specializing in psychiatry and write with concern about the proposal before you to expand naturopaths' scope of practice. In their applicant report, the Washington Association of Naturopathic Physicians specifically highlights the ongoing mental health crisis as the rationale to expand their prescribing privileges, including controlled substances. Medicine is a complicated science and psychiatric care is much more than just prescribing. This proposal would put vulnerable patients at risk of significant harm. Naturopaths have limited medical education, and this proposal disregards the training needed to understand the complex interactions between mental and physical health conditions. While psychotropic medications used to treat mental illness can be highly effective, they can also be ineffective or harmful if prescribed incorrectly. Prescribers must be diligently trained to understand how they affect the central nervous system and other organ systems, and how they interact with other medications or conditions such as pregnancy. These medications also need to be used differently across the lifespan. Psychiatric physicians complete over 12,000 hours of rigorous training AFTER medical school, specializing in the treatment of mental health conditions and substance use disorders. Unlike these MD and DO training programs – which must meet the national requirements defined by the Accreditation Council for Graduate Medical Education (ACGME) – naturopath training remains highly variable. As our state continues to battle the opioid epidemic, giving naturopaths authority to prescribe opioids and other controlled substances is irresponsible. Fighting the opioid epidemic means making sure these dangerous drugs are not over-prescribed. In my two years of post-graduate training I have seen countless patients admitted to the acute psychiatric unit with poorly managed - or wholly mismanaged - medication regimens managed in the outpatient setting by mid-level providers (ARNPs, PAs). My principle concern with expanding scope of practice to naturopaths without rigorous training and monitoring could lead to an exacerbation of patients having substandard management of their medical concerns. (This is not to say there are not countless of mid-level providers who perform at providing exceptional care to their patients). As an Osteopathic physician, our training is often compared or equated to that of my naturopathic colleagues. Despite this often used comparison, the underlying training and knowledge base remains markedly distinct. Our naturopathic colleagues and providers play a crucial role in the management of patient wellness and health, however expanding scope of practice in this manner, I wholly believe, is hazardous and without due justification. While we acknowledge that there is a shortage of psychiatrists in our state, this policy proposal does not address the workforce shortage ahead of us, nor the stigma that patients with mental illness face. Instead, I urge you to consider alternative evidence-based solutions to safely increase access to care, including the Collaborative Care Model, telepsychiatry, increasing the number of psychiatry residency spots, and more. Patient safety must be the driver behind any modification to our health laws and I urge you to oppose this proposal.

Brenna Born,  
MD

Oppose

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in Issaquah, Redmond and Mill Creek. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the USMLE I spent 4 more years completing a residency where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.

Kim Ha Wadsworth, DO	Oppose	Thank you for the opportunity to address the sunrise review of the naturopathic scope of practice. As a family medicine physician at Essential Direct Primary Care in Olympia, Washington, I align with the comprehensive concerns articulated by the Washington State Medical Association (WSMA) and the Washington Academy of Family Physicians (WAFP) in opposition of the proposed expansions. The proposal, in seeking to equate naturopaths with primary care physicians in prescribing controlled substances and performing office procedures, overlooks the substantial training gap between the two professions. Naturopathic education lacks the depth and clinical expertise necessary for such responsibilities. As a board-certified family physician, I underwent rigorous medical education, including comprehensive pharmacology training and residency, which differs significantly from naturopathic education's focus on "natural healing." Granting naturopaths prescriptive authority for schedules II-V without mandated additional training poses substantial risks, considering the complexity and well-known dangers associated with these medications. As we collectively combat the opioid crisis by striving to reduce inappropriate prescribing, expanding prescriptive authority to practitioners with lesser training would worsen the situation. Moreover, the lack of specificity in the proposal concerning "primary care services" and expanded procedures could compromise patient safety without ensuring adequate education and training of naturopaths. I urge the Department of Health to heed the concerns raised by WSMA and WAFP and oppose the proposed expansion in its entirety. Thank you for considering these critical concerns for patient safety and the quality of care in our state.
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Dr. Samuel VanderGriend	Oppose	Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in Seattle, WA. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state.
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James Calamia, DO	Oppose	Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice.  I am a family medicine physician practicing in Spokane, WA.  I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal in Senate Bill 5411, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state.
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Ross  
Vogelgesang  
M.D.

Oppose

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in Pain Management. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. My own personal experience with naturopaths is via my wife. She has been treated by various naturopaths as well as MD's in the Olympia area for 20+ years. She has worked in the medical field with MD's for the same 20+ years. She has reported to me that across the board the naturopathic offices are not following the same rules for patient safety that the MD offices are expected to follow (from no vitals taken at visits) to charts that would not pass audits. When she did have a mildly concerning lab result her naturopath's suggested care was so non-logical that she followed up with an MD. The naturopath has since lost her license to practice. The only time she had a pap smear performed by a naturopath the sample was incomplete and it was the most painful pap smear that she had experienced. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when incorrectly prescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.

Kelly Roberts,  
M.D.      Oppose

I am writing to you in regards to SB 5411 which proposes to expand the naturopathic scope of practice to allow them to prescribe controlled substances and to perform medical procedures. I am a board certified M.D. I will be retiring from paid employment soon so an allowing naturopaths to practice medicine without training in medical school or residency (post-graduate in hospital training for 3-7 years) will NOT affect my income. Rather, I would be concerned for the greater public safety if naturopaths who are not MD equivalents begin performing procedures and prescribing drugs that presently require training in medical school and residency. As you know, resident physicians are the young doctors that you see in UW Harborview and other teaching hospitals. They just graduated from medical school, have an M.D. degree and are learning the practice of medicine/complex decision-making on the job. There was a time in the 1940s and 1950s where medical school graduates could immediately open an office in the community without doing a residency. Unfortunately, there were many disastrous results of ppl treating patients with no residency training. Today, all 50 states require AT LEAST one year of residency for a full medical license. WA requires at least 2 years of residency (for a full medical license) and CA requires 3 years of residency. Residency is NOT just a legal formality-- it's for patient safety (a life and death issue). Yet SB5411 will allow ppl with NO M.D. schooling and NO residency training to practice medicine on an unsuspecting public. I have the medical training (and board certification which is not required, but something that I wanted to do) to steer family members from naturopaths who do not have the appropriate training to practice medicine. However, it is the duty of the Department of Health to protect the members of the public who do not have an MD in their family to protect them from untrained naturopaths practicing medicine without training. Please, for sake of patient safety, please do NOT recommend SB 5411 to proceed.

Tom Bowman      Oppose

I am a member of the public. I am concerned and opposed to expanding the naturopath practice to include more narcotics and medical procedures because it is a danger to public safety. I am fairly informed but some of my friends and relatives are not. It should not be a "buyer beware" situation. I do not want my friends and relatives to be harmed in the future.

The training of physicians is very extensive and necessary. Furthermore, there are several more medical schools than in the past. In the past, there was only UW but now there is a new medical school in Spokane and Yakima.

The Department of Health conducted a sunrise review of naturopathy in 2014 and did not recommend expansion. Health care is more complex in 2023 than 2014 so the 2014 recommendations should either not change or should become more stringent.



Diane Dakin, MD      Oppose      I am a recently retired Family Practice MD. I worked at the Olympia Group Health Cooperative clinic for 32 years and Kaiser Urgent Care for 6. I understand there is a proposal to significantly increase Naturopathic scope of practice in SB 5411. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. We certainly need more primary care access and many of my patients enjoyed the relationships with their naturopathic Doctor. I took several courses in Naturopathic Medicine many years ago and finally stopped that course of study as I felt it would not be possible to do justice to both ways of taking care of patients. There is just far too much to stay abreast of. I am concerned that Naturopaths have not, and will not be able, to add sufficient training to take care of our patients adequately if they are given the additional scope of practice. Are they ready to add all we learn in 4 years of Medical School and 3 years of Family Medicine residency to their own schooling?! I think the 2 specialties can be complimentary but they cannot be equated for most patient care situations. Much of SB 5411 is also very vague and could lead to very dangerous situations. Again I urge you not to support this proposal.

Thomas A. Scandalis, DO, Dean & Chief Academic Officer      Oppose      As the Dean of Pacific Northwest University College of Osteopathic Medicine, I am well qualified to comment on the Sunrise Review of the Naturopathic Scope of Practice.  
The pathway to practice medicine as a physician is clear. All student physicians follow a similar four-year curriculum including at least two years of observed practice as a medical student. Also, during medical school, students take two licensing exams pertaining to the content and practice of medicine. To be licensed in Washington State a minimum of one year of internship must be completed in addition to passing a third licensing exam following graduation from medical school. Practically speaking, the vast majority of physicians complete four years of medical school, a minimum of three years of residency, three licensing exams, and lastly a board certification exam. Current ACGME residency standards require the residency program director to "...verify that the resident has demonstrated the knowledge, skills, and behaviors necessary to enter autonomous practice."  
As dean of an osteopathic medical school, I am aware of resistance to MD's practicing osteopathic manipulative therapy (OMT) without additional training. Yet an MD who provides OMT services has completed all of the training an osteopathic physician has, except the medical school curriculum in osteopathic principles and practice. For a naturopathic provider who has not completed anything close to a similar 4+ year training to prescribe opioids, sign the myriad of forms that require a physician's signature, and begin providing invasive (breaking the skin or entering body cavities) procedures begs a closer examination. This interest in becoming a DO or MD isn't new. And the criteria for that scope of practice has not changed. If a naturopathic school wants to meet COCA or LCME accreditation criteria for the practice of medicine AND graduates of the naturopathic school complete at least a year of accredited post graduate training our support could change. At this point in time a naturopath's education and training does not include the comprehensive medical and pharmacological background needed to safely prescribe controlled substances and perform procedures. We oppose the updates included in SB 5411.

Jan Martin MD    Oppose

I am writing to provide comment on the review of the naturopathic scope of practice. I am a physician practicing in Seattle, Washington at Seattle Children's Hospital and the University of Washington. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the three-part USMLE, I spent five years completing a residency where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when mis-prescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. Furthermore, the DEA requires ongoing education around prescription safety and medication overuse/abuse identification by all physicians to ensure ongoing safe prescription practices. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. As you likely know, it is difficult for patients, without a medical background, to differentiate between the training and skills of various practitioners that call themselves "doctor." In my experience, this has led to expensive, unnecessary and, at times, unsafe testing and treatment by practitioners who are not adequately trained to understand the risks and benefits of the course they are taking. The risk to our patients and, by extension, the residents of the state of Washington, is high and does not seem worth it. Perhaps, instead of giving additional authority to unqualified practitioners, we should address the bigger issues around lack of access to care including allowing insurance companies to practice medicine without a license and interfering with medical care, poor reimbursement and increase cost to practice leading to burnout and clinicians leaving medicine. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.

Christina Sadler, MD	Oppose	<p>I am writing this email in response to the invitation for public commentary on the proposal to expand naturopathic physician scope of practice. I am a general pediatrician in WA state. I care for children ages birth to 18 ( sometimes 21). As an allopathic physician ( MD) my education included extensive pharmacology education and my post medical school residency training prepared me to understand and use important medication in children when appropriate. My DO colleagues have comparable education and training. We also undergo rigorous testing before we start practice and ongoing board certification to ensure we remain uptodate. This proposal to expand their scope of practice to prescribing prescription drugs schedule II-V is concerning because it does not include any stipulation of requiring additional education or training before permitting NDs to prescribe these medications. The education and training of naturopathic physicians does not include the comprehensive medical and pharmacological background to safely prescribe controlled substances. If naturopathic physicians are to prescribe controlled substances, they need to be subject to the extensive training that MDs and DOs complete. The bill also proposes to allow NDs to sign off on any certification cards, forms etc that a primary care doctor can sign. While this sounds simple in theory, my concern is that families who are already questioning routine vaccinations for their children will go to a naturopath who will sign exemption forms for vaccines without having a real discussion about the actual risks of not being vaccinated. It will become easier for people to avoid getting their children vaccinated, and our already declining vaccination rate will go down further, opening up opportunities for outbreaks of severe childhood diseases. I also have other concerns specifically regarding the pediatric population. In my experience and reading of Naturopathic education, the training and experience with a pediatric population is quite variable and there is no standard minimum to ensure that they are competent to treat children. Some schools give very little real life exposure to any pediatric patients, and the exposure given is aimed at naturopathic healing and does not teach about sick or complex children. When it comes to medical care for children for physical, mental, or behavioral health, they are not little adults. Things can be very different. I would be concerned if naturopathic physicians started prescribing ADHD medications (adderall/ritalin) which are schedule II or antipsychotics and SSRIs for children without the proper additional education/training and certification that they are competent to do so. I'm sure that allowing NDs to prescribe sounds like an easy partial solution to our primary care shortage, but the truth is they do not have adequate training as a standard part of their education. I would strongly urge you to not increase the scope of practice in this way. Consideration could be given if they are supervised under an MD/DO, or have testing and certification to show that they have gotten the necessary training.. As the bill stands now, it will be a disservice to patients in WA state. Most people do not fully understand the difference in training and so they would not be aware of the potential problems.</p>
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Frederick  
Duenebier,  
MD

Oppose

Thank you for reading this! I am a psychiatrist practicing in the greater Washington area, and strongly opposed to this bill. I generally welcome any increased availability for patients to find appropriate and safe treatment for mental health concerns, but allowing anyone, naturopaths included, to broaden their scope of practice without additional training is a profound safety risk for patients. Their training was defined and designed to prescribe non-scheduled medications. If naturopathic physicians would like to broaden their prescribing abilities, then \*at a bare minimum\*, the additional education they need to receive should be commensurate with this. And that means years of training to understand the biology and neurology associated with these medications, the risks, interactions, side effects and prognostic concerns, and the oversight and supervision and testing to obtain a new qualifying license, at the very least. It also is so, so very noteworthy that this request simply \*does not make sense\* within the scope of what the definition of a naturopathic physician is: by definition, their philosophy is to focus on \*natural\* remedies such as supplements, herbs, and other alternative treatments. Trying then, to broaden their scope to include treatments with the exact opposite approach and philosophy such as to prescribe scheduled medications, is contradictory to their core tenants. This poses serious concerns, then, of what their motivation is; it's like someone working at a salad bar seeing a shortage of chefs at a steak restaurant, and going for the money grab regardless of knowing nothing of what the job entails. In this case it's not a terrible meal at risk, it is literally the lives of our patients. Please, please do not allow this!

Lisa Stone, MD    Oppose

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in Wenatchee. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing USMLE, I spent 3 years completing a residency in Internal Medicine where I learned to perform my duties safely and effectively. I learned to appropriately diagnose, treat, and monitor patients' medical conditions. I then completed a 3 year fellowship in Endocrinology, Metabolism, and Diabetes. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. Additionally, the oversight over naturopaths through their state licensing board is not as rigorous as for MDs/DOs. I previously reported a naturopath for practices prescribing thyroid hormone that harmed patients leading to hospitalization. Other than an investigator contacting me and agreeing that the naturopath's practices were counter to evidence-based medicine and laboratory monitoring, there was no disciplinary action on the part of the Naturopathic Board that I am aware of. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when mis-prescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.

Jeroen Vanderhoeven MD	Oppose	<p>Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in Seattle, Washington with a specialty of Obstetrics &amp; Gynecology. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the USMLE I spent 4 years completing a residency followed by an additional 3 years in fellowship where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, any scheduled drugs can be dangerous when misprescribed and/or misused, which is why they require scheduling consideration in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have, particularly in my field of high risk pregnancy. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing under qualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. This concern could not be more self-evident than in the case of potentially underqualified providers performing abortion care. While I support the consistently demonstrated will of the people of Washington State to preserve access to abortion services, the proposed inclusion of in-clinic abortion by the applicant. In clinic abortion services are safe and established in the hands of providers who have completed the necessary clinical training. This training includes nondirective counseling, preprocedural preparation, performance of the procedure, and post-procedural patient care. Most importantly, allopathic physicians and osteopathic physicians have the medical training to respond to complications that may result when performing procedural abortions. As outlined in the WSMA letter, adverse outcomes occurring in abortion procedures are often used by proponents of restricting access to reproductive health services and the inclusion of an additional health care profession that lacks the training for this procedure must be considered a potential risk to ultimately preserve access for care for Washington State residents. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.</p>
Sumathy Pathy MD	Oppose	<p>As a primary care providers we are already dealing with patients who are using compounded hormones, insulin like substances, unnecessary testing etc done by Naturopath providers now if the control substance prescribing and procedures added with inadequate training the quality of care is going to suffer. We as primary care providers has to deal with the aftermath or consequences.</p>
Clint Thompson	Oppose	<p>I believe in collegiality with practitioners of the allied healing arts. However, expanding naturopathic scope of practice to include dangerous drugs and procedures without the requisite training puts the public in danger. I oppose the expansion of scope of practice.</p>
Reza Tabibi, MD	Oppose	<p>Hi, I strongly disagree with increasing scope of naturopathic practices. Instead, I emphasize to put more supervision on naturopathic practices. For example, many of these practices sell the supplements! Isn't it conflict of interest?</p>

M.D., MPH, St. Peter Family Medicine Residency	Oppose	Naturopaths do not have required training. I teach family physicians to diagnose and treat numerous conditions and the use of a differential is essential in medicine. I recently saw a woman who had been diagnosed with a hormonal deficit and treated with numerous hormonal concoctions when in fact she had lichen sclerosus of her genitals. The misdiagnosis allowed the condition to proceed unchecked and destroy her genitalia permanently. I have also seen numerous people managed for thyroid disease with substandard therapies and practices. Those of us practicing medicine cannot rescue many patients from their mismanagement. If they will not recognize their limitations, then the state must limit them. I know physicians are struggling to meet the needs of patients but any argument that ND access is better than no access is wrong. We will have more misdiagnoses and profound misunderstandings to correct, which will further strain legitimate medical services.
John S. Roberts, MD, Family Medicine	Oppose	Expanding naturopathic scope of practice is the wrong move. It will put patients at risk and diminish the quality of care Washingtonians receive.
Bob Bray MD	Oppose	I am strongly opposed to the proposed changes to the scope of practice for naturopaths. They do not have the training to safely prescribe and manage opioid medications, nor do they have the training to do office surgical procedures. I am board certified in Family Medicine as well as Hospice and Palliative Medicine. I understand primary care medicine and the treatment of pain and discomfort. Practitioners of naturopathy are not adequately trained to do either of these important roles.
William R. Phillips, MD, MPH	Oppose	I strongly oppose Senate Bill 5411. Passage of this bill would pose an immediate threat to the safety of patients and of the health of the public. My qualifications to share an expert opinion on this matter includes: <ul style="list-style-type: none"> <li>• Washington state physician certified in both Family Medicine and Preventive Medicine and Public Health.</li> <li>• University of Washington Emeritus Professor of Family Medicine in the School of Medicine and of Epidemiology and of Health Systems and Population Health in the School of Public Health.</li> <li>• Past member of multiple US national advisory committees on medical practice in public health, including USPSTF - United States Preventive Services Task Force, ACIP - Advisory Committee on Immunization Practices, and the MCAC - Medicare Advisory Committee.</li> <li>• Pioneer and international expert on interprofessional education and practice</li> </ul> The provisions of this bill would extend naturopathic physician practice: <ul style="list-style-type: none"> <li>• Go beyond anything connected to their professional training.</li> <li>• Are not supported by any published evidence of patient safety or public health.</li> <li>• Involve professional duties with substantial potential for harm.</li> <li>• Require training and monitoring that are beyond the capability and expertise of current naturopathic physician educators and practitioners.</li> <li>• With no documentation that this these practices would meet needs of patients or communities in Washington state.</li> </ul> Thank you for your careful consideration of this important matter.

Brendan Levy  
MD

Oppose

I am writing to express my concerns regarding the proposed expansion of the naturopathic scope of practice under SB 5411, currently under review by the Washington State Department of Health. This proposal, advocated by the Washington Association of Naturopathic Physicians (WANP), seeks to significantly broaden the prescriptive authority and procedural capabilities of naturopathic doctors. However, I believe that approving these changes would be a substantial misstep, compromising patient safety and the integrity of medical practice in Washington. The proposed expansion includes granting naturopathic doctors the authority to prescribe all drugs listed in Schedule II-V, including highly potent opioids like fentanyl and methadone, as well as stimulants such as amphetamines. This is a drastic leap from their current prescriptive scope, which is sensibly limited to legend drugs and substances consistent with naturopathic practice. Additionally, the bill seeks to equate naturopaths with physicians in signing legal documents and performing minor office procedures, redefined to encompass primary care services. This includes controversial practices such as in-office nitrous oxide administration, and stem cell treatments, which naturopaths have previously attempted to include in their scope. It is imperative to recognize that naturopathic doctors, despite their valuable role in healthcare, do not undergo the extensive medical training and residency that is required of primary care physicians. Expanding their scope to include such critical and potentially high-risk areas of medicine, without equivalent training, poses a significant risk to patient safety and public health. The Washington Academy of Family Physicians (WAFP) has rightly opposed this proposed expansion, highlighting these crucial differences in training and expertise. I urge the Department of Health to consider these points carefully in their review. The implications of such an expansion are far-reaching and could set a concerning precedent. I strongly recommend maintaining the current scope of practice for naturopathic doctors to ensure the highest standards of patient care and safety in Washington. Thank you for your attention to this matter. I trust that the Department will make a decision that prioritizes the well-being and safety of our community.

Mariel  
Scheinberg,  
DO

Oppose

My name is Mariel Scheinberg and I am a board certified family physician. I have been practicing as a primary care doctor in Washington since graduating from my residency training at the University of Vermont Medical Center in 2018. My practice is in Renton, WA. I am writing to express my strong opposition to this proposal based on my understanding of naturopathic training as well as my own experience in treating patients who have either previously seen or are simultaneously seeing a naturopath while under my care. I firmly believe that the rigorous and regulated education and training we undergo, in settings that span a wide range of acuity, as overseen by unified accreditation bodies, set us apart in terms of understanding and managing complex medical issues and there is no reliable way of evaluating the qualifications of naturopaths to the same degree. I am concerned that expanding the scope will lead people (patients) to equate the level of care under a naturopath with the evidence-based care that we provide. This would be misleading and potentially harmful as many patients, especially those who are underserved, may not have the background to evaluate the individual qualifications of a practitioner and would therefore be more vulnerable to exploitation. Thank you for your attention to this matter.



Julia Sokoloff, MD, Family Physician	Oppose	<p>I am writing in opposition to the expansion of Naturopathic Scope of Practice. Naturopaths complete 4 years of school, during which they learn a standard medical curriculum plus also information about naturopathic and alternative healing. And then they go into practice, with no further training. Physicians, in contrast, complete a minimum of 3 additional years of intensive training after medical school -- internship and residency -- during which they learn and practice specialty-specific skills, including office procedures and managing complex medication regimens. Naturopaths simply do not have appropriate and sufficient training to safely perform the office procedures listed. Nor do they have the expertise to manage risky medications. Please recommend a "no" vote on this measure to help maintain patient safety in Washington State.</p>
Deborah A. Hall, MD	Oppose	<p>I strongly oppose any increase in scope of practice of naturopaths in the state of Washington. The care I have seen of patients in this state by naturopaths compared to other states (California, Colorado and New Mexico) in which I've practiced has been appalling. I have seen inappropriate use of steroids, thyroid hormones, antibiotics and other medications. This has resulted in serious health outcomes and huge costs to patients and the healthcare system since most of these practitioners are selling many of these products along with unregulated supplements.</p> <p>They absolutely should not be allowed to prescribe any controlled substances, sign and attest to any certification cards or forms such as disability determinations or to be considered primary care practitioners. They do not have the training commensurate for this.</p> <p>SB5411 will only set back care of people in our state and in my local community.</p>
H. Matt Smith MD	Oppose	<p>I have been practicing primary care medicine since 1980, including several years when I worked in a family medicine residency program. Over these many years, I've encountered many patients who had been seeking care from naturopathic physicians and who had come seeking another opinion. Occasionally, the nutritional and health management advice offered by the naturopathic providers matched my own but the great majority of the care and records provided by local naturopaths demonstrated, in my opinion, gross ignorance or misunderstanding of human physiology and disease processes. I find the thought that naturopathic "physicians" are being considered on par with medical school and residency trained primary care doctors as exceedingly frightening. Medicine is becoming more complex, not less so. The four years of medical school and at least 3 years of residency primary care physicians must complete as well as the continued emphasis on study and recertification are a minimum standard, not a maximum one. Please do not approve this expansion of naturopathic scope of practice.</p>

Josephine  
Wang, MD

Oppose

Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the USMLE I spent 4 years completing a residency in obstetrics and gynecology where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411.

The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have.

The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits.

Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.

Leslie King, RPh	Oppose	<p>After carefully reviewing Senate Bill 5411, WANP's applicant report, and the letter from the Senate Health and LTC Committee, I must STRONGLY oppose this proposed expansion of naturopathic scope of practice. As a registered pharmacist practicing in Washington for over 30 years (the last 5 in an inpatient psychiatric and substance abuse facility), I remain shocked, appalled and dismayed at the slippery slope our state legislators continue to slide down in regards to inappropriate prescriptive authority. As the final gatekeeper in the prescriptive process, retail pharmacy has been unable to stem the tide of overprescribing and has seen countless lives ruined by a careless view of addictive pharmacology. Better stewardship and appropriate prescribing by appropriate providers must be addressed further upstream by legislative and accrediting bodies, including our own Washington State Department of Health. The state and nation continues to suffer an opioid and prescription drug abuse crisis. The last thing Washington state needs is naturopaths (or anyone for that matter) prescribing MORE opioids and benzodiazepines. Current "best practice" standards for physicians, nurse practitioners and pharmacists in regards to appropriate opioid stewardship include utilizing non-addictive pharmacological and non-pharmacological treatment modalities plus DEPRESCRIBING controlled substances. That is the nationwide clinical standard today. Naturopaths speak of natural, botanical, holistic healing. Opium derivatives and synthetics have proven far too potent with too much abuse potential to justify expanding access. Benzodiazepines have no natural or botanical basis. That's what valerian root is for. Addressing some of the claims of the senate bill and the applicant report: <b>Claim:</b> There is a shortage of primary care services that can be addressed by increasing the scope of practice of naturopathic physicians. <b>Clarification:</b> This shortage is being addressed by 2 medical schools in the state of Washington, as well as nurse practitioners, rural pharmacies, telemed, electronic prescribing, etc. <b>Claim:</b> In some areas naturopathic physicians are the only available health care providers. <b>Clarification:</b> Rural areas are served by clinics, hospitals, nurses, doctors, nurse practitioners and independent retail pharmacies as well as telemed and electronic prescribing. I live in eastern Washington and my hospital takes referrals from tribal reservations and other rural areas north, south, west, and east, including Idaho. Never have we encountered any patients from these rural areas who claim to only have had access to a naturopath. <b>Claim:</b> Neighboring states have expanded prescriptive authority of naturopaths. <b>Clarification:</b> Washington only has 2 neighboring states and only Oregon has expanded the prescriptive authority of naturopaths to include controlled substances II-V. New Mexico limited prescriptive authority of naturopaths to schedules III-V and EXCEPTED benzodiazepines and opiates. California's "expansion" requires the supervision of a physician. This is NO JUSTIFICATION for broadening the prescriptive authority of naturopaths in our state. <b>Claim:</b> Naturopaths need an expansion of controlled substance prescribing to be able to reorder and taper patients' pain medicines. <b>Clarification:</b> this is addressed through telemedicine, faxed and e-scripted prescriptions. Additionally, the loosening of DEA regulations on medication-assisted treatment (Suboxone/buprenorphine access) has expanded access of traditional prescribers in all other specialties. There is NO JUSTIFICATION to expand it further through naturopaths untrained in addiction and behavior. <b>Claim:</b> Naturopaths receive more pharmacology credits during training than physicians and nurse practitioners. <b>Clarification:</b> that may appear true in course listings in school catalogs, but the real measure of pharmacological knowledge counts in which disease states were studied. A loose example: 8 hours of opioid pharmacology is not comparable to 30 hours of hormonal pharmacology when the specialty that needs to be addressed is pain management modalities, abuse and addiction. Just because the state of Washington granted naturopaths limited controlled substance prescribing in 2005 (codeine and testosterone in schedules III-V) is no reason to grant further expansion to schedule II agents including hydrocodone, oxycodone and morphine, or other controlled substances such as lorazepam, clonazepam, tramadol, carisoprodol, buprenorphine, etc. etc. That is swinging the pendulum dangerously too far in the other direction. Wise up, Washington.</p>
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David B Brecher, MD FAAFP FAAHPM	Oppose	Dear Ms Thomas,As a dual board certified physician I want to express my opposition to allowing naturopathic providers to expand their clinical responsibilities. I have long believed that medicine is the ultimate team game and appreciate the help and assistance that my naturopathic colleagues have provided. They are able to provide a different perspective of the healing process and their work is valuable. However expanding their privileges, especially in prescribing of medications, would be detrimental to the people of Washington State. It has taken me many years of training and experience to understand these concepts and this proposal does not seem to me to be a wise idea.Appreciate your consideration and respect of my opinion. Will be happy to provide more information if you feel this would be helpful.Thank you for your time and efforts.David B Brecher MD FAAFP FAAHPM
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Andrea Chymiy, MD, MPH	Oppose	<p>I am writing with my comment RE: proposed Naturopathic Scope Expansion being considered by the Washington State Department of Health in response to proposed Senate Bill 5411.</p> <p>Although I understand the intent of the bill would be expand access to primary healthcare in the face of a healthcare provider shortage, I have significant reservations about expanding Naturopath's scope of practice to include essentially the same prescribing and in-office procedural capabilities as MD and DOs in Washington state. The prescribing and procedural training undergone by MDs and DOs is intensive and thorough, with an emphasis on evidence-based care.</p> <p>In my medical opinion the training received by allopathic MDs and DOs is far superior to Naturopathic training with regard to medication management and in-office procedures, and it would be a disservice to Washington state residents if the primary healthcare provided by Naturopaths were to be considered equal and equivalent to that provided by allopathic physicians. A better response to the primary healthcare provider shortage would be to provide financial support for recruiting and training more primary healthcare providers in our state, and making excellent primary healthcare a higher priority.</p> <p>Thank you for your consideration.</p>
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Victoria Boisen DO	Oppose	This proposition to expand the scope of naturopathic practice to include procedures with the potential for great harm if not done by a trained professional, who is experienced, should by no means be approved. This will lower the standard of medicine overall and cause damage to both patients and the profession as a whole. I strongly oppose this proposal.
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Olivia Rae Wright, MD      Oppose      Thank you so much for taking comments on the proposal. I have been a Family Medicine Residency educator for over 20 years. The nature of this training is broad, comprehensive and both experience and competency based. Residents spend up to 80 hours per week for 3 years with oversight from experienced practitioners to assess their competency with prescribing, procedures and disability assessment in multiple settings. I have a great respect for naturopathic medicine and all it brings to the care of patients. However, it is not the same type of training, especially related to prescribing and procedural care. I would not attempt to replicate the unique services a naturopath provides without additional training. I am concerned that patients will not know the difference and would be susceptible to a level of care that is not associated with the same level of scrutinized training and oversight. I am unclear how broadening the scope of practice without the level of training normally associated with this level of care will help the citizens of Washington. I would strongly encourage you to oppose this proposal, related to SB 5411.

Clinton Hobson, MD      Oppose      I am an emergency medicine physician living and working in Washington State. I am extremely concerned about scope creep with naturopathic practitioners in Washington. As an emergency medicine physician, I can strongly speak towards numerous safety concerns - and borderline fraud - that I have seen with patients presenting to the emergency department. I have seen patients coming in to the ED concerned about nuanced vitamin deficiencies or test results where they were given inaccurate or incomplete information from a naturopath who did not know what to do with the information they ordered. Additionally, I have heard from patients that they have spent upwards of \$1,000 or more for testing and information that is not clinically relevant.

I have spent 4 years in college, 4 years in medical school (Dartmouth Medical School class of 2013), and 4 years in residency training at the University of Pennsylvania. I did additional training in patient safety and healthcare quality, earning a Masters degree from Johns Hopkins University. I am originally from the east coast, and must say I am shocked about the current scope of Naturopathic clinicians, and am very concerned about the overall wellbeing and safety of patients in our state should their scope expand.

Please, in the interest of our community and our friends/family, please do not allow further scope creep.

Teresa Girolami, MD      Oppose      Recent patient came in, told me she had a total hysterectomy because "her naturopath overdosed her on hormones and she ended up with endometrial cancer." Unfortunately this is not uncommon. I am shocked at the "Practicing of medicine" by naturopaths. They are NOT doctors of medicine and not trained. They confuse patients by stating they are Md's and cause harm. I have seen it over and over. I respect their knowledge of herbs and nutrients and they should respect the field of medicine. I do not practice naturopathy and expect Nd's to not practice medicine for the sake of all patients. Thank you

E. Lee Foley  
IV, M.S. D.O.

Oppose

I am writing in order to provide comment on the proposed changes to Naturopathic physician scope of practice. I am a board certified emergency medicine physician working in Washington State. I would like to express my fervent opposition to expanding the scope of Naturopathic Physician (ND) practice specifically as it relates to the prescribing of controlled substances. At the heart of the issue is patient safety and well-being. The ND curriculum is woefully inadequate in regards to pharmacology. Moreover, it has been well documented that certain practices and treatments utilized by NDs not only fail to meet standards of care, but lack basis in evidence based medicine. I believe that allowing NDs to prescribe controlled substances would pose a threat to the safety of patients and should be opposed. While the goal of expanding access to care is noble, allowing an unqualified profession to prescribe addictive and potentially dangerous medications would not only be an egregious mistake, it would also set a bad precedent. For these reasons, I ask the legislature to oppose the proposed changes.

Should you have any questions regarding my comments or, if I can be of any assistance, please do not hesitate to reach out. Thank you very much for taking the time to read and consider this.

Anita J.  
Demlow, MD

Oppose

I am writing to address my concerns to the Washington Department of Health regarding Senate Bill 5411, which would expand the scope of practice of naturopathic doctors, to include such things as signing attestations currently requiring medical doctor signatures, prescribing scheduled medications and performing in office vasectomies and abortions, without specifying additional education and training requirements. As a medical doctor with 33 years of post-graduate experience practicing medicine, I cannot express strongly enough my opposition to this bill. According to the National Library of Medicine there are "close to 6,800 prescription medications" on the market in addition to over the counter medications, supplements, herbs etc. The sheer number alone demonstrate the potential for making prescription errors, and in fact, again according to the National Library of Medicine, "each year in the United States alone, 7,000-9,000 people die due to a medication error. Additionally, hundreds of thousands of other patients experience but do not often report...adverse drug reactions or other complications." These errors are not all made by allopathic providers, but they serve to illustrate the point that even with the current standard of care in training for medical education, many errors are made that have significant and at times deadly consequences. To even consider expanding the prescribing scope of a naturopathic doctor without requiring additional education and training is pure folly, and places our patient population in peril. The same argument can be made against expanding the definition of interoffice procedures. If NDs want to practice as MDs they should become MDs so they can meet the same standard of excellence that our current medical education demands. One of my medical school classmates who was an ND, did just that. The approach of the ND as stated by the American Academy of Naturopathic Medicine is to address "the root cause of symptoms from a whole-person lens, focusing on Body, mind, and spirit. NDs also focus on prevention and the body's natural ability to heal itself...NDs collaborate with their patients to create individualized treatment plans that address diet, lifestyle, and mental wellness in order to achieve positive health outcomes." Our patients need NDs and benefit from their care when they practice in the scope of naturopathic medicine. If NDs cannot provide the care their patient need within their current scope of practice, then perhaps we should all admit for the greatest good of our patients, that that care is outside their scope of practice and would best be delivered by a trained allopathic physician. Thank You for your consideration of my strong opposition to Senate Bill 5411

Ian C. May, MD    Oppose  
FACEP

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am an emergency physician practicing in downtown Seattle at Swedish Medical Center (First Hill and Cherry Hill) as well as the Puget Sound Veteran's Affairs Administration Hospital. I oppose the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school at the University of Michigan where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. As part of my training today I complete hundreds of non-compensated hours a year to maintain my certifications which allow me to provide medical care. After graduation and passing the USMLE's Steps I-III, I spent three years in emergency medicine residency at Madigan Army Medical Center where I learned to perform my duties safely and effectively. This represents greater than 10,000 hours of observed and supervised medical treatment as a resident. I then passed the American Board of Medical Specialties examinations (written and oral) in Emergency Medicine, and am Board Certified in Emergency Medicine. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for prescribing on schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. By contrast, allopathic and osteopathic physicians have additional requirements through the DEA just to be able to prescribe buprenorphine, the medication needed to help reduce dependency. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when incorrectly prescribed and/or misused. For this reason, they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances or provide medical care. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. This type of grey zone would never be allowed in any medical credentialing document for any hospital system. As an emergency physician I have to continually prove competency through procedure logs and graded simulation by my peers to have the right to perform procedures. Furthermore, this law would blanket grant naturopaths the ability to perform procedures under which they have no proven competency nor training. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal. If you have any questions, I would love to talk with you or a member of your staff about the matter.





Danko  
Martincic, MD

Oppose

my name is Danko Martincic and I am board certified hematologist/oncologist practicing currently at Beacon Cancer Care, CdA, ID. I am Washington State medical license holder since 2006.

This proposal is going against every single principle of medical science and practice. We as a physicians are all obligated to [1] go through rigorous and quite long education; [2] quite extensive clinical training; [3] pass boards to be eligible to practice medicine. The purpose of the board examination is to prove physician has certain level of competency defined as the best of our current understanding based on evidence from clinical trials. "Do not harm" is the basic principle every single medical student learns as soon as medical school starts. Ethical principles are beacon of our profession.

In my personal opinion based on experience from my own practice, naturopaths are:

- practicing certain level of patient care with minimal to no evidence based approach;
- they are ordering tests which have never been proven to make any sense in medical practice and, by doing so, adding unnecessary expenses;
- they are misleading patients with false statements creating false sense of patients comfort
- their recommendations are frequently based on unproven theories;
- they lack basic understanding of physiology and, more importantly, pathophysiology.

I suggest to minimize and limit the scope of their practice to as low as possible level, not to expand it under any circumstances.

Zeke Melquist    Oppose    Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in Shelton, WA. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education, that is overseen by a national accrediting body, as well as being accepted throughout the world. Among other subjects, I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the USMLE, I spent 3 years completing a residency where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and does not train in the evaluation and application of evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions, nor does this incorporate the scientific literature available. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all prescription medications can be dangerous when incorrectly prescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances, nor any medication for that matter. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal. If anything, legislation ought to be advanced which further limits what naturopaths are allowed to do.

Alan Thomas, MD, PhD    Oppose    I recently have reviewed the requests made by naturopaths to expand their privileges and it's honestly shocking to me why a naturopath would want to basically perform allopathic medicine, but with only a fraction of the training. I have always maintained that if someone wants to be a physician that they should go to medical school or DO school and go through residency, and then practice medicine and allowing naturopaths to practice medicine without full training will certainly lead to patient harm.

Linhchi Pham	Oppose	<p>I hope this email finds you well. I am a new attending physician, having just finished residency at the University of Washington in June 2023 and am now in hospital medicine at Evergreen. I am writing on my personal belief that I oppose the proposed naturopathic scope of practice expansions. I urge the Department of Health to oppose all elements of the proposal which compromise the safety of our patients and the effectiveness and quality of care delivered in our state. As a hospitalist, I take care of patients in the ICU and on the medicine floor who have suffered detrimental side effects from naturopathic medicine. This includes infertility from inappropriate prescribing of testosterone, significant electrolyte abnormalities from supplements requiring ICU care and progression of treatable breast cancer with new spread to the brain/bone from seeing a naturopathic provider and not an oncologist. With the advancement in medicine with evidence-based practice, it is clear that naturopathic education has not improved outcomes for many in a meaningful way. In medicine, we have undergone 4 years of medical school with pharmacology and 3+ years of residency to enhance our practice/knowledge of medicine. Naturopathic education is not comparable. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 54111 worry about this proposal as it would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. Additionally, the proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." I worry that this will compromise quality care because naturopathic education does not focus on this. As physicians, we undergo training with understanding of anatomy and diagnoses to do knee injections, shoulder injections, paracentesis, shave biopsy etc. and other procedures. This would not provide quality care at all. I urge the department to oppose all elements and appreciate your time on this matter.</p>
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James McMillan, MD	Oppose	<p>I am writing to comment on the sunrise review of naturopathic scope of practice. As an M.D. with 38 years practice experience in Washington—and in many ways one very supportive of naturopathic adjunctive medical care—I am utterly opposed to the requested increases in scope of practice for Washington State naturopaths. While I deeply respect the proper administration and potential of naturopathic care, naturopaths should practice their own art and not be trying to act as M.D.s without having done the necessary training and certifications. Put simply, in order to protect the public welfare, any practitioner who would like to offer care in the scope of an M.D. should do the right thing and obtain an M.D. degree like all of us who did. Naturopaths are not adequately trained in pharmacology—let alone surgical care—with no internship, residency experience or national medical board certifications to suggest they should be pursuing these expanded privileges. To allow this expansion would endanger the public welfare beyond any logical doubt. If medical school training and licensure are no longer needed to allow for such a scope of practice, then there is really not reason for M.D. training, licensure or certification to exist. Please protect our patients and terminate this scope of practice expansion request.</p>
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Margaret A. MacLeod, MD

Oppose

As a trained MD and Board Certified Family Medicine physician, I am opposed to Naturopaths continued efforts to usurp the medical responsibilities to physicians to patients. They are not equally trained and too often rely on sharing patients with physicians and shifting liability for their poor outcomes to my fellow professionals.

I don't understand why the State would support a lower level of care for their constituents rather than invest in increasing access to qualified primary care physicians through education and adequate reimbursement for services rendered.

E. Kai Hansen, MD

Oppose

I am an internal medicine physician in Kirkland, WA. I have been practicing for 28 years. During that time, I have had the opportunity to observe the impact of naturopathy on many patients. I've discussed their recommendations with my patients, reviewed their notes, reviewed their rationale for specific treatments. I have cared for patients who died or were very seriously injured because they placed their trust in a naturopath. I've witnessed the recommendation of very expensive, but unproven supplements. These not only have the potential to harm but also delude the patient into believing that they don't need treatments that have been proven to be beneficial. The justifications for treatments I have read in naturopathic notes are based on physiologic assumption and basic science (what occurs in a test tube) as opposed to evidence-based medicine.

I have read the naturopathic curriculum of Bastyr, as well as descriptions of the training by those who have been through it. They do no training in hospitals. They don't learn how to take care of patients who have serious medical illness. In addition, they demonstrate a lack of necessary medical skepticism and understanding of the levels of evidence required to justify asking someone to put a chemical into their bodies.

I have no doubt that naturopaths genuinely want to help their patient and try hard to do so. They simply don't know what they don't know. From my experience, there is a tremendous amount that they don't know.

I believe strongly that the current scope of practice for naturopaths is too broad. I believe that entrusting them with some of the most dangerous medications available would be a terrible mistake.

Jake Goyden,  
MD

Oppose

To Whom It May Concern, I am a physician specializing in psychiatry and write with concern about the proposal before you to expand naturopaths' scope of practice. In their applicant report, the Washington Association of Naturopathic Physicians specifically highlights the ongoing mental health crisis as the rationale to expand their prescribing privileges, including controlled substances. Medicine is a complicated science and psychiatric care is much more than just prescribing. This proposal would put vulnerable patients at risk of significant harm. Naturopaths have limited medical education, and this proposal disregards the training needed to understand the complex interactions between mental and physical health conditions. While psychotropic medications used to treat mental illness can be highly effective, they can also be ineffective or harmful if prescribed incorrectly. Prescribers must be diligently trained to understand how they affect the central nervous system and other organ systems, and how they interact with other medications or conditions such as pregnancy. These medications also need to be used differently across the lifespan. Psychiatric physicians complete over 12,000 hours of rigorous training after medical school, specializing in the treatment of mental health conditions and substance use disorders. Unlike these MD and DO training programs – which must meet the national requirements defined by the Accreditation Council for Graduate Medical Education (ACGME) – naturopath training remains highly variable. As our state continues to battle the opioid epidemic, giving naturopaths authority to prescribe opioids and other controlled substances is irresponsible. Fighting the opioid epidemic means making sure these dangerous drugs are not over-prescribed. While practicing in clinic and hospital setting, one of the most frequent challenges I face is helping patients to stop medications that are burdening the patient with side effects more than helping them. This "deprescribing" is most often necessary when a prior provider lacks the training and experience of a psychiatrist. It is especially difficult, and the harms have often been much greater, when the medications are controlled substances. Medications generally, and controlled substances especially, are the product of a scientific and evidence based approach to health. They should only be used by providers practicing in that model. I have seen many patients work painfully for years to undo the damage caused by inappropriately trained providers. While we acknowledge that there is a shortage of psychiatrists in our state, this policy proposal does not address the workforce shortage ahead of us, nor the stigma that patients with mental illness face. Instead, I urge you to consider alternative evidence-based solutions to safely increase access to care, including the Collaborative Care Model, telepsychiatry, increasing the number of psychiatry residency spots, and more. Patient safety must be the driver behind any modification to our health laws and I urge you to oppose this proposal. Thank you so much for your time and work on behalf of my patients,

Jordan  
Roberts, MD,  
MPH

Oppose

Thank you for the opportunity to provide comments on the sunrise review of the naturopathic scope of practice. I am a pediatrician and pediatric rheumatologist practicing in Seattle WA, and I previously practiced in Boston, MA. I have cared for patients who unfortunately received inadequate and dangerous care from naturopaths practicing well beyond their training in ways that harmed children. Based on my experience of inadequate evaluation for medical causes, inaccurate diagnoses, and lack of appropriate use of restricted medications, I am strongly opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology, and interpreting evidence based medicine. After graduation and passing multiple board exams, I spent three years in pediatric residency and an additional three years in fellowship to become board certified in pediatrics and pediatric rheumatology. I also received an MPH which allows me to effectively evaluate and apply research. In contrast to these 10 years of rigorous education, a naturopath's education emphasizes "natural healing" and not evidence-based practices. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete medical school, residency or fellowship. The education and training of a naturopath is not anywhere near equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. I would not allow any of my family members to be primarily cared for, or take medications recommended by a naturopath. Thank you for the opportunity to share my concerns with this proposal. Again, I strongly urge the department to oppose all elements of the proposal. Please do not hesitate to contact me should you have additional questions about these concerns.

Brandon  
Lawrence, WA  
State Medical  
Oncology  
Society

Oppose

Hello! I am reaching out on behalf of the Washington State Medical Oncology Society (WSMOS) regarding the proposal from the Washington Association of Naturopathic Physicians (WANP). WSMOS President Jay Lopez, MD, is submitting the attached letter on behalf of the society. Please do not hesitate to reach out to me or Advocacy Partner Kathryn Kolan (cc'ed) if you have any questions. I am writing on behalf of the Washington State Medical Oncology Society (WSMOS) regarding the Washington Department of Health (Department)'s sunrise review of naturopathic scope of practice. WSMOS is a committed community of oncologists, nurse practitioners, physician assistants, and other allied health professionals who provide a voice for multidisciplinary cancer care teams and the patients they serve. Our core mission is to ensure that all patients with cancer in Washington State have meaningful access to high quality, high-value, and equitable cancer care. WSMOS urges the Department to oppose the proposal from the Washington Association of Naturopathic Physicians (WANP). We believe that naturopathic education is not equivalent to the years of education that are required for osteopathic physicians. Furthermore, WSMOS is concerned about the expanded prescriptive authority that naturopaths would possess. This raises the risk of patient harm. This proposal also seeks the largest scope of practice for naturopaths in the country, but it does not create new ND's. This would not increase access of care at all. These lack of guardrails are very concerning, because the end result will be worse patient outcomes. Finally, as mentioned above, WSMOS' core mission is to ensure patients receive high-value care. WSMOS believes that this proposal would cause patients to receive a lower value of care. At my practice, I have seen patients who have had delays in care when they have seen naturopaths prior to coming to oncologists. They have had a progression of disease interim. Patients of mine have had peripheral neuropathy after receiving naturopathic medications, and this caused them to receive below standard of care chemotherapy to prevent permanent neuropathy. Finally, I have seen patients receive false hope from naturopaths with unstudied medications. Based on the reasons listed above, WSMOS urges the Department to reject this proposal. If you have any questions, or need any assistance, please coordinate with our advocacy partner, Kathryn Kolan, JD, (katie@kathrynkolanpublicaffairs.com). We thank you for the opportunity to provide comment. Signed by board of directors



Laurie  
Arndorfer, MD

Oppose

I am a physician specializing in psychiatry and write with concern about the proposal before you to expand naturopaths' scope of practice. In their applicant report, the Washington Association of Naturopathic Physicians specifically highlights the ongoing mental health crisis as the rationale to expand their prescribing privileges, including controlled substances. Medicine is a complicated science and psychiatric care is much more than just prescribing. This proposal would put vulnerable patients at risk of significant harm. Naturopaths have limited medical education, and this proposal disregards the training needed to understand the complex interactions between mental and physical health conditions. While psychotropic medications used to treat mental illness can be highly effective, they can also be ineffective or harmful if prescribed incorrectly. Prescribers must be diligently trained to understand how they affect the central nervous system and other organ systems, and how they interact with other medications or conditions such as pregnancy. These medications also need to be used differently across the lifespan. Psychiatric physicians complete over 12,000 hours of rigorous training after medical school, specializing in the treatment of mental health conditions and substance use disorders. Unlike these MD and DO training programs – which must meet the national requirements defined by the Accreditation Council for Graduate Medical Education (ACGME) – naturopath training remains highly variable. As our state continues to battle the opioid epidemic, giving naturopaths authority to prescribe opioids and other controlled substances is irresponsible. Fighting the opioid epidemic means making sure these dangerous drugs are not over-prescribed. I have worked with several naturopaths and do believe that their clinical experience helps patients to make good choice regarding their primary health care. However, they do not have the training or experience to manage more complex psychiatric care. I recently had a call from a naturopath who did not know how to identify the basic symptoms of a manic episode, how to manage lithium levels in a patient with bipolar disorder and did not know what labs to order to monitor kidney and thyroid function in this patient. This lack of knowledge could have disastrous consequences for patients. While we acknowledge that there is a shortage of psychiatrists in our state, this policy proposal does not address the workforce shortage ahead of us, nor the stigma that patients with mental illness face. Instead, I urge you to consider alternative evidence-based solutions to safely increase access to care, including the Collaborative Care Model, telepsychiatry, increasing the number of psychiatry residency spots, and more. Patient safety must be the driver behind any modification to our health laws and I urge you to oppose this proposal.

Jash Bansal,  
MD MPH

Oppose

Is there a place I can call to discuss the care that my patients have received from naturopaths? I do not currently believe that patients are well served seeing them for a broad variety of pathology. Expanding their prescribing rights and procedural access only further endangers my patients.

As is, the practice of naturopaths in our area is a severe detriment to my work in this area and is a factor in considering relocation.

Maika Dang, M.D.	Oppose	<p>Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in emergency medicine. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the USMLE, I spent four years completing a residency where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing under qualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.</p>
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Ralph Althouse MD, MPH	Oppose	<p>I would like to provide comment on the sunrise review of the naturopathic scope of practice. I oppose the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of patients in our state. I appreciate the dearth of primary care providers, but allowing untrained people to do this is not the answer.</p>
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John Ho, MD	Oppose	<p>I am a Neuro interventional and interventional radiologist. I completely disagree with expansion of scope of practice to all medical specialties unless that specialty can show training in these areas. By training, I mean formal training. Not a weekend course that let's you play if you pay.</p>
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Kam Vaziri, MD    Oppose

Hope you are well, I am an internal medicine physician serving the underserved pierce county patients in Wa. I am hearing there are thoughts of naturopaths prescribing medications that they never had any education or training on? I hope i am hearing wrong as that would be malpractice and a disservice to our patient's lives.

Naturopath's training as its name suggests completely lacks in prescription medication education, they do not have any training on advanced medications, mechanism of action, side effects and medication interactions. I cannot tell you how many misdiagnoses or incorrect diagnoses I have had to catch from naturopaths and that's without them being able to prescribe advanced medications.

I have to say I am mind blown that this is even on the table. Would you be comfortable a naturopath managing your loved ones' heart failure? lets not do to our patients what we wouldn't do for our own loved ones.

Marta Shala  
Erich, MD

Oppose

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in Bellingham, WA. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the required three stages of competency board exams, I spent four years completing a residency in psychiatry where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Allopathic medical training is not without flaws and medical doctors are certainly fallible, but we are grounded in much more extensive training in diagnosis and weighing of risks and benefits of pharmacological and procedural interventions than naturopaths are. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.

Samuel Shirk,  
MD

Oppose

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in Port Townsend. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the USMLE, I spent 3 completing a residency where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal. Proposals like this further complicates patient interpretations of qualified medical experts - physicians.

Robie Sterling  
MD

Oppose

I am a family physician practicing in Okanogan county, WA a severely under-resourced county in north central washington, where I treat many native, immigrant and impoverished individuals. I am writing in opposition to SB 5411, and urge the DOH to oppose this measure, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. I have worked alongside naturopaths at a local FQHC, and I do think they provide a valuable resource to our community, including complementary medicines, and improved access to simple primary care visits. I was initially quite bullish on the potential scope of naturopaths, but over time I have seen repeated clinical missteps and gaps in knowledge come out, resulting in either delays in care, near misses, or even harm to patients. I now see naturopaths as equivalent to a physician assistant in their general medical scope, with the addition of a strong foundation in complementary medicine. This is a valuable skill set, but very different from a physician who goes through evidence based medical school and a rigorous residency of 3-7 years in length, with extensive testing along the way. Expanding the scope of NDs has a high likelihood to result in patient harm and further deteriorate the perception of the medical system by the general public. Additionally, the expanding prescribing authority being proposed will absolutely result in excess unnecessary controlled meds being used inappropriately. Society is just starting to put together a coordinated response to the ongoing opioid epidemic, however stimulant and ketamine prescribing are exploding. We do not need more partially trained individuals worsening this issue. I understand that we are very short of the number of clinicians needed to care for our population, and this bill may be seen as a reasonable approach to address this issue. I would instead encourage NDs to go the route of DOs, and standardize their training so one day perhaps they can participate in the well established track of medical residency, and ideally we expand the number of residency programs to accommodate this necessary growth. Simply giving more clinical privileges to less trained people is not the answer.

Adam J.  
Claessens, DO

Oppose

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice (SB 5411). I am a physician practicing anesthesiology and pain medicine at the University of Washington Medical Center; as well as a faculty instructor to medical students, residents and fellows through the UW School of Medicine. I have a very unique perspective on this bill due to the fact that prior to attending medical school, I enrolled in the naturopathic doctoral program at Bastyr University in Kenmore, WA and completed the first year curriculum. Ultimately I was concerned by the lack of evidence-based medicine in that program and in naturopathic training generally. I later matriculated at a medical school in California and completed four years of comprehensive, evidence-based didactics and clinical rotations. I passed all licensure examinations and then completed a 4-year residency program in anesthesiology in New York, followed by a 1-year fellowship here at the University of Washington. I am board-certified by the American Board of Anesthesiology. I have friends and colleagues who are naturopathic physicians. However, I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.

Cynthia  
McNally, MD

Oppose

I have been a board-certified gynecologist in Vancouver, WA for over 20 years. Unlike a lot of my peers, I actually refer some of my patients to naturopaths for gut and pain issues. I pride myself on embracing complementary methods of treating chronic conditions and I do not feel that Western medicine has all the answers. With that said, I am frequently astounded by how naturopaths exaggerate their scope and experience. Some are conservative and know when to refer to allopathic doctors, but I have seen so many who mismanage patients. Many patients do not know the difference between a naturopathic "physician" and a board-certified medical doctor, and naturopaths often ignore established standards of care. I have seen delayed diagnosis and other harm as a result of these practices. I strongly oppose any expansion of their privileges, even as someone who sees a role for natural medicine in our healthcare system.

Michael Astion  
MD, PhD

Oppose

I am a UW physician and UW Professor of Laboratory Medicine and Pathology, who has practiced Laboratory Medicine, in a variety of leadership positions at UWMC, Harborview and Seattle Childrens. I have had ample experience with naturopaths ordering laboratory tests.

I am against Senate Bill 5411. I am for limiting naturopaths and requiring they get more medical education. This bill does the opposite of what I believe to be beneficial for healthcare and the citizens of our state.



Matt Becker,  
MD PhD

Oppose

I am a physician specializing in psychiatry and write with concern about the proposal before you to expand naturopaths' scope of practice. In their applicant report, the Washington Association of Naturopathic Physicians specifically highlights the ongoing mental health crisis as the rationale to expand their prescribing privileges, including controlled substances. Medicine is a complicated science and psychiatric care is much more than just prescribing. This proposal would put vulnerable patients at risk of significant harm. Naturopaths have limited medical education, and this proposal disregards the training needed to understand the complex interactions between mental and physical health conditions. While psychotropic medications used to treat mental illness can be highly effective, they can also be ineffective or harmful if prescribed incorrectly. Prescribers must be diligently trained to understand how they affect the central nervous system and other organ systems, and how they interact with other medications or conditions such as pregnancy. These medications also need to be used differently across the lifespan. Psychiatric physicians complete over 12,000 hours of rigorous training after medical school, specializing in the treatment of mental health conditions and substance use disorders. Unlike these MD and DO training programs – which must meet the national requirements defined by the Accreditation Council for Graduate Medical Education (ACGME) – naturopath training remains highly variable. As our state continues to battle the opioid epidemic, giving naturopaths authority to prescribe opioids and other controlled substances is irresponsible. Fighting the opioid epidemic means making sure these dangerous drugs are not over-prescribed. I have personally taken care of patients who have had serious side effects from taking supplements and other substances not evaluated by the FDA, often at direct compromise of their ongoing medical / psychiatric care. While we acknowledge that there is a shortage of psychiatrists in our state, this policy proposal does not address the workforce shortage ahead of us, nor the stigma that patients with mental illness face. Instead, I urge you to consider alternative evidence-based solutions to safely increase access to care, including the Collaborative Care Model, telepsychiatry, increasing the number of psychiatry residency spots, and more. Patient safety must be the driver behind any modification to our health laws and I urge you to oppose this proposal. Thank you so much for your time and work on behalf of my patients,

Piper  
Buersmeyer,  
PMHNP-BC,  
ARNP

Oppose

My name is Piper Buersmeyer, PMHNP-BC, ARNP and I'm a PMHNP with 14 years of experience. I own both Med Rx Partners and TMS NW in Vancouver, WA. The extended scope of practice for naturopaths is inappropriate and dangerous. They do not have the training to diagnose and treat mental health issues outside of basic depression and anxiety, and even then they make suggestions inconsistent with evidence-based practice. Med Rx frequently receives new client intakes who previously saw a ND and come to Med Rx Partners because they are not improving and are spending a ridiculous amount of money on treatments not covered by insurance. NDs are excessively and inappropriately prescribing benzodiazepines in excess and we see this frequently. NDs are prescribing at excessively high doses with dangerous taper schedules and poly pharmacy that is ineffective and dangerous. They have no place prescribing stimulants and are desiring this for the financial gain. They do not have the training to diagnose complicated and multiple comorbid diagnoses. Expanding their scope is not the answer to the need for expanded mental health access. Prescribing controlled substances is inherently against the mission of NDs. This is not the best option for clients and NDs need to focus on what they are trained in.

Chun, Michael    Oppose

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in Everett WA. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the USMLE I spent four years completing a residency, then two years in a fellowship (and then had to pass the neurology board examination) where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.

Tuan Phan, MD    Oppose

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in Internal Medicine. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the 3 USMLE step exams, I spent 3 years completing a residency where I learned to perform my duties safely and effectively and subsequently passed the American Board of Internal Medicine exam. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.

Jon-Pierre  
Pazevic, DO,  
FACOEP,  
FACEP

Oppose

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in Issaquah, WA. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the COMLEX, I spent 3 years completing a residency where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.

Mike Tacheny, MD      Oppose

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in Walla Walla, WA. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the USMLE, I spent three years completing a residency where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.

Joshua  
Cooper, MD,  
FACS

Oppose

I am a Plastic and Reconstructive Surgeon practicing in Seattle. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. IF NATUROPATHS WANT TO BE MEDICAL DOCTORS, THEN THEY SHOULD GO TO MEDICAL SCHOOL FOR GOD'S SAKE, AND PATIENTS' SAKE!!!!HONESTLY, it should be absolutely ILLEGAL for naturopaths to prescribe narcotics!!Are you kidding me??Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the USMLE EXAMS, I spent 7 years completing a residency where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.

Minoo D'Cruz, MD  
Oppose

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a family medicine physician practicing in Seattle, WA. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the USMLE examinations, I spent 3 years completing a residency and an additional year of obstetrics fellowship where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.

Angela Caffrey, Oppose  
MD Board  
Certified in  
Hospice and  
Palliative  
Medicine,  
Gynecologic  
Oncology,  
Obstetrics and  
Gynecology

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing hospice and palliative medicine in WA state working remotely. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the USMLE I spent 7 years completing residency and fellowship training where I learned to perform my duties safely and effectively and am now triple board certified. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances as there are risks even when we are prescribing for pain at end of life. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.



Bethany Fowler, MD	Oppose	<p>Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in University Place, WA. I am very strongly opposed to the proposed naturopathic scope of practice expansions. While I believe that patients may benefit from certain aspects of naturopathic care, the scope expansion being requested far exceeds the definition of a naturopath and the training they receive. I believe it will put patients at risk, under the guise of increasing healthcare access. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the USMLE, I spent 3 completing a residency in internal medicine where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing unqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.</p>
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Anh-Thu  
Tiffany Vu, MD,  
FACP, FAAP

Oppose

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in Seattle, WA. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the USMLE, I spent 4 years completing a residency where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.

Sheryl  
A. Morelli, MD,  
FAAP

Oppose

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician executive serving as Chief Medical Officer for the only pediatric clinically indicated network in the state of Washington and Medical Director for a community pediatric primary care network in Western Washington. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the USMLE, I spent 3 years completing a pediatric residency where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing under qualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. This is particularly true in the field of pediatrics. Infants, children and adolescents are not simply smaller adults. They have unique developmental and physiological attributes which require specialty education and training to enable clinicians to be able to safely and competently provide them care. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.

Carla  
Ainsworth, MD

Oppose

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a family physician practicing in Seattle. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the USMLE, I spent 3 additional years completing a residency where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.

Brenda Park	Oppose	<p>Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am an Emergency physician practicing at Kaiser Permanente. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the multiple steps of the COMLEX, I spent four years completing a residency where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. As an Emergency physician, I have seen many patients who have had labs, imaging, and other tests ordered by naturopaths who do not know how to interpret the findings. As they have no safety net, these patients end up in the nearest ED. Often times these tests and complications did not have to happen at all. This adds to healthcare cost burdens and overcrowding in our emergency dept. I feel that providers should not be allowed to order tests if they are unable to interpret and act on these findings. It feels like "cleaning up" another provider's mess. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.</p>
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Benjamin  
Hamilton, MD,  
MS

Oppose

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in Seattle. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the USMLE Steps 1, 2, 2CK, and 3, I spent 4 years completing a residency where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.

Blain Crandell, MD      Oppose

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice as per Senate Bill 5411. I am a physician practicing on Bainbridge Island. I'm opposed to the proposed naturopathic scope of practice expansions and I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the USMLE, I spent three years completing a residency where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.

Mariel Balboa,  
D. O.      Oppose

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in Mill Creek. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the COMLEX, I spent 3 years completing a residency where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.



Mika Sinanan  
MD, PhD

Oppose

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a recently retired physician who used to practice at the UW in Seattle. I am strongly opposed to the proposed naturopathic scope of practice expansions and urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. As a physician, I completed four years of medical school where I received a comprehensive medical education. In my opinion, naturopathic education does not similarly prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the USMLE, I spent 8 years completing a residency and a PhD where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete a practical, supervised period of training termed a residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposed legislation would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.

todd seidner,  
MD

Oppose

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in Seattle. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the USMLE, I spent six years completing a residency and fellowship where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing under qualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.

Paul F. Edmonson, M.D., Ph.D.	Oppose	<p>Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in the Seattle area. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and having passed the USMLE (3 phases), I spent 5-years completing a residency and subspecialty fellowship where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.</p>
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Andrea Lowe,  
M.D., Ph.D.

Oppose

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in Mount Vernon, WA. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the USMLE, I spent 3 years completing a residency where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing under qualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.

Alexandra  
Rackoff, MD,  
MPH

Oppose

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in Issaquah, Redmond, and Mill Creek. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the USMLE, I spent 3 years completing a residency where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.

Jie Deng, MD, PhD.      Oppose

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a OBGYN/Fertility physician practicing in Bellevue. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the USMLE, I spent 4 years completing a residency where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing under qualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.

Yevgeniy  
Vayntrub MD

Oppose

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in Tacoma. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the USMLE, I spent 3 years completing a residency where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.

Christopher W. Davis, MD      Oppose

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic “physician” scope of practice. I am a physician practicing in Wenatchee, WA. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. A wise physician once told me, “lots of people will want to do what you do. Very few of them will be willing to do what you did to get here.” The perpetual attempts of naturopaths to creep into the practice of actual physicians is a perfect example of the wisdom in these words. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the USMLE, I spent 3 years completing a residency where I learned to perform my duties safely and effectively. By contrast, a naturopath’s education emphasizes “natural healing” and not evidence-based practices and methods. The focus on “natural healing” does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current “minor office procedure” provision within the naturopathic practice act to include “primary care services” and “procedures incident thereto of minor injuries” without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform “injections.” These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.



Richard  
Lindquist M.D.

Oppose

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in Sequim, WA. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the , I spent 3 years completing a residency where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.

Carrie  
Caruthers, MD,  
FAAAAI,  
FACAAI

Oppose

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in Vancouver, Washington. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the USMLE, I spent three years completing a residency where I learned to perform my duties safely and effectively and two additional years to complete my fellowship training. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.

Brian E Eifert,  
MD

Oppose

Dear Ms. Thomas, Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in Wenatchee. I am strongly opposed to the proposed naturopathic scope of practice expansions. I urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the FLEX, I spent seven years completing both internal medicine and radiology residencies where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. Indeed, allopathic evidence-based practices and methods tend to be held suspect in the naturopathic world, if not disdained outright. This from personal experience with friends caught up in that world. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. Not insignificantly, the proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. This lack of specificity is clearly intentional, another red flag, and would be laughed out of any self-respecting credentialing committee in any medical establishment in the state. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. This much should be obvious. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal. I am taking the liberty of cc'ing Senators Brad Hawkins and Keith Goehner.

Meaghan Foster, MD	Oppose	<p>Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in family medicine. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of evidence-based care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the series of USMLE exams, I spent 3 additional years completing a residency where I learned to perform my clinical duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.</p>
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Sean  
Dwijendra, MD

Oppose

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing at the University of Washington. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the USMLE, I spent 5 years completing a residency where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing under-qualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal

Dr. Carmen  
Dittman MD

Oppose

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in Federal Way. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the USMLE, I spent 3 years completing a residency where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.

Shannon  
Hoiium, MD

Oppose

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in Issaquah, Redmond and Mill Creek, WA. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the USMLE, I spent three years completing a residency where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.

Anna  
Shamitoff, MD

Oppose

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in Seattle, Wa. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing three USMLE exams, I spent five years completing a residency where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency, and when they do- they are often one year. Prior to medical school, I was a nurse practitioner in a program where we had a large enrollment of Naturopath students so that they could get dual degrees. I never felt prepared to practice medicine as an NP and after medical school- I can tell you with 100% confidence that no naturopath is prepared after their education. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.



Kyle Benner,  
MD

Oppose

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in Seattle. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the USMLE, I spent 6 years completing a residency where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.

Abel Tewodros	Oppose	<p>Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in [Issaquah]. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the [USMLE], I spent [3 years] completing a residency where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.</p>
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Kimberly  
Morrissette,  
DO, FACEP

Oppose

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in Issaquah, WA. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the COMLEX I spent 3 years completing a residency where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.

Suzanne M.  
Inchauste, MD

Oppose

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in at the University of Washington Medical Center in Seattle, Washington. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing all three parts of the USMLE, I spent 5 years in general surgery residency, 3 years in surgical oncology fellowship, 3 years in plastic surgery fellowship and 1 year in microsurgery fellowship completing all my training where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods and nearly as lengthy. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete any residency training. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.

Xue Zeng MD, MBA  
Oppose

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in Arlington, Washington. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the [USMLE/COMLEX], I spent 5 years completing a residency where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.

Laura Aguilar,  
DO

Oppose

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in Maple Valley. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the [USMLE], I spent 3 years completing a residency where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.

Hou-Hsien  
Tony Chiang  
MD

Oppose

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in University of Washington. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. At daily practice, I saw many patients received inappropriate treatments from naturopath clinics, for example, expensive lab tests that they do not need, and expensive supplements that have very little evidence to support its effectiveness. The worse cases are when they received long-term hormone therapy that have harm to their health, such as testosterone therapy for patients who have little evidence of hypogonadism. I spent lots of my practice time to correct these mistakes. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the UEMLE, I spent 5 years completing a residency/fellowship where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.

Robert Ryan,  
MD

Oppose

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in Seattle at VMFH. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the USMLE and MCCQE, I spent 8 years completing a residency where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.



Ting-Lin Yang, MD, PhD, FAAD

Oppose

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician scientist practicing in dermatology. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed eight years of medical scientist training program with four years of medical school and four years of PhD school, where I received a comprehensive medical and scientific education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the UMSLE exams, I spent four more years completing a dermatology residency where I learned to perform my duties safely and effectively. After a total of twelve years of postgraduate training, I successfully passed the American Board of Dermatology certifying exams and am a board-certified dermatologist. I spent an additional year in a physician scientist fellowship program where I conducted scientific research in dermatology and treated patients with an evidence-based approach. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.

Robert  
Margulies, MD  
MPH FACPM  
FACEP FACFE

Oppose

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician licensed and practicing in The State of Washington. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and postgraduate training and experience; I became board certified in three medical specialties. This required not only training, but also testing. I continue maintaining my continuing education. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. They are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The lack of education precludes adequate evaluation; and the complexities of diagnosis and treatment of multiple medical and surgical morbidities are beyond the abilities of Naturopaths. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. Who will inspect these offices and practitioners regarding infection control, antibiotic stewardship, pain management, etc.. and documentation? The risks associated with allowing under-educated, under-qualified providers to perform -unsupervised- unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.

Benjamin M.  
Carpenter, MD

Oppose

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in Spokane, WA. I am strongly opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed extensive didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the USMLE parts I, II, and III, I spent a year in a medical internship and a further three years completing a residency where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is far inferior to that of a physician in many ways including pharmacology, evidence based practice and procedural skills and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Expanding the scope of practice of naturopaths will cause patient harm, both directly due to lack of naturopathic education in pharmacology and procedural skills, and indirectly due to the delay in care if patients see naturopathic doctors instead of appropriately trained physicians. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.

Eric Kinder, MD    Oppose

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a radiologist practicing in the Puget Sound region. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the USMLE, I spent six years completing internship, residency, and fellowship where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.

Garrett Hyman	Oppose	<p>Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in Bellevue, WA. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the USMLE, I spent 4 years completing a residency where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.</p>
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Edmond  
Marzbani, MD

Oppose

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing at the Fred Hutchinson Cancer Center in Seattle, WA. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the USMLE, I spent 3 years completing a residency where I learned to perform my duties safely and effectively. I subsequently completed 3 years of fellowship in hematology and oncology. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. I have seen many patients hurt through spurious claims made by naturopaths. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. This will absolutely result in patient harm. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.

Saralyn  
Beckius, MD

Oppose

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in Spokane WA. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduating from medical school, and passing the USMLE, I spent 5 years completing a residency, all to learn to perform my duties safely, effectively, and in an evidence-based manner. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.

Julie Dobell,  
MD

Oppose

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in Yakima, WA. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the FLEX, LMCC, FRCP, I spent 5 years completing a residency where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules 11-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.



Dr. Leah  
Hershberger

Oppose

I am a resident physician affiliated with the University of Washington and practicing in Seattle. I am writing to express my strong opposition to the proposed expansion of naturopathic scope of practice chiefly on the grounds of patient safety and care quality concerns. I am grateful for your attention and for the opportunity to share my thoughts today. As a physician, I have completed four years of rigorous and comprehensive medical education at an accredited institution, including pharmacology. After graduating and passing the USLME licensing examination, I began my four-year residency training program, where I continue to learn safe, comprehensive, evidenced-based medical care. I am in my second year of training, and I can state confidently that high quality medical care requires years of intensive training to both protect the patient from harm and provide the highest quality treatment. Naturopaths are not required to complete residency. Their education is not equivalent to that of medical doctors, and their training does not prepare them to safely perform the duties outlined in SB5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state.

Matt  
Smitherman,  
MD

Oppose

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing at UW Medicine in Seattle. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing USMLE examinations, I spent 3 years completing a residency where I worked 80 hour weeks learning to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. While I believe there is an appropriate role for naturopaths in the medical community, and their current scope of practice is reasonable, I do not believe it is safe to expand that scope. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.

Margaret  
Merrifield MD,  
CCP, FCFP

Oppose

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in Richland, WA I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the Family Practice certification I spent three years completing a residency where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing under-qualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.

Michelle T.  
Cabrera, MD

Oppose

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in Seattle. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the USMLE, I spent 6 years completing a residency and fellowship where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.

Michael Sarai      Oppose

Dear Ms. Thomas, Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in Bellingham. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After 4 years of medical school, I spent an additional 4 years completing a residency where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal. Sincerely, Michael Sarai

Charles A.  
Frosolone, MD,  
FACS

Oppose

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in Oak Harbor, WA. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the USMLE, I spent eight years completing a residency where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing under qualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.

Tam Quach,  
DO

Oppose

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in Kent, WA I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the USMLE and COMPLEX exams, I spent 4 years completing a residency where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.

Wirt Hines Ph.D, M.D.	Oppose	<p>Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician in Anacorrtes. As with the previous attempts at this scope increase, I am opposed to the proposed naturopathic scope of practice expansions. I urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. I have shared office space with a Naturopathic doctor, and also been around numerous NP training candidates for that degree through that office. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received comprehensive training in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the USMLE exam, completed a residency where I learned to perform my surgery and opioid prescriptive authority safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. As someone who performs literally a hundred procedures per week, this is an extraordinary bad proposal. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.</p>
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Edward Boyko    Oppose

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in Seattle. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the USMLE, I spent 3 years completing a residency and 2 years in fellowship training where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.

Connie Mao,  
MD

Oppose

Dear Ms. Thomas, Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in Seattle WA. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. I have personally testified as expert witness against a naturopathic provider who did not practice standard medical care for a women with abnormal cervical cancer screening. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the USMLE, I spent 4 years in ObGyn completing a residency where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.

Thao Tran, DO    Oppose

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in Renton and Burien, WA. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the COMLEX, I spent three years completing a residency where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal

Yash Patel, DO    Oppose

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in Vancouver, WA. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the COMPLEX, I will spend at least three years completing a residency where I will learn to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.

Brooke Rosen, MD (Seattle Children's Hospital; University of Washington)      Oppose

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing at Seattle Children's Hospital. I am vehemently opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. I have treated numerous pediatric patients in the hospital who have received care for naturopaths in the community and I have been severely concerned about the prescription and treatment practices they have received and the significant dangers and harms they have sustained as a result. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the USMLE Step 1 and 2, I spent four years completing a residency where I learned to perform my duties safely and effectively, followed by two years of fellowship training to specialize in treating pediatric patients. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411 (<https://www.aafp.org/dam/AAFP/documents/advocacy/workforce/gme/ES-FPvsNaturopaths-110810.pdf>). The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.

Joshua Dill, DO    Oppose

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a Pulmonary/Critical Care physician practicing in Tacoma, WA. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the COMLEX, I spent 6 years completing a residency and fellowship where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. It is important to note- I generally support natural and complimentary medicine- I just feel that if additional scope of practice is being proposed, this needs to be accompanied by appropriate education and training. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.

Dr. Sabre A  
Patton-Fee,  
MD

Oppose

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in Olympia, Washington. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the USMLE parts 1-3, I spent four years completing a residency and an additional one year of fellowship training where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The bill is requesting expansion of medical interventions that, first, could not be characterized in any way as "natural healing". A naturopath's training and experience do not even allow for the same level of emphasis on treating many medical conditions which could safely be managed with "natural healing". Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.

Sarah Ho, MD

Oppose

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in Tacoma, WA. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the USMLE, I spent four years completing a residency where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.



Carol J.  
Swarts, MD

Oppose

Dear Ms. Thomas, Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing Radiation Oncology. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the State Boards I spent four years completing a residency where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal. Sincerely, Carol J. Swarts, MD

Robby C.  
Riddle, MD,  
FAAFP, MBA

Oppose

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in Steven's Co. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the USMLE, I spent 3 years completing a residency where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.

Ryan Otten,  
MD, MPH

Oppose

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in Seattle. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing all steps of the USMLE, I spent 3 years completing a residency where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.

Dawn Kopp,  
MD, MPH,  
FACOG

Oppose

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am an Ob/Gyn physician practicing at the Mann-Grandstaff-VA Medical Center in Spokane, WA. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As an allopathic physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing three United States Medical Licensing Examinations, I 4 years completing an Ob/Gyn residency at the University of Washington where I learned to perform my duties safely and effectively. After this, to become board-certified, I passed both a written and oral board examination by the American Board of Obstetrics and Gynecology after submitting a detailed list of my patient care over a 12-month period outside of my residency training. This list was reviewed by many board-certified Ob/Gyn physicians to evaluate if my care and practice was evidence-based and in line with the standard of care for Ob/Gyn physicians. To maintain my board certification status, I must read 15 recent articles in Ob/Gyn clinical care and correctly answer multiple-choice questions about these every year in addition to demonstration of personal evaluation of my practice patterns and plan for improvement. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.

Trent Garcia,  
MD

Oppose

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in Bellingham, WA. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. This is absolutely a patient safety issue! Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the United States Medical Licensing Exam, I spent an additional 4 years of supervised training completing a residency where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.

Robert C. Scott III, MD, PhD, FACC

Oppose

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a board certified physician practicing in Spokane, WA. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the FLEX exam, I spent 1 year of internship, 3 years completing a residency, and 3 years completing a fellowship where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances and you have to understand the pharmacology and biology of these drugs. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.

Anna Shope,  
MD

Oppose

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a OBGYN physician practicing in Seattle at the University of Washington. Please recognize this letter as my own personal opinion and not as a representative of the University. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the USMLE, I spent 4 years completing a residency where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. I am also concerned about the expansion of their credentialing into OBGYN care of patients. I currently am a professor teaching OBGYN residents in our state, and they have to undergo rigorous and lengthy training in order to perform abortions and other office procedures after graduation. I think it is very dangerous to expand naturopathic provider scope without the same standards in training. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.

Herbie Yung,  
MD

Oppose

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in Skagit County. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the USMLE, I spent 4 years completing a physical medicine and rehabilitation residency where I learned to perform my duties safely and effectively, and an additional year in a pain medicine fellowship. In addition, I am triple board certified in PM&R, pain medicine and electrodiagnostics, which establishes a baseline level of competency. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.



Hugo Quezada, Oppose  
MD

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in Federal Way, Everett, Bellevue and Seattle. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. I filled out the standard form but also want to tell you how as a pediatrician I have seen the care or lack of care harm children. A child with Lupus not be on their medication and have awful rash that was super infected and she's immunocompromised. Be told you need IV antibiotics. Rule out disseminated infection and your kidneys while they work have lost function. Under the care of naturopath. We as MD or DOs don't get it always right and there's room for improvement. But expanding further their scope is opening the door to more lack of treatment of actual conditions that can affect long term children adults and vulnerable members of our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the USMLE STEP 1,2 and 3 I spent 3 Years completing a residency in Pediatrics where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.

Rufus Van  
Dyke IV, MD

Oppose

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in Covington, WA. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the USMLE, I spent 6 years completing a residency where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.

Claire Brutocao    Oppose

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in Spokane. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the USMLE, I spent four years completing a residency where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing under qualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.

Tessa Zolnikov, Oppose  
MD, MBA

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in Seattle. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation from medical school and passing the USMLE (Step 1 =8-hour test, Step 2= 9-hour test, Step 3= 16-hour test), I spent four (4) years completing a residency where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal. Simply put, there is truly a high risk of death associated with this bill due to lack of education and training of naturopaths. Please do not put the people of Washington at risk.

William Todd  
Johnston, MD

Oppose

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in Seattle, WA @ the Polyclinic. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the USMLE qualifying exams and my Ophthalmology board exams, I spent 6 years completing a residency and fellowship, where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when mis-prescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.

Katina Rue, DO    Oppose

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in Kennewick, WA. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of osteopathic medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the COMLEX examinations, I spent three years completing an osteopathic family medicine residency where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing under qualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.

Bryce  
Robinson, MD

Oppose

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in Seattle. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician and surgeon, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the USMLE, I spent 5 years completing a residency and an additional 1 year in fellowship where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.

James Town

Oppose

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in Seattle, Washington. I am STRONGLY opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the USMLE (3 steps) I spent 3 years in residency and 3 years in fellowship completing where I learned to perform my duties safely and effectively. I am currently on the faculty at the University of Washington School of Medicine and oversee trainees in many medical and surgical disciplines and can attest that even those with the most rigorous training still need oversight well into their residency and fellowships. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. As someone who has cared for patients who have had complications from poorly managed or misdiagnosed diseases and frankly inept medical care, I strongly urge you to oppose this proposal for the sake of the safety of our communities and the integrity of the medical system. If people can take shortcuts to achieve an endpoint, they will take them and thusly erode the quality of the system as there will be even less incentive to undertake rigorous training at all. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.



Lon Hayne, MD    Oppose

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in the Seattle Washington metropolitan area. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the National Boards, I spent seven years completing a residency and fellowship where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. As a practicing Radiologist, I receive imaging and intervention requests on a daily basis from the area's Naturopathic Doctors. It is clear from the inappropriate procedure requests and many conversations regarding imaging findings that there is a pervasive lack of understanding many disease processes, treatments, and standards of practice. Expanding the scope of their activities without requiring education and certification would be a serious mistake. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.

Melissa Herrin, Oppose  
MD, MPH

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in Bellingham, WA. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing all 3 steps of the USMLE, I spent 5 years in post graduate residency training where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.

Ashley Diana  
Lundgren  
Mohora, MD

Oppose

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in Spokane, Washington. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the USMLE, I spent 4 years completing a residency where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.

Sheena Hembrador	Oppose	<p>Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in Seattle. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the USMLE, I spent 5 years completing a residency where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.</p>
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Sara Neches,  
MD

Oppose

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in Seattle, WA. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the USMLE board certifying exams I spent 3 years completing a residency in pediatrics where I learned to perform my duties safely and effectively. After passing the American Board of Pediatrics certifying exam I worked as a neonatal hospitalist and then trained for 3 additional years as a neonatology fellow. I am currently a board eligible neonatologist. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. I also have personal experience with this issue as a relative of mine with multiple severe and life limiting medical problems insisted on being treated by naturopaths who over and over again prescribed many herbs and potions (none FDA approved), and some with serious potential interactions including coagulopathy and/or thrombosis, and all of this prescribing was done entirely remotely and across state lines. These are serious concerns when the medications being prescribed may also now include controlled substances. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.

Dilawar  
Khokhar, MD

Oppose

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in Seattle, Washington. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the USMLE, I spent 3 years completing a residency in internal medicine as well as 2 years in fellowship where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.

Shahrooz  
Zandnia, MD

Oppose

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in Spanaway, WA. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the USMLE, I spent 4 years completing a residency where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.

Ping Yang, MD    Oppose

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in Washington. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the USMLE, I spent 3 completing a residency where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.



Vulihn Ta,  
M.D., Physician  
Faculty  
OB/GYN

Oppose

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in Tacoma, Washington. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the USMLE, I spent 4 years completing a residency and 2 years in fellowship, where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.

Brenda S.  
Houmard, MD  
PhD

Oppose

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in Spokane. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the USMLE, I spent 4 years completing a residency and 3 years completing an REI fellowship where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when mis-prescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.

Hailey Silverii	Oppose	<p>Thank you for the opportunity to provide comments on the sunrise review of the naturopathic scope of practice. I am a Urologist practicing in Seattle. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the USMLE, I spent 5 years completing Urology residency where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal would modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. I particularly feel that procedures such as a vasectomy should only be performed by physicians who have received special training in surgical techniques – this is an in office procedure that requires a high amount of skill to be done safely. There are major risks associated when the procedures is done incorrectly, namely hemorrhage. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.</p>
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Kenneth J.  
McCabe M.D.

Oppose

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in Spokane. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the USMLE, I spent [4 years] completing a residency and 1 year completing a fellowship where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.

Dr Aneet Kaur, Oppose  
MD

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in Auburn and Tacoma. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed 5 years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing 4 USMLE exams, I have spent 3 years completing a residency program and additional 2 years of fellowship where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.

Mark Lahtinen, DO  
Oppose

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in Spokane, WA. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the USMLE and COMLEX exams, I spent 3 years completing a residency where I learned to perform my duties safely and effectively under supervision. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.

Jay Alexander, MD      Oppose

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in Child Neurology at Seattle Children's Hospital. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the USMLE, I spent 5 years completing a residency where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating most medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician or even a nurse practitioner or physician assistant and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.

Soumya  
choudhury

Oppose

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in Renton, WA. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the USMLE, I spent 3 years completing a residency where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.



Michael Bolton, MD, PhD    Oppose

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in Edmonds, WA . I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the USMLE. I spent 3 years completing a residency and 2 years in a fellowship where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. In my practice, I have encountered many patients who have had naturopaths prescribe them medications with serious and dangerous side effects for conditions that were not adequately diagnosed. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.

Kelly Carlisle,  
MD

Oppose

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in Kitsap County. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the USMLE, I spent 4 years completing a residency where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.

Dr. Jeltema	Oppose	<p>Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in Olympia. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the COMLEX, I spent 3 years completing a residency where I learned to perform my duties safely and effectively. And additionally did further training with the American College of Lifestyle Medicine for board certification. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.</p>
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Gary Blume,  
MD

Oppose

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a board certified family medicine physician practicing in Bellevue. I have been in practice for 34 years, and previously practiced in Bothell and Kirkland. Most of my career was spent in a primary practice only a few miles from Bastyr University in Kenmore. I have had extensive professional contact with many Naturopathic Doctors and their practice of medicine. I am strongly opposed to the proposed naturopathic scope of practice expansions based on this extensive experience with the actual practice of naturopathic medicine by practitioners in Washington. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school at Northwestern University where I received comprehensive, intensive medical education, including pharmacology education exceeding what clinical pharmacists receive. After graduation and passing the USMLE, I spent 3 years completing a residency at Duke University where I spent over 12,000 hours getting the advanced post-medical school training necessary to practice modern medicine effectively and safely. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete a residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.

Matthew Hillman, DO

Oppose

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in Lake Chelan. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the COMLEX, I spent 3 years completing a residency where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.

Steven  
Maynard, MD

Oppose

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in Tacoma. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the National Boards Exam, I spent 5 years completing an internship and a residency where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.

Quoc Phan,  
MD

Oppose

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in Olympia. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the USMLE, I spent three years completing a residency where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing under qualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.

Jeffrey  
Schachter, MD

Oppose

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in Bellingham and Sedro Woolley. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology, and human physiology. After graduation and passing the USMLE Steps 1, 2, and 3, I spent 4 years completing a residency where I learned to perform my duties safely and effectively and an additional year in fellowship to hone subspecialty expertise. I completed certification examinations for my specialty and subspecialty. It is my understanding that a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. I find it frightening that a naturopath would think their training approaches that of allopathic or osteopathic physicians, and speaks to the fact that it does not. As a specialist, I receive referrals from multiple providers. While I cannot comment on all naturopaths, it has been my (admittedly anecdotal) experience that the clinical acumen and judgement demonstrated by referring naturopaths is inferior to referring physicians as evidenced by insufficient history taking, inaccurate examination, and inability or unwillingness to apply evidence-based principles to treatment. Expanding the scope of the naturopath would be expected to amplify these deficiencies, which I believe would result in increased harm to patients. I do understand that there is an urgent need for primary care in the state of Washington, but expanding the scope of practice of naturopaths is more likely to harm patients than to help. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.



Kellie Jacobs,  
MD

Oppose

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in Bellingham. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the USMLE I spent 3 years completing a Family Practice residency where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. I remained concerned about the provision of well care for newborns and notice that a newborn has not been able to access their naturopathic provider until 28 days of life. This seems to be a dangerous state of limbo, allowing hospital care but no in hospital check up, no early access for concerns regarding jaundice, fever or feeding issue, no 2 week check up with required PKU testing. I have observed this to be a dangerous gap in care for newborns. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.

Chad Clevon,  
DO

Oppose

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in Marysville, Washington . I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing both the USMLE and COMLEX, I spent 3 years completing a residency where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.

Jack Bergstein    Oppose

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in Marysville, WA. I support the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to support the proposal, which, in my opinion, would enhance the effectiveness and quality of care delivered in our state. Primary care is increasingly hard to find, and we should be enhancing the ability of providers to provide it, not degrading it. DOH is, I am sure, better able to assess the education of a naturopath than am I or other allopathic physicians, so I will not comment. However, I have received my own primary care from a naturopath for several years, and found her care to be outstanding, extremely knowledgeable, and compassionate. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Naturopaths would be subject to the same scrutiny and regulation as allopaths, per the DEA. Whether or not you believe that misprescribing is the cause of the current "opioid epidemic" (I do not), there is no reason to believe that naturopaths would be any worse than allopaths, and are likely to be more knowledgeable about interactions with non-pharmaceuticals (which can, in some cases, be significant). In my experience, naturopaths are less likely to be rushed or dismissive., and much more cautious when it comes to prescribing pharmaceuticals, let alone controlled substances. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." As a surgeon, I see no major risk to this allowance, beyond that from nonsurgeon allopaths Thank you for the opportunity to share my thoughts about this proposal. Again, I urge the department to support the proposal.

Nicole Laney,  
MD

Oppose

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in Lynnwood, WA. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the USMLE, I spent 3 years completing a family medicine residency where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.

Keely Coxon

Oppose

Thank you for the opportunity to provide comment on the review of the naturopathic scope of practice. I am a senior resident physician practicing in Everett, WA. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school, now followed by two and a half years of residency, and have passed three separate national board exams along the way. My training has included a great deal of emphasis on evidence-based medical practice, including that related to allopathic pharmacology. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. As a provider, I raise the question of why a naturopathically trained provider has an interest in prescribing allopathic medications, and in writing this letter I intend to voice a concern about the high risk of misprescribing and misuse if this proposal passes. Our medical system is already struggling under the burden of the opioid epidemic, which was largely caused by irresponsible prescribing practices. Pain management in particular is a highly nuanced area of medicine and there is a great deal of emerging evidence supporting the use of alternative therapies - those that don't involve controlled substances. We do not need more prescribers of controlled substances. We need better-trained prescribers. Irresponsibly expanding the scope of prescribing for underqualified providers is a dangerous decision and not something we should be entertaining. Dr. Keely Coxon The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.

Audrey  
Marshall  
Lundberg, DO

Oppose

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am an OB/GYN physician and the current medical director for my company for Pierce County. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Specifically, as an OB/GYN, I have personally seen patients wrongfully affected by misuse of hormones therapy and monitoring by their naturopathic physician. Just recently, I had a patient present with uterine precancer as a result of misuse of hormones. I have seen many examples of this over the years and am greatly concerned what could happen to patients with expansion of their scope. Over the years, I have also seen patients rely on a naturopathic physician as their primary care provider and have conditions misdiagnosed and have delay in treatments as a direct result harming the patient. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing many board exams, I spent 4 years completing a residency where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.

Steven Bernick, Oppose  
MD

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in Tacoma, Washington. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the USMLE I spent 6 completing a residency and fellowship, where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.

Jesus Vicente  
Casino, MD

Oppose

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in Gig Harbor. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the USMLE, I spent three years completing a residency where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.



Alore Lea, MD

Oppose

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in anesthesiology. I am opposed to the proposed naturopathic scope of practice expansions. In fact, there are naturopathic and holistic physicians who have DONE THE WORK to obtain an MD or DO to safely practice on patients. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the USMLE exams, I spent 6 years completing a residency where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. INCLUDING THE OPIOID CRISIS!!! Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.

Michael J.  
Rossi, MD, MS,  
FAAOS

Oppose

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in Wenatchee, WA. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the USMLE, I spent five years and one year of fellowship completing a training where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.

Jaime All, MD  
RPVI

Oppose

I am a physician practicing in Tacoma, WA. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the USMLE exams, I spent 6 years completing a rigorous residency and fellowship program where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing," not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. I urge the department to oppose all elements of the proposal. This gross overreach is wildly unsafe and undermines the notion of having a trained and qualified medical community.

Hnia Usman,  
MD

Oppose

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a family physician practicing in Federal Way. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed five years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the USMLE, I spent 3 years completing a residency where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.

Dr. Leila Raminfar	Oppose	<p>Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in Marysville, WA. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the USMLE, I spent 3 years completing a residency where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.</p>
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John Tanner  
MD

Oppose

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing at Overlake Hospital in Bellevue. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the USMLE, I spent three years completing a residency where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.

Heather Ross  
Blackford, DO

Oppose

I am a OBGYN physician practicing in Longview WA and would like to take this opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the medical board exams, I spent 4 additional years completing a residency where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.

Michael Gilbert, Oppose  
MD

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in Bellevue. I am strongly opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing all necessary certifications, I spent four years ophthalmology residency and two years fellowship where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing under qualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.



German  
Grinshpun DO

Oppose

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in Tacoma WA. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the COMLEX, I spent 4 years completing a residency where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.

Nicholas  
Markadakis,  
M.D.

Oppose

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am an emergency medicine physician practicing in Seattle, Auburn, and Port Angeles. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the USMLE, I spent four years completing a residency where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.

Michael S  
Opsahl, MD

Oppose

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in Kirkland, WA. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the National Board Exam, I spent 4 years completing a residency in Obstetrics & Gynecology where I learned to perform my duties safely and effectively. I also spent 2 years in fellowship training for my sub-specialty of Reproductive Endocrinology and Infertility. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when mis-prescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.

Audrey Talley  
Rostov MD

Oppose

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in Seattle, WA. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the USMLE, I spent 5 years completing a residency and fellowship where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.

Uresh Patel  
MD

Oppose

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in Seattle WA. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the USMLE], I spent 7 years] completing a residency where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.

Steve Schiebel, Oppose  
MD, FAAP

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a pediatrician practicing in Bellevue, WA. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the USMLE Parts 1 through 3, I spent three years completing a residency where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.

Dominique Marion, MD	Oppose	<p>Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing Bellevue, WA at Allegro Pediatrics. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the USMLE I spent three years completing a residency where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.</p>
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Sung Park, MD    Oppose

Thank you for reading this comment on your upcoming review of the naturopathic scope of practice. I am a physician practicing in Sammamish, WA. I strongly oppose the proposed naturopathic scope of practice expansions. In a time when scientific and governmental institutions are struggling to maintain their connection and trust with the general public, allowing a group of practitioners that have less training and less respect for the scientific method or evidence would only further erode that trust. I urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the USMLE, I spent 3 years completing a residency where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.



Marissa  
Anderson, MD,  
MS

Oppose

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in Kitsap and Grant counties of Washington state. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduating and passing the USMLE, I spent 3 completing a residency where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.

Dr. Heather  
Tacheny

Oppose

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in Walla Walla, WA. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the USMLE, I spent 3 years completing a residency where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.

Joy M. Welty,  
M.D.

Oppose

Dear Ms. Thomas, Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in Bellingham, WA. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the USMLE, I spent 2 years in a surgical residency and 3 years in a family practice residency where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal. Sincerely,

Susan Cuneo, MD  
Oppose

Dear Ms. Thomas, Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in Vancouver, WA. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation I spent 3 years completing a residency in Pediatrics where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. Because of the opioid epidemic, this year medical doctors had to take an additional 8 hour course on opioids in order to maintain their DEA license. Being able to prescribe these medications should be taken seriously and requires on going education. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.

Sonal Patel MD, MPH	Oppose	<p>Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a family medicine physician practicing in Seattle. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the USMLE I spent 3 years completing a residency where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. Naturopaths are not required to complete residency nor do they receive the rigorous basic science and clinical training as physicians. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.</p>
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David Smith,  
MD

Oppose

Dear Ms. Thomas, Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in Everett, WA. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing all three steps of the USMLE I spent 4 years completing a residency where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.

Andrew Miller,  
MD

Oppose

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in Spokane. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the USMLE, I spent four years completing a residency where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.

Jenny  
Roraback-  
Carson, MD

Oppose

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in Seattle. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the USMLE, I spent 4 years in residency and fellowship training where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.



Shannon  
Colohan MD  
MSc FRCSC  
FACS

Oppose

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing at the University of Washington in Seattle. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the MCCQE/II (Canadian exams) and USMLE (American exams) I spent 5 years completing a residency where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.

Dr Oana Marcu    Oppose

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in family medicine . I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the USMLE, I spent 4 years completing a residency where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.

Elise  
Rasmussen

Oppose

Dear Ms. Thomas, Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in Seattle, WA. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the USMLE, I spent 3 years completing a residency where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.

Olivia M  
Klinkhammer,  
DO

Oppose

Dear Ms. Thomas, Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in Marysville, WA. I am vehemently opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the USMLE (nationally recognized & standardized competency testing), I spent three years completing a residency where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. Even after completion and graduation of residency physicians are subject to supervision by colleagues of procedures they plan to practice to ensure that they are competent and safe in doing these procedures. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. Furthermore, we are required to complete certain additional continuing medical education training ANNUALLY with regard to prescribing certain medications and treatment of disorders related to controlled substances and their abuse. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal as it is a frank disregard for patient safety, negligent, and completely opposite to the central pillar of the Hippocratic Oath of doing no harm.

Tori McFall,  
MD, FACS

Oppose

Dear Ms. Thomas, Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in Renton, Washington. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which may compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I spent an additional five years completing a residency in general surgery, where I learned to perform my duties safely and effectively. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when not prescribed correctly and/or misused. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.

Edward M.  
Iuliano, DO

Oppose

Dear Ms. Thomas, Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in Richland, WA. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As an osteopathic physician, I completed four years of osteopathic medical school where I received a comprehensive osteopathic medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the COMLEX, I spent 6 years completing an internship, residency and fellowship where I learned to perform my duties as a neuroradiologist safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.

Dr Aniq  
Minhas DO

Oppose

Dear Ms. Thomas, Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in family medicine. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the COMLEX, I spent 3 years completing a residency where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.

Andrew Phan,  
MD

Oppose

Dear Ms. Thomas, Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in Seattle, Washington at the University of Washington and at Harborview Medical Center. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing 3 standardized examinations, I spent 3 years completing a family medicine residency where I learned to perform my duties safely and effectively. I am in my 4th year of additional training in psychiatry and am still learning new pharmacological interactions and diagnostic patterns every day. By contrast, a naturopath's education emphasizes "natural healing" and non evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.



Christopher Jones, MD	Oppose	<p>Thank you for listening to my input regarding the proposed bill. I am a physician and have practiced pediatrics for more than 20 years. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the USMLE I spent 3 years completing a residency where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing under-qualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.</p>
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Byron Haney,  
MD

Oppose

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in Ellensburg. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the USMLE, I spent 3 completing a residency where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. My 50 year experience as a board certified family physician has noted Naturopaths do not know what they do not know. Examples: 1- Naturopaths order an extremely large screening lab panel. As 5% of normal patients labs fall outside the "normal range" people are labeled abnormal that are actually normal. Also, one has a higher false positive lab result due to ordering inappropriate (too many on asymptomatic patients or patients with low pretest probability of disease. Thus patients obtain costly workups, that are often unnecessary or inappropriate and thus increase the risk adverse events. 2-often euthyroid people are labeled hypothyroid by their symptoms and treated with Armour thyroid. Patient's therefore are such treated for many years and do not need it. Armour thyroid is made from animal sources and has not been proven safe or effective. 3-inappropriate use of anxiolytics/narcotics/hormonal treatment. 4-If, as a board certified family physician performing non-scalpel vasectomy's for 45 years, Washington Physicians Insurance, changed the risk rate for my coverage, it does not seem in the patient's best interest for lesser train naturopaths to be allowed to do this procedure. The state of Washington seems to be systematically diluting the gold standard of care. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. There is no objective data that these changes will meet the triple aim of healthcare (reducing costs, improving patient health, and improving quality of care). Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.

Matthew  
Uhlman, MD,  
MBA

Oppose

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in Yakima. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the four USMLE tests, I spent 6 years completing a residency where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.

Barbara  
Schach MD

Oppose

Dear Ms. Thomas, Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in Kirkland and Bothell, WA. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the American Boards, I spent 3 years completing a residency where I learned to perform my duties safely and effectively. I also complete over 50 hours of continuing medical education on average per year. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. I respect the rights of all patients to consult with a naturopath, but I have seen too many instances where even supplements have been prescribed that conflict with a patient's other medications or medical conditions. I shudder to think of them prescribing controlled substances. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.

Stephanie Chang, MD	Oppose	<p>Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in Seattle, WA. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the USMLE, I spent four years completing a residency where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.</p>
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DeeAnna  
Maughan, MD

Oppose

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in Lynnwood, WA. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the USMLE, I spent 3 years completing a residency where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal

Jeffrey R.  
Wesolowski,  
M.D., M.H.S.A.

Oppose

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in Gig Harbor, Washington. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the USMLE, I spent 7 years completing a residency where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.

Negin Nekahi,  
MD, PhD

Oppose

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in [insert location]. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the USMLE, I spent 2 years in residency and 4 years in fellowship completing a residency where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing under qualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.



Jeff McLaren,  
MD

Oppose

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in Seattle. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. While I understand the merits for this proposal (expanding care to more Washingtonians), the risks of doing this far exceed the potential benefit. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the United States Medical licensing exam, a requirement to even apply for my medical license, I spent another 4 years completing a residency in anesthesiology where I learned to perform my duties safely and effectively. I've had the benefit of spending an extra year in fellowship in acute and chronic pain management. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.

Grace Mariko  
Kalish

Oppose

Dear Ms. Thomas, Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in Virginia Mason Franciscan Health. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the USMLE, I spent 5 years completing a residency where I learned to perform my duties safely and effectively, in addition to 2 years in fellowship. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. I know several naturopaths personally, who are great healers in their areas of expertise. Often, their approach to healing is wiser than our approach in Western medicine. However, it is imperative that you understand that their scope of practice does not include complications related to pharmacology - what happens when the dose is suboptimal or even toxic to the patient. This includes overdoses and abuse, but also situations of physiologic toxicity, to name just a few examples - they have NEVER trained in an inpatient hospital setting. Moreover, their general irreverence for allopathic medical societies and their guidelines make them a hazard to patient safety when dealing with pharmacological doses of medicines. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits.

Scott C.  
Brakenridge  
M.D.

Oppose

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing at Harborview Medical Center, Seattle WA. I am a Surgeon, educator and faculty member of the University of Washington College of Medicine. In this context, I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the [USMLE/COMLEX], I spent 7 years completing a General Surgery residency, as well as 2 additional years of Critical Care advanced fellowship training where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. Most concerning to me as a board certified Surgeon, the proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.

Seth E Scott

Oppose

Dear Ms. Thomas, Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in Olympia, WA. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the USMLE, I spend 3 years completing a residency where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.

Matthew Correia	Oppose	<p>To Whom It May Concern,My name is Matthew Correia and I am an allopathic physician board certified in both Medical Toxicology and Emergency Medicine and licensed to practice medicine Washington State.I strongly oppose the proposed prescribing expansion for naturopaths on the grounds of insufficient training. There is an incredible amount of nuance that is required to safely and effectively prescribe medications, notwithstanding controlled medications, to patients. The includes including a detailed understanding of the medication's mechanism of action in relation to the underlying pathophysiology of the patient's disease, interactions with other medications, as well as many of the subtle adverse reactions that patients can experience. This is not to minimize the extensive training that naturopaths have in recommending specific alternative herbals and supplements, and the few medications they are allowed to prescribe, but there is a significant risk towards scope expansion without requisite training. There is also the additional risk that patient's do not disclose medications prescribed by a naturopath to the western medical community due to perceived "silo-ing" of indications which can also have adverse reactions if a patient doesn't disclose a medication prescribed by a naturopath because it is considered separate.I do agree with narrowing the scope of procedures that naturopaths can preform including elimination of those including vasectomies as these should be performed by trained board certified surgeons.</p>
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Matthew  
Messerschmidt  
MD, MS

Oppose

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing at a Community Health Center in South King County, WA alongside naturopaths, osteopathic, and allopathic physicians. While I appreciate the support of my Naturopathic colleagues, I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school followed by 3 years of residency. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. In cross-covering patients, I have seen the limited scope of medical knowledge and understanding across multiple naturopaths. While these colleagues offer important support for a variety of conditions, the level of clinical reasoning and understanding is generally not on-par with that of my physician colleagues. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.

Peter Meis	Oppose	<p>Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in psychiatry. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the USMLE, I spent 4 years completing a residency where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.</p>
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Jared  
Brandenberger,  
MD

Oppose

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a Transplant Surgeon practicing in Seattle. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the USMLE, I spent 5 years completing a residency where I learned to perform my duties safely and effectively, followed by a 2 year specialty fellowship. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.



Olympia  
Stafford

Oppose

Dear Ms. Thomas, Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I have spent four years in Internal Residency training at Long Island College Hospital, NY, followed by Fellowship in Infectious Disease at the Cleveland Clinic. My first job was in TriCities in 2003 and I have practiced in Washington State ever since. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our State. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing USMLE Steps I, II and III, I spent 3 years completing an Internal Medicine residency, following which I was a Chief Resident. I was on call every third or fourth night, admitting, evaluating and treating patients non stop. I attended didactic rounds, morning report and noon lectures daily. To this day I remain ABIM Board certified- I have taken and passed both Internal Medicine and Infectious Disease Board exams each three times. How could that possibly compare with naturopath training and education? A naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.

Lindy Klaff MD, Oppose  
FCCP

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in pulmonary and critical care medicine. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the USMLE, I spent 8 years completing a residency and fellowship where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. I can also add that I have seen the most offensive types malpractice of patients coming from NPs in our community which demonstrate a severe lack of knowledge and lack of awareness regarding lack of knowledge. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.

Michael Pietro, Oppose  
MD

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in Bellingham and Friday Harbor. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation from Vanderbilt Medical School I spent 5 years completing a residency where I learned to perform surgery safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.

Ryan Lunsford, MD  
Oppose

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in Seattle, WA. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the USMLE, I spent 5 years a residency and fellowship where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.

Matthew  
Jenkins MD

Oppose

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in Pierce County. I am entirely opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not adequately prepare naturopathic providers to accurately diagnose or provide the medical treatments considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the several steps of the USMLE, I spent five years completing a residency where I learned to perform my duties safely and effectively, as well as then completing a one year subspecialty fellowship in shoulder and elbow surgery. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices or methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is in no way equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for deadly or catastrophic overdose, abuse, psychological dependence, or physical dependence, as well as the high potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when improperly prescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.

Brian  
Simmerman  
MD

Oppose

Dear Ms. Thomas, Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing pediatrics in Spokane. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the USMLE, I spent three years completing a residency where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.

Brittany Barber    Oppose

Dear Ms. Thomas, Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing as a head and neck surgeon at the University of Washington. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the USMLE, I spent 6 years completing a residency and another year completing a fellowship in head and neck surgical oncology and microvascular reconstruction. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. More specifically, as a head and neck cancer surgeon, I can tell you - with abhorrence - that I have seen SEVERE ramifications of the lack of rigorous training of naturopaths in my field of head and neck cancer. I have seen cancer patients treated for significant lengths of time with non-evidenced based remedies, for which they paid out of pocket, to the detriment of their survival. The last patient I saw in this condition was a 36 year old female with a very large and obvious oral tongue cancer who was told she had a vitamin deficiency and was treated for 6 MONTHS with Vitamin C injections which cost her thousands of dollars and ultimately, her life. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. More importantly, this proposal grants authority to perform surgery WITHOUT ANY SURGICAL TRAINING. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.

Joellyn Sheehy    Oppose

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am current fourth-year psychiatry resident in Seattle. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. I dislike commenting on this issue because I worry that it looks like a "turf war" to anyone on the outside, but after reading the proposal, I truly believe that the potential for harm outweighs the good. As a person, I am very open and respectful of complementary medical approaches and do not want to belittle the specialty of naturopathy. I believe that it has a valuable role and, with the right practitioner, can provide relief for suffering where the "medical system" fails. However, I do not understand why naturopathy training, with the wide breadth of healing practices it encompasses, would translate as qualifying someone to prescribe the same medications as me when I am now in my eighth year of training focused specifically on appropriately diagnosing and treating mental disorders. I was alarmed by the proposal by the way that it framed the need for naturopaths to be able to prescribe controlled substances. The argument that a naturopath needs to prescribe controlled substances because there is a dearth of prescribers is a non sequitur that ignores the question of whether they are appropriately knowledgeable about the risks and benefits of the medications. You could solve the problem of availability easily by just making all medication over the counter. There is a dearth of providers who are capable and qualified to identify who is appropriate for the medication, at what dose, and for how long. In my job, I frequently see people who have been inappropriately prescribed opioids and/or benzodiazepines and it can be very challenging to help them stop. I have seen so many cases of people who became addicted to prescribed opioids and then had to progress to illicit drugs because the prescription was suddenly stopped. I have spent so much time working in hospitals, sometimes because of bad outcomes of inappropriately prescribed medications. I worry that giving this prescriptive responsibility to naturopaths puts them in a difficult and pressured position that they will not have adequate instruction and experience in navigating. I think it is also important to remember that naturopaths have their own standard of care that differs to that of medical doctors. So while an action on my part as a psychiatrist might be viewed as negligent if it caused harm and is against typical practice by other psychiatrists, this standard would not extend to naturopaths. If is commonly practiced among naturopaths, despite the same risk for causing harm, then a naturopath prescriber would not be negligent. Thank you for the opportunity to share some of my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.



Carolyn  
McHugh MD,  
MPH

Oppose

Dear Ms. Thomas, Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing as a board certified internist inpatient hospitalist at Overlake Hospital in Bellevue. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the USMLE, I spent 3 years completing a residency where I learned to perform my duties safely and effectively. Every procedure was subject to observation and training through a vetted process within our residency program. The very nature of the work with do is highly evidenced based. From the diagnostic work up of various conditions, to the use and understanding of FDA approved drugs and their interactions and contraindications, to procedures. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. Our colleagues at Bastyr collaborated with our students at UW School of Medicine and it was made clear that the practice of naturopathy does not use the allopathic tradition of research and evidence. Furthermore, Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. These duties are uniquely allopathic, and they should require exactly such training. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.

Andrea  
Johnson, MD

Oppose

Dear Ms. Thomas, Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in Spokane, Washington. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the USMLE, I spent three years completing a residency where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is NOT equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.

Syed Arshad  
Masood Gillani,  
MD DO

Oppose

Dear Ms. Thomas, Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in Othello. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the USMLE and COMLEX, I spent three years completing a residency and one year of fellowship where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to perform the duties safely contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the Naturopathic Practice Act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.

Lisa Evans, MD    Oppose

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in Longview, WA. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the USMLE, I spent 3 years completing a residency where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.

Scott F.  
Kronlund, MD,  
MS

Oppose

Dear Ms. Thomas, Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a Family Physician who has been licensed in the State of Washington since 1986 and have provided direct medical care and, later, served as a Physician Executive in a number of leadership roles. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the National Board of Medical Examiners (NBME) examination (and later the American Board of Family Medicine examination), I spent three (3) years completing a residency where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when improperly prescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. With all this in mind, I do believe that naturopathic physicians provide beneficial services to many patients; however, just as in the case for allopathic physicians, naturopaths should be required to maintain a scope of practice consistent with their training. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.

Richard  
Deppisch, DO

Oppose

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in Spokane, WA. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the COMLEX, I spent 3 completing a residency where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. My concerns come from a position of patient safety and concern. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. I have personally witnessed several patients going to naturopaths who have prescribed patients medications without significant evidence behind their use. This common nonevidence practice among naturopaths is so prevalent that many simply do not accept insurance because their treatments are declined by insurance companies for the lack of evidence. I fear enabling this profession the ability to prescribe more complex, potentially abusable medications without the proper training will have a significant detrimental impact to patients. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.

Stephen Olivar MD    Oppose

Dear Ms. Thomas, Below is a for you to consider as the Naturopath scope of practice issue is being brought up. It is reckless and dangerous to even consider allowing naturopaths to expand their practice as asked. Furthermore, given the opioid crisis in our state and nation it is insane to think of expanding the right to prescribe schedule 2 medications to providers who are not trained to the same standards as physicians and advanced care providers. Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in Seattle. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the USMLE, I spent 4 years completing a residency where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.

Martin Dubek  
MD

Oppose

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in Bellingham, WA. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the USMLE Steps 1-3, I spent 3 years completing a Family Medicine residency where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.



Dinah Thyerlei, Oppose  
MD

Dear Ms. Thomas, Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in Shoreline and Everett. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. I know personally from experience with a friend who went through the Bastyr training that naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed six years of medical school (in Germany) where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the USMLE, I spent 4 completing a residency and 2 years completing a fellowship where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent at all to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. In fact, again from personal experience I know that a lot of the hours spent in training are spent reading patient vignettes, not actually diagnosing and treating real life patients for many years under detailed supervision. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.

Chester  
Jangala, MD

Oppose

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in [insert location]. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the [USMLE/COMLEX], I spent [insert residency length] completing a residency where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.

Blake Bond,  
MD

Oppose

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in Sunnyside, WA. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the United States Medical Licensing Exam (USMLE), I spent 3 years completing a residency where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.

Kelly  
Casperson, MD

Oppose

Dear Ms. Thomas, Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing urology in Bellingham, WA. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation, I spent 6 years completing a residency where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Narcotic addiction is a huge problem and more people prescribing narcotics with sub-par training is not the answer. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Naturopaths should not be allowed to perform vasectomy. Yes it is a "minor office procedure" in the correct hands and with good training. Not all medical physicians can and should perform this procedure, and certainly not someone with less than that level of expertise. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal. Sincerely, Kelly Casperson, MD

Grant Lohse	Oppose	<p>Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in orthopaedic surgery in Bellevue. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to reconsider at there are concerning elements of the proposal, which could compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the USMLE , I spent 6 SIX additional years completing a residency where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.</p>
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Anne Bankson, Oppose  
MD

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in Bellevue, Washington. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the American Board of Family Practice national exam, I spent three years completing a residency where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.

Justin  
Liberman MD

Oppose

Dear Ms. Thomas, Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in Seattle, Washington. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the USMLE, I spent four years completing a residency where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.

Jason R.  
Stone, MD

Oppose

Dear Ms. Thomas, Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in Puyallup. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the USMLA, I spent 3 years completing a residency where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.



Jeremiah  
Alexander, MD

Oppose

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in Seattle, WA. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the USMLE Steps I-III, I spent 3 years completing a residency at the University of Washington where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.

Howard  
Sanders, MD,  
MS

Oppose

Dear Ms. Thomas, Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in the greater Seattle area. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the USMLE, I spent three years completing a residency where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.

Basma Raees, MD      Oppose

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in Kirkland. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed five years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the [USMLE/COMLEX], I spent 3 years completing a residency where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing under qualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.

Stacy L.  
Donlon, M.D.

Oppose

Dear Ms. Thomas, Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in Washington state. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the USMLE, I spent 4 years completing a residency and 1 year completing a fellowship where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.

Sarah Gruber,  
DO, MSPH

Oppose

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in Everett, WA. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the COMLEX, I spent 3 years completing a residency and 1 year completing a fellowship where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing under qualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.

Aimee Sato,  
MD

Oppose

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in Seattle, Washington. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the USMLE, I spent 5 years completing a residency and an additional year in fellowship where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.

Mitra Ehsan,  
MD, FACS,  
FASCRS

Oppose

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in King County, where there are many naturopathic providers due to the school at Bastyr. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the US Medical licensing examinations I spent an additional five years plus a fellowship year completing a residency where I learned to perform my duties safely and effectively. Our training encompasses extensive observation, supervision, and countless hours of study, rigorous morbidity and mortality review and subsequent board certification. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete any post-training residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that any requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. I work alongside many naturopathic providers and several of them have additional certification such as nurse practitioner. They also understand that there is a limit to what an "ND" should do without additional training. The provisions herein would open the door for less conscientious practitioners to descend upon our state and prey upon patients. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.

Todd N. Witte,  
MD

Oppose

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing Gastroenterology in Bellingham WA. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the USMLE, I spent 3 years completing an Internal Medicine residency, followed by another 3 years in a GI fellowship program, where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. All the time I consult on cases with non-evidence based recommendations from a naturopath. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when wrongly prescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.



Emily Brown,  
MD MS

Oppose

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in Seattle. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the USMLE, I spent 3 years completing a residency and 3 years completing a fellowship where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.

Bryan Bennett, MD      Oppose

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing at Olympic Medical Center in Port Angeles, WA. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the USMLE I spent 3 years completing an emergency medicine residency where I learned to perform my duties safely and effectively. As an emergency medicine physician, I am fully aware of the risk and benefits associated with using controlled substances, however, find it laughable to be considered safe for naturopathic providers in an outpatient setting. These controlled substances can have serious consequences without the proper resources and training. Patients are at serious risk of harm. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.

Katherine  
Adler, MD,  
FACP

Oppose

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in Seattle, Washington. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. I passed numerous standardized exams after medical school graduation. I then did a 3 year Internal Medicine residency where I learned to perform my duties safely and effectively, followed by more rigorous and standardized exams. I am now a board certified physician in the field of Internal Medicine, practicing in the hospital setting. This is more training than that of a naturopath by orders of magnitude. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing under qualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.

Janet Joy Lee, Oppose  
MD

Thank you for the opportunity to share our thoughts and concerns on the sunrise review of the naturopathic scope of practice. I am a physician practicing at Swedish Hospital in Seattle, WA. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the USMLE exams, I then spent 6 years completing a Urology residency, followed by a 1-year fellowship in robotics and minimally invasive surgery, where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.

Stanley Ling,  
MD

Oppose

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in Everett, WA. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the USMLE, I spent 3 years completing a residency where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.

Dr. Jesse Paulsen	Oppose	<p>Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in Seattle. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the USMLE, I spent 4 years completing a psychiatry residency where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.</p>
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Karen  
McGrane, MD

Oppose

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in Tacoma, WA. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the USMLE, I spent 3 years completing a residency where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.

P.Z Pearce,  
MD

Oppose

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in Spokane, Washington. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the National Board of Medical Examiners, I spent 3 years completing a residency where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when incorrectly prescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.



Benjamin  
Edmonds, MD

Oppose

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in Seattle, WA at the University of Washington. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduating and passing the USMLE, I spent 7 years completing a residency and two fellowships where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.

Scott Oh, M.D.    Oppose    Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in Vancouver, WA. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the USMLE, I have spent 3 years completing a residency where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when wrongly prescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.

Susan Sheno	Oppose	<p>Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in Seattle. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. I am a certified and qualified physician in 3 countries including India, UK and USA and have spent over 30 years in the field of medicine including a total of 15 and half years of those 30 years in just training 5.5 years medical school in India, 3 year Pediatric residency in India, 2 year MRCP residency in UK and 2 years residency in USA followed by 3 year fellowship in USA. After graduation and passing the USMLE, I spent 5 years completing a residency and fellowship here in USA where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.</p>
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Arinola Dada,  
MD, FACR

Oppose

I hope this message finds you well. My name is Arinola Dada, MD, and I am a practicing physician based in . I am writing to express my strong opposition to the proposed expansion of the naturopathic scope of practice, specifically Senate Bill 5411. I firmly believe that this proposal poses a significant threat to patient safety and the overall quality of healthcare in our state. Naturopathic education differs significantly from the rigorous medical training that physicians like myself undergo. I completed four years of medical school followed by didactic courses in pharmacology, as well as extensive clinical training during my residency and fellowship, spanning seven years in total. This comprehensive medical education and training are essential to diagnose and treat a wide range of medical conditions safely and effectively. In contrast, naturopathic education primarily focuses on "natural healing" and lacks the depth and breadth of evidence-based medical practices and methods. Naturopaths are not required to complete a residency, and their education does not equip them with the knowledge and skills necessary for the responsibilities outlined in SB 5411. One of the most concerning aspects of this proposal is the granting of prescriptive authority to naturopaths for schedules II-V controlled substances, including opioids, without specifying any additional education and training requirements. Schedule II drugs are highly regulated due to their potential for abuse, dependence, and adverse interactions with other drugs and medical conditions. Safely prescribing controlled substances requires a deep understanding of these drugs, potential interactions, and the patient's overall health, which naturopathic education does not adequately provide. Given the current opioid crisis in Washington state, we cannot afford to compromise patient safety in this manner. Additionally, the proposed modification of the "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" lacks clarity and specificity. These changes could lead to varied interpretations and procedures without ensuring that naturopaths have received the requisite education and training. Patient safety and the delivery of high-quality care should always be paramount in any scope of practice proposal, and the potential risks associated with allowing underqualified providers to perform undefined procedures far outweigh any potential benefits. In conclusion, I urge the Department of Health to oppose all elements of this proposal. Our patients' safety and the integrity of healthcare in our state must remain the top priorities. Thank you for considering my concerns, and I appreciate the opportunity to voice my opposition.

Nicholas D.  
Freuen D.D.S.,  
M.D.

Oppose

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in Spokane, Washington. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the USMLE steps I, II and III, I spent 6 years completing a residency where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for Schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. I think one unintended consequence would be many physicians would leave this state and practice in another state where they may feel better appreciated. Perhaps a better idea would be to create a speciality within medicine that focused on delivering the most natural therapies possible. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.

Dawn  
Hastreiter, MD,  
PhD, CPE |  
Radiologist

Oppose

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in Kirkland, WA. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the USMLE, I spent 6 years completing a residency and fellowship where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.

Zinnia T. San  
Juan, MD

Oppose

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in Silverdale, WA. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the USMLE, I spent 5 years completing a residency and subsequent fellowship specialization where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.

Ryan J  
Martinez, MD  
FACS

Oppose

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a surgeon practicing in Seattle. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the third and final portion of the United States Medical Licensing Exam, I spent 5 years completing a residency where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal would modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. And as a surgeon, I see these misadventures frequently and do not want to see more! For the sake of patient safety, let's not lower the bar to practicing medicine. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.



Raquel G  
Hernandez, DO

Oppose

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician Anesthesiologist practicing in Vancouver, WA. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the USMLE Step 1 and 2, COMLEX 1, 2, and 3 including a CE which requires actual physical examination skills and diagnosing a patient, I spent four years completing a residency where I utilized my education in physiology and learned to perform my duties safely and effectively. I learned how to collaborate with experienced medical professionals from various subspecialties and surgical specialties. After completing residency, I was required to not only pass a written board examination for my specialty but also an oral board examination with examiners from the American Board of Anesthesiology to become a Board-Certified Anesthesiologist. I then went on to complete two subspecialty fellowships. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. As an Anesthesiologist who has a significant amount of not only clinical hours and experience with scheduled II-V drugs, but also required CME hours for maintaining hospital privileges and a valid DEA certification, I know the responsibility, education, and understanding of pharmacodynamics and pharmacokinetics that comes with having this serious scope of practice. Our patients deserve it and should expect it. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.

Tallat Fahim.  
MD

Oppose

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing Primary care at Kaiser Permanente. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed five years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the USMLE I spent 3 years completing a residency where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when mis-prescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.

Sarah Oman	Oppose	<p>I am a physician practicing in Seattle. I am opposed to the proposed naturopathic scope of practice expansions. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the USMLE exams, I spent 5 years completing a residency and fellowship where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.</p>
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Matt Rivara	Oppose	<p>Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in internal medicine and nephrology. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the USMLE, I spent 3 years completing a residency in internal medicine followed by years in fellowship training in nephrology where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.</p>
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Amanda Martin, MD	Oppose	<p>Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in Wenatchee. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the USMLE, I spent 4 years completing a residency where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.</p>
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Kathleen Love, Oppose  
MD FACC

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in Wenatchee, WA. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the USMLE, I spent 3 years completing a residency and 3 years in fellowship where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.

Carlos Ramos, MD      Oppose

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in Camas, WA. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the USMLE, I spent 5 years completing a residency where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.

Kathryn  
Christofersen,  
DO

Oppose

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in Kent, WA. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing BOTH the USMLE and COMLEX exams, I spent four years completing a residency where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.



Judy Kimelman  
MD, FACOG

Oppose

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing in Seattle, WA. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the USMLE board exams, I spent 4 years completing a residency in Ob/Gyn where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.

Rachel  
Whynott, MD,  
FACOG (UW)

Oppose

Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing at the University of Washington in Seattle. I am strongly opposed to the proposed naturopathic scope of practice expansions. I vehemently urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. I have already seen the devastating effects from their ability to provide hormones to people in my job as a reproductive endocrinologist, and can already imagine the harm in our community they will cause if their scope of practice is increased. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the United States Medical Licensing Examination (USMLE), I spent four years completing a residency in obstetrics and gynecology followed by an additional three years of a reproductive endocrinology and infertility fellowship where I learned to perform my duties safely and effectively. I have also passed written and oral board examinations for both OBGYN and reproductive endocrinology and infertility. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. In fact, I see patients who have received harmful care from inappropriate naturopathic administration of hormones regularly. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when wrongly prescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. "Minor procedures" can include surgeries that physicians spend years performing while supervised, after which we subsequently prove our competence in performing through clinical competence committees, as well as managing any complications that may ensue. Naturopaths will not have the same access to training and oversight, and this is downright dangerous for the community. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.

Josephine Wang, MD	Oppose	<p>Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am an OBGYN physician practicing in Kirkland, Washington. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. I have already seen patients that have been harmed when they have had their postmenopausal hormonal medications managed by their naturopathic primary care physicians that is currently within their scope of practice. Their education and training is not on par with the training that I have received and I worry for the safety of patients if their scope of practice is expanded to include what is contemplated in SB5411. I worry about the 'minor' office procedures they will be performing since they have not had to go through a residency to perform any procedures and will not be able to recognize and take care of the complications. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the USMLE, I spent 4 years completing a residency where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.</p>
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Paul Aaron DO	Oppose	<p>As a physician I would disagree for Naturopathic providers to prescribe additional medications that carry a lot more risks for patients. Extensive training in medical school and residency is required to prescribe these powerful medications.</p>
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Luke Rosen, DO	Oppose	<p>Hello, This expansion of prescribing would be a horrible mistake. ND have limited training to support prescribing as is. Already when I had my office located in WA a large part of my practice was undoing what ARNPs and ND's were prescribing. Simply put, giving them the prospect to do controlled substances will be a boon for business for me as an addictionologist. Please for the love of humankind. Stop the madness. Stop giving professions who lack the training and further scope increase. Just say no.</p>
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Dustin Schuett, DO	Oppose	<p>To whom it may concern;</p> <p>I cannot adequately convey in words how terrible of an idea it would be to increase the scope of Naturopathic practitioners and to allow them to serve as primary care physicians. Their training is not evidence-based nor are the majority of their treatments supported by any level of scientific evidence. Their training is completely different from actual physicians (MD's and DO's) and is extremely lacking in anatomy, physiology, pathology, pharmacology and numerous other realms. Additionally, every physician has an additional 3-11 years of residency and fellowship training beyond actual medical school. Naturopaths have the equivalent of a bachelor's degree</p> <p>As an actual physician, I have treated dozens of patients who had complications/adverse outcomes as a result of naturopathic treatments that had zero chance of actual improvement and very high chances of complications. I would sooner have my loved ones see a veterinarian or a dentist for their primary care than a naturopath. At least veterinarians and dentists have a basic sound level of scientific education.</p> <p>The people of Washington deserve care from a team led by actual physicians. This proposed action would be a massive step in the wrong direction and would result in the mistreatment of millions of Washingtonians and countless premature deaths. If the legislators of Washington are seriously considering this terrible idea, in the legislation they should include a clause that every Washington Legislator and their family members can only see a Naturopath. When the legislators balk at this, it should become clear to them why subjecting people they don't know to this same abysmal level of care far below the level of 3rd world medical care is a terrible idea.</p>
Daniel Walton, DO, FACP, FACOI, FASN	Oppose	Do not allow expanded scope of practice to a group that has rejected scientific practice of medicine. In my 40 years of experience they have not embraced supervised post graduate training in the form of internships or residencies. We have enough poorly trained practitioners incapable of prescribing controlled substances.
KPLEEMDPLL C	Oppose	Naturopaths are not qualified to prescribe powerful controlled drugs. Their very background is against modern pharmaceuticals. This quest to expand their scope of practice will only harm the citizens of Washington state and lead to more addiction and deaths.
Erin Dickerson	Oppose	I am writing to oppose the increase in naturopathic physicians' scope of practice to include narcotics for two reasons. 1. These "physicians" often utilize interventions that do not have FDA approval and/or sufficient scientific evidence. Vitamin, mineral, and herbal supplements that have not been FDA-approved or USP-verified are often written as a "prescription" and sold at the front desk. 2. More importantly, the LAST thing we need is more opioid dispensaries. We are in the midst of an opioid crisis and allowing these "physicians" to prescribe is the WORST idea ever. These "physicians" do not adhere to FDA recommendations, therefore why assume they won't prescribe narcotics for off-label purposes? Please do not allow the scope of practice for this group to include narcotic-prescribing abilities! Leave Pandora's Box closed! Thank you for your consideration of my opinion,
Michael Pritchett PharmD	Oppose	No schedule II substance prescribing. It will circumvent the desire for seeking treatment for serious medical issues and push patients away from needed treatments and interventions. Benzodiazepine prescriptions are also questionable.

Chad Bouterse DO	Oppose	<p>I think that giving naturopaths the ability to prescribe controlled substances is absurd. I am unaware that they have pharmaceutical training in these drugs nor do they have clinical rotations in their training to become familiar with their uses and pitfalls.</p> <p>Secondly, the entire point of their line of treatment is to not use medications that doctors normally use that they consider unnecessary poison. So, why do they need this ability?</p> <p>Lastly, I am a board certified ophthalmologist. I have a hard time getting Fentanyl and other controlled substances for my ASC. This is because of new regulations put in place due to the epidemic of drug abuse in this country. And now you want to make it easy to get these drugs thru pharmaceutically untrained naturopaths?</p> <p>This is reckless and misguided</p>
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Evgeny Bistrika D.O.	Oppose	<p>As a hospitalist, I have major reservations about expansion of Scope of practice for naturopaths. I frequently see end results of patients who follow naturopaths who treat with non evidence based practices leading to significant decline. When they end up admitted to my service it is abundantly evident that there was a deficit of evidence based care that could have prevented poor outcomes. As a physician who has completed rigorous training, residency training and board certification, I expect anyone who wants to have similar scopes to complete the same training. Short of this, it will again fall on physicians to address consequences resulting from non evidence based approaches utilized by naturopaths. If a naturopath would like something prescribed, I believe it would be safer for them to refer to a physician or mid level supervised by a licensed physician to assess the evidence based need for such prescriptions. Every time there is a proposal for expansion of prescribing rights to non physicians you dilute the quality and safety of prescribing privileges.</p>
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Brian C.  
Rubens DDS

Oppose

First, let me point out that Naturapaths practice naturopathic medicine and are asking for privileges to practice allopathic medicine without any allopathic medical training. The requirements to get into an approved naturopathic school do not rise even close to the level of requirements to get into a medical school or nurse practitioner program where the medical doctor or nurse practitioner is actually trained to prescribe and manage patients on these medications. A naturopath is a person who has no training whatsoever in a hospital, allopathic medical clinic, emergency room, or in any area of medicine such as internal medicine, psychiatry, chronic pain management, or surgery. They have a four year program with no internship required, no residency offered in a hospital or a mainstream allopathic medical setting, only in some clinics where other naturopaths work. Granting these privileges under the guise that there is a shortage of primary care doctors is a disservice to the population by providing ill-trained health care providers to provide medications for which they are not trained to prescribe, manage the complications, treat or recognize medical interactions, or acutely deal with medical emergencies resulting from their mismanagement. I have first hand experience dealing with naturopaths who have no grasp of medicine, no grasp of what they are prescribing or how to manage patients with real medical problems such as diabetes, depression, chronic pain, cancer, etc. Only 16 states actually recognize naturapaths and most of these states DO NOT allow prescribing without a medical doctor for a reason. They simply are not trained to do so. Alaska Arizona Connecticut District of Columbia California Hawaii Kansas Main Minnesota Montana New Hampshire Oregon North Dakota Utah Vermont WashintonOf these, only California with MD supervision allows the prescribing of scheduled narcotics and medications (what does that say) can prescribe narcotics. States such as Oregon, Vermont, Arizona, and Washington may only do so by formulary. The Washington formula is limited to codeine and testosterone products. Thus, there is simply NO STATE IN THE ENTIRE UNITED STATES that allows the prescribing of allopathic medications except under a naturopathic formulary. The reason for this is that short of having finished a 4-year program of observation and minimal patient management, the training to become a naturapath falls so far short of even nursing training, that no State will recognize a naturopath as a legitimate primary care provider without medical management. Why grant untrained naturopaths to provide medical care. I recommend they go to medical school and get an MD or at least nursing school and become a Nurse Practitioner where they receive actual training to provide this level of care. I welcome the opportunity to discuss this further.

Jade Regan,  
DO

Oppose

As a licensed and practicing osteopathic physician in WA, I do not support the proposal for naturopathic providers to prescribe controlled substances.

Evan Clemens, Pharm.D.      Oppose      To whom it may concern, The notion outlined in the WANP applicant report that hours of pharmacology correlate to competence is prescribing is a bit laughable, as is the assertion that the ND degree confers an equivalent ability to practice as a primary care provider. Pharmacists have more training in pharmacology than all the other professions combined, and as a pharmacist, I have seen several errors in prescribing origination from patients seeing an ND as their primary care provider. Comparisons with a physician assistant and nurse practitioner are unfair, as these providers almost always work directly under the supervision of a MD or DO. Before granting carte-blanch prescribing authority to NDs, I recommend re-addressing why the most highly trained experts in pharmacotherapy, PharmDs, do not have similar carte-blanch prescriptive authority in Washington state. If NDs want prescriptive authority, I feel it is more than reasonable to require similar collaborative practice agreements that are required for pharmacists to prescribe controlled substances.

Steve Olsen ND      Oppose      To whom it may concern,  
  
Regarding the proposal to allow naturopathic doctors the legal right to prescribe schedule II drugs in Washington State.  
  
Having practiced naturopathic medicine in Washington State for more than 20 years and treating patients with various painful conditions successfully with traditional naturopathic methods such as homeopathy, I am very much against this proposal. Many of the drugs in Schedule II are extremely addictive and they often do not treat the cause of the problem.  
  
Please deny the request of WANP to expand their schedule.

Kelly segars      Oppose      Hello  
  
I am very concerned about the proposal to allow naturopathic physicians prescribing power.  
  
As a board certified dermatologist, I see many patients who have been devastated by side effects of medications prescribed by so called naturopathic physicians. The main ones i see are "hormone replacement pellets" these often to lead to devastating hair loss, acne, other side effects. These charlatans have zero knowledge of physiology, pharmacology, even basic biology. Allowing them to prescribe medications is reckless and not in the best interests of the patient.

Dr Andrew Anderson, FACP	Oppose	<p>Good afternoon,I was just responding to provide feedback on the new proposed expansion of the scope of practice for naturopathic providers. I have worked in multiple states as a physician in my career and have had many poor experiences with naturopathic providers. These experiences have include episodes of non-guideline directed medical therapy that resulted in toxicity from the drug prescriptions as well as inappropriate use of controlled substances in previous states. I believe that the training pipeline does not provide enough rigor and experience to make sure that these medications are safely prescribed or tapered in the correct manner. I am more than happy to answer any more questions regarding my experiences in other states that allowed expanded access if needed. Thank you for allowing us the time for public comment. I understand that we have a paucity of primary care providers in the state of Washington, but there are better and safer ways for us to expand access to our patients.</p>
Erin Johnson	Oppose	<p>This should not occur. After completing both my ND and MD and now two years of OBGYN residency. Training as an ND is not adequate to safely prescribes scheduled medications to any capacity including schedule II and IV.</p>
Kevin Costa	Oppose	<p>I think this is a BAD idea from my perspective as a physician. Naturopaths are not held to the same standard as “traditional physicians” and therefore also rarely ever follow guidelines for appropriate prescribing of the drugs they do use. This, this would likely result in more poor prescribing practices in WA state. My vote would be 100% no on this issue.</p>
Renee Clements	Oppose	<p>Expansion to naturopathic privileges to prescribe Schedule II to V drugs.</p> <p>If anything we need a reduction in all sectors of US health care in prescribing Narcotics not an expansion.... All providers through the PMP with WSHA are monitored on appropriateness, and I am not sure if Naturopathic providers would be part of the state Quality Improvement program to monitor appropriateness either?</p>



Kendra  
Dresner,  
PharmD

Oppose

Regarding the sunrise application for naturopaths. I am writing to state my objections to the expansion of scope of practice for naturopaths. This proposal poses a danger to patients as well as public health. Naturopaths focus on natural products and often hold antipathy toward manufactured pharmaceuticals. Furthermore, they do not receive the same extensive education and training as primary care doctors. I will detail here the dangers expanding the scope of practice could pose: reduced vaccination rates, proliferation of unproven and untested treatments, and the prescribing of controlled substances by providers with insufficient background in pharmacology. Vaccinations are a key public health measure and even slightly decreased uptake rates can pose risks to entire populations. Unfortunately, the naturopathic profession has held problematic views toward vaccines. Surveys have shown that the majority of naturopaths have incorrect and negative views toward routine vaccinations, such as being “concerned that a child’s immune system could be negatively impacted by too many vaccinations.” or that it is better to get immunity through illness than through a vaccine. ( 2,3). Bastyr’s own website had a claim that the flu vaccine can “weaken” the immune system(1), though this post has now been removed. Patients of naturopaths are less likely to be vaccinated (4)The naturopathic education is inferior to that of primary care doctors. Family doctors are required to complete a residency and this is after an education that has far more hours, with far more focus on evidence based treatments, than naturopaths. Homeopathy is part of the naturopathic physician study, with 5 class offerings at Bastyr (5) This debunked, pseudoscientific method purports that one can dilute a compound and get increased effectiveness. Typical homeopathic ‘remedies’ are at a dilution high enough that little to no compound remains in the solution. Though it is medically, and chemically, impossible for these remedies to be effective, they remain part of the standard naturopathic coursework. In addition to homeopathy, other coursework includes Chinese herbal medicine, and botanical medicine. This clearly leaves little time for study of prescription medications. The American Association of Family Physicians does not support allowing naturopaths to practice as PCPs due to the large number of naturopathic remedies that are ineffective and, sometimes, dangerous. (6) Currently the United States faces an opioid epidemic. Increasing access to controlled substances is a measure to be taken with utmost caution. The prescription of controlled substances by inadequately trained personnel may lead to patient harm or drug misuse and abuse. A shortage of primary care providers is a critical problem facing the healthcare field. However, this promotion of providers without the necessary training or education will only serve to endanger patients. I urge the reviewers to place patient safety first and reject this proposal. Sincerely, Kendra Dresner,  
PharmD <https://web.archive.org/web/20140822222220/http://www.bastyrcenter.org/content/view/198/> <https://quackwatch.org/related/naturopathy/immu/> <https://academic.oup.com/jlb/article/4/2/229/3871793?login=false> <https://pubmed.ncbi.nlm.nih.gov/19760163/> <https://bastyr.smartcatalogiq.com/2019-2020/2019-2020-academic-catalog/courses/ho-homeopathic-medicine/> <https://www.consumerreports.org/doctors/how-natural-doctors-can-hurt-you/#:~:text=They%20say%20that%20N.D.s%20aren,are%20ineffective%20and%20potentially%20dang>

<p>Dustin Colegrove, DO, MBA, FACP, HMDC, CPE Internal Medicine Hospitalist and Hospice Medical Director</p>	<p>Oppose</p>	<p>Naturopathic physicians are inappropriate to prescribe scheduled medications. Naturopathy has its role in patient therapy however prescribing controlled substances should not be one of them. Allopathic and osteopathic physicians are the two branches of medicine with full practice and prescribing rights. Both disciplines are required to have rigorous training including 4 years of medical school and at a minimum 3 years of residency training. If naturopathic physicians are required to have comprehensive training including a residency (post-graduate training beyond the 4 years they are currently required), they would be appropriate for this medication responsibility. We are suffering from an ongoing opioid epidemic. Expanding the number of prescribers at present is not beneficial for patients or the medical profession. Recently there were cases in Washington where naturopathic physicians were acting recklessly and endangering the public by prescribing opioids against Washington state and federal law (<a href="https://www.dea.gov/press-releases/2022/04/25/two-naturopaths-agree-pay-32000-civil-penalties-improper-prescription">https://www.dea.gov/press-releases/2022/04/25/two-naturopaths-agree-pay-32000-civil-penalties-improper-prescription</a>). I firmly believe that this responsibility of prescribing requires an appropriate level of training including post-graduate training (residency).</p>
<p>Bhavesh Patel</p>	<p>Oppose</p>	<p>You cannot allow naturopath the ability to prescribe narcotics or to perform procedures. They do not have the training to do these skills. How can we easily forget that we are still in an opioid epidemic and allowing more people to prescribe opiates will just make it worse.</p> <p>How can they perform procedures that even qualified MD and DO need extra training to perform.</p> <p>I do not agree with the scope expansion there is no oversight. This is very concerning for the general public</p>
<p>Sheila Grauer Fay MD FACS</p>	<p>Oppose</p>	<p>I just read all the requests from the board of naturopathy and the bill 5411 being presented to the state legislature and I am frankly appalled! The privileges requested are way beyond the training for these “physicians” and have nothing to do with naturopathy which in the past has eschewed the use of drugs for treatment. I practiced for 40 years as a General Surgeon in Washington State and worked with many naturopaths whose training and capabilities were all over the map! Sadly there were some very bad outcomes when they reached beyond their knowledge and applied treatments that had side effects they were very ignorant of. They are certainly NOT trained for surgical office procedures and the idea is beyond outrageous. Ameliorating the physician shortage with unqualified providers is not a reasonable thing to do and can only lead to more potential bad outcomes.</p> <p>I strongly oppose this legislation and hope it will not move forward as there is NO reason to expand their scope of practice.</p>
<p>Dr. Frank Joseph Rinella III, DO, HDMC</p>	<p>Oppose</p>	<p>I am opposed to efforts to expand the scope of practice of naturopathic physicians. The current scope of practice is appropriate for their level of training.</p>

Ben Walker RN APRN	Oppose	<p>I oppose the expansion of the Naturopath's license to include Schedule II to V controlled substances. 1. The Naturopath's have always promoted their profession's education and professional reputation as an alternative to allopathic medicine. This expansion of scope of practice appears to be a blatant backdoor proposal to practice allopathic medicine. Which totally contradicts their core mission as an alternative to allopathic medicine. 2. The Naturopaths do not have the educational and clinical experiences Nurse Practitioners have had with Schedule II to V controlled substances, through first practicing as an RN and then as a Nurse Practitioner. Therefore, the Naturopaths are a danger to the public. 3. I suggest the Naturopaths enroll in medical school, if not at least an accelerated Nurse Practitioner program, if they want to be fully educated and get the proper experience in allopathic medicine. 4. The public is safer with the ban on assault rifles. Keep it safe by banning the less than qualified Naturopaths from adding to our drug problem. There are enough drug issues on the West Coast that we do not need these amateurs adding to the problem.</p>
Daniel Krische	Oppose	<p>As a pharmacist who has filled prescriptions for naturopaths since 2000, their scope of practice should be reduced, not expanded. The training isn't there and the performance reflects it.</p> <p>To give NDs authority to prescribe C 2-5 drugs would be a tragic mistake. Tragic</p>
Christel A Carlson MD	Oppose	<p>I find it interesting, disturbing and incredibly ironic that naturopaths are seeking prescription authority- including controlled substances!</p> <p>There is already a huge issue with controlled substances. As a physician I have many hours of training and continue to be required to do more training on the use and prescribing of these drugs. Naturopaths have no formal medical training. The idea of giving individuals who 'don't believe in medications (naturopathy)' prescriptive authority is ludicrous at best.</p> <p>I am strongly against this proposal and bill as a licensed medical doctor for over 40 years.</p>
Mika Sinanan MD, PhD Professor of Surgery, University of Washington (retired)	Oppose	<p>As a physician and former academic surgeon, I know the rigorous training and guided experience that goes into becoming a competent and safe physician. Without an appropriate and commensurate training, naturopathic physicians WILL NOT be able to safely deliver the services outlined in the expanded scope proposals. I strongly urge that the scope not be expanded without also requiring both training and mentored experience, especially for an expanded portfolio of in office surgical procedures.</p>

Audrey Cavins-Ezell	Oppose	Please do not allow naturopathic physicians access to prescribe schedule 2 narcotics. As a psychiatric nurse practitioner that works with underserved populations in Snohomish, King, and other counties, this will increase the amount of inappropriate opiate prescriptions and increase the amount of drug abuse. Naturopathic doctors are not appropriately prepared to prescribe opiates or stimulants. The increased access to opiates that big pharma pushed in the 90's and 00's gave us the opiate epidemic. Increasing further access by increasing prescriptive authority of naturopaths will only increase the amount opiate and stimulant addiction and death.
Cesar Andrade, MD	Oppose	As a family medicine physician, I want to express my concern for patient safety if untrained individuals can prescribe medications that can cause harm to patients without any additional training.
Teresa Girolami MD Bel-Red Internal Medicine, PLLC	Oppose	<p>I have been practicing primary care medicine after working in an emergency room as well. I have 30 years of experience and trained and am board certified. In every year I have had harm done to my patients by naturopaths. The lack of training is evident and harmful. Trying to undo their errors is difficult and should not be happening. They simply are not trained in hormone replacement surgery paps urgent care and much more. They use drugs not approved by the FDA, use their own compounding pharmacies using mixtures and dosing not approved and unregulated.</p> <p>Please on behalf of all patients, stop the harm. Please do not expand any scope of practice for NDs</p>
Andrea R. Bedlington, PharmD, BCPS	Oppose	<p>I am a licensed pharmacist in the state of Washington (PH60881990). I learned about the proposed expansion for naturopath prescriptive authority last week and I want to provide my firm argument against this. Naturopaths should NOT have expanded prescriptive authority to include all CII-CV medications in this state. My professional opinion is it will cause harm to the public. Plenty of the practices these folks widely promote are considered pseudoscience, ineffective and at times dangerous. My reasoning for recommending denial of this request is:</p> <ul style="list-style-type: none"> <li>• Inadequate training and knowledge regarding clinical pharmacology. Medical and osteopathic physicians go through extensive training in pharmacology throughout their four years of medical school with 3+ years of residency and sometimes an additional fellowship.</li> <li>• We are in the midst of an opioid epidemic. Expanding access to undertrained providers will have negative consequences with overprescribing and opioid related deaths of patients. The training that naturopaths receive is pseudoscientific and not based in the biomedical scientific knowledge that is needed to safely prescribe medications. I do not believe that adding on some CE for these people to prescribe dangerous controls will benefit the problem with already over prescribed medications. It will cause patient harm and thus should be denied. I will end my grievance with a firm statement from the American Academy of Family Physicians: 'The American Academy of Family Physicians (AAFP) opposes licensure of naturopaths. Naturopathic theory and practice are not based upon the body of basic knowledge related to health, disease, and health care that has been accepted widely by the scientific community. Moreover, the scope and quality of naturopathic education do not prepare the practitioner to properly and accurately diagnose illness or provide appropriate treatment. Governmental endorsement of naturopaths through licensure will jeopardize the health and safety of patients.'</li> </ul>

Bradford Bentley, DPT Doctor of Physical Therapy	Oppose	Expanding the Scope of practice for Naturopathic Doctor under Senate Bill 5411 must never be allowed to pass. The use and prescription of allopathic controlled substances in any Schedule including II to V is antithetical to the practice of Naturopathy. It is fundamentally opposed to the principles and teachings of the profession. No self respecting Naturopathic Doctor (ND) would agree with this bill or this change to their practice act. Nurse Practitioners and Physician Assistants are filling the market need for primary care and both have the education and current licensure to prescribe these controlled substances. There is no need to add ND to add more narcotics to the market. Naturopathy and controlled substances are diametrically opposed. Never support this bill or bizarre attempt to add this to the practice act
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Denise Houghtaling MN, MSN, ARNP, FNP- BC, FNE, CEN	Oppose	If their roles are expanding and ability to prescribe narcotics then they should attend the same medical classes as allopathics. We are not allowed to prescribe their "natural medicines". They have been allowed too many increases and should NOT be called ND if they are practicing allopathic medicine!
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Greg Sidell MD	Oppose	I am writing to voice my opposition to SB 5411, which would expand the scope of practice for naturopaths.  Naturaopaths lack the academic training and clinical experience necessary to practice safely within the expanded scope that SB 5411 would permit, and approval of this bill would threaten public safety, so I urge interested lawmakers to vote against SB 5411.
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Jason Melander, PharmD	Oppose	I'm very concerned about the proposed increase in expanding a naturopath's scope of practice.  As a practicing pharmacist I see many prescriptions that are not evidence based and possibly not safe. Too many times have I seen naturopaths writing for thyroid meds with improper monitoring and chronic antifungal use. Both at patient demand and because it's in vogue. These patients' medical doctors refuse the prescriptions and a naturopath for a fee will write for them.  We have a opiate and controlled substance crisis in this country. I'm not convinced allowing less trained naturopaths more scope to write for dangerous meds is needed, safe, or appropriate.  Please do not allow naturopaths to write for controlled substances.
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Erica L Nunez MSN, RN, WHNP-BC Oppose I am a Nurse Practitioner in Washington writing to oppose the expansion of naturopathic care to include the prescription of controlled substances. It is my professional opinion that the scope of practice for naturopaths in Washington state is already too large given the lack of rigor in their education of training, as well as the lack of meaningful oversight by the Board of Naturopathy. Expanding their scope to include the prescription of controlled substances will put patients at risk for more harm. I have personally cared for patients who have reported receiving misleading, substandard, inappropriate, or unethical care by naturopaths. This includes the inappropriate and costly use of meaningless lab tests, telling patients that normal physiological processes are pathological and inappropriate conflicts of interest regarding costly treatment plans that naturopathic providers benefit from -- see the direct selling of costly vitamins, herbs, and supplements touted as "cures" that are sold directly by naturopaths to make a profit. Adding controlled substance prescribing to this mix puts patients at direct risk for harm. Naturopaths are not held to the same educational or oversight standards as other prescribers, and until they are, they should not be able to prescribe medications with such potential for morbidity, mortality, abuse and diversion. I ask that the Department of Health and the legislature NOT pass Senate Bill 5411.

Elizabeth Dwyer ARNP, ACNP FNP BSN BA Oppose I am 100% against naturopathic's prescribing controlled substances.

Elizabeth Loggers, MD, PhD Oppose I am commenting on the proposed new language to section 18.36A RCW.

As a parent and physician (licensed and actively practicing in medical oncology and palliative care), I am concerned that this proposed addition to the scope of practice of naturopathic physicians is inappropriate and may negatively affect the health and safety of Washington State residents. All of the listed examples seem inappropriate, however, I will provide a few of the most concerning examples.

For example, naturopathic physicians are not trained to identify congenital heart disease or risk factors for sudden cardiac arrest in our children. It is therefore not appropriate to suggest that they are appropriate clinicians to examine children and sign off on sports physicals.

Further, naturopathic physicians are not trained to diagnose, treat and prognosticate for the serious and/or terminal illnesses that would lead to POLST forms or hospice certification. Individuals with serious illnesses should be getting their information about and referrals to hospice from the medical doctors who treat those diseases.

I recommend that this language not be added.

Dr. Scheidt Oppose I have been practicing medicine for nearly 20 years now and I think allowing naturopaths to prescribe controlled substances is a mistake. They have no residency program in which there has been oversight and training to learn about these medications in real world scenarios. I have a lot of patients whom I co-manage with naturopaths and I think this would be an injustice to the people of the state of Washington. I don't think mid-levels should have ever been allowed to prescribe either, but that is already done. These medications are addictive and overused now, I think expanding the access would actually create more of a public health crisis than we are already dealing with now. Please don't do this, I think restricting access to trained providers and requiring even physicians to seek extra training should be the way these laws should be moving toward.

<p>Anna A. Barber, MD Pediatrician</p>	<p>Oppose</p>	<p>I urge our state legislature NOT to expand the scope of naturopathic clinicians. I am confused, in fact, as to why they are listed on the DOH newsletter as physicians.          Have they gone to medical school?          Have they completed a residency?          How many hours of education have they received in order to “practice medicine”?          As a physician, I was required to complete 4 years of medical school and 3 years of residency to care for patients. I am frustrated and appalled at the practice creep that states such as WA are allowing.          As a patient, do you want yourself or your loved ones to receive care from someone who completed 600 hours (NP), 2000 hours (PA), or the paltry number of hours I am sure a naturopathic clinician receives during their education, or would you send your family member to a physician, who has completed 20,000 or more hours of clinical education?          Data is showing, more and more, that patient outcomes are WORSE when patients receive care from these non-physician providers.</p> <p>WA state, please look out for our communities, our loved ones, and yourselves, and vote NO on this and all future requests to expand the scope of these practitioners that have not received adequate education.</p>
<p>Jeremiah, Allen Hubbard, DO</p>	<p>Oppose</p>	<p>Dear sir, I am vehemently opposed to naturopathic physicians prescribing any medication at all. If they were interested in doing this, they should've gone to an allopathic or Osteopathic medical school in the first place. I think they set a dangerous precedent and against this move.</p>
<p>Alexandra Barner</p>	<p>Oppose</p>	<p>Personally, I think the expansion of the naturopath's scope would not serve the citizens of Washington. Naturopathic physicians are not qualified to manage controlled substances and allowing them to do so would put people at risk. I strongly feel that this should move forward</p>
<p>Ryan Lynch</p>	<p>Oppose</p>	<p>I would like to comment that the proposed changes to the scope of naturopathic physicians are not a good idea. This would falsely convey the message to patients that a naturopathic physician has similar training and experience compared to MDs.</p>
<p>No name provided</p>	<p>Oppose</p>	<p>Absolutely not! Let's give patients more access to inappropriate prescribing of drugs with potential for abuse! Naturopaths should stick to their specialty medications.          How are you going to measure competency in prescribing of these medications? Just say no or don't complain about the consequences.          As a Doctor of Pharmacy I have seen plenty of poor prescribing habits of scheduled medications by MDs, ARNPs and PAs. Don't add another group.</p>
<p>Cindy Tian, MD, PhD Emergency Medicine Resident, UW Medicine</p>	<p>Oppose</p>	<p>Naturopathic medicine is not licensed or regulated in every state, and nationally, there is no standardized credentialing system. Naturopathy is considered complementary or alternative by the National Institutes of Health, depending on how a person uses it. As there is no standardized credentialing process or training process for naturopaths, they should not be qualified to prescribe schedule II medications as it would cause more harm to patients than good. Schedule II medications can be addictive and dangerous to prescribe without the requisite medical knowledge of an MD/DO and allowing naturopaths to do so would put millions of patients at risk.</p>
<p>John Kittel, PharmD</p>	<p>Oppose</p>	<p>Regarding the proposed expansion of naturopathic physician scope of practice: I am opposed to this expansion of scope of practice to include prescriptive authority for schedule II drugs. I have reviewed the curriculum for naturopathic physician education and can see no courses in pharmacology, pharmaceuticals, pharmacokinetics, or any other medication related course. As a pharmacist, this causes me concern. With medications becoming more and more complicated, and with the rise in controlled substance abuse, I think granting additional prescriptive authority is not wise unless specific medication-related courses or training are required.</p>

Angela Hendrick, MD	Oppose	<p>I am writing this email regarding a notice to expand scope of practice for naturopaths prescribing scheduled medications. I have been a family physician in WA since 2010, providing care to underserved populations. Here are my thoughts on this matter. In Wenatchee, where I practice, there are many of these practitioners who INAPPROPRIATELY prescribe many substances, including hormones - sometimes at very high dosages/pellets/infusions - for uncertain indications that have caused poor outcomes for patients. They charge a lot of money to do "medicine" that has NO EVIDENCE. I do not think this is uncommon at all in places where naturopaths practice. They are commonly practitioners who do NOT recommend vaccines either.</p> <p>It is also worsening misinformation problems since a lot of patients with low health literacy think these practitioners are actual physicians - when they are NOT. They did not go to medical school and are unable to care for patients in the hospital who are actually sick. But their practices are very predatory and have made a lot of patients think they can just take herbs and supplements for their diabetes/cancer/other chronic illnesses without any basis for evidence. Lastly, if these practitioners continue to have higher scope of practice, I can guarantee that many of my fellow physicians - who actually care about giving evidence based, compassionate and quality care - WILL LEAVE THIS STATE or just stop practicing.</p> <p>Thank you for your consideration of this matter.</p>
Melissa Chinn DO, FACOG	Oppose	<p>I am in disagreement with approving naturopaths' ability to prescribe Schedule II to V controlled substances. They have limited education in pharmacology and clinical experience to safely prescribe these medications.</p> <p>Also it goes against their tenet to, "Treat the individual, to stimulate and support the body's inherent ability to heal, to identify the root cause, address it as naturally and gently as possible, to teach patients how to create wellness, and to prevent illness whenever possible."</p>
Jeriah Moors	Oppose	<p>Why would a naturopathic doctor need to prescribe any medication? Isn't that the basis of their practice, to not rely on prescription meds? Sounds like you're creating a new drug crisis in your state. Completely illogical. Someone accepted a lot of money to even bring this to gov attention and they need to be fired.</p>
Mahnaz Mellati	Oppose	<p>I am not writing to you as a physician, but just as a very concerned citizen. In the past few years we have become to understand the horrible mismanagement of two serious medical situations (pain with narcotics and anxiety with benzodiazepines) in this country, taking so many lives. Should our next step really be to go ahead and allow more people to prescribe these medications? We still have so much work to do to undo all the damages done the past decade.</p>
Ryan Hoff	Oppose	<p>Regarding the proposal to expand the scope of practice for naturopathic physicians in Washington State to include controlled substances. I urge you to advise against this change, as naturopathic physicians are not nearly qualified enough to manage controlled substances. Medical physicians (MD and DO) receive rigorous training in medical school, which includes two years of clinical experience with physicians who are qualified to use controlled substances where appropriate. Naturopathic physicians receive training in mind-body medicine, acupuncture, homeopathy, and nutrition, and are not required to complete any residency training whatsoever prior to full practice. If medical physicians (MD and DO) are not ready to manage controlled substances immediately upon graduating from medical school, why would we grant naturopathic physicians this scope of practice after graduating ND school?</p>



Danielle  
Therson,  
Psy.D., LP

Oppose I am strongly opposed to this bill for a variety of reasons.

Naturopathy is a form of 'complementary and alternative medicine' (CAM) that often ascribes to a variety of pseudoscientific and unproven treatments. The practice often combines routine medical practice with these disproven treatments, which has made it one of the most embedded CAMs in the U.S. The educational curriculum is rife with pseudoscientific theories. For example, many naturopathic programs require students to study disproven theories, such as energy healing. A concerning and high percentage of naturopaths are anti-vaccination. They receive far less training and education than physicians. There are a number of cases where naturopaths have prescribed unproven medications to cancer patients. I already find that consumers of healthcare have enough difficulty differentiating the educational differences between MDs, PAs, and NPs, and this is an unnecessary and convoluted addition that further legitimizes practices that are not scientifically based. I am deeply concerned and think this would pose a huge risk to patients who already struggle with the mixed messaging and inaccurate information they receive.

Please see the American Academy of Family Physicians position on this:

<https://cdn.centerforinquiry.org/wp-content/uploads/2021/02/22145722/BKG-Scope-Naturopaths.pdf>

[https://www.washingtonpost.com/national/health-science/natural-doctors-face-skepticism-from-practitioners-of-conventional-medicine/2018/04/09/0c148bf4-3351-11e8-8abc-22a366b72f2d\\_story.html](https://www.washingtonpost.com/national/health-science/natural-doctors-face-skepticism-from-practitioners-of-conventional-medicine/2018/04/09/0c148bf4-3351-11e8-8abc-22a366b72f2d_story.html)

There is no rational reason naturopaths should have prescribing privileges. I absolutely understand and acknowledge the provider shortage we are currently experiencing (my husband and I are both healthcare providers), but this is not the way to address the issue. Find ways to lower barriers for people pursuing actual medical education. Just as this same committee voted down psychologists having limited prescribing privileges, it is wild that this is being considered. This is not the way to address the current and future provider shortage in a safe manner.

William  
Kamens, MD

Oppose

I am a physician licensed in Washington. My license number is MD60866937. Naturopathy is a pseudoscience, founded on patently false ideas. It is already bad enough that naturopaths are granted licenses sanctioned by the state of Washington and allowed to prescribe legend medications. Many patients do not realize that their naturopathic "physician" is not a physician and has no legitimate biomedical training. Allowing them to prescribe controlled substances will further worsen this situation. Expanding the scope of practice of naturopaths will harm patients. These persons undergo training that is not grounded in medical science and is wholly inadequate to prescribe controlled substances. It is a worthy goal to expand access to medical care. However, naturopaths do not offer medical care. Because they lack adequate training to diagnose, treat, and manage medical conditions, permitting them to prescribe controlled substances would be frankly dangerous, and irresponsible. I believe that the 2014 DOH sunrise review addresses this adequately. This statement from the American Academy of Family Physicians also states the problems quite clearly: Naturopathic theory and practice are not based upon the body of basic knowledge related to health, disease, and health care that has been accepted widely by the scientific community. Moreover, the scope and quality of naturopathic education do not prepare the practitioner to properly and accurately diagnose illness or provide appropriate treatment. Governmental endorsement of naturopaths through licensure will jeopardize the health and safety of patients. <https://www.aafp.org/about/policies/all/naturopathic-practice.html>

Paul Naber, Pharm, Consultant Pharmacist      Oppose      After reviewing all that has been presented, I must find that we shall NOT allow Naturopathic physicians expand their scope of practice. Perhaps, their practice should be somewhat reduced so that patient care will become better and best. Further, Naturopathic physicians should not be allowed the authority to prescribe and prescribe controlled substances because they are NOT trained in diagnosis and pharmacology and prescribing controlled substances. Subject to the requirements of this section, a naturopathic physician should NOT prescribe and administer legend drugs and controlled substances contained in Schedules II through V of the uniform controlled substances act, chapter 69.50 RCW, as necessary in the practice of naturopathy. By rule, the board should NOT establish education and training requirements related to prescribing legend drugs and controlled substances. A naturopathic physician should NOT prescribe and administer 4 drugs pursuant to subsection of this section. Even if he or she satisfies the education and training requirements established by the board. Naturopathic physicians should NOT prescribe legend and non-legend 16 drugs and controlled substances contained in Schedules II through V 17 of the uniform controlled substances act, chapter 69.50 RCW, hygiene 18 and immunization, contraceptive devices, common diagnostic 19 procedures, and suggestions. Caring for patients on prescription medications are not currently in their scope of practice. Even though this duplication of services adversely impacts coordination of care, increasing confusion and requiring more time and effort for patients, clinicians, and staff, there is a great need for this dual utilization for prescription and management of medications that are routinely handled in the primary care setting. Naturopathic physicians need to be able to address all routine primary care needs of their patients, but to NOT include management of controlled substances, and perhaps not even testosterone and codeine products. These should have NEVER been allowed.

Andrew Harrison, DO      Oppose      In short, I would not recommend naturopathic providers have the authority to prescribe schedule II-V medications, unless under the supervision of a board licensed medical doctor (MD or DO). These types of medications should be managed by a primary care provider (family practice or internal medicine) or medical specialist depending on the clinical scenario. This proposal seems counterintuitive to the naturopathic profession.

Douglas Migden, DO, JD      Oppose      I have been a licensed osteopathic physician in Washington State for over 35 years. I also have read the application letter submitted by WANP. As an ACGME emergency medicine residency trained physician, who is also board-certified by the American Board of Emergency Medicine, I adamantly oppose expanding the scope of practice for naturopaths. In my opinion, this is a huge mistake without justification. In particular, I strongly oppose controlled substances being prescribed by these practitioners. In my opinion, they do not have the necessary experience or training. I do not believe there is any legitimate justification to grant this request

Rachael Scott, LMT, Licensed Massage Therapist	Oppose	<p>I am writing to express my strong concerns and objections regarding the proposed expansion of the scope of practice for naturopaths. As a massage therapist, I have personally worked in the complementary and alternative healthcare industry for nearly 20 years, and during that time have seen naturopaths practice make millions off supplements, tell patients they don't need vaccinations, order the wrong labs and misinterpret them, claim that they can cure illness without drugs, and convince their patients that they do not need conventional medicine. I have found them to be willfully ignorant and poorly educated and I have concluded for myself that they are unqualified to practice medicine. While I recognize the importance of considering various healthcare providers, I believe that expanding their scope of practice carries significant risks to patient safety and well-being.</p> <p>Naturopathic education and training do not meet the same rigorous standards as those of medical doctors, and the proliferation of practices in this field is a risk to public health.</p> <p>Here are some reasons why expanding the scope of practice for naturopaths is concerning:</p> <ul style="list-style-type: none"> <li>• Limited Medical Training: Naturopaths typically complete a four-year naturopathic medicine program, which lacks the depth and breadth of education and clinical training required of medical doctors. Allowing them to perform medical procedures beyond their training poses a significant risk to patients.</li> <li>• Safety Concerns: Medical procedures, such as surgery or prescription of pharmaceuticals, require a comprehensive understanding of human anatomy, physiology, and pharmacology. Naturopaths do not receive the same level of training in these critical areas. Using alternative care options during cancer treatment has been shown to more than double a person's risk of death from cancer because they do not seek out proper, effective care. Source: Alternative Medicine for Cancer Treatment Raises Mortality Risk - NCI</li> <li>• Misleading Claims: Naturopaths notoriously promote treatments that lack scientific evidence and may make unsubstantiated claims about their efficacy. Allowing them to expand their scope of practice could lead to more patients being exposed to unproven and potentially harmful therapies.</li> <li>• Erosion of Patient Trust: Expanding the scope of practice for naturopaths could erode trust in the healthcare system. Patients might find it difficult to distinguish between the qualifications of naturopaths and medical doctors, potentially delaying necessary medical care, and wasting time and money on ineffective medicine.</li> </ul> <p>Expanding the scope of practice for naturopaths without addressing these significant concerns about their training, qualifications, and the safety of their practices is ill-advised. I urge you to prioritize patient safety and uphold the highest standards of healthcare by maintaining the current scope of practice for naturopaths.</p> <p>Thank you for considering my concerns. I strongly believe that the health and well-being of patients should be the top priority in any decision related to healthcare practices.</p>
Douglas Migden, DO, JD	Oppose	<p>I have been a licensed osteopathic physician in Washington State for over 35 years. I also have read the application letter submitted by WANAP. As an ACGME emergency medicine residency trained physician, who is also board-certified by the American Board of Emergency Medicine, I adamantly oppose expanding the scope of practice for naturopaths. In my opinion, this is a huge mistake without justification. In particular, I strongly oppose controlled substances being prescribed by these practitioners. In my opinion, they do not have the necessary experience or training. I do not believe there is any legitimate justification to grant this request.</p>
Jenna Nickless	Oppose	<p>Please consider voting no to the proposal to expand scope for schedule II-V controlled substances. As a pharmacist I do not think this is the safest option for our patients, our push should be to expanding primary care and not changing the scope of naturopathic physicians to make up that gap.</p>

Louise Schultz, DO, MPH      Oppose      I would strongly discourage the expansion of naturopathic licensure. The training is not standardized across the country. The training does not include the robust pharmacology didactic. These last two points are in contrast to allopathic(MD) and osteopathic (DO) training. Naturopathic practitioners are ineligible for sitting for medical board testing due the significant gaps in their training. I have personally already seen the deleterious effects of some naturopathic recommendations and 'prescribing'. Two come to recent mind: a naturopathic practitioner recommending a cocktail of herbs while discouraging a patient from breast cancer treatments with an oncologist and the other was a patient recommended to take synthetic pig thyroid (armour thyroid) that sent her thyroid into dangerously low levels and caused an arrhythmia causing hospitalization.  
Do not broaden the prescribing privileges of these individuals who do NOT have proper training nor certification/licensure to responsibly prescribe within schedule II-IV.  
It would be reckless.

Mark Lahtinen      Oppose      I'm the midst of an opioid epidemic and so many issues with controlled substances being overprescribed, why would the state allow more people with less training in prescribing to prescribe the controlled medications? This does not seem to solve any problems and would only have the potential to cause more issues than we already have

Kenna M.  
Wood, D.O.,  
Internal  
Medicine  
Physician

Oppose

I strongly disagree with Senate Bill 5411, which suggests an increase in scope for naturopaths. I am a primary care physician and would welcome a lot of help, but only truly competent help. Instead of flooding primary care with lesser trained persons, fix the actual problem by:1. Incentivizing physicians to enter primary care paths (loan repayment, loan forgiveness, bonuses, increased pay)2. Increase the number of residencies available to physicians3. Make it easier for physicians without residency training (not selected for residency programs) to obtain internships and eventual employmentSaturating primary care with lesser-trained persons will only provide lesser care. Think about who will be managing your care when you are older and have mild dementia. Only a medical physician or medical physician-led team of well-trained professionals can manage that well. This is due to our in-depth medical education and intensive residency training (80+ hours/week x 3 years).In addition, I don't need the extra work in cleaning up the mess left by naturopaths, which I have already had to do in the past. I believe they mean well, but I also know they are not equal in training. I usually find terrible conditions much later in the process because the patients have seen naturopaths for so long and haven't gotten better.One of the proposed changes would allow naturopaths to prescribe schedule 2-5 controlled substances. Not only do I believe they are not properly educated and trained to prescribe these but we also don't need more controlled substances in the community. I do not see this change being used to decrease controlled substances because the "controlled" part will be missing with more providers writing them, particularly without appropriate years of training.Naturopaths do not have appropriate training to attest on forms regarding disability determinations, student athletic forms, guardianships, or powers of attorney. They do not receive appropriate musculoskeletal system training and do not know what conditions to look for prior to signing off on student athletic forms. There are conditions that can lead to death if missed.Sometimes I hear or read about people saying that doctors are only trying to protect their turf. This is not the case here. I'm in primary care. I will ALWAYS have a job. ALWAYS. As a female internist, older women (and many men also) will ALWAYS flock to me. I don't have to protect my turf. I can even move to other countries and practice and still have patients flock to me. I would just appreciate it if you do not make my job harder than it already is by adding poorly trained persons to the mix.

Cullen Penner-Ray, Doctor of Pharmacy      Oppose      Regarding RCW 18.120.010 granting naturopathic practitioners ability to prescribe Schedule 2-5 controlled substances. I recommend against expanding the prescribing privileges of naturopathic practitioners. As a pharmacist who has served the people of Washington for six years, my experiences with naturopaths leads me to believe that increasing their prescription authority would harm patient safety. Currently naturopaths seem to lack the training and education to prescribe appropriately and seem to struggle even with their current, more limited, prescribing authority. Many of the prescriptions I have received from naturopathic practitioners have contained errors in dosing, treatment length, or had potentially dangerous interactions with other medications they were prescribing. I have experienced several incidents of naturopathic practitioners attempting to prescribe controlled substances inappropriately only to express ignorance that the medication is controlled. When I asked why they chose to prescribe a control over other standard treatments, they stated that it was "what the patient asked for". Some naturopaths have been hostile to collaborating for patient safety. In one instance, I called to clarify what indication a medication was prescribed to treat so I could verify the dosing and the naturopath replied "I don't have to tell you that, that's HIPAA." I feel that it is unsafe to allow naturopaths to prescribe controlled substances and that doing so would likely worsen the opioid epidemic and harm the people of Washington.

Diane Henry,      Oppose      I'm writing to comment to urge you NOT to expanse naturopathic scope of practice in any way at all.

Naturopaths are woefully undertrained and not in any way qualified for their current scope of practice. The poor quality of training is why naturopathic "doctors" are not allowed to practice in more than half of the states. The services they provide that are unique are not good. Naturopaths, in general, are anti-vaccine and so put public health at risk. They tell their patients to ask their actual MDs to get multiple unnecessary lab draws. They prescribe herbs and supplements with abandon, despite the fact that herbs and supplements are not regulated and what any given supplement contains is unknown and/or actively harmful. Naturopaths sole possible contribution is their long appointment times, due to the fact that so many of them cannot get insurance to pay for their quacky treatments and so, receiving cash, can afford to have long appointments where patients feel heard. The solution to this is to increase the amount of compensation real doctors and advance practice providers receive from insurance, so they don't have to pack so many appointments into one day.

Jessie Marks, ARNP      Oppose      As an Advanced Practice Nurse Practitioner, the expanding scope of practice to prescribe Schedule II-VI medications for Naturopathic providers concerns me on a few levels. While Naturopathic providers do have some pharmacology, it mainly focuses on how herbs and plant based medicines interact with pharmaceuticals. They also do not participate in residencies to give them expanded patient experience with clinical oversight allowing them adequate experience to practice prescribing schedule II-VI medications, while MD, DO and ARNP students and graduates have clinicals plus residencies to gain experience. My concern is prescribing errors and inappropriate use of narcotic prescriptions. Lastly, I fail to see how expanding their scope to allow schedule II-VI prescribing aligns with the scope of their studies as and I quote, "Prevention medicine and whole health are at the heart of naturopathy". <https://www.spokesman.com/stories/2022/feb/02/what-is-naturopathy-and-who-is-allowed-to-practice/> Thank you for taking the time to read these concerns,

Carol Barnes,  
MD

Oppose

I am a physician specializing in psychiatry and write with concern about the proposal before you to expand naturopaths' scope of practice. In their applicant report, the Washington Association of Naturopathic Physicians specifically highlights the ongoing mental health crisis as the rationale to expand their prescribing privileges, including controlled substances. Medicine is a complicated science and psychiatric care is much more than just prescribing. This proposal would put vulnerable patients at risk of significant harm. Naturopaths have limited medical education, and this proposal disregards the training needed to understand the complex interactions between mental and physical health conditions. While psychotropic medications used to treat mental illness can be highly effective, they can also be ineffective or harmful if prescribed incorrectly. Prescribers must be diligently trained to understand how they affect the central nervous system and other organ systems, and how they interact with other medications or conditions such as pregnancy. These medications also need to be used differently across the lifespan. Psychiatric physicians complete over 12,000 hours of rigorous training after medical school, specializing in the treatment of mental health conditions and substance use disorders. Unlike these MD and DO training programs – which must meet the national requirements defined by the Accreditation Council for Graduate Medical Education (ACGME) – naturopath training remains highly variable. As our state continues to battle the opioid epidemic, giving naturopaths authority to prescribe opioids and other controlled substances is irresponsible. Fighting the opioid epidemic means making sure these dangerous drugs are not over-prescribed. As a psychiatrist, I know first hand the risks and dangers of poorly educated prescribing practices. Our patients are among the most vulnerable and deserve our protection. Providers with an incomplete knowledge of medical sciences should not be allowed to haphazardly prescribe medications. While we acknowledge that there is a shortage of psychiatrists in our state, this policy proposal does not address the workforce shortage ahead of us, nor the stigma that patients with mental illness face. Instead, I urge you to consider alternative evidence-based solutions to safely increase access to care, including the Collaborative Care Model, telepsychiatry, increasing the number of psychiatry residency spots, and more. Patient safety must be the driver behind any modification to our health laws and I urge you to oppose this proposal.



Dennis Sorta, MD  
Oppose

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Kathryn Rahn  
MD

Oppose

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William Adams MD    Oppose

I am a physician specializing in psychiatry and write with concern about the proposal before you to expand naturopaths' scope of practice. In their applicant report, the Washington Association of Naturopathic Physicians specifically highlights the ongoing mental health crisis as the rationale to expand their prescribing privileges, including controlled substances. Medicine is a complicated science and psychiatric care is much more than just prescribing. This proposal would put vulnerable patients at risk of significant harm. Naturopaths have limited medical education, and this proposal disregards the training needed to understand the complex interactions between mental and physical health conditions. While psychotropic medications used to treat mental illness can be highly effective, they can also be ineffective or harmful if prescribed incorrectly. Prescribers must be diligently trained to understand how they affect the central nervous system and other organ systems, and how they interact with other medications or conditions such as pregnancy. These medications also need to be used differently across the lifespan. Psychiatric physicians complete over 12,000 hours of rigorous training after medical school, specializing in the treatment of mental health conditions and substance use disorders. Unlike these MD and DO training programs – which must meet the national requirements defined by the Accreditation Council for Graduate Medical Education (ACGME) – naturopath training remains highly variable. As our state continues to battle the opioid epidemic, giving naturopaths authority to prescribe opioids and other controlled substances is irresponsible. Fighting the opioid epidemic means making sure these dangerous drugs are not over-prescribed. Frankly, I wish we could further restrict who can prescribe controlled meds, not expand it. For the most part, some cats are out of the bag, so don't let more out. While we acknowledge that there is a shortage of psychiatrists in our state, this policy proposal does not address the workforce shortage ahead of us, nor the stigma that patients with mental illness face. Instead, I urge you to consider alternative evidence-based solutions to safely increase access to care, including the Collaborative Care Model, telepsychiatry, increasing the number of psychiatry residency spots, and more. Patient safety must be the driver behind any modification to our health laws and I urge you to oppose this proposal.

Saritha Reddy  
MD

Oppose

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Henry S.  
Levine, MD

Oppose

I have been a practicing physician in Washington State for over 50 years. As part of my training in my specialty, psychiatry, I have undergone 8 years and countless thousands of hours of postgraduate training in medicine, including psychiatric medicine. This is a complex field requiring detailed knowledge of biological, psychological and social aspects of our patients.

Naturopaths simply do not have such training. Extending their privileges in this area will result in their harming vulnerable patients with acts of both commission and omission. Such acts are inevitable given the lack of training naturopaths have in psychiatric medicine.

Please find other, less harmful ways of addressing the needs of Washington patients. The problems of physician shortage can be met and conquered in ways that do not place undereducated practitioners in a position to gravely harm our patients.

Steven M. Hall, MD  
Oppose

I am a physician specializing in Integral Medicine and write with concern about the proposal before you to expand naturopaths' scope of practice. In their applicant report, the Washington Association of Naturopathic Physicians specifically highlights the ongoing mental health crisis as the rationale to expand their prescribing privileges, including controlled substances. Medicine is a complicated science and psychiatric care is much more than just prescribing. This proposal would put vulnerable patients at risk of significant harm. Naturopaths have limited medical education, and this proposal disregards the training needed to understand the complex interactions between mental and physical health conditions. While psychotropic medications used to treat mental illness can be highly effective, they can also be ineffective or harmful if prescribed incorrectly. Prescribers must be diligently trained to understand how they affect the central nervous system and other organ systems, and how they interact with other medications or conditions such as pregnancy. These medications also need to be used differently across the lifespan. Psychiatric physicians complete over 12,000 hours of rigorous training after medical school, specializing in the treatment of mental health conditions and substance use disorders. Unlike these MD and DO training programs – which must meet the national requirements defined by the Accreditation Council for Graduate Medical Education (ACGME) – naturopath training remains highly variable. As our state continues to battle the opioid epidemic, giving naturopaths authority to prescribe opioids and other controlled substances is irresponsible. Fighting the opioid epidemic means making sure these dangerous drugs are not over-prescribed. I have personally taught at Bastyr University and have been precepting ND students in my office practice since 1991. Many of my patients have or are also seeing Naturopaths, so I have a great deal of experience observing NDs both in training and in practice. Naturopaths complete a four year program (some take five or six years to complete it) that is not nearly as rigorous or comprehensive as a four year MD program. Then they start practicing. Most have not taken a residency. Imagine how you would have performed if you started seeing patients right out of medical school with no residency training. Though many NDs are very conscientious and continue their learning on their own and can become very competent in their scope of practice, this learning is fairly hap-hazard and not at all monitored or regulated. Naturopaths do not need this increased scope of prescribing mainly because they have a whole palate of their own non-prescriptive approaches to treat mental health and chronic pain conditions. And naturopaths should not be granted this increased scope of prescribing because they, quite literally, have not been trained. While we acknowledge that there is a shortage of psychiatrists in our state, this policy proposal does not address the workforce shortage ahead of us, nor the stigma that patients with mental illness face. Instead, I urge you to consider alternative evidence-based solutions to safely increase access to care, including the Collaborative Care Model, telepsychiatry, increasing the number of psychiatry residency spots, and more. Patient safety must be the driver behind any modification to our health laws and I urge you to oppose this proposal.

MAJ Anton  
Power, D.O.  
Addiction  
Psychiatrist  
Medical  
Director, Army  
Behavioral  
Health  
Program,  
JBLM, WA

Oppose

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Michael K.  
Friedman, D.O.

Oppose

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Susan  
Hakeman, MD,  
Board Certified  
Psychiatrist

Oppose

I am a psychiatrist, a physician specializing mental health and write with concern about the proposal before you to expand naturopaths' scope of practice. In their applicant report, the Washington Association of Naturopathic Physicians specifically highlights the ongoing mental health crisis as the rationale to expand their prescribing privileges, including controlled substances. Medicine is a complicated science and psychiatric care is much more than just prescribing. This proposal would put vulnerable patients at risk of significant harm. Naturopaths have limited medical education, and this proposal disregards the training needed to understand the complex interactions between mental and physical health conditions. While psychotropic medications used to treat mental illness can be highly effective, they can also be ineffective or harmful if prescribed incorrectly. Prescribers must be diligently trained to understand how they affect the central nervous system and other organ systems, and how they interact with other medications or conditions such as pregnancy. These medications also need to be used differently across the lifespan. Psychiatric physicians complete over 12,000 hours of rigorous training after medical school, specializing in the treatment of mental health conditions and substance use disorders. Unlike these MD and DO training programs – which must meet the national requirements defined by the Accreditation Council for Graduate Medical Education (ACGME) – naturopath training remains highly variable. As our state continues to battle the opioid epidemic, giving naturopaths authority to prescribe opioids and other controlled substances is irresponsible. Fighting the opioid epidemic means making sure these dangerous drugs are not over-prescribed. There has been an increase in the diagnosis of Attention Deficit/Hyperactivity Disorder and consequent shortage of stimulant. Rigorous training is needed for careful diagnosis and prescribing. While acknowledging there is a shortage of psychiatrists in our state, this policy proposal does not address the workforce shortage ahead of us, nor the stigma that patients with mental illness face. Instead, I urge you to consider alternative evidence-based solutions to safely increase access to care, including the Collaborative Care Model, telepsychiatry, increasing the number of psychiatry residency spots, and more. Patient safety must be the driver behind any modification to our health laws and I urge you to oppose this proposal.

Karen Berlin,  
MD, Adult  
Psychiatrist

Oppose

I am a physician specializing in psychiatry and write with concern about the proposal before you to expand naturopaths' scope of practice. In their applicant report, the Washington Association of Naturopathic Physicians specifically highlights the ongoing mental health crisis as the rationale to expand their prescribing privileges, including controlled substances. Medicine is a complicated science and psychiatric care is much more than just prescribing. This proposal would put vulnerable patients at risk of significant harm. Naturopaths have limited medical education, and this proposal disregards the training needed to understand the complex interactions between mental and physical health conditions. While psychotropic medications used to treat mental illness can be highly effective, they can also be ineffective or harmful if prescribed incorrectly. Prescribers must be diligently trained to understand how they affect the central nervous system and other organ systems, and how they interact with other medications or conditions such as pregnancy. These medications also need to be used differently across the lifespan. Psychiatric physicians complete over 12,000 hours of rigorous training after medical school, specializing in the treatment of mental health conditions and substance use disorders. Unlike these MD and DO training programs – which must meet the national requirements defined by the Accreditation Council for Graduate Medical Education (ACGME) – naturopath training remains highly variable. As our state continues to battle the opioid epidemic, giving naturopaths authority to prescribe opioids and other controlled substances is irresponsible. Fighting the opioid epidemic means making sure these dangerous drugs are not over-prescribed. I became very aware of the lack of psychiatric knowledge of naturopaths in the management of one of my patients. I was taking care of a young woman who had a previously debilitating psychotic illness that resulted in job loss, risky behaviors, and hospitalization. She had a significant recovery with a medication called olanzapine and was finally functioning well- attending school, feeling like herself, and happy. She went to see a naturopath for unrelated reasons and was advised to stop the medication. This was without proper assessment and consultation. Fortunately, my patient did not follow that recommendation and, instead, talked to me about it. Stopping it would likely have been catastrophic. Besides lack of training in understanding psychiatric illness and the proper use of medications, I am also concerned that the training is insufficient for practitioners to have awareness of their own limitations- to know when they do not know. I fear that having the ability to prescribe will result in more mental health crises to manage rather than fewer. While we acknowledge that there is a shortage of psychiatrists in our state, this policy proposal does not address the workforce shortage ahead of us, nor the stigma that patients with mental illness face. Instead, I urge you to consider alternative evidence-based solutions to safely increase access to care, including the Collaborative Care Model, telepsychiatry, increasing the number of psychiatry residency spots, and more. Patient safety must be the driver behind any modification to our health laws and I urge you to oppose this proposal.



Robin P.  
Berger, MD  
MRCPsych

Oppose

I am a physician specializing in psychiatry and write with concern about the proposal before you to expand naturopaths' scope of practice. In their applicant report, the Washington Association of Naturopathic Physicians specifically highlights the ongoing mental health crisis as the rationale to expand their prescribing privileges, including controlled substances. Medicine is a complicated science and psychiatric care is much more than just prescribing. This proposal would put vulnerable patients at risk of significant harm. Naturopaths have limited medical education, and this proposal disregards the training needed to understand the complex interactions between mental and physical health conditions. While psychotropic medications used to treat mental illness can be highly effective, they can also be ineffective or harmful if prescribed incorrectly. Prescribers must be diligently trained to understand how they affect the central nervous system and other organ systems, and how they interact with other medications or conditions such as pregnancy. These medications also need to be used differently across the lifespan. Psychiatric physicians complete over 12,000 hours of rigorous training after medical school, specializing in the treatment of mental health conditions and substance use disorders. Unlike these MD and DO training programs – which must meet the national requirements defined by the Accreditation Council for Graduate Medical Education (ACGME) – naturopath training remains highly variable. As our state continues to battle the opioid epidemic, giving naturopaths authority to prescribe opioids and other controlled substances is irresponsible. Fighting the opioid epidemic means making sure these dangerous drugs are not over-prescribed. I work at Seattle Children's Hospital and recently cared for an adolescent who had been treated in Washington State for bipolar disorder and substance use, who was admitted with aggressive behavior and psychotic symptoms after independently seeing a Naturopath based in Oregon, where Naturopaths have wider prescribing powers. This Naturopath had prescribed off-label ketamine for his mood disorder, which he was taking multiple times per day at home, and probably caused his psychosis. The FDA approved version of ketamine (esketamine) is used only in clinic and in very special cases where substance use has been excluded, and not for bipolar disorder. This Naturopath had also prescribed 10 x the maximum daily dose of pregabalin and 10 x the normal maximum dose of baclofen. This combination could not only have been life threatening, but was prescribed with no evidence base for effectiveness. This family ended up paying a lot of money for an unsafe, ineffective and harmful intervention from a Naturopath. Additionally, there was no accountability for the harm caused. While we acknowledge that there is a shortage of psychiatrists in our state, this policy proposal does not address the workforce shortage ahead of us, nor the stigma that patients with mental illness face. Instead, I urge you to consider alternative evidence-based solutions to safely increase access to care, including the Collaborative Care Model, telepsychiatry, increasing the number of psychiatry residency spots, and more. Patient safety must be the driver behind any modification to our health laws and I urge you to oppose this proposal.

Tom Soeprono  
MD

Oppose

I am a physician specializing in transplant psychiatry and write with concern about the proposal before you to expand naturopaths' scope of practice. In their applicant report, the Washington Association of Naturopathic Physicians specifically highlights the ongoing mental health crisis as the rationale to expand their prescribing privileges, including controlled substances. Medicine is a complicated science and psychiatric care is much more than just prescribing. This proposal would put vulnerable patients at risk of significant harm. Naturopaths have limited medical education, and this proposal disregards the training needed to understand the complex interactions between mental and physical health conditions. While psychotropic medications used to treat mental illness can be highly effective, they can also be ineffective or harmful if prescribed incorrectly. Prescribers must be diligently trained to understand how they affect the central nervous system and other organ systems, and how they interact with other medications or conditions such as pregnancy. These medications also need to be used differently across the lifespan. Psychiatric physicians complete over 12,000 hours of rigorous training after medical school, specializing in the treatment of mental health conditions and substance use disorders. Unlike these MD and DO training programs – which must meet the national requirements defined by the Accreditation Council for Graduate Medical Education (ACGME) – naturopath training remains highly variable. As our state continues to battle the opioid epidemic, giving naturopaths authority to prescribe opioids and other controlled substances is irresponsible. Fighting the opioid epidemic means making sure these dangerous drugs are not over-prescribed. I regularly have to de-prescribe as much as I prescribe. In practitioners who have lesser training than physicians there is a clear and consistent pattern, dangerous poly-pharmacy at subtherapeutic doses. I can recall a patient who was prescribed a “herbal supplement” by a naturopath for the patient’s mental health to be used in combination with the required immunosuppression for the patient’s solid organ transplant. The patient shortly thereafter presented to the Emergency Room in acute organ rejection (life threatening) because the herbal supplement influenced the metabolism of the immunosuppression. These rather routine drug interactions and understandings of psychopharmacology are second nature for physicians. Whereas naturopaths do not have the knowledge or experience to know and avoid these dangers. More practitioners with inadequate education and training will only lead to more medical illness and worse access, backing up ER’s and leading to additional visits to repair the damage done. The patient mentioned required hospitalization and thousands of dollars of medical interventions to reverse the consequences of this naturopath’s decision. While we acknowledge that there is a shortage of psychiatrists in our state, this policy proposal does not address the workforce shortage ahead of us, nor the stigma that patients with mental illness face. Instead, I urge you to consider alternative evidence-based solutions to safely increase access to care, including the Collaborative Care Model, telepsychiatry, increasing the number of psychiatry residency spots, and more. Patient safety must be the driver behind any modification to our health laws and I urge you to oppose this proposal. Thank you so much for your time and work on behalf of my patients,

Nancy  
Brunsvold, MD

Oppose

I am writing to ask that you do not increase the scope of practice for naturopaths. They have not demonstrated adequate training in pharmacology, physiology or other medical or even scientific practices. They do not use a scientific approach to make sure best practices are incorporated into their therapies. This harms patients despite their good intentions. Using naturopaths to fill the primary care gap is not the answer. Efforts to better support and value primary care relative to other medical specialties (such as dermatology, gastroenterology, orthopedic surgery, etc) is the answer. Only then will newly trained physicians be able to afford to choose primary care as their specialty over other highly paid medical specialties. Thank you for your time and attention to this important matter.

Jennifer Piel,  
MD, JD

Oppose

I am a physician specializing in psychiatry and write with concern about the proposal before you to expand naturopaths' scope of practice. In their applicant report, the Washington Association of Naturopathic Physicians specifically highlights the ongoing mental health crisis as the rationale to expand their prescribing privileges, including controlled substances. Medicine is a complicated science and psychiatric care is much more than just prescribing. This proposal would put vulnerable patients at risk of significant harm. Naturopaths have limited medical education, and this proposal disregards the training needed to understand the complex interactions between mental and physical health conditions. While psychotropic medications used to treat mental illness can be highly effective, they can also be ineffective or harmful if prescribed incorrectly. Prescribers must be diligently trained to understand how they affect the central nervous system and other organ systems, and how they interact with other medications or conditions such as pregnancy. These medications also need to be used differently across the lifespan. Psychiatric physicians complete over 12,000 hours of rigorous training after medical school, specializing in the treatment of mental health conditions and substance use disorders. Unlike these MD and DO training programs – which must meet the national requirements defined by the Accreditation Council for Graduate Medical Education (ACGME) – naturopath training remains highly variable. As our state continues to battle the opioid epidemic, giving naturopaths authority to prescribe opioids and other controlled substances is irresponsible. Fighting the opioid epidemic means making sure these dangerous drugs are not over-prescribed. I have numerous personal examples of naturopathic physicians putting at risk the safety of patients related to the assessment and management of psychiatric conditions. In my roles as a clinical psychiatrist but also as a forensic psychiatrist, I have reviewed dozens of cases where patient safety was jeopardized. - I have seen cases of naturopathic physicians holding themselves out as psychiatric specialists. They do not have this training and giving them more prescribing privileges will not equip them to safely manage many patients with psychiatric conditions. - I have encountered several occasions when naturopathic providers took patients off antipsychotic or mood stabilizing medications without consultation with the patient's psychiatrist and, in at least some of these cases, have led to destabilization including hospitalization. - On several occasions, my own patients were prescribed herbal or other remedies by naturopathic physicians that were contraindicated with the patients' KNOWN psychiatric medications. The naturopathic physicians did not have enough familiarity to recognize the potential harm. The naturopathic physician did not consult with me. In one recent case, this precipitated a manic episode. Luckily, this patient was also engaged in care with me and we were able to get him stabilized without utilizing emergency resources or hospitalization. Had he not been engaged with me, this could have led to a very bad outcome. - I reviewed a case where a naturopathic physician instructed the parents of a teenage patient that their child needed a stimulant for ADHD. Because a family member had a supply of the medications, the parents gave a trial to the teenager. But, stimulants were contraindicated in the patient due to his use of illicit substances (including cocaine) that the naturopathic did not even inquire about (and certainly would have been an important part of the assessment for ADHD) and also an underlying heart condition that the naturopathic had on the patient's problem list. The patient developed an arrhythmia at school and had to be taken to the emergency room. - These are just a few examples of the situations I have encountered recently. While we acknowledge that there is a shortage of psychiatrists in our state, this policy proposal does not address the workforce shortage ahead of us, nor the stigma that patients with mental illness face. Instead, I urge you to consider alternative evidence-based solutions to safely increase access to care, including the Collaborative Care Model, telepsychiatry, increasing the number of psychiatry residency spots, and more. Patient safety must be the driver behind any modification to our health laws and I urge you to oppose this proposal.

Allison Rooney, Oppose  
MD

I am a physician and current psychiatry resident within the University of Washington hospital system. I write to you with concern about the proposal before you to expand naturopaths' scope of practice. In their applicant report, the Washington Association of Naturopathic Physicians specifically highlights the ongoing mental health crisis as the rationale to expand their prescribing privileges, including controlled substances. Medicine is a complicated science and psychiatric care is much more than just prescribing. This proposal would put vulnerable patients at risk of significant harm. As a resident physician I have already treated numerous patients that have required hospitalization including to the level of intensive care unit admission and intubation (a breathing tube placed down a patient's throat) due to the inappropriate prescribing and recommendations of current Naturopathic prescribers under our current legislation. To give a specific example one provider had recommended a patient take a medication called Ivermectin as "COVID prophylaxis" (prophylaxis - to prevent a disease in someone without the disease) which not only has no indication for use in this way but moreover the provider had recommended doses higher than any that should be prescribed. This led to this patient developing a neurologic encephalopathy, inability to move their limbs, and eventually inability to breathe on their own due to the toxic levels of the drug remaining in the neural tissue. Thankfully with several weeks in the hospital and multiple days of a breathing tube and presser medication this patient recovered. This severe event was under the current guidelines. Increasing Naturopathic prescribing to scheduled substances dramatically raises the risk of harm to Washington residents that rely on these providers for guidance and care. This proposal disregards the training needed to understand the complex interactions between mental and physical health conditions. While psychotropic medications used to treat mental illness can be highly effective, they can also be ineffective or harmful if prescribed incorrectly. Prescribers must be diligently trained to understand how they affect the central nervous system and other organ systems, and how they interact with other medications or conditions such as pregnancy. These medications also need to be used differently across the lifespan. Psychiatric physicians complete over 12,000 hours of rigorous training after medical school, specializing in the treatment of mental health conditions and substance use disorders. Unlike these MD and DO training programs – which must meet the national requirements defined by the Accreditation Council for Graduate Medical Education (ACGME) – naturopath training remains highly variable. As our state continues to battle the opioid epidemic, giving naturopaths authority to prescribe opioids and other controlled substances is irresponsible. Fighting the opioid epidemic means making sure these dangerous drugs are not over-prescribed. While we acknowledge that there is a shortage of psychiatrists in our state, this policy proposal does not address the workforce shortage ahead of us, nor the stigma that patients with mental illness face. Instead, I urge you to consider alternative evidence-based solutions to safely increase access to care, including the Collaborative Care Model, telepsychiatry, increasing the number of psychiatry residency spots, and more. Patient safety must be the driver behind any modification to our health laws and I urge you to oppose this proposal.

Chris Nguyen      Oppose      I am a physician specializing in psychiatry and write with concern about the proposal before you to expand naturopaths' scope of practice. In their applicant report, the Washington Association of Naturopathic Physicians specifically highlights the ongoing mental health crisis as the rationale to expand their prescribing privileges, including controlled substances. Medicine is a complicated science and psychiatric care is much more than just prescribing. This proposal would put vulnerable patients at risk of significant harm. I've spent so many visits with patients trying to negotiate careful deprescription of benzodiazepine, a class of medication that's meant to be used in the short term for anxiety. In the long term, they are addictive, associated with dementia, dangerous with overdose and lethal when stopped improperly. Well meaning prescribers start patients on these medications without clear expectation and boundaries which leads to patients being on increasingly higher doses of these drugs. I was taught this over and over in my training, over 12,000 hours after medical school, specializing in the treatment of mental health conditions and substance use disorders. I worry that if we allow naturopaths, who have variable training, the ability to prescribe these substances it would continue to increase the amount of benzodiazepine dependency in the community. While we acknowledge that there is a shortage of psychiatrists in our state, this policy proposal does not address the workforce shortage ahead of us, nor the stigma that patients with mental illness face. Instead, I urge you to consider alternative evidence-based solutions to safely increase access to care, including the Collaborative Care Model, telepsychiatry, increasing the number of psychiatry residency spots, and more. Patient safety must be the driver behind any modification to our health laws and I urge you to oppose this proposal.

McKenzie Momany, MD      Oppose      I am a physician specializing in psychiatry and write with concern about the proposal before you to expand naturopaths' scope of practice. In their applicant report, the Washington Association of Naturopathic Physicians specifically highlights the ongoing mental health crisis as the rationale to expand their prescribing privileges, including controlled substances. Medicine is a complicated science and psychiatric care is much more than just prescribing. This proposal would put vulnerable patients at risk of significant harm. Naturopaths have limited medical education, and this proposal disregards the training needed to understand the complex interactions between mental and physical health conditions. While psychotropic medications used to treat mental illness can be highly effective, they can also be ineffective or harmful if prescribed incorrectly. Prescribers must be diligently trained to understand how they affect the central nervous system and other organ systems, and how they interact with other medications or conditions such as pregnancy. These medications also need to be used differently across the lifespan. Psychiatric physicians complete over 12,000 hours of rigorous training after medical school, specializing in the treatment of mental health conditions and substance use disorders. Unlike these MD and DO training programs – which must meet the national requirements defined by the Accreditation Council for Graduate Medical Education (ACGME) – naturopath training remains highly variable. As our state continues to battle the opioid epidemic, giving naturopaths authority to prescribe opioids and other controlled substances is irresponsible. Fighting the opioid epidemic means making sure these dangerous drugs are not over-prescribed. While we acknowledge that there is a shortage of psychiatrists in our state, this policy proposal does not address the workforce shortage ahead of us, nor the stigma that patients with mental illness face. Instead, I urge you to consider alternative evidence-based solutions to safely increase access to care, including the Collaborative Care Model, telepsychiatry, increasing the number of psychiatry residency spots, and more. Patient safety must be the driver behind any modification to our health laws and I urge you to oppose this proposal.

Wisam Al  
Jumaili, MD

Oppose

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Amelia Wendt, MD  
Oppose

I am a physician specializing in perinatal psychiatry and write with concern about the proposal before you to expand naturopaths' scope of practice. In their applicant report, the Washington Association of Naturopathic Physicians specifically highlights the ongoing mental health crisis as the rationale to expand their prescribing privileges, including controlled substances. Medicine is a complicated science and psychiatric care is much more than just prescribing. This proposal would put vulnerable patients at risk of significant harm. Naturopaths have limited medical education, and this proposal disregards the training needed to understand the complex interactions between mental and physical health conditions. While psychotropic medications used to treat mental illness can be highly effective, they can also be ineffective or harmful if prescribed incorrectly. Prescribers must be diligently trained to understand how they affect the central nervous system and other organ systems, and how they interact with other medications or conditions such as pregnancy. These medications also need to be used differently across the lifespan. Psychiatric physicians complete over 12,000 hours of rigorous training after medical school, specializing in the treatment of mental health conditions and substance use disorders. Unlike these MD and DO training programs – which must meet the national requirements defined by the Accreditation Council for Graduate Medical Education (ACGME) – naturopath training remains highly variable. As our state continues to battle the opioid epidemic, giving naturopaths authority to prescribe opioids and other controlled substances is irresponsible. Fighting the opioid epidemic means making sure these dangerous drugs are not over-prescribed. I am a perinatal psychiatrist and have specific training in women's mental health. I counsel pregnant and postpartum patients about the risks of untreated psychiatric illness versus the risks of psychiatric medication during this time, and help them weigh their individual situation, risks, and preferences to make an informed and patient-centered decision. To acquire this knowledge, I not only completed 4 years of medical school and 4 years of residency, but also a fellowship program in women's mental health. This level of training and expertise is what is needed for making evidence based and safe decisions for mothers and their babies. If this policy were in place, the lack of training and expertise could lead to dangerous outcomes – for example the naturopath might prescribe inappropriate ADHD stimulant medication doses or in high risk clinical situations -- leading to an increased risk of pre-eclampsia, babies being born early, or being admitted to the NICU after delivery. Additionally, they might prescribe benzodiazepines (e.g. Xanax) inappropriately or at high doses, leading to risks for mom and baby, as well as risks for substance misuse and addiction. Finally, given a naturopath's lack of training in mental health, they could miss one of the largest psychiatric emergencies - postpartum psychosis, which comes with an increased risk of both suicide and infanticide. While we acknowledge that there is a shortage of psychiatrists in our state, this policy proposal does not address the workforce shortage ahead of us, nor the stigma that patients with mental illness face. Instead, I urge you to consider alternative evidence-based solutions to safely increase access to care, including the Collaborative Care Model, telepsychiatry, increasing the number of psychiatry residency spots, and more. Patient safety must be the driver behind any modification to our health laws and I urge you to oppose this proposal.

Lisa Nawei Chen, MD	Oppose	<p>I write to you with a heightened sense of urgency and dismay regarding the proposal to expand naturopaths' scope of practice, particularly the alarming provision granting them the authority to prescribe controlled substances. As a dedicated psychiatrist, I cannot overstate the potential risks and dangers inherent in this ill-advised proposal. The Washington Association of Naturopathic Physicians attempts to justify this expansion by citing the ongoing mental health crisis. However, the idea that naturopaths, with their limited medical education, should be entrusted with the prescription of controlled substances is not only misguided but dangerous. Psychiatric care is a nuanced and intricate field. The proposal disregards the specialized training required to comprehend the complex interplay between mental and physical health conditions. Psychotropic medications demand a level of expertise that naturopaths simply do not possess. Patients can and have died from mismanaged medications and a lack of integration between their mental and physical health treatments. The opioid epidemic remains a critical concern in our state, and granting naturopaths the authority to prescribe opioids and other controlled substances is a reckless and irresponsible decision. We must not compromise patient safety by allowing these potent medications to be wielded by individuals lacking rigorous and specialized training. In the pursuit of patient safety and the overall well-being of our community, I strongly urge you to vehemently oppose this dangerous proposal. It is our duty to uphold the highest standards of medical care and protect vulnerable individuals from potential harm.</p>
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John Wynn,  
MD

Oppose

I am a physician – a Medical Doctor — specializing in Psychiatry. I am writing with concern about the proposal before you to expand naturopaths' scope of practice. In their applicant report, the Washington Association of Naturopathic Physicians specifically highlights the ongoing mental health crisis as the rationale to expand their prescribing privileges, including controlled substances. Medicine is a complicated science and psychiatric care is much more than just prescribing. This proposal would put vulnerable patients at risk of significant harm. Naturopaths have limited medical education, and this proposal disregards the training needed to understand the complex interactions between mental and physical health conditions. While psychotropic medications used to treat mental illness can be highly effective, they can also be ineffective or harmful if prescribed incorrectly. Prescribers must be diligently trained to understand how these drugs affect the brain and other organ systems, and how they interact with other medications or conditions such as pregnancy or heart disease. These medications also need to be used differently across the lifespan. Psychiatric physicians complete over 12,000 hours of rigorous training after medical school, specializing in the treatment of mental health conditions and substance use disorders. Unlike these MD and DO training programs – which must meet the national requirements defined by the Accreditation Council for Graduate Medical Education (ACGME) – naturopath training remains highly variable. As our state continues to battle the opioid epidemic, giving naturopaths authority to prescribe opioids and other controlled substances is irresponsible. Fighting the opioid epidemic means making sure these dangerous drugs are not over-prescribed. Our patients deserve the safety, certainty and reliability of well-trained clinicians who will watch out for their health and well-being. The practice of medicine requires a strong foundation in the basic sciences of chemistry, physics, biology and physiology – which naturopathic education lacks. Psychiatrists undergo rigorous, closely supervised training in the care of hundreds of patients over a 7-year period, after the demanding course of pre-medical studies in college. Following all of this training, board certification by the American Board of Psychiatry and Neurology stands for yet another layer of sophistication and expertise. Naturopathic education offers nothing similar, let alone equivalent. There is a shortage of psychiatrists in our state, but this policy proposal does not address the workforce shortage ahead of us, nor the stigma that patients with mental illness face. Instead, I urge you to consider alternative evidence-based solutions to safely increase access to care, including the Collaborative Care Model, telepsychiatry, increasing the number of psychiatry residency spots, and more, maintaining the world-class standards of training, practice and expertise found in our medical schools and residency programs. Patient safety must be the driver behind any modification to our health laws and I urge you to oppose this proposal. Thank you so much for your time and work on behalf of my patients and all the people of Washington State.

Carol Rockhill, M.D., Ph.D, M.P.H., DF-AACAP, Child and Adolescent Psychiatrist

Oppose

I am a physician specializing in psychiatry. I am writing with my personal opinion, and not on behalf of my employer, whose opinion I don't know on this issue. I write with concern about the proposal before you to expand naturopaths' scope of practice. In their applicant report, the Washington Association of Naturopathic Physicians specifically highlights the ongoing mental health crisis as the rationale to expand their prescribing privileges, including controlled substances. Medicine is a complicated science and psychiatric care is much more than just prescribing. This proposal would put vulnerable patients at risk of significant harm. Naturopaths have limited medical education, and this proposal disregards the training needed to understand the complex interactions between mental and physical health conditions. While psychotropic medications used to treat mental illness can be highly effective, they can also be ineffective or harmful if prescribed incorrectly. Prescribers must be diligently trained to understand how they affect the central nervous system and other organ systems, and how they interact with other medications or conditions such as pregnancy. These medications also need to be used differently across the lifespan. Psychiatric physicians complete over 12,000 hours of rigorous training after medical school, specializing in the treatment of mental health conditions and substance use disorders. Unlike these MD and DO training programs – which must meet the national requirements defined by the Accreditation Council for Graduate Medical Education (ACGME) – naturopath training remains highly variable. As our state continues to battle the opioid epidemic, giving naturopaths authority to prescribe opioids and other controlled substances is not a good idea, given their lack of training and the potential for iatrogenic harm. I see child and adolescent patients in outpatient, Emergency Department, and inpatient settings. We frequently receive referrals or have patients come in whose primary care providers are Naturopathic physicians. Unfortunately, I can personally attest that in my experience, the pharmacology considered and prescribed by Naturopathic physicians is often not what is the evidence-based standard of care. This is not surprising, because as outlined in their own proposal, their curriculums are variable and include a very limited amount of attention to psychopharmacology. For example, 13.5 credit hours of pharmacology at Bastyr, to consider all prescribed medicines across all areas of medicine. The result, in practice, is that although well-intentioned, Naturopathic providers are unaware of the literature about what medicines work for specific indications, the mechanism of action of the medications they would like to prescribe, and interactions with other medicines. I have personally seen negative iatrogenic impacts from prescribing of non-indicated medications from Naturopathic prescribers leading to Emergency Department visits and inpatient psychiatric hospitalizations. While we acknowledge that there is a shortage of psychiatrists in our state, this policy proposal does not address the workforce shortage ahead of us, nor the stigma that patients with mental illness face. Instead, I urge you to consider alternative evidence-based solutions to safely increase access to care, including the Collaborative Care Model, telepsychiatry, increasing the number of psychiatry residency spots, and more. Patient safety must be the driver behind any modification to our health laws and I urge you to oppose this proposal.

Tess Moore,  
MD FAAFP

Oppose

I am a Family Medicine physician and own my private practice in Seattle. Before that I practiced for 10 years at a Community Health Center and included non-surgical Obstetrics and many outpatient procedures. I am a fellow with the American Academy of Family Physicians. In my current practice setting it is much more common that my first 10 years of practice for me to have patients to either transfer to me for care from a Naturopath or be referred to me for medical management of eating disorders. This has been shocking. I have long worked with Naturopaths and understand that their training can superficially be broad enough for primary care, but that they routinely and dangerously miss key information because of lack of any hospital or ER experience, true residency, or volume of patients during training that would make them safe as independent practitioners for medically complex patients or those needing procedures. I do have a great deal of respect for them and their field, but their specialty is not allopathic medicine. I have seen children who annually see an ND as primary care for well visits yet have never had a growth chart or vitals recorded fully. I have had NDs recommend dangerous hormonal regimens including implanted hormones that cannot be removed if there are complications. I have had patients critically ill from malnutrition and eating disorder thoughts be recommended to stop eating major food groups "presumptively" without any testing. I have had NDs believe they could manage refeeding in a patient with type 1 diabetes when management of type 1 diabetics is completely out of their scope, much less in such a medically precarious setting. Not having worked in a hospital means they have not seen what happens when patients get very ill or early indicators of it. They often do not check the right labs, instead ordering very expensive "theoretically useful" but unstudied tests and recommend treatment based on them. I have seen them refer a patient for skin biopsy to me but the lesion they were concerned about was completely benign while missing a much more concerning lesion. The list goes on. They report that they are completing residencies, but I have heard from multiple NDs that this involves 1-2 years of seeing patients in a senior ND's clinic but they may not have any oversight during that time. This is compared to minimum of 3 years of accredited and standardized training past 4 years of medical school and standardized testing, 18 months of which in hospitals and getting oversight of every patient seen. Specialists have another 1-4 years in that field with intensive teaching and oversight. The idea that these are in any way comparable is absurd and misleading to patients. They almost never worked with specialists, yet they hope to be working in fields of gynecology, psychiatry, dermatology, endocrinology and urology to name a few. Additionally, their oversight board is permissive of incredible mistakes without sanction. If these expansion of privileges continue, we are doing tremendous harm to patients and failing them in our credentialing processes and their trust in the field of medicine. I urge you to consider these things when making decisions to expand privileges.

Jacynda Wheeler DO	Oppose	<p>I am a physician specializing in psychiatry and write with concern about the proposal before you to expand naturopaths' scope of practice. In their applicant report, the Washington Association of Naturopathic Physicians specifically highlights the ongoing mental health crisis as the rationale to expand their prescribing privileges, including controlled substances. Medicine is a complicated science and psychiatric care is much more than just prescribing. This proposal would put vulnerable patients at risk of significant harm. Naturopaths have limited medical education, and this proposal disregards the training needed to understand the complex interactions between mental and physical health conditions. While psychotropic medications used to treat mental illness can be highly effective, they can also be ineffective or harmful if prescribed incorrectly. Prescribers must be diligently trained to understand how they affect the central nervous system and other organ systems, and how they interact with other medications or conditions such as pregnancy. These medications also need to be used differently across the lifespan. Psychiatric physicians complete over 12,000 hours of rigorous training after medical school, specializing in the treatment of mental health conditions and substance use disorders. Unlike these MD and DO training programs – which must meet the national requirements defined by the Accreditation Council for Graduate Medical Education (ACGME) – naturopath training remains highly variable. As our state continues to battle the opioid epidemic, giving naturopaths authority to prescribe opioids and other controlled substances is irresponsible. Fighting the opioid epidemic means making sure these dangerous drugs are not over-prescribed. In my previous work at Island Hospital in Anacortes, WA, around 50% of patients I saw for the first time did not need new medication; they needed a more thorough diagnostic evaluation and stopping medications that were either not necessary or were dangerous in current doses or combinations. Most, if not all, of these patients came from mid-level prescribers with many fewer hours of training in psychiatric prescribing compared to a psychiatrist. Adding naturopaths to this mix of psychiatric prescribing will worsen this problem, not improve it. While we acknowledge that there is a shortage of psychiatrists in our state, this policy proposal does not address the workforce shortage ahead of us, nor the stigma that patients with mental illness face. Instead, I urge you to consider alternative evidence-based solutions to safely increase access to care, including the Collaborative Care Model, telepsychiatry, increasing the number of psychiatry residency spots, and more. Patient safety must be the driver behind any modification to our health laws and I urge you to oppose this proposal. Thank you so much for your time and work on behalf of my patients,</p>
Shyler DeMill, DO	Oppose	<p>I would like to make it known that I oppose and recommend against the expansion of naturopathic scope of practice. I do not feel that their education or training are sufficient to allow the increased abilities in their practice. I feel that it will be a risk to the communities and people within those communities. It will not be good for healthcare.</p>
Adam M. Daily, MD MS, Chief Urology Resident,	Oppose	<p>As a urologist I see patients treated incorrectly and harmed from naturopaths within their current scope of practice (classic example young man with persistent infertility because he was treated with testosterone by a naturopath for misguided reasons and who either did not know or did not council him on these risks) and the intended increase in scope of their practice will increase these instances. Given our opioid crisis adding more prescribers with less training into the mix is a risky proposal. Additionally they should absolutely not be allowed to do "minor" office procedures that they do not have the capability to treat/handle the known complications of. This proposal is way outside what is appropriate for the patients of Washington state and will lead to increase in harm for them as well as increasing burn out of physicians who have to handle the complications of naturopaths.</p>

Dr. Paul Aaron DO      Oppose

I am a physician specializing in Anesthesiology and write with concern about the proposal before you to expand naturopaths' scope of practice. In their applicant report, the Washington Association of Naturopathic Physicians specifically highlights the ongoing mental health crisis as the rationale to expand their prescribing privileges, including controlled substances. Medicine is a complicated science and psychiatric care is much more than just prescribing. This proposal would put vulnerable patients at risk of significant harm.

Naturopaths have limited medical education, and this proposal disregards the training needed to understand the complex interactions between mental and physical health conditions. While psychotropic medications used to treat mental illness can be highly effective, they can also be ineffective or harmful if prescribed incorrectly. Prescribers must be diligently trained to understand how they affect the central nervous system and other organ systems, and how they interact with other medications or conditions such as pregnancy. These medications also need to be used differently across the lifespan. Psychiatric physicians complete over 12,000 hours of rigorous training after medical school, specializing in the treatment of mental health conditions and substance use disorders. Unlike these MD and DO training programs – which must meet the national requirements defined by the Accreditation Council for Graduate Medical Education (ACGME) – naturopath training remains highly variable. As our state continues to battle the opioid epidemic, giving naturopaths authority to prescribe opioids and other controlled substances is irresponsible. Fighting the opioid epidemic means making sure these dangerous drugs are not over-prescribed.

While we acknowledge that there is a shortage of psychiatrists in our state, this policy proposal does not address the workforce shortage ahead of us, nor the stigma that patients with mental illness face. Instead, I urge you to consider alternative evidence-based solutions to safely increase access to care, including the Collaborative Care Model, telepsychiatry, increasing the number of psychiatry residency spots, and more.

Patient safety must be the driver behind any modification to our health laws and I urge you to oppose this proposal.  
Thank you so much for your time and work on behalf of my patients,

Amanda Ryder MD      Oppose

As a Family Physician practicing at Family Medicine of Yakima for the last 25 years, I strongly oppose bill SB 5411, which proposes to increase the scope of naturopathic physicians. As an allopathic physician trained in evidence-based medicine, I have a long list of resources that I can use to help guide my answers when patients come in with questions. I use Up To Date, the New England Journal of Medicine, Journal of the American Medical Association and Journal Watch. I can point to specific studies that reveal the risks and benefits of a particular medication or therapy to help my patients manage their medical conditions, and because my office does not accept pharmaceutical gifts and provides no supplements for sale, I can honestly say that the information I provide is free from bias. Many naturopathic offices sell supplements to their patients from which they make a profit, and many do not reveal that these supplements are not tested by the FDA. I do not feel that the training provided to naturopathic providers is adequate to allow them prescriptive authority. Thank you for your attention.

Franklin B Retherford MD	Oppose	<p>I am a retired family physician. I recently became aware of your review of proposed changes in naturopathic scope of practice. I am doubtful that naturopathic physicians in their training have covered vasectomies, sports medicine, stem cell treatment, in office nitrous oxide, or prescribing opioids such as fentanyl and amphetamines. Such authority should be based on specific and focused training, if given at all.</p> <p>Franklin B Retherford MD 602 SW 175th PL Normandy Park WA 98166</p>
Michael Wingren MD, MPH	Oppose	<p>I am a family physician and I have taught naturopathic students at Bastyr University. They get no training in primary care medicine or procedures. Maintaining a distinction between naturopathic consultative health care and primary care medical care serves the WA state public interest.</p>
Trevor Kwan	Oppose	<p>Hello, This email is in response to the request for public opinion regarding naturopath physicians scope of practice. The proposal to allow naturopaths to prescribe Schedule II to V controlled substances should be denied. This would be a complete departure from the practice philosophy of a naturopath who has undergone training to provide therapy using natural remedies. I would like to use insomnia as an example. A naturopath prescribing Ambien for insomnia instead of providing guidance and encouragement on proper sleep hygiene and developing appropriate habits is a substantial deviation from naturopathic medicine. Not only is the natural/non medicinal approach the most safe, but also the most appropriate recommendation. Allowing this scope of practice will increase low barrier access to medications that have high risk and require appropriate risk benefit evaluation. It would seem naturopaths want to increase their scope of practice without additional training. This action is the naturopathic community using healthcare shortages as leverage to expand their scope of practice without training. The potential for these medications to be poorly managed will only further strain the hospital systems and medical providers. If a naturopath wants to increase their scope then they have equal opportunity to pursue the appropriate medical training and licensing to do so.</p>
Sanjay Kubsad	Oppose	<p>Dear WA Dept of Health,</p> <p>I strongly recommend against the proposal to expand scope of practice and privileges of Naturopathic Doctors. Please look towards the training rigor and qualifications required to achieve entrance into and successfully complete medical school (allopathic or osteopathic) when considering the proposal to expand prescription privileges towards ND. Furthermore, look towards the evidence-based practice rooted in heart of allopathic and osteopathic medicine that has advanced the health of this state for the past hundred years. The inordinate focus on mythical healing, Eastern medicine, and unsubstantiated practices rampant in the ND has grave consequences for citizens of WA state if such providers can have privileges and expanded scope of practice.</p> <p>Thank you for your consideration,</p>
Savanna Griffith, DO	Oppose	<p>To whom it may concern,</p> <p>I strongly oppose this proposal by naturopaths.</p>
Murray Rouse DO	Oppose	<p>I strongly agree with the WA Academy of Family Physicians, WAFP, opposing the Naturopathic proposed expansion of practice. "We believe this proposal attempts to place naturopaths on par with primary care physicians in terms of prescribing controlled substances, office procedures, and other services without the equivalent training."</p>

Norah Nguyen, MD  
Oppose

To Whom it May Concern,I do not support the proposal for expansion of scope of naturopathic practice.The proposal states that a significant motivator for this proposed expansion is that there is a shortage in primary care providers. This shortage is not an adequate reason to simply allow providers without adequate training or experience to prescribe and manage these potentially dangerous and addictive controlled substance or perform more complex in- office procedures without adequate prior experience. Surely the situation is not dire enough to forgo thought of patient safety.They go on to compare credit hours in pharmacology between clinician type - not accounting for the type of training such clinic rotations vs classroom - as though the number of credit hours and theory-based learning directly translates to being able to adequately care for a patient with complex pain needs or uncontrolled substance dependencies. My concern is a worsening of the substance use issues as patients flock towards naturopathic clinics which might have looser prescribing patterns. They use testosterone and codeine as examples of success in expanded scope, but these allowances have also lead to more specialized cash pay clinics like naturopathic testosterone clinics that may be providing non evidence based treatments and not “primary care” as they report is their overall goal.Just some thoughts as I read the proposal.

Aimee J. Lee, MD  
Oppose

Hello,

I am a family medicine physician (MD) practicing in Seattle, Washington. I am alarmed and dismayed by the proposed expansion of naturopathic practice to include expanded prescriptive and procedural abilities. This is an extremely unsafe idea and one that could potentially fuel the opioid epidemic we currently struggle with. The training and exposure of naturopathic providers to this medication and its downward consequences is vastly insufficient to make this standard of care. They lack the training and will be unable to deal with the ensuing issues with addiction and withdrawal that many of their patients will inevitably experience. They also are ill equipped to handle an expansion of office procedures which can have serious consequences in the wrong hands. Abortions, vasectomies, and botox for example are all procedures which require significant hands on training and supervision and build upon other skills that they do not have foundational knowledge in. Furthermore, improperly completed procedures will only further the narrative that abortions are dangerous and can lead to life-threatening consequences. This is true with a number of procedures listed and will further lead to distrust of the medical system and confuse and equate the titles of naturopath with doctors and other licensed professionals that are actually able to safely complete these procedures. I stand with the WAFP in firmly opposing SB5411.

Thank you for your time,

Ritu Sarin, MD	Oppose	To whom it may concern, This proposal is not appropriate and approval of this would be a completely unethical move by the state to not protect the citizens of Washington from unsafe medical practices. The people of Washington deserve care from trained professionals in all aspects, naturopath care from naturopath practitioners and medical care from trained medical professionals. No one should be placed at risk as a patient because they don't understand the level of training different professionals have in different areas. They should be allowed to assume the department of health is providing appropriate credentials reflecting the education of medical professionals. A naturopath is not a DO or MD and should not push their scope of practice into these fields.Thank for your attention to this matter
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Amy McCargar-Davis MultiCare, Government Relations Analyst	Oppose	<p>I am writing on behalf of MultiCare Health System to comment on the Washington State Department of Health's sunrise review of naturopathic scope of practice. While MultiCare supports improving access to high quality health care, we oppose the elements of the proposal, submitted by the Washington Association of Naturopathic Physicians (WANP), that would compromise patient safety and quality of care.</p> <p>One of those elements includes expanding naturopathic prescriptive authority to include controlled substances in Schedules II-V, which would include opioids, psychotropic drugs, narcotics, stimulants and sedatives. Schedule II drugs in particular have a high potential for abuse and dependence and there is risk for adverse interactions in the context of specific conditions or when these drugs are taken alongside other drugs. Naturopathic physicians do not have adequate training in pharmacology, addiction medicine or the potential risks associated with prescribing such substances. Allowing naturopathic physicians to prescribe controlled substances would jeopardize patient safety.</p> <p>Another element of WANP's proposal that concerns MultiCare is their desire to update the definition of "minor office procedure" to include primary care services and treatment of minor injuries. Even minor procedures can have complications that must be recognized and properly treated. Naturopaths do not have sufficient depth of training or experience in minor procedures and surgeries to perform them safely.</p> <p>Every patient deserves to receive care from a practitioner with the appropriate amount of training and education. To protect the safety of our patients and community members, MultiCare urges the DOH to oppose expanding naturopathic scope of practice to include prescribing controlled substances and performing minor procedures.</p>
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Sean Brady , DO      Other      With regards to the expansion, I do have some concerns. My most concerning issue is with education for expanding the scope. Will there be some sort of additional training or classes for an individual to be able to receive the expansion? Several schedule IIs are not to be prescribed lightly, and I take a serious ownership of the prescriptions I give. I would want to ensure anyone prescribing them has a similar sense of responsibility and education level to be prudent with those particular medicines. My other concern goes in hand with the first. If naturopaths want to prescribe medication, does that not contradict itself? And what other type of educational background do these individuals receive to project their careers in the direction of a controlled substance? It seems more and more midlevel health providers are wanting to have more liberties. I became a physician because I wanted to be able to see patients and not have restrictions. If someone wants a similar liberty, I think it best to keep education the limiting factor and have medical schools be the funnel for individuals with the ability to prescribe schedule IIs. Thank you for taking time to listen to my comments.

Matt Brignall , ND      Other      I am an ND provider in the Tacoma area with 25 years of experience, and nearly 20 years of experience as a professor in the training program. I am worried that our current scope of practice increases risk to the public in two important ways:  
1) The evidence that Suboxone therapy saves the lives of individuals with opiate use disorder is clear. As more and more ND providers are moving into the FQHC and urgent care setting, it is not acceptable that these doctors cannot prescribe this important medication. My county has not been able to fill the job of overseeing the Suboxone clinic at the local health department for 3 years, in part because I am not allowed to oversee the prescription, even under standing orders from the health officer.  
2) The lack of clear parameters on what can be administered as an intravenous medication allows for providers to inject patients with any item obtained through a compounding pharmacy, even if this item lacks basic safety or efficacy research. We've seen multiple situations of patient harm caused by use of unconventional medications via intravenous route (I've linked multiple examples below). This would be an easy risk to address. I recommend adding a caveat to the ND scope RCW that stipulates that only FDA approved medications can be administered. I also recommend adding a restriction on off-label medication use in patients with a current cancer diagnosis. I think this would effectively address this safety concern, and would prevent patient fraud and abuse.  
Thank you for reviewing my comment. Please reach out if you have any questions.

Allison Moalli      Other      My family has received incredible care from our NP here in Friday Harbor, WA. She has made diagnosis that our traditional MDs have missed. A Dermatology specialist at Virginia Mason thought I was wasting his time with my skin rashes - it wasn't until going to our local NP who listened and addressed my concerns with bloodwork and non invasive treatments that I was finally diagnosed with a gluten allergy. It was life changing - clearing up much more than my skin rashes. My quality of life greatly improved. A Gastroentology physician recently diagnosed me with Celiac Disease - 6 years after my NP told me to stop eating gluten and treated my damaged intestinal tract with herbs and other natural remedies. We still see our traditional medical doctors and assimilate the two models of care for what works best for our healthcare. Our NP uses very gentle interventions and when she sees things happening in our bloodwork or elsewhere that needs to be addressed with traditional medicine she will quickly refer us to a specialist. Both her holistic interventions and referrals have greatly improved our quality of life.

Sandy Jaime,  
Legislative  
Review &  
Analysis  
Manager,  
Health Care  
Authority

Other

The following is the Health Care Authority's (HCA) response to the Washington State Department of Health's (DOH) Sunrise Review request on naturopathic physician scope of practice. We reviewed SB 5411 [2023] and additional materials included in the Washington Association of Naturopathic Physicians' (WANP) request. The bill would change the scope of practice for licensed naturopaths to include, among other additions, the ability to prescribe legend drugs and Schedule II-V controlled substances. HCA does see the potential for this scope change to improve access to care, but retains concerns that it could impact the quality of care particularly absent adequate training for naturopathic providers. If this legislation were to pass, it would have some systems impacts for HCA. Washington Apple Health (Medicaid) billing guides and fee schedules would likely need to be amended to reflect changes. Apple Health pharmacy systems may also need to be updated to allow for billing of certain drugs prescribed by naturopathic physicians that are not allowed under the provider's current scope of practice. Additionally, HCA would need to check if any changes were required in the ProviderOne system. There may be some minimal impacts to our Public and School Employee pharmacy benefits program administered by Moda, but impacts are not expected to be significant. Expanding the scope of practice for naturopathic physicians could have a positive impact for Apple Health clients as it could potentially address health care provider shortages and access to care issues. Apple Health may also see a reduction in cost due to better care coordination, as there would be decrease in duplicative appointments to obtain necessary medications or documentation. Medicaid managed care plans have concerns about the varying amounts of training and education naturopathic physicians receive in pharmacology, specifically with stimulants and controlled substances (as submitted in the Applicant Report by WANP). Controlled substances are prescription medications with higher potential for dependency and misuse with the potential for severe adverse events. These medications require appropriate education, training, and experience in order to ensure appropriate therapeutic levels are prescribed, that patients and their doses are monitored, that drug-drug and drug-disease interactions are mitigated, and that safe tapering may occur for discontinuation. Although HCA does not regulate scope of practice, we likewise have concerns that these extensions of scope would allow naturopathic providers to prescribe controlled substances for which they are potentially not adequately trained. This could lead to a lower level of care quality for our clients utilizing these services. Regardless of the potential for addressing health care provider shortages, we want to ensure that naturopathic physicians caring for our clients have the level of training needed to provide quality care. Conclusion HCA recognizes the potential of this proposal to impact access to care for the Washington residents we serve; however, we do have specific concerns about the quality of care that might result from increasing the scope of practice of naturopathic physicians, if additional training requirements for the expanded prescriptive authority are not required.

Jeffrey L. Evans, MD	Other	<p>Dear committee members, My name is Dr. Jeffrey Evans. I am a urologist that has been practicing in the state of WA since 2006. Our naturopathic colleagues have been trying to expand their scope of practice unsuccessfully since I arrived in this state. In my opinion they are not trying to expand access to care as their argument suggests. I believe the Naturopathic Board is trying to tap into lucrative cash pay business that is bad for patient care and are trying to manipulate the DOH by suggesting there is an access issue. Do we really want less qualified providers prescribing more opiates during an opioid crisis? Injecting cosmetic Botox? Do our citizens want non-surgeons performing invasive procedures. They would bring down the quality of abortion care provided by our states highly trained OB/GYNs and vasectomy care provided by surgically trained urologists. Their 2 years of medical training does not compare with a urologists 9-13 years of training in genitourinary surgical care or an OB/GYNs 8 years of surgical training. Urologists take offense to suggesting that a vasectomy is a "minor" or "non-invasive" procedure in hopes of expanding their scope of care. Last year the Office of the Attorney General ruled vasectomy was NOT a minor procedure. The Naturopath Board is trying again with DOH. They have failed the legislative approach and the regulatory approach previously. The Board is not getting the answer they want and are now trying again with your highly regarded regulatory department. Vasectomy requires an incision on both sides of the scrotum, followed by clipping and cutting out a section of the vas deferens. This structure is very near to blood vessels and nerves. There is significant risk of pain, bleeding or even loss of the testicle(s). I tried to teach a fully trained Naval General Surgeon recently and after trying she realized how hard the procedure is and abandoned learning it. She felt the learning curve is such that only urologists should do them. In my practice of 6 urologists, only 2 of us feel comfortable with the procedure. Would you or your family want a naturopathy performing such a complex procedure? I am sure our gynecology colleagues feel the same about abortion care and the risk of retained products of conception, infection or even uterine rupture. I value the care that our Naturopath colleagues provide and frequently share patients, but we all need to "stay in our lane" to ensure we are providing the best possible care to the residents of Washington state. I appreciate the service DOH provides to WA and was particularly impressed by the policies and practices during the COVID crisis. Thank you for your work, and thank you for considering my comments.</p>
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Samuel Michel, Other  
MD

Dear Sunrise Committee, I am a General Surgeon practicing in Olympia, Washington. I am writing to share my significant concerns with regards to the proposal currently under review to expand the scope of practice for naturopathic physicians. I am particularly concerned with the provision to allow naturopathic providers to perform "minor procedures." As a General Surgeon, I perform a wide variety of procedures of various degrees of complexity including many "minor procedures" in my office. I am also involved in the training of medical students and family medicine residents on how to perform office procedures safely, how to triage patients with more complex needs appropriately, and how to manage minor complications and seek help when necessary. Even the simplest of procedures has a wide range of potential complications that, if not understood by the practitioner, can lead to substantial patient harm or even death. Even "minor" procedures should not be performed by any provider without broad education in anatomy and physiology as well as focused training in how to safely perform these procedures. Any potential effort to increase the procedural scope of any provider must be accompanied by focused training and certification pathways specific to each and every procedure being considered. To do otherwise would be reckless and harmful to the residents of the state of Washington. I would also like to share my concern with regards to the provision to allow Naturopathic physicians to prescribe controlled substances. Increasing the ability of providers to prescribe these medications without adequate education and training in their physiologic impacts and safe principles of use will only worsen our ongoing addiction and overdose epidemic. We as a medical society should be focused on limiting access to controlled substances rather than expanding it. While I recognize that naturopathic physicians play an important role in our medical community and can help fill certain gaps in our existing medical infrastructure, expanding their scope as elucidated in this bill will have disastrous implications for the provision of healthcare in the state of Washington. I would be happy to further discuss my concerns with the committee at any time.

Melissa Chubbuck, MD, Medical Director Home Health and Hospice | MultiCare Health System

I was not able to attend the public policy meeting but do want to offer a comment. While I am broadly a skeptic of naturopathic medicine, I have a nutrition degree from Bastyr and I learned a lot about the ND curriculum while I was there. I do think that NDs in Washington State are qualified to complete the documents/orders described, including POLST forms and hospice orders. In this state we have high standards for the protected title of ND, which is not universally true elsewhere. I would also say that our NDs usually spend more time with their patients than allopathic physicians are able to, and thus they are the best people to have extensive or sensitive conversations and make these determinations in most cases. They may not have the same capability in some relevant areas -- such as prognostication -- that, for example, an internist does. However, I would also say that is true for many MD/DO specialists who are allowed to participate in these activities.

Thomas D. Bird, MD	Other	<p>I have several questions about the pending Naturopathic Medicine legislation:</p> <ol style="list-style-type: none"><li>1. Do we need more persons able to prescribe narcotic controlled substances? The book "Empire of Pain" (Keefe, 2021) documents the misunderstanding and over prescribing of narcotics by doctors and dentists and the resulting harm to patients. Are naturopaths better able to do this? Do we need more prescribers of narcotics?</li><li>2. Is there a "firewall" between naturopaths and the prescribing and recommending of drugs, supplements and medicines such that they do not receive financial rebates or kickbacks?</li><li>3. Does the signing of medical documents and certificates include death certificates, social security disability forms and involuntary admissions to mental health facilities?</li><li>4. The terms "minor office procedures" and "physical modalities" requires more detailed definitions. Does this include biopsies, x-rays, CT's, MRI's, EMG, EEG, ECG? Are naturopaths qualified to perform and interpret such procedures and modalities?</li></ol>
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Sigrid Crompe	Other	<p>I have practiced alternative healing my entire adult life, introduced to it by my family as a child. I grew up in the 60s in health food stores, and my parents weren't hippies, they were German immigrants. While I likely have been blessed with a good gene pool, I do believe that my good health and care decisions have been based on my early knowledge about health and wellness. I choose my diet fairly carefully, though I am not crazy about it. I don't smoke, take drugs except the occasional ibuprofen or Tylenol OTC. I avoid any pharma at all cost because I believe it sets disease in motion unless it is absolutely needed. I have never had a flu shot, instead feeling getting infected is the best way for my immune system to launch a lasting response, and I do not allow myself to put on more than an extra 5# before addressing it. It helps I'm sure to have an inner locus of control. I stay fairly fit and honor my spinal health immensely. I have utilized chiropractic for most of my life for maintenance and to correct anything that may shift from something like when I was rear-ended, or when I'd take a tough fall. I am about to be 69 and recently learned that I have not lost any height and that virtually all vertebrae cushioning is intact except for a couple that are just showing signs of some compression. I completely believe that Western medicine is not taught correctly, that it creates disease and illness and that Pharma plays a role in that. Most seniors who end up in nursing homes come with a gallon Ziploc full of different medicines they are taking. This must cost the state and Feds a fortune taking care of people who are unaware of the options I was raised with. Please look more carefully at naturopathic medicine and hold high standards for those who practice as some are a bit wacky. I believe many more people would consider it over western medicine at some point in their lives if only they knew more about it.</p>
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Melissa Knapp	Other	<p>In response to Senate Bill 5411, I have had very good Naturopathic Physician experience. My NP does not replace my primary care doctor, instead adding services to enhance care for long-term health care for chronic conditions such as my chronic kidney disease. The CKD is now under control due to the services of my Naturopathic Physician.</p> <p>Please contact me if you would like more information.</p>
Bla Mo	Support	<p>I moved to WA state during the pandemic and was surprised to learn that naturopathic physicians have less scope than the ones in Oregon. Please reduce our need to see multiple physicians when our medicines need titrating down. Paying one co-pay is sometimes too hard, and NDs provide much better care than MDs in my personal history.</p>
Megan Gonzales	Support	<p>I write this letter in support of the increased scope of prescriptive rights for Naturopathic physicians. There is a lack of adequate primary care in the state, and indeed the country, with an increase in this scope naturopaths, who are mid-level practitioners, will have the ability to provide better and more adequate care to the people needing these services. As the administrative specialist at a small clinic with two dually licensed practitioners (both naturopaths with other healthcare licenses/ mental health licenses) this increase would help them better serve their patients. Of course, individuals who are not interested in prescribing the scheduled pharmaceuticals would not have to prescribe them.</p>
Dr. Cyn Kotarski ND (she/her), PDA Medical Director,	Support	<p>I work with patients who are predominately at the intersection of homelessness and high behavioral health including substance use disorder. Frequently, my patients request medication assisted treatment (MAT) for opioid use disorder, often in the form of buprenorphine and Suboxone. Under current regulations, I am forced to not only inform them that even as their designated primary care physician I can not prescribe them this gold standard treatment.</p> <p>I can only offer referrals to other, often extremely over-capacity, clinics where they sometimes are told appointments can be weeks out. I have, on occasion, been able to recruit a Nurse Practitioner to work with us specifically to prescribe for these patients which frankly only confuses them more that they are referred by their physician to a nurse to receive their medication.</p> <p>I have even been accused by some patients as intentionally withholding MAT from them, which frankly breaks my heart that they come so far in their recovery journey to ask for help only to learn that they will not be receiving the medication they need and also that the denial lands for them as an exercise of discrimination due to stigma (which of course it is not).</p> <p>As you are likely aware, are currently experiencing a fentanyl epidemic and folks experiencing homelessness are some of the most affected and simultaneously the most stigmatized and vulnerable.</p> <p>Washington state has numerous primary care providers in their licensed Naturopathic Physicians that are being underutilized in my opinion due to out-dated legislation that has failed to keep up with the profession and the public need.</p> <p>I love my work and I love living in Washington but I do sometimes find myself considering leaving, as many of my fellow NDs have, to move to a state where we can practice with the full scope of our medicine in order to best serve my patients.</p> <p>Thank you so much for your time in reading my message. I realize it is coming in just under the deadline wire today, which I do hope you can understand and give some grace as it is true that as providers, we are often last to do our part to advocate for the very legislation we need to do our jobs. I tend to focus more on my patients than law. I take responsibility for my own inaction and offer my commitment to advocate and also to listen. Please feel free to contact me if you think there is anything else I provide in support of this legislative update request SB 5411.</p>

Stephanie Prima	Support	<p>I see THREE naturopaths, each who helps me with different areas of my health, and ALL who are listening to me and helping me more than any allopathic physicians do. And the sad thing is that I have to pay for each of these and the tests they request out of my pocket because Medicare won't recognize them or their orders. In my experience, allopathic physicians just want you to take drugs and be done with it. Each of the NDs I see are extremely knowledgeable – in fact, more knowledgeable about the body's systems than the MDs who seem to only have very limited or narrow knowledge. I fully trust my 3 NDs, and obviously, they have improved the quality of my life or I wouldn't be paying them out of pocket for their care. I would rather have who I refer to as my "internal" ND as my primary care physician but with current laws, that doesn't get me anywhere. But her care DOES get me to state of better health, as do the other 2, one who specializes in more physical medicine such as Musculo-skeletal-facial movement, and the other who is also an acupuncturist. They look at the whole picture, the whole body instead of prescribing drugs that are counter to other issues I'm dealing with. I fully trust and appreciate my NDs and hope that their scope can be expanded, to the benefit of people like me who have been poorly treated by standard medicine. Thank you for requesting comments on this very important subject. Please add my email address to the list of updates on this subject.</p>
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Martha Wysocki	Support	<p>I whole-heartedly support the expanding scope of Naturopathic Medicine in Washington. I have been under a Naturopath's care, Dr. Mandy Gulla, on Friday Harbor since 2019. She was able to assess, diagnose, and treat my medical issues when my allopathic doctors had given up on me. Dr. Gulla diagnosed &amp; is treating my thyroid issues, my tick-borne illnesses, and my IBS, this is not an all inclusive list.</p> <p>I finally have quality of life back after decades of illness which led to my inability to work. She has helped me tremendously with proper diet and well.</p> <p>I recommend to everyone to seek a naturopath's opinion regarding well-being. She took into consideration all of my symptoms and listened closely to what other treatments have been tried.</p>
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Dr. Marnie Frisch	Support	<p>I have been a primary care doctor in WA state since 2007. I have been practicing in Olympia since 2009. During this time, I have built up a primary care practice that employs 3 other primary care doctors and we serve thousands of patients. We mainly take health insurance, INCLUDING MEDICAID. I think we have built an important health clinic in this town, despite the hardships of keeping a private clinic open ( no large hospital systems to support us). While I do not WANT to have to prescribe codeine for pain...all these other medications that we are limited from prescribing are really starting to impact my work, and those of other "primary care doctors" that do NOT have primary care privileges. It is more and more exhausting to coordinate care for patients that need it, as specialists are more and more hard to get into. Nor should these require a specialist to prescribe what OTHER primary care doctors prescribe. This was apparent this week when people need simple refills that I cannot provide, or they have to wait 6 months for something I really should be able to help with. I actually have a TON of faith in the WANP ( our state board) to provide the correct continuing education so that we are all staying up to date on current standards of care. And really, those NDs who do NOT practice Primary care, are just not going to prescribe these medicaitons. So, as i would love to still be part of any group you have to help work on solving this issue of lack of Primary care doctors in this area, and access to specilaists- NDs should certainly be fully counted in this area- not just in name only. Thank you so much for your time and thoughtfulness in this area. We are here to put patients' health and wellness , and safety first.</p>
Patricia Upchurch	Support	<p>I strongly urge you to support expanding Naturopathic Scope in Washington. I trust my Naturopathic Doctor and find that she works well with my primary physician. Together, they have provided excellent medical care for me.</p> <p>I support expanding Naturopathic Scope in Washington. I trust my Naturopathic Doctor. She has been very helpful in many situations using low force interventions that have improved my quality of life. I have found her to work smoothly with my primary medical doctor. The two modalities work well together and can accomplish synergistically with each other. I encourage you to support this expansion.</p>
KEELY BUTTERS	Support	<p>I am writing to support SB 5411. I believe the bill is important as it supports patient choice. I prefer seeing a provider with a naturopathic background and want for my provider to be able to provide all services and be able to write prescriptions within the scope of their license same as any other primary care physician. Thank you. Keely Butters Seattle Resident</p>



Kelsey Klausmeyer, ND	Support	<p>Dear WA Department of Health, thank you for considering SB5411 which would expand the scope of naturopathic physicians. I am writing you today as both a practicing clinician with a primary care practice in full support of SB 5411. I am a naturopathic physician and practice in an outpatient clinic, the Institute Complementary Medicine, located on the Swedish Cherry Hill campus in Seattle. I carry a full patient panel and for many of my patients I am the assigned primary care provider with their insurance plan. It is a daily occurrence in my practice where the limitations on the naturopathic scope are negatively impacting my patients. Most commonly patients are seen at the end of the work week or over the weekend in the Emergency Department and then I received the notes with the instructions to continue a medication plan or therapy. This becomes problematic when there are controlled substances that are outside of my scope of practice and often times in these patients it is a very time sensitive issue. In these cases I have to work over the weekend or after hours, call in favors to my colleagues within other health systems in order to connect my patients with care. None of this is covered by insurance. It delays necessary care, makes patients suffer needlessly and duplicates office visits. I would like to highlight a couple situations that have happened in my practice. Please consider my patient with an acute kidney stone. He was seen in the emergency department. The stone is small enough that he is discharged to pass it at home. He is prescribed initial therapy with just a couple of doses of an opioid, and he is sent home with the instructions to follow up with his primary care provider. This recent situation occurred on a weekend and the patient ultimately had to return to the Emergency Department for additional care, as I was unable to prescribe the necessary medication. I would also like to share a patient's story, who had a terminal cancer diagnosis, primary lung cancer that had metastasized to her brain. She was treated at Fred Hutch. I served in an adjunctive capacity supporting her with Naturopathic modalities and was really a vital part of the care team as I saw her frequently either in clinic or at her home. As she progressed in her illness her medical treatment became more complex and she was less able to remember the many details. For a variety of reasons, there was a lapse of her pain medication prescription. She suffered unnecessarily for several days trying to get a hold of the prescriber's office. The severity of pain set her entire treatment back tremendously and could have been prevented had I been able to provide a short term prescription. Recently I had a new patient establish care for treatment of hypertension and anxiety. His hypertension had been resistant to many pharmaceuticals but was responding well to naturopathic treatment plus one medication (he initially presented on three). The patient was very happy with the results for his blood pressure and asked me to help with the anxiety. This patient had been taking high doses of a benzodiazepine daily for several years. In order to safely treat this patient I would need to be able to deprescribe this medication, gradually weaning him off the benzodiazepine as naturopathic treatment brought on board. Lastly, I would like to say that I am also licensed in Arizona and California as a naturopathic physician. The scope of practice in both of those states includes broad prescriptive authority for controlled substances (California requires a practice agreement with a medical doctor, which I have). My point in sharing this is that Washington is not the first state to consider allowing expanded prescriptive authority and there is a track record of safety in several other states. I previously served as the President for the WANP (2017-2023). It is no secret that the Washington State Medical Association (WSMA) opposes expansion of scope for NDs. This stance has not changed despite great efforts by the naturopathic profession to expand residencies and improve naturopathic continuing medical education. Please note that the continuing education requirements for the profession were recently updated to better align with a broader prescriptive authority. The profession is committed to the safety of the public.</p>
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Jenée DesLongchamp	Support	<p>I am a primary care patient of Dr. Jennifer November, ND. Dr. November has been a wonderful PCP and has made me feel more heard and cared for than any MD I've ever been treated by, however, I have often been frustrated by the limited scope in which she can provide care chemically. I suffer from a diagnosis of Generalized Anxiety Disorder and am prone to high anxiety episodes and panic attacks and have requested an Ativan prescription for which Dr. November had to refer me out to another provider to obtain. My preference is to see Dr. November as she has been my trusted provider for the last 6 years, and it would benefit my health in many ways if she could prescribe meds that fit my needs that go beyond natural supplements. Please strongly consider passing this bill for patients just like me who have benefited so much from having a naturopathic provider and would like to find all of my primary health support in one place.</p>
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JoAnn Dechant ND	Support	<p>I am writing this letter to ask you to support the sunrise review regarding SB 5411, which is the current bill to help modernize the naturopathic profession's scope of practice in Washington State.</p> <p>I am a naturopathic physician serving a community health center in Washington state since 1996. As a primary care provider with many long established patients, I would like to have the ability to sign common public health forms that primary care providers routinely are expected to sign, such as disability forms. It is a hardship both on patients and the other providers I work with when I have to refer patients to a colleague to complete paperwork that I could do myself but don't have the current authority to do so. The patient must retell their story, and the provider has the task of trying to gather all that data and complete paperwork for someone they are newly meeting. This is highly inefficient, and patients don't like it either.</p> <p>Also, the proposed scope expansion is meant to clarify the language around minor office procedures. This would be beneficial in that we as providers should be confident that we are able to do the procedures that are within our scope, and not holding back on doing these procedures that we are trained to do due to a concern that perhaps the language in our scope is unclear.</p> <p>In addition, this scope expansion would help fill the critical need for more providers equipped to treat patients struggling with opioid use disorder, by allowing NDs to prescribe buprenorphine.</p>
Carol Clifford	Support	<p>My naturopath is capable and trained in providing many of the controlled substances and minor office procedures that myself and other patients have to be referred out of the clinic for. Please support Senate Bill 5411 in order to decrease our burden of unnecessary referrals and long wait times with alternate providers who don't know us like our naturopaths.</p>
Michelle Brown-Echerd ND	Support	<p>I am in support of scope expansion for Naturopathic Physicians. This includes expanding prescriptive rights for controlled substances. I attended medical school in Portland, OR and received my 1st ND medical license in Oregon in 2015 a few years prior to receiving my Washington state license. I am surprised that so many medications we were educated on and prescribing to patients while in clinic are unable to be prescribed currently in Washington. For Naturopathic Physicians who may feel the need to review medications and learn about new prescriptions there are many free to low cost CME available and they are more numerous than ND natural medicine courses, as many are designed for all types of healthcare providers in the US, in order to help maintain a standard of care when providing care for many ailments.</p>
Dr. Semanie	Support	<p>Thank you for your time. I believe it is imperative that NDs are able to safely assist their patients in medication management. Scope expansion will allow NDs to more fully step into the role they are already providing as Primary Care Physicians.</p>
Barnali Basu, 2nd year, ND student	Support	<p>I request a sound evaluation of the Bill SB 5411 and pass the bill for following reasons:</p> <ol style="list-style-type: none"> <li>1. Increase access of health care across diverse populations</li> <li>2. Improve continuity of care</li> <li>3. Reduce redundant and unnecessary expenses for patients, healthcare workers, insurance carriers, taxpayers and allowing Naturopathic doctors to provide full spectrum of care they are trained and licensed to provide.</li> <li>4. Proper and full utilization of Naturopathic Doctors will significantly reduce healthcare costs of the country which is one of the highest in the world !</li> </ol>

Mike Winstead	Support	<p>I heard there may be an opportunity for my ND to wider prescriptive authority with Senate Bill 5411. I have had an outstanding patient experience as a patient of Neighborhood Naturopathic in West Seattle. I've received evidence-based care with far more effective doctor-patient interactions than I've had as a patient of the military medical system (I'm a veteran) or in the time post-military when I was a patient of UW's traditional system. If today I needed to see a traditional MD for care outside of my ND's scope of practice, I expect that I'd experience a gap in care given the difficulty that I as a patient would have to guess at how much context (medical data and care methodology) to share between the professionals. It seems odd to me that if NDs have the same care and training as MDs and DOs that they wouldn't be able to prescribe the full scope of medications: my ND has far, far more context in being able to effectively determine what I need because I have so much more face time with my ND and also would be set to fully integrate a wider range of prescription drugs into a full-spectrum care plan. My time in the military left me with a great opportunity to service my country, but also ambient anxiety that follows me every day. If my ND's prescriptive authority extended to medications such as those to help regulate anxiety, I would certainly engage with them to help regulate this aspect of my life just like I already do for things like GI health and illness care. This veteran would have more days of calm after dedicating my early adulthood in service. All this to say: I support the Senate Bill 5411 to expand my NDs prescriptive authority.</p>
Corrine Canavan	Support	<p>I want to comment on the care I have received from naturopaths. After struggling for almost a year with symptoms that several doctors could not identify I saw a naturopath. She was able to discover what was wrong and treat me. Her approach of looking at overall health and the whole body has made a huge difference in my life. I would like to see the scope of practice for naturopaths expanded in the State of Washington. They fulfill a very important and critical need for patients. Their approach to patient's care is different and therefore a viable and much needed option for patients.</p>
Catherine Jones, ND, MS, LAc	Support	<p>I am writing in support of SB5411 because I think it will benefit the quality of healthcare that the people of Washington want and deserve. The extra time and care that naturopathic physicians give to their patients is invaluable and is so rare in these times. Broadening the scope of practice for NDs is not only fair to the patients and the NDs but allows for even more time to discuss health and wellness, prevention and maintenance. Although I am in South Carolina I am still licensed as an ND in the state of Washington. Thank you for your time and consideration.</p>
Jacqueline Powers	Support	<p>As a past patient of Sage Health in Factoria, WA I am sending this note to support their effort for SB 5411. Naturopathic medicine offers medical care that is broader than medical practices of western medicine. We should be able to get all of our medical care from naturopathic doctors and having them write prescriptions would be very helpful. I support the Senate Bill 5411 proposal.</p>

Benjamin McBride      Support      I wanted to share my positive experience with naturopathic care and express my support for expanding Naturopathic Scope in Washington.

My Naturopathic Doctor has been a game-changer for my health. They've taken a thorough and holistic approach, addressing issues that were previously overlooked. The low-force interventions they've used have made a real difference in my quality of life.

I was diagnosed with ADHD by a traditional doctor, and I'm hopeful that expanding Naturopathic Scope in Washington will give me the option to receive treatment from my Naturopathic Doctor, making it more accessible and patient-friendly.

I believe that widening the scope of naturopathic practice in Washington will provide more diverse and effective healthcare options. I hope you'll consider the positive impact this can have on patient well-being.

Thanks for your time and consideration.

Maria McBride      Support      I am writing to express my strong support for the proposed sunrise review and expansion of Naturopathic Scope in Washington. As a patient who has benefited significantly from naturopathic care, I believe in the importance of acknowledging the safety and efficacy of Naturopathic Medicine and fostering the valuable contributions of Naturopathic Doctors (NDs) to healthcare. My trust in naturopathic medicine stems from the exceptional care I have received from my Naturopathic Doctor. Under their guidance, I have experienced the most comprehensive healthcare I have ever experienced in my life. My ND has diligently listened to me and then tested me for various issues that have persisted since my childhood. Thanks to their expertise, I can now address these long-standing concerns, alleviate symptoms, and undergo appropriate testing by specialists, all made possible through my ND's insightful referrals. This contrasts my previous experiences with traditional MDs who dismissed and minimized my symptoms solely based on my age. I want to emphasize the success of low-force interventions employed by my ND, which have significantly improved my quality of life. These approaches have addressed my immediate concerns and provided sustainable solutions, promoting overall well-being. As someone diagnosed with ADHD at the age of 31 by a traditional MD, I am hopeful that the expansion of Naturopathic Scope in Washington will provide me with the option to receive my treatment from my Naturopathic Doctor. This alternative is especially significant for me since it means the expense of another out-of-pocket doctor visit which causes me currently to ration my medication due to insurance constraints. Access to naturopathic care for managing my ADHD would greatly enhance the continuity and effectiveness of my treatment. Expanding the scope of naturopathic practice in Washington will undoubtedly benefit many individuals seeking alternative and complementary healthcare options. Please consider the positive impact that such an expansion can have on patient outcomes and the overall health landscape. Thank you for your time and consideration. I trust that your decisions will continue to prioritize the well-being of patients and support the growth of diverse and effective healthcare practices.

Alma Britschgi	Support	<p>I support the expansion of Naturopathic medicine in Washington state. Dr. Mandy Gulla of Living Medical Arts and her team have cared for me in ways I do not think conventional Dr. Office would. They are so thorough with testing, always care and gentle. Giving so many different opinions of treatments, from what food to supplements to pharmaceuticals to body work. I think that it is very important to have access to this type of care for any one that is looking to take better care of their body mode and spirit. Thanks for your time, I hope this helps the efforts.</p>
Rebecca Watson	Support	<p>I support SB5411. I believe my Naturopath should have the ability to prescribe medicines that they've been trained to prescribe, and sign off of all necessary forms as my PCP. This will minimize obstacles and delay to me getting the care I need from my primary care provider. Thanks for your time and consideration,</p>
Alex Crenshaw	Support	<p>I am a patient of a Naturopathic Physician and I wanted to submit my comments in support of Senate Bill 5411. My ND is my primary care provider and they should have full prescriptive authority. NDs have the necessary training to prescribe these medications and it is both frustrating and redundant that I have to seek a different type of medical professional to fill medications that are not currently within ND scope. This expanded scope would help lower my cost of seeing multiple primary care-level medical providers and provide me with a significantly better patient experience.</p> <p>I believe this expansion would be a huge value to our community and to patient care. Please support Senate Bill 5411.</p>
Elias Kass, ND	Support	<p>I am a naturopathic physician specializing in pediatrics in Seattle, WA. I have been in practice since 2010 and manage a panel of roughly 1000 patients. Though my scope is adequate to care for most pediatric concerns, my inability to prescribe and manage ADHD stimulant medications poses a significant challenge for my patient families. These families need to find – and wait for – a separate provider strictly to manage the child's ADHD medications. There are long waitlists for these providers, and they frequently do not participate in public or private insurance networks, meaning increased out of pocket costs for the families, as well as duplicated efforts in reporting histories, redoing assessments, and attending extra visits, when all of that could have been handled in house with their primary care provider who has known them (frequently) since birth. Our practice is their medical home. ADHD is a common problem, and it makes sense for it to be managed in the primary care setting. The AAP agrees:</p> <p>Given the nationwide problem of limited access to mental health clinicians, pediatricians ... are increasingly called on to provide services to patients with ADHD and to their families. In addition, the AAP holds that primary care pediatricians should be prepared to diagnose and manage mild-to-moderate ADHD, anxiety, [and] depression." [1]</p> <p>I have availed myself of many trainings in ADHD diagnosis and management over the years, through the AAP, CHADD, and others. The only missing piece is the ability to prescribe the appropriate medications.</p> <p>SB 5411 would also ensure that as their primary care provider, I can sign their sports physicals forms and any other in-scope documentation that requires medical input.</p> <p>Thank you for your support of comprehensive primary care.</p>

Sera Mattson	Support	<p>Hello. I am writing to express my support in expanding naturopathic scope of practice to better align with that of other statute-recognized primary care providers in Washington. Please support Senate Bill 5411. I have had a naturopath as my primary care practitioner for the last 20 years and depending on my insurance coverage, I have elected to continue to pay to see her out of pocket because I have yet to meet another medical doctor with her level of care. To quote the statement made by the Washington Association of Naturopathic Physicians, "Naturopathic doctors have been given the incredible responsibility of serving patients as primary care providers, yet they have restricted access to the tools routinely used in a primary care setting. This creates undue burden on and confusion for patients and the healthcare system as a whole and should be remedied through a change in regulation and an update to naturopathic scope of practice."</p>
Evan Oakes, MD, Vice President of Clinical Care	Support	<p>I am writing this letter to ask you to support the sunrise review regarding SB 5411, which is the current bill to help modernize the naturopathic profession's scope of practice in Washington State.</p> <p>HealthPoint was one of the first federally funded organizations in the country to employ Naturopathic physicians as part of our multidisciplinary care teams. We are also an important provider of primary care for many patients receiving Medicaid coverage in the State of Washington, as well as refugees, asylee seekers, and many of the uninsured residents of our state. Operating primarily in King County, we serve a large proportion of underserved patients who struggle financially and suffer from many additional physical, mental, and psychosocial factors.</p> <p>Over the years, we have found that our patients greatly benefit from having access to naturopathic services. Our naturopathic physicians serve as primary care providers and consultants for many of our patients. Since being included in Washington State Medicaid programs, more patients than ever seek NDs as their PCP in our clinics. The number of NDs participating in Washington Medicaid plans grows every year, and now numbers over 450, representing over 30% of NDs licensed in WA state. With the well-known primary care provider shortage, NDs are stepping up to help fill that need. I have been impressed with their competence and compassion in how they interact with and serve our patients here at HealthPoint.</p> <p>The proposed prescriptive scope expansion and clarification of minor office procedures language, along with the ability to sign common public health forms will help improve the service that they offer our patients. I agree that the current limitations on their prescriptive authority risk duplications of services between our NDs, MD/DO, and other advanced practice clinicians. Unnecessary visits or time spent consulting unnecessarily within busy primary care settings drains resources and costs patients, insurers, and the State valuable time and money, and can result in suboptimal care for patients. In addition, this scope expansion would help fill the critical need for more providers equipped to treat patients struggling with opioid use disorder, by allowing NDs to prescribe the life-changing medication buprenorphine.</p> <p>In my opinion, expanding naturopathic prescriptive authority along with the other changes proposed makes sense. NDs have been safely managing full prescriptive authority with all legend drugs and the controlled substances testosterone and codeine preparations since 2007. Our NDs are well-trained and have been valuable members of our care teams for over 20 years. I recommend that you support the sunrise review and SB5411.</p>

Judith Steurich	Support	<p>Please accept this particular Public Comment: Naturopathic physicians should be granted broader scope to match that of other primary care providers in Washington. We have the premier school for naturopathic physicians, Bastyr University, right here in Washington. At this school, many of the naturopathic physicians choose to stay here in Washington to practice. They have spent four years in rigorous classes getting a naturopathic physician's degree. Many of these former students of Bastyr University also have residencies lasting 1-2 years at Bastyr Clinics in Washington. It is time to ensure that they receive fairness from the State Legislature with regard to their duties and pay.</p>
Nikki Hunter	Support	<p>Thank you for the opportunity to share my thoughts and experience relating to the Sunrise Review process on Senate Bill 5411 (1). This concerns the proposed expansion to the scope of practice of naturopathic doctors (NDs), to address a shortage of primary care providers (PCPs) and manage the opioid crisis. NDs are already acting as designated PCPs; therefore, they are a natural extension of primary health care. I argue that NDs are being underutilized for this purpose with the current legal limitations in place on prescriptive authority. There appear to be different classes of PCP, with different rights and responsibilities. I had previously assumed that Washington state's designation of NDs as PCPs was basically equivalent to that of other designated primary care providers, and at least that of ARNPs and Physician's assistants. This assumption was challenged when I chose a provider who happened to be an ND as my primary care provider during a serious health crisis. During treatment, I discovered the limitations on NDs, specifically in terms of prescriptive authority, which necessitated that I involve a second PCP. My ND could order diagnostic X-rays or ultrasounds, but could not prescribe the appropriate pain relief, or even an antidepressant. This necessitated explaining to another doctor at a separate clinic the history, potential diagnoses, and anticipated actions of my ND, with regular follow-ups to manage ongoing prescriptions, while I was in a vulnerable position. I chose to put up with this situation in order to continue seeing my ND. I argue these limitations are inefficient and outdated, such as compared to the rights of NDs in Oregon state under their naturopathic formulary. I observed the situation was also, in effect, professionally demeaning, as it took important aspects of basic care out of the hands of my provider. While I acknowledge the complexities regarding the details, NDs cannot be efficient physician extenders if patients require a second physician, not even for some kind of oversight, but to act as a duplicate PCP. I submit we should narrow this gap to achieve the stated goal of efficient access to primary care and increase the number of first-point-of-care providers to address the opiate crisis. I find the counterargument to an expansion of scope on the basis of the naturopathic focus on drug free or self-healing process to be missing a key point: this perspective on healing does not preclude interventions which stabilize or provide initial treatment for an ill patient. Nor does it automatically imply a barrier to having or obtaining a comprehensive education in medicine or pharmacology. A study in Oregon run from 2011-2014 showed that "among all opioid-related hospitalizations (N = 7366), the ND was the prescriber in only 29 cases (0.66% of all opioid prescriptions by NDs, with no significant difference from the MD rate of 0.69%)" and "no opioid-related deaths in patients last prescribed opioids by an ND" (2). We should look further into the long-term data from Oregon in making this decision. The intent of any type of medical care should be to restore the body to a normal state of function and to manage the gaps in that function as needed, which includes providing pain relief in certain instances. I understand that NDs rely on the concept of a therapeutic order when evaluating and treating patients as they present, with high force interventions and synthetic symptom relief as necessary for stabilization (3). This is followed by a focus on the reestablishment of the body's natural systems. I find this a more compelling motive for an expansion of prescriptive rights than the accusations of a twisting of naturopathic principles to justify gaining increased market share.</p>



Alissa Haslam	Support	Hello, I see a naturopath as my primary care physician and support SB5411 to increase her authority over matters that other PCPs have, and that match her training.
Emer McKenna, ND	Support	
Dr. Joy Nauman	Support	I am a Primary Care physician practicing in Eastern Washington. In our area, we have a critical need for Primary Care. By expanding the scope of practice for Naturopathic Physicians, we can fill an enormous gap in coverage, particularly with mental health medications. ADHD diagnosis and treatment is a significant part of my practice and research. It is a significant hardship as I am unable to prescribe necessary medications. At this time, our community does not have access to mental health providers who can assist with medication management. This is a significant disservice to our community.
Shelley Malcolm	Support	<p>I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state.</p> <p>I believe that this bill represents a positive step forward in healthcare by aligning the scope of practice for Naturopathic Physicians with their extensive training and legal recognition as primary care physicians. Allowing them to prescribe medications routinely prescribed by primary care providers, as seen in other states like Oregon and Vermont, can contribute to better healthcare outcomes for our community.</p> <p>As a patient of a Naturopathic Doctor, I trust my doctor to prescribe needed medications safely and appropriately. Being able to have all of my needs met by my Naturopathic primary care doctor would help to alleviate the burden of needing to see multiple providers, and greatly benefit patients across the state.</p>
Jeffrey Brusseau	Support	<p>My ND is my primary caregiver, yet there are numerous RX that he cannot prescribe for me. This is wrong and needs to change.</p> <p>Please change this law so I can get the medical support I need from my dr.</p>
Stina Lane-Cummings	Support	Hello, naturopaths have been my family's primary physicians for over twenty years. I support SB 5411 because my naturopath is fully trained in providing many of the services that currently have to be referred out of office. Please approve this bill in order to decrease our burden of unnecessary referrals and long wait times...health care needs to be *more* streamlined, not less streamlined!
Heather Larson	Support	My naturopath and primary care provider (PCP) has extensive training and should be recognized to fully practice as any PCP does. This would help to reduce costs and increase access to care for me, my family, and Washingtonians in general.
Daniel Amen, MD	Support	I am writing in support of increasing Naturopathic Physicians' scope of practice in WA state. I am a psychiatrist who has been practicing since 1989 and have worked with ND's in our integrated care model. From my experience working closely with several Naturopathic doctors on our team at Amen clinics I would fully support increasing their scope of practice to be able to prescribe controlled substances as this is well within their training and knowledge base. This would help patients with decreased cost burden, timeliness and continuity of care.



Paola Venturini Hubert Support I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state. I believe that this bill represents a positive step forward in healthcare by aligning the scope of practice for Naturopathic Physicians with their extensive training and legal recognition as primary care physicians. Allowing them to prescribe medications routinely prescribed by primary care providers, as seen in other states like Oregon and Vermont, can contribute to better healthcare outcomes for our community. As a patient of a Naturopathic Doctor, I trust my doctor to prescribe needed medications safely and appropriately. Being able to have all of my needs met by my Naturopathic primary care doctor would help to alleviate the burden of needing to see multiple providers, and greatly benefit patients across the state.

Lisa Guard Support I am writing to you today to express my support to expand Naturopathic Doctors' scope of care in Washington State.

The benefits of seeing a naturopathic Doctor have had many benefits for my health care and quality of life. With low force interventions I have had wonderful health results which have bettered my life.

My cholesterol is under control and my ratio is over the top great! My blood pressure is fantastic for the first time in years. All with minimum drug interventions.

I truly feel cared for and listened to with my Naturopathic Doctor.

Please grant the current application submitted for approval for these hard working Naturopathic Doctors.

Guido DeSantis Support I am a patient of Dr Kleusmeyer, a naturopathic in Seattle.

Dr Kleusmeyer is treating me for high blood pressure and weight issues that have been caused by the last 3 years of constant elevated stress, overwork and anxiety.

About 12 years ago I could recover from a similar pattern also with the help of minimal doses of xanax (alprazolam), to ensure I could sleep and heal with resting.

He is currently not able to prescribe xanax due to license restrictions. I believe this is making treatment and recovery unnecessarily difficult. I will have to find another doctor.

I don't see why there should be specific restrictions for certain types of doctors and not others.

I understand concerns of substance abuse, but these concern apply to every doctor not just ND.

Actually, the ND and their patient are less prone to be drug oriented.

Diana Aguilar Support I'm a patient of Sagemed since 2018 off and on due to medical health insurance policies for the state of Washington. I'm allowed 6 visits per year. I strongly recommend to allow Naturalpathy to be able to prescribe medication for anxiety depression etc. that is medically necessary for there well health being in the State of Washington the patients makes that decisions. Please can you approve that in State of Washington.

Kim Bruder	Support	<p>I am writing on behalf of myself, my husband &amp; the many caring Naturopaths across Washington State.</p> <p>This is our story...</p> <p>My husband became extremely ill in the 1990s with what was later diagnosed as Lyme Disease. He went from a strong physically fit young man to struggling to get out of bed for months. Before he was diagnosed we went from one MD to another. All of them were dismissive and went as far as suggesting he see a psychiatrist. A family friend recommended we seek out a Naturopath. We finally went to see a Naturopath and she immediately took up his cause &amp; did extensive research on Lyme disease. She treated him in with a broad spectrum of modalities. We saw improvement within weeks. Mainly it helped his esteem to know someone was on his side &amp; trying to help him instead of shame him. It took a couple months but he is still symptom free 30 years later.</p> <p>Fast forward to me 6 years ago, I struggled with low energy and sudden debilitating headaches. It started to worsen to the point that I was having cognitive issues at age 55. I sought help from a MD that my insurance would cover &amp; they told me it was most likely just menopause and to get used to it. They prescribed me pain meds which made me even more tired. I was getting worse rapidly. I soon found I couldn't handle loud noises, crowds or extensive interaction without being bed ridden for days after. I was getting really depressed to a dangerous level.</p> <p>My husband suggested I find a naturopath. I found an incredible one here in Friday Harbor. After a my first round of blood tests I was diagnosed with Lyme disease, rocky mountain spotted fever and was severely anemic. I underwent treatment which included iron infusions that immediately brought my energy back and my headaches went away. Who knows how long I was anemic &amp; the MDs never tested my iron levels. This same naturopath pushed me to go get an ultrasound that showed I had a grapefruit size cyst on my uterus that was causing excessive bleeding and most likely my anemia. She did not give up on me until I was well. She was so caring &amp; followed up with me to make sure I was remaining healthy.</p> <p>I cannot say enough positive statements about the care we have received from Naturopaths. They save lives. They listen when modern doctors don't. We were spiraling downward quickly and modern medicine was not throwing either of us one iota of a life line! They mocked us if anything. Very sad state that our medical industry is in these days.</p> <p>Please allow and expand Naturopathic Care in Washington. We will all be better off for it!</p>
Celeste	Support	<p>As a student of naturopathic medicine that was pursuing an MD route my entire adult life, I completely believe that NDs should have a wider scope. We care for our patients and treat each individually. We want to reduce the side effects and give our patients long vital lives. We will learn to know more from our patients than post MDs can or will have the capacity for. Because that is why we are here. We are doctors. We put in the work. We should be allowed all the tools available to people practicing medicine.</p>
Mary Lynn and Tom Brooke	Support	<p>Without going into detail about my personal health, I can tell you that if it wasn't for my Naturopath, I honestly don't think I would be here today to tell my story. My Naturopath has done more for me than all the Medical doctors I have seen in my life. It's cruel that medicare won't cover them. Naturopaths aren't controlled by Pharma, so when they prescribed something, it something specifically for me and my issue and there's science to back it up. It's a shame that the medical field has chosen money over humans.</p>

Lauren Potts, ND, MPH, MSM	Support	<p>My name is Lauren Potts and I am a licensed naturopathic physician in WA state practicing primary care and serving primarily pediatric patients and adult women. I am in support of Senate Bill 5411 because it would directly affect my ability to provide primary care services to my patients on a regular basis. One example of how this bill will benefit the patient population I serve is by allowing me to prescribe and monitor stimulants for my patients with ADHD. Access to prescribing health care providers has been incredibly challenging throughout the pandemic, particularly for my patients who are on Medicaid.</p> <p>Specialists are referring back to the patient's primary care doctor for medication management, and while I am licensed as a primary care doctor and follow AAP guidelines for screening throughout infancy, childhood and adolescence, this is one area where I am not permitted to serve my patients.</p> <p>Additionally most PCPs will not see a patient for adjunctive care for medication management, therefore I am urging my patients, many of whom I serve their entire families and have trusted and knowing relationships with, to transfer care so that their child can have greater access to a medication that is first line treatment for a common medical condition.</p> <p>Senate Bill 5411 is fundamental in increasing access to needed medical care for so many families under the care of naturopathic physicians and will better enable us to serve our patient's needs more appropriately and result in a decrease of delay of care.</p>
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Leslie Fiedler, Student of Naturopathic Medicine, anticipated graduation June 2025	Support	<p>I am a doctoral student at Bastyr University studying naturopathic medicine. My hope is to work as a primary care provider after graduation, and I am therefore very interested in working in a state that recognizes and supports the primary care role by ensuring that patients are not penalized when seeking primary care from a naturopathic physician. Without full recognition given by the scope expansion in this bill, patients are required to seek additional care and providers to get some of their primary care needs met, even though NDs are fully trained to provide this care. This leads to additional cost for patients and healthcare payers (the state, insurance carriers), duplication of healthcare services, and compromised continuity of care. With the shortage of primary care providers that the state and nation faces, it is not in the best interest of patients, providers or healthcare entities to require duplication of services. In the State of Washing, naturopathic physicians are an important part of meeting the population's primary care needs - it is important from the point of view of addressing the shortage of providers and also because many patients desire a primary care provider with specialized training in prevention and minimal force interventions. This bill helps to ensure that NDs can fulfill that role without hindrance.</p>
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Dr. Brandilyn Binstock      Support      I am writing to you as a naturopathic doctor (ND), having completed four years of post-graduate residency clinical training and now being in my fifth year of clinical practice. I am requesting an expansion of the ND scope of practice given the role of NDs as primary care providers in the state of Washington.

During my residency training, I worked at HealthPoint Community Health Centers for two years. Working alongside MDs, DOs, NPs and PAs, it was very clear to me how my limited scope reduced efficiency, efficacy and quality of care.

Regarding efficiency and quality, most of my patients prefer to receive all of their care through me as their primary doctor, though many times there is a need to seek additional primary care services when an indicated therapy is outside of my scope. At HealthPoint CHC, I often had to seek out other providers to refill a chronic medication that was outside of my scope or prescribe a new, short term medication, even though I have been trained in the management of these medications. NDs are not legally able to help patients taper off of pain medication, benzodiazepines or higher force sleep medicine. NDs also cannot see patients for suboxone management, which limits my impact in addictions medicine.

I am well-educated in all of the above practices that are outside of my scope, as this training is part of our medical program and I regularly attend primary care continuing education through the University of Washington.

Please consider my experience and approve for NDs to have a full scope expansion to better match the ND to the scope of all other primary care providers in the state of Washington.

Tiffany Bloomingdale, ND, CYT-200      Support      I am writing as both a WA-state licensed Naturopathic Physician, as well as the patient of a Naturopathic Physician. I am a resident of the Burien neighborhood where my spouse and I both see Naturopathic Physicians for our primary care needs. We enjoy the benefits of their expertise in natural therapeutics, pharmacologics and collaborative care with specialists (in our case, this includes MDs in endocrinology, maternal fetal medicine and gastroenterology). The competence and conscientiousness of our naturopathic providers positions them well to have an expanded scope of practice. My family's naturopathic physicians are part of a wider community of naturopathic providers who value patient safety, access to healthcare and health equity. In conclusion, I request your support of SB5411 - allowing Naturopathic Physicians to be part of the evolution of healthcare in WA state in a meaningful way as well as subject to well-established regulations that will ensure the safety of Washingtonians from day one.

Jean Hung, ND, FABNP      Support      The increase in medication scope is crucial for pediatric naturopathic physicians who work with the ADHD population.

I am a licensed naturopathic primary care physician and completed a two-year CNME-accredited pediatric residency program. I am also board certified in pediatrics by the Pediatric Association of Naturopathic Physicians. I do ADHD assessments as well as med management in my private practice. Due to limitations in medication scope with controlled substances, I am unable to manage any stimulant medications for this population and have to refer out, often to psychiatric nurse practitioners or physician assistants. This delays critical treatment for patients in an area I am more than comfortable in managing.

It is a disservice to these patients and their families in this population if the medication scope expansion for ND's is not immediately expanded.

Selena Eon, ND	Support	<p>I'm an actively practicing naturopathic doctor.</p> <p>I went into this profession with the understanding that we could practice largely equally to a primary practice MD. This has proven false. In my job I frequently run into problems because my scope of practice is inadequate for what my workplace needs me to do. I work for the Puyallup Tribe, in a clinic allied with the Indian Health clinic (PTHA) run by the Tribe. Many of our clinic patients need us to be able to do everything their PTHA doctors do, but with a different focus. They trust us. To support naturopathic doctors, we must increase our scope so we have the same rights and responsibilities as an MD. SB 5411 is a good start.</p> <p>I'd also like to comment that we need our continuing education system to be fixed so we can get appropriate CME that suits the needs of practitioners with a broad practice like me.</p>
Tim Shannon, ND	Support	<p>I'm a licensed Naturopathic Physician PCP. I used to practice in Oregon. There, they accept ND's as PCP's as well. However, in Oregon your PCP license automatically gives you the full breadth of care needed to provide primary care. SB 5411 will INCREASE quality access while reducing costs writ large. I hope you will support this bill's passage.</p>
Christie McNabb	Support	<p>My name is Christie McNabb and I'm currently in the Naturopathic Medicine program at Bastyr. I will be graduating in 2025 and plan, at this time, to practice in primary care.</p> <p>One thing not many people realize is that our training is as rigorous, thorough and expensive as our conventional medicine counterparts. We come out of school fully able to treat the majority of care complaints and concerns that patients present to their PCP. The bonus of our medicine is that we are also considering the whole person and helping them implement prevention strategies, which lessens their incidents of disease and complication over time, as well as alleviates the system of the overburden of caring for chronically ill people.</p> <p>Unfortunately, despite the extensiveness of our training and credentialing, we are still being treated as "adjunctive" care in terms of scope and pay parity. This concerns me as a soon-to-be graduate considering where and how I want to practice. To keep pace with the expanding legislature in the greater US and to retain quality graduates who will actively work to fill doctor shortages, Washington needs to seriously consider expanding the scope of NDs as well as addressing pay parity issues w/ insurance companies.</p> <p>As we see in other states where qualified graduates find more ample employment elsewhere, the future of Washington is dependent on retaining professionals. Our economy, education systems, healthcare and more are threatened when we lose doctors to competing states.</p> <p>In short, NDs are more than qualified for the scope expansion requested and they're doing equal work to their conventional medicine counterparts so pay parity is necessary. I, along with many other students, will be eagerly watching to see how Washington decides to honor our training and skill level.</p>

John Donald, LAc.	Support	The expansion of Naturopathic scope of practice enables naturopathic physicians to practice the comprehensive primary care they are trained and licensed to provide as primary care physicians. Increasing numbers of naturopathic physicians are working or seeking work in community and tribal health systems, providing primary care to diverse and traditionally underserved populations. Naturopathic doctors truly shine in these settings with their focus on prevention, lifestyle intervention, and whole person care. However, patients who seek out naturopathic primary care often come in on many pharmaceutical medications - some of which are not currently in naturopathic scope of practice. This leads to patients suffering because they need to maintain care with secondary providers to manage prescriptions that are routinely managed in the primary care setting. This duplication of care creates undue burden on the patient and the system, increasing costs (both to patients and to insurers/Medicaid) and often delaying necessary care. In worst case scenarios, patients must be referred to already-stressed emergency departments for care that could be easily provided by a primary care physician. The COVID-19 global pandemic highlighted the need for highly competent primary care providers, and naturopathic physicians can and should be allowed to help meet this need.
Samantha H	Support	I see a naturopath as my primary provider and they know me best therefore, I feel that they should be able to fill out any necessary documentation I might require, and prescribe me medications that I need for any medical condition.
Heidi Hoglan	Support	Please pass SB5411. My family sees a Naturopath and it is frustrating that they cannot prescribe my daughter's ADHD medication, and that we have to spend extra money to see a separate specialist.
Eva Miller, N.D.	Support	I am a Naturopathic Physician and am in support for bill 5411 - I have been in practice for 18 years and to have full scope will allow me to manage all aspects of primary care and have the ability to wean my patients off of controlled substances by being able to taper them slowly which would be my goal if it did not seem they needed it or if there was a safer alternative.
Randal Dahl	Support	I have wanted a naturopath as a primary doctor. Please pass this bill.
Kimberly Leeper	Support	<p>I am in strong support of NDs having the ability to prescribe medicines that they've been trained to prescribe, and to sign off on all necessary forms as a PCP. This will minimize obstacles and delays in getting care that is needed.</p> <p>My naturopathic physician has extensive training, knows patients well, and should be recognized to fully practice as any PCP does. This would help to reduce costs and increase access to care for me and many others in WA State.</p> <p>Please support Senate Bill 5411!</p>
Carole Guizzetti	Support	<p>I'm writing in support of passing SB5411:</p> <ul style="list-style-type: none"> <li>• I support my ND having the ability to prescribe medicines that they've been trained to prescribe, and sign off of all necessary forms as my PCP. This will minimize obstacles and ensure me getting the care I need from my primary care provider.</li> <li>• My naturopath is capable and trained in providing many of the controlled substances and minor office procedures that myself and other patients have to be referred out of the clinic for. Please approve this bill in order to decrease our burden of unnecessary referrals and long wait times with alternate providers who don't know us like our naturopaths.</li> </ul>
Erika Ramberg	Support	My naturopath has extensive training and should be recognized to fully practice under this setting, as any PCP does. This would help to reduce costs and increase access to care for me and many other Washingtonians. Please approve Senate Bill 5411.

Michelle Smith	Support	<p>Please support Senate Bill 5411! • I see an ND as my primary care provider (PCP). I support my ND having the ability to prescribe medicines that they've been trained to prescribe, and sign off on all necessary forms. • My naturopath has extensive training and should be recognized to fully practice under this setting, as any PCP does. This would help to reduce costs and increase access to care for me and many other Washingtonians. • My naturopath is capable and trained in providing many of the controlled substances and minor office procedures that myself and other patients have to be referred out of the clinic for. Please approve this bill in order to decrease our burden of unnecessary referrals and long wait times with alternate providers who don't know us like our naturopaths.</p>
Susan Aylesworth	Support	<p>I support naturopathic care!!</p> <p>It was the Naturopath that found out why my 5-year-old son had chronic ear infections. 5 infections within 9 months. It was food allergies. 27 years ago we had to private pay for this service. It was \$700 out of pocket by the time we were done. That included office visits and blood-allergy test for foods. Eventhough we were a one-person working income, it was money very well spent!</p> <p>During this time, Our regular, pediatric-medical doctor, who taught at Children's Hospital, looked right at my son and said he didn't have food allergies and referred us to an ear doctor. The ENT specialist we saw recommended ear tubes.</p> <p>A friend recommended a naturopath. After seeing the naturopath and changing his diet, there were no more ear infections!</p> <p>My infant grandson went to two medical doctors, Childrens hospital and 3 naturopaths for painful digestion. After several months, the 3rd naturopath figured it out. It was fruit sensitivity. Once he had fruit removed from his diet, his digestion has been great!</p> <p>I truly believe naturopaths take a deeper look into the root cause of illness to correct the issue. One naturopath told me, if I have to keep coming back, he wasn't doing his job.</p>
Charm Miller-Davis	Support	<p>I am supporting Senate Bill 5411 which allows natural paths to sign health care documents and be treated as primary care providers.</p>
Katherine Suchland	Support	<p>I regularly see a naturopathic doctor as part of my treatment for breast cancer. My naturopath is capable and trained in providing many of the controlled substances and minor office procedures that myself and other patients have to be referred out of the clinic for. Please approve this bill in order to decrease our burden of unnecessary referrals and long wait times with alternate providers who don't know us like our naturopaths.</p>

<p>Alison Bradywood, DNP, MN/MPH, RN, NEA-BC, Executive Director, Washington State Board of Nursing</p>	<p>Support</p>	<p>Naturopathic Physician Scope of PracticeA proposal by the Washington Association of Naturopathic Physicians(WANP) to increase the scope of practice of naturopathic physicians (Chapter 18.36A RCW –Naturopathy and Chapter 246-836 WAC – Naturopathic Physicians). We are providing the following WABON comments on whether the proposal meets the criteria in chapter 18.120 RCW. Meets Criteria:Materials were reviewed by Board (WABON) staff and Advanced Practice Nurse interested parties. There was a comparison of ARNP preparation to other providers in pharmacology credits (p10). This comparison did not include the pharmacology background completed in baccalaureate education of all nurses. We would respectfully ask for corrections to this comparison table so the representation of ARNP education preparation is accurate. The continuing education hours required for all providers who prescribe opioids is a one-time 4 hour course. New prescribers of opioids may require more continuing education preparation depending on the individual provider. We also found it would be helpful if there was more clarity around the definition of office procedures.After careful consideration of these factors, it was determined that providing full prescriptive authority and an increase in minor office procedures to naturopathic physicians may increase overall access to primary care in the state of Washington. This proposal meets the criteria for change in scope of practice outlined in RCW 18.120.</p>
<p>Dr. Blasi, ND LAc EAMP</p>	<p>Support</p>	<p>I am in support of increased scope while still demanding it be contingent on access CE rules that include better access to conventional content (as the new rules currently do not). This is for SB 5411 for naturopathic scope expansion.</p> <p>Happy to be available for further comment or discussion.</p>
<p>Linda Kodama</p>	<p>Support</p>	<p>I support Naturopath to be able to prescribe control substances and increase additional services.</p>
<p>Leesa Tucker</p>	<p>Support</p>	<p>Please consider expanding the scope of practice for naturopathic physicians! We need naturopathic Dr.s in our community!</p>
<p>amy mcmaster</p>	<p>Support</p>	<p>I support my ND having the ability to prescribe medicines that they've been trained to prescribe, and sign off of all necessary forms as my PCP. This will minimize obstacles and delay to me getting the care I need from my primary care provider.</p>
<p>Doreen Manibusan</p>	<p>Support</p>	<p>My little family comes to you today to ask for Senate Bill 5411 to be passed. I come to you as a parent of an autistic child whose primary provider is a naturopathic doctor and who's been caring for him since birth. This bill would allow and help her to give my son the best care needed without having to go to be seen elsewhere due to she is unable to do what's necessary because of what her license fo practice as a naturopathic doctor. We are a family that wants him to receive the care that he deserves and needs.</p>



Stephanie Fife	Support	<p>I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state. I believe that this bill represents a positive step forward in healthcare by aligning the scope of practice for Naturopathic Physicians with their extensive training and legal recognition as primary care physicians. Allowing them to prescribe medications routinely prescribed by primary care providers, as seen in other states like Oregon and Vermont, can contribute to better healthcare outcomes for our community. As a patient of a Naturopathic Doctor, I trust my doctor to prescribe needed medications safely and appropriately. Being able to have all of my needs met by my Naturopathic primary care doctor would help to alleviate the burden of needing to see multiple providers, and greatly benefit patients across the state.</p>
Greg Shiffler	Support	<p>My naturopath is capable and trained in providing many of the controlled substances and minor office procedures that myself and other patients have to be referred out of the clinic for. Please approve this bill in order to decrease our burden of unnecessary referrals and long wait times with alternate providers who don't know us like our naturopaths.</p>
Linnea Westerlind	Support	<p>I support my Naturopathic doctor being able to prescribe medications. My Naturopath is my primary care physician and she does an amazing job taking care of my health needs!</p> <p>Please support SB 5411.</p>
Brie Woodruff, DNP, ARNP, FNP-C	Support	<p>As a DNP and colleague of Naturopathic Doctors, I fully support them. NDs have extensive training that should allow them to practice within their full scope in Washington state, including prescribing medications and signing off on forms (such as home health). NDs provide CRITICAL access to primary care, which is in high demand in Washington state. Patients are often waiting 12-16 weeks to establish with a new PCP, and limiting NDs scope creates further barriers to patients accessing care.</p> <p>Please support Senate bill 5411 in order to decrease the burden of unnecessary referrals and long wait times.</p>
Mike Taylor	Support	<p>I grew up going to a traditional Western Doctor, and still utilize such services for acute care. However, some years ago I started seeing a Naturopath as my primary care doctor, and find they provides much more comprehensive care.</p> <p>In my experience, for primary care, a traditional doctor treats only the symptoms, but a naturopath looks holistically at your entire health, and offers reasonable solutions for better overall health. They are not afraid to use prescription medicine when needed for more acute health issues, but offer more detailed diet/exercise/supplement treatments for more minor health issues.</p> <p>I still go to urgent care for more serious injuries or immediate health concerns, where it makes sense that they would only need to treat the symptoms in the moment; but for primary care, where the doctor should be looking at your overall health, I find a naturopath to provide much better care, and should be allowed to provide all of the resources as any other primary care doctor.</p>

Samantha Nakhoul Manjarres	Support	Hello, I am writing to support SB5411. Since I started seeing an ND, my whole approach to health and well-being has improved. NDs have an important holistic view of care, and that has had a very positive impact on me. My naturopath has extensive training and should be recognized to fully practice under this setting, as any PCP does. This would help to reduce costs and increase access to care for me and many other Washingtonians. Please approve Senate Bill 5411. I support my ND having the ability to prescribe medicines that they've been trained to prescribe and sign off on all necessary forms as my PCP. This will minimize obstacles and delays my getting the care I need from my primary care provider.
Holli Margell	Support	I support my naturopath having the ability to provide many of the controlled substances and minor office procedures that myself and other patients have to be referred out of the clinic for. Please approve this bill in order to decrease our burden of unnecessary referrals and long wait times with alternate providers who don't know us like our naturopaths.
Heidi Robel, ND, LAc, PC	Support	I am a Naturopathic physician in Yakima, WA serving as a primary care provider to the area. Without the ability to prescribe controlled substances, we are having to refer patients to outside providers to an already overburdened healthcare system in the Yakima Valley. Yakima is lacking in both primary care and speciality providers which makes it difficult for our patients to find a provider seeing new patients that can refill important medications for anxiety, ADHD, insomnia and so forth. With the scope expansion, our patients will not have to be burdened with establishing with a second provider to fill these medications, we will have the ability to refill or discontinue these medications when medically appropriate and will be able to continue to offer full service primary care to our patient population. I appreciate your consideration in expanding our scope.
Melinda	Support	I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state. I believe that this bill represents a positive step forward in healthcare by aligning the scope of practice for Naturopathic Physicians with their extensive training and legal recognition as primary care physicians. Allowing them to prescribe medications routinely prescribed by primary care providers, as seen in other states like Oregon and Vermont, can contribute to better healthcare outcomes for our community. As a patient of a Naturopathic Doctor, I trust my doctor to prescribe needed medications safely and appropriately. Being able to have all of my needs met by my Naturopathic primary care doctor would help to alleviate the burden of needing to see multiple providers, and greatly benefit patients across the state.

James Chandler	Support	<p>I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state. I believe that this bill represents a positive step forward in healthcare by aligning the scope of practice for Naturopathic Physicians with their extensive training and legal recognition as primary care physicians. Allowing them to prescribe medications routinely prescribed by primary care providers, as seen in other states like Oregon and Vermont, can contribute to better healthcare outcomes for our community. As a patient of a Naturopathic Doctor, I trust my doctor to prescribe needed medications safely and appropriately. Being able to have all of my needs met by my Naturopathic primary care doctor would help to alleviate the burden of needing to see multiple providers, and greatly benefit patients across the state. I've been seeing a Naturopathic Doctor for approximately 20 yrs now with excellent success on a wide range of health issues. I have the utmost confidence in my Naturopaths ability to address my health needs with appropriate treatments that pertain to me. There's been situations when regulations/laws have restricted my Naturopathic Doctor from prescribing me a medication that could treat me appropriately. The current system forces me to schedule an appointment with an M.D. to write the exact same prescription my Naturopath wanted to prescribe me. This scenario has delayed my treatments, doubled my travel expenses, doubled my negative impact on the environment and more than doubled my health care costs.</p>
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Jennifer Lehr	Support	<p>I am in support of expanding the Naturopathic Scope in Washington. I had been seriously ill with Lyme disease for many years. The Naturopathic Doctors I worked with were very helpful and knew much more about my illness than traditional doctors.</p> <p>Currently, I am working with a Naturopathic doctor who is highly knowledgeable and helping me continue to improve my health.</p> <p>The options they offer regarding health treatment are a necessary component of a healthy life.</p>
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Lorinda Sorensen ND, LAc	Support	<p>am writing to show my support to increase the scope of practice of naturopathic physicians (Chapter 18.36A RCW – Naturopathy; Chapter 246-836 WAC – Naturopathic Physicians) licensed in Washington State. One thing this would do is expand naturopathic prescriptive authority to include controlled substances in Schedules II through V of the Uniform Controlled Substances Act as necessary in the practice of naturopathy. The public would be well-served by having access to ADDITIONAL competent and attentive physicians with full authority to prescribe necessary medications and to sign health care related documents that require a physician's signature. Naturopathic doctors would rarely start a patient on a controlled substance unless truly indicated, as the controlled substance prescriptions will remain a last resort whenever possible. But allowing naturopathic physicians to prescribe is in the best interest for the patient, who would not have to make other appointments, which could prolong pain and discomfort. The scope of practice naturopathic doctors in the states of Washington are seeking in the current bill is already in place in Oregon, where I also am licensed, and Vermont. Our neighbors to the south in Oregon have a greater scope even though the practice of naturopathic medicine has been regulated in Washington State since 1919 – longer than in any other state in the country. It's time Washington take a lead in supporting patients assess to ALL types of healthcare. Additionally, naturopathic physicians licensed in Arizona can legally prescribe controlled substances in Schedules III through V, plus morphine in Schedule II and any other drugs that have been reclassified from Schedule III to Schedule II since 2014; those in California are legally permitted to prescribe controlled substances in Schedules III through V under the supervision of a physician or surgeon; and those in New Mexico may prescribe all controlled substances in Schedules III through V except for benzodiazepines, opiates, or opiate derivatives. This bill also enables naturopathic physicians to sign and attest to any documents or certificates that any primary care provider is routinely expected to sign; update defining language under “minor office procedures” and “physical modalities”; and update the RCW to reflect that our profession is now regulated by an established board rather than by the Office of the Secretary of Health (effective 2011). I feel moving forward to increase the scope of practice for naturopathic physicians is an important step for the public. People are waiting months to establish with primary care providers in the Seattle, Vancouver, near where I practice - and even longer to establish with specialists. This delay in patient care and the lack of prescriptive rights has the potential for harm, and incongruent with my profession goals of providing care to all people no matter where they are at in the healing journey. .</p>
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Roni Mazzella	Support	<p>I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state. I believe that this bill represents a positive step forward in healthcare by aligning the scope of practice for Naturopathic Physicians with their extensive training and legal recognition as primary care physicians. Allowing them to prescribe medications routinely prescribed by primary care providers, as seen in other states like Oregon and Vermont, can contribute to better healthcare outcomes for our community. As a patient of a Naturopathic Doctor, I trust my doctor to prescribe needed medications safely and appropriately. Being able to have all of my needs met by my Naturopathic primary care doctor would help to alleviate the burden of needing to see multiple providers, and greatly benefit patients across the state.</p>
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Dr Teresa  
Richter,  
Naturopathic  
Physician  
President,  
Washington  
Association of  
Naturopathic  
Physicians  
(WANP)

Support

This is my public comment on the Sunrise review for Naturopathic physicians SB 5411. I am a naturopathic doctor in Washington state. I am an independent practice owner and solo practitioner in my practice. My practice is primarily primary care medicine. Patients seek me out as a primary care physician and find me on their insurance companies websites as a provider. Patients often ask me after seeing me if they can list me as their primary care provider and in quite a few cases, I have to say: yes, Naturopathic physicians are defined in Washington state statute as primary care physicians, however, I have to inform you that you are taking medication X and the state of Washington does not allow me to prescribe medication X. I recommend you also maintain your other provider so that they can manage medication X for you. Immediately that patient has lost confidence in me as a provider and they get a confused look on their face. This conversation has a negative impact on my practice in multiple ways, this patient wants to see me as their primary care provider, however, I just had to tell them I cannot provide all the same level of care as their allopathic medical provider. In addition to the immediate loss of confidence, now this patient is duplicating care, costing their insurance, possibly medicaid, and themselves extra money for something that could have been handled in one visit with a provider that is defined as a primary care physician. Second, it limits this patient's access to care because they may not be able to see the other provider in a timely manner due to shortages. It is a burden of extra time and money, this patient has to find time for another appointment when they can get one, possibly take time off from work more than once, pay an additional copay for a visit with a second doctor. Third, patients that are seeking out naturopathic medicine are often looking to reduce or get off of their medications. Without the authority to prescribe the medications they are coming in with, I am also unable to help de-prescribe them by helping to give them smaller and smaller dosages to wean off a medication. I also can't make any recommendations about doing so. Many patients are seeking out naturopathic medicine because they want a doctor that spends extra time with them, listens to them and learns about them. They want a doctor that has other solutions besides medications. Due to the extra time spent with patients, and behavior and lifestyle modifications that naturopathic medicine heavily focuses on, naturopathic physicians are in a great position to help with the opioid crisis, treating opioid use disorder and helping patients get off opiate medications to use other modalities and safer substances for pain management. Frequently, naturopathic physicians are trying to reduce the amount of medications patients are taking, however, sometimes medications are necessary and we have to be able to do what is best for the patient. Sometimes we have to start with medications and can improve their other habits to improve their overall health and reduce their need for medications. Mental health issues have been on the rise since COVID, and that is another area where there are incredible shortages of providers. For some patients having the appropriate treatment for their anxiety attack or being able to get proper help with sleep when nothing else has worked can be the difference between life and death. Naturopathic physicians are appropriately trained with more didactic hours of education than conventional medical schools. Naturopathic physicians also receive clinical training before graduating. It is safe for naturopathic physicians to be managing these medications and some could argue even more so due to the extended amount of time spent with patients, getting to know so many aspects of their lives and behaviors. Naturopathic physicians tend to be more conservative and thoughtful when prescribing these high force medications especially if there is an effective alternative. Naturopathic physicians can help save the state money on healthcare, can help fill the healthcare shortage gap that has grown significantly larger since COVID and can help with opioid use disorder as well as getting more patients off of medications. I recommend that the scope of practice for Naturopathic physicians be expanded to match all others that are listed as primary care physicians and am in support of SB 5411.

Robert Lightman Support I'm writing to express my support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in WA state. I believe that this bill represents a positive step forward in healthcare by aligning the scope of practice for Naturopathic Physicians with their extensive training and legal recognition as primary care physicians. Allowing them to prescribe medications routinely prescribed by primary care providers, as seen in other states like Oregon and Vermont, can contribute to better healthcare outcomes for our community. I personally use a Naturopathic doctor and find their extensive knowledge along with bent towards applying natural remedies first, offers me the best balance of healthcare options. I also feel that medical professionals should be allowed to offer therapeutic options IF they have done their research and offer informed consent to patients by providing materials, research and verbal understanding of both pros and cons. No medical professional should just be blindly prescribing or forcing medical therapies onto their patients. Naturopathic doctors should be able to prescribe needed medications safely and appropriately. Being able to have all of my needs met by my Naturopathic primary care doctor would help to alleviate the burden of needing to see multiple providers, and greatly benefit patients across the state.

Ellesa Hunter Support I am a long time patient of naturopathic doctors. I get wonderful, thorough care from them. Unfortunately because I am self employed, my only choices of insurance are through the affordable care act. I have not been able to have naturopaths covered under my plan and I would very much like to. Thank you, Ellesa Hunter LMT

Ian Dugan Support I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state.

I believe that this bill represents a positive step forward in healthcare by aligning the scope of practice for Naturopathic Physicians with their extensive training and legal recognition as primary care physicians. Allowing them to prescribe medications routinely prescribed by primary care providers, as seen in other states like Oregon and Vermont, can contribute to better healthcare outcomes for our community.

As a patient of a Naturopathic Doctor, I trust my doctor to prescribe needed medications safely and appropriately. Being able to have all of my needs met by my Naturopathic primary care doctor would help to alleviate the burden of needing to see multiple providers, and greatly benefit patients across the state.

Susan Breu Support I have been seeing a naturopath in addition to my PCP for approximately 17 years! They're wonderful doctors and focus more on good health choices and natural ways to care for our bodies!!Especially at this point in time good doctors are hard to come by!Please support my naturopath!

Kim Hansen,  
ND

Support

As a Naturopathic Physician in Washington State, I am in support of Senate Bill 5411. This would offer a tremendous opportunity to expand our scope and provide greater access to care.

Primary care physicians are in high demand in Washington State. Several of my current patients are waiting to establish with primary care physicians which can take several months in the Seattle area. Others are only able to see their primary on an annual basis due to the high demands of their practice, leaving them without follow up care and support throughout the remainder of the year. This bill would help us better serve the community by being able to meet this primary care physician shortage and ensure that patients are receiving competent care by ND's who have had the training to provide full spectrum care. Without this expansion in our scope, we are limited in what we can do to help these patients, requiring them to see multiple providers to have their prescriptive needs met vs one. Naturopathic Physicians are considered primary care providers in Washington State - this bill will allow us to fully take on that primary care role.

This expansion would be particularly helpful when it comes to managing behavioral health concerns. The demand for behavioral health has increased dramatically since the onset of the Covid-19 pandemic in 2020. By increasing our scope, we can better serve the community by offering and managing these life-saving medications to those in need.

To ensure competency in our expanded scope, Naturopathic Physicians in Washington state are required to undergo 15 hours of continuing education in pharmacology every 2 years which supports our efforts to increase our prescriptive authority. Naturopathic medicine schools have been prepared for this expansion and have been training our upcoming doctors to be competent in providing this level of care.

Thank you for your time and consideration. I look forward to being a part of the primary care shortage solution in providing greater access to care for all.

Noryang Yeshi, Support  
ND

I am a naturopathic physician practicing primary care in Pierce County, Washington. I reviewed the proposal to increase our scope of practice and agree with the statements presented by the WANP. Our practice is heavy in primary care, and we serve a large population of people on Medicaid. We have been seeing an uptick in patients with mental health conditions who are unable to access psychiatric care. We also have many patients established in our clinic who are on stimulant medications prescribed by their previous PCPs with whom they are no longer established or by previous psych providers online or elsewhere. They establish care with us with the expectation that we will be able to refill their medications. Unfortunately, we must refer them elsewhere and most of the time they are turned away, especially if they have Medicaid. Those on private insurance are burdened by the cost of having to see a specialist for a single prescription. Some specialists expect PCPs to take over prescriptions for refills once patients are discharged from their care. I have a patient who was discharged by her neurologist with a prescription for Zebutal, which I was unable to manage in any capacity, and the patient ended up in the emergency room with severe headaches, where she managed to get a refill. As you can imagine, this is a burden on the healthcare system and emergency care providers, who usually expect such medications to be managed by their patients' PCPs. We also have patients who suffer from addiction. Hopefully, this is something that our profession, with training, can manage with the rise in the opioid overdose epidemic. For those of us doing primary care, scope expansion is necessary in the post-pandemic era. I would expect CME requirements in pharmacology for those of us willing to start managing some of these medications and share this burden with the rest of the healthcare system. Thank you for your consideration and all the work you do for our profession.

Rev. Dr. Support  
Stephen Ross

I am writing to register my support for Senate Bill 5411. I am a senior citizen living in an independent living community for seniors. The value of finding and accessing competent health care is very important to me. Throughout my lifetime, I have sought to maintain connections with people and organizations who encourage others to strengthen and enable their well-being. I have observed that access and support to these resources are becoming less available in the current health care system. As our world becomes more complicated and complex, there is a need to offer individuals more options to access competent health care.

I am aware that the Washington Legislature is considering giving naturopathic physicians full authority to prescribe necessary medications and to sign health care related documents that require a physician's signature. I believe passing this legislation would be a positive step in addressing many of the concerns facing the health care industry. The Public would have access to additional competent and attentive prescribers to help address their health care needs. Naturopathic physicians are already Primary Care Providers, and they already have extensive education, training and compassion. Passing Senate Bill 5411 would give the Public more opportunities to safely pursue care that supports and enables people to live life to its fullest.



Beverly Ross	Support	<p>I am writing to record my support for Senate Bill 5411. The WANP's ongoing effort to expand naturopathic scope of practice to better align with that of other statute recognized primary care providers in the State of Washington is crucial in addressing the health care crisis facing the public. I am a broker who helps people navigate the process and eventually sign up for individual and family health insurance. Due to the shortage of Primary Care Providers, a common caveat I tell clients is to make sure providers are taking new patients before deciding on which insurance is right for them. Because Naturopathic Physicians are already Primary Care Providers in the State of Washington, passing Senate Bill 5411 and enabling them to provide comprehensive primary care services could help to alleviate the shortage. Also, as a broker and senior citizen living in a senior community, I am very concerned about the number of drugs being prescribed to patients. Almost every commercial on television is promoting one drug or another to address a myriad of patient problems. Medical doctors seem to see writing prescriptions as a "fix" for every concern and treat only the symptom. In contrast, Naturopathic Physicians work with patients to determine the underlying issue by examining the whole person – social, emotional and physical. The Naturopathic physicians' years of rigorous education and training (more than Physician Assistants and several other conventionally trained providers) prepares and encourages them to seek natural, non-chemical treatments to help their patients to live healthier lives. However, there are situations when a patient and their physician need access to appropriate alternatives. But the Naturopathic Physicians' hands are tied. Currently, they do not have access to the same prescriptive authority and scope of practice as other less educated and/or trained providers. Passing Senate Bill 5411 would provide more options for essential primary care for the people of Washington. It would mean more and better access to full scope primary care for patients, reduced costs and better coordination of care through reduced need to maintain multiple providers. I believe if Naturopathic Physicians were given the authority to utilize the options available to all other primary care provider types, our communities would be better served and healthier. I respectfully ask the Department of Health to provide the State Legislature a supportive recommendation to advance this, long overdue, Senate Bill 5411.</p>
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Sam Buck	Support	<p>I have found Naturopathic Dr Mandy Gulla ND to be exceptionally brilliant and helpful. My wife Jane Buck has also benefited greatly from her expertise multiple times.</p>
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We support expanding Naturopathic Scope in Washington State

Emily Prosser	Support	<p>I wanted to express my support for the ability of ND's to prescribe medicines that they've been trained to prescribe, and to sign off on all necessary forms as a PCP. This will minimize obstacles and delay to getting their patients the care they need. NDs play a critical role in family medicine and this bill would allow them to provide critical care for their patients.</p>
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Lesley Morical, ND Support

Thanks for your review of SB 5411 and consideration of the issues raised therein. I've been providing care to people in Washington since 2011. As long ago as 1988, the training of naturopathic doctors was noted to be equivalent to that of our MD/DO colleagues in biochemistry, pharmacology, and clinical medicine. Every scope of practice change for ND's brings out a raft of "not adequately trained" comments. Course hours, licensure requirements for basic sciences, clinical sciences and pharmacology - all have been exhaustively evaluated and found to be equivalent. I am sure you are aware of these curriculum comparisons and won't belabor this point. Regarding Section 3, in my own practice in Washington, I have had occasion to sign many forms (FMLA, sports physicals, handicapped license plates, etc.). I've appreciated being able to help my patients obtain services they require. But sometimes I have to send them on to another provider - if they can find one who is accepting new patients. For many years, I provided integrative mental health care in Eastern Washington. I was one of only two ND's in the Spokane area who was willing to bill Medicaid and work with low-income families. (The other ND has now retired.) I worked with people who have autism and developmental delays. As a primary care ND working with babies and children, I was often the first person to screen and diagnose these children. Unfortunately, although I could counsel and treat these conditions, I was not able to provide any help with forms or referral for services because an "ND" was not an accepted signer. Eventually I moved to a private, specialty clinic near Seattle and stopped working with low-income patients and those with autism, mental health issues and developmental delays - and their families. I continue to get emails and calls from my former patients' parents across the state, asking if I can see their children, now teens and young adults. There are not enough doctors providing care to this population. If there are still entities that don't allow ND's to sign as the doctor on their patients' forms, this should be addressed and remedied. There is a huge need for primary care doctors who will see low-income patients in Washington. If there were no restrictions on my ability to provide care for these patients, I would be happy to welcome them into my practice again. Thanks for reading my note in support of the expansion of this aspect of the ND scope of practice.

Alia Jones Support

The Senate Bill 5411 should be passed. Our current healthcare system has a shortage of licensed healthcare providers who can meet the needs of their patients based on prescriptive authority. This bill would give licensed naturopathic physicians an expanded scope of practice by increasing their prescriptive authority to include controlled substances - medications their patients require. Naturopathic physicians have to send their primary care patients to other providers to manage prescriptions outside their prescriptive authority. This costs more money for patients and requires additional time. Patients have to wait to acquire life-saving medication. This also creates more unnecessary work for multiple providers to juggle healthcare needs and any relevant medical documentation. This issue can be addressed efficiently and effectively by expanding the scope of naturopathic physicians to include the prescription of controlled substances. Patients should have increased access to their healthcare needs. Naturopathic physicians are primary care providers whose scope of practice should attest to that.

Elizabeth Gustas Support I would like to extend my support towards the 2024 Sunrise review for Naturopathic Medicine. I have seen personally how great ND's are able to support the community in primary care efforts and overall healthcare. Being able to expand prescriptive rights would better help the field to serve the community and to fill the gap in medicine. The wait times to see the average doctor have increased dramatically, and by expanding the scope for NDs, they can better help fill this gap. NDs are well trained in pharmacy and already have expanded prescriptive rights in their scope in several other states. Furthermore, I would like to voice how helpful the naturopathic field has been for me and my health. I have been able to work on preventing my chronic conditions from worsening and to change my lifestyle habits into healthier habits. I hope this message finds you well, and that we can all work together to help expand the Naturopathic field to better aid filling the gap in the current healthcare realm.

Doug Popham Support Naturopathy Doctors should be legitimized in the State of Washington. They should be granted full acceptance by state licensing boards and insurance carriers. Current MDs are great but additional alternative care should be provided.

carolee maya Support My experience with naturopathic medicine has always been positive. I do not see my naturopath as frequently as I would like because their services are not included as an option for Insurance coverage. There is place for every type of medicine and people should be able to use which ever they choose.

Maria Gimenez Support It is my understanding that the Washington Department of Health is seeking public comment on Washington Association of Naturopathic Physician's effort to expand Naturopathic scope in Washington State and that comments should be directed to you.

I have been seeing a Naturopathic Doctor at least since 2017. To me a Naturopathic Doctor is the best of both worlds. I get preventative care that is much more comprehensive than any MD has ever offered me, and when I am sick, I get an array of solutions than just the standard options offered by an MD. However, my Naturopathic Dr. never hesitates to refer me to an MD if she feels it is necessary.

I'm 64 years old and do not currently need to take any pharmaceuticals, while many of my friends who see regular Drs. are on multiple pharmaceuticals and don't have the positive energy level that I have.

I would love to see Naturopathic Medicine become more widespread in the state of Washington and see Naturopathic Medicine increase their scope of practice. Life is already too chaotic to have to see multiple medical professionals for issues that a Naturopathic Dr. can competently resolve. The fewer medical professionals that need to be involved lessens the possibility of miscommunication and misunderstanding between doctors so fewer errors.

Blake O. Langley, ND, LAc	Support	<p>I am writing in favor of the proposed language included in the Sunrise Review application for Washington naturopathic physician scope of practice. I joined the Washington state healthcare workforce in 2022 and work at a National Cancer Institute (NCI) designated comprehensive cancer center. I work as a clinical researcher in this setting, and work alongside fellow naturopathic physicians in the Seattle area who coordinate the care needed to manage side-effects and treatment toxicities associated with cancer treatments. The proposed changes to the scope of naturopathic physicians promises to benefit many of the patients I see, as well as the broader population of patients seeking primary care across Washington State. The proposed changes have the potential to remove many burdens which prevent patients from accessing their choice of healthcare provider due to prescriptive and signatory authorities. Pertinent to my work, the proposed changes would support patients who seek mental health care for anxiety, depression, or fatigue which can require scheduled prescription medications; provide a safety net for patients who have chronic pain and face dangerous risks for overdose; and decrease the potential time and travel burden for patients who live in rural areas and have access to a competent care provider in their area. I strongly believe the training naturopathic physicians receive while in school and continue to receive in post-graduate settings support the safe implementation from the proposed changes. In the interests of increased patient access to healthcare, I urge you to consider this application favorably. Thank you for your time, consideration, and dedication to the health of Washington State residents.</p>
Renée Giovarelli	Support	<p>Please expand the Naturopathic Scope in Washington. I support and trust my Naturopathic Doctor completely with my health. I have had much better care from Dr. Gulla than I have from any other doctor. She is accessible and includes me in decision-making, fully explains what is going on and what might work and why. Her low force interventions have definitely improved my life.</p>
Rosana Palisoc	Support	<p>Please allow Naturaphatic Doctor to expand their scope of Practice in Washngtom to help their patients just like others Doctors.</p>
Dylan Marcus	Support	<p>I am writing to express my sullort for Senate Bill 5411. My naturopath is capable and trained in providing many of the controlled substances and minor office procedures that myself and other patients have to be referred out of the clinic for. Please approve this bill in order to decrease our burden of unnecessary referrals and long wait times with alternate providers who don't know us like our naturopaths.</p> <p>Please vote to pass this bill!</p>
Allison Middleman, ND	Support	<p>I am a naturopathic physician and primary care provider in West Seattle. I provide primary care for all ages and genders, from infants through senior years, and am proud to be able to offer this service given the high need for primary care providers. However, I am frustrated by the limitations of the Washington state formulary for naturopathic physicians. I am required to refer my patients for ADHD medication prescribing, and have limited anxiolytics for short-term needs, all of which means my patients must endure delays in care as they wait to see another provider who can prescribe these items. I know that if the scope of my practice were expanded to match my training, I could truly provide comprehensive primary care to my patients.</p>

Wendy Batzel      Support      I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state. I believe that this bill represents a positive step forward in healthcare by aligning the scope of practice for Naturopathic Physicians with their extensive training and legal recognition as primary care physicians. Allowing them to prescribe medications routinely prescribed by primary care providers, as seen in other states like Oregon and Vermont, can contribute to better healthcare outcomes for our community. I am a patient of a Naturopathic Doctor whom I have trusted for many years. There are things that I ended up in urgent care and the ER for that they could never figure out what was wrong. Dr Stokely spent time with me and was able to figure out that I had a drug interaction. Because Dr Stokely actually takes the time to talk to me about the issues I am having, I have more trust in her than any other normal doctor and believe she will prescribe the needed medications safely and appropriately. Being able to have all of my needs met by my Naturopathic primary care doctor would help to alleviate the burden of needing to see multiple providers, and greatly benefit patients across the state.

Avi Whinkin      Support      I am writing in favor of SB 5411 proposing naturopathic scope of practice to be increased, allowing NPs to prescribe and wean over time schedule II to V controlled substances. As the proposal reveals, Naturopathic Physicians are uniquely trained to assess and treat a person's complex interaction of biological, physiological and environmental systems that influence their symptoms, disease progression, and prognosis.

Naturopathic physicians are poised to play a vital role in reducing the harm associated with the opioid epidemic by slowly weaning while simultaneously addressing psychosocial and biological factors to reduce dependency on opioids and harmful pharmaceutical interventions.

Thank you for your consideration in this matter - public health impacts us all. It must be representative of the population's needs for short- and long-term wellness.

Justin Taylor,  
ND

Support

I am writing to express my strong support for SB 5411 and the ability of Naturopathic Physicians to prescribe controlled substances from classes 2-5. As a primary care physician, I believe that all healthcare providers should have equal opportunity to serve their patients in the best possible way, and allowing naturopathic physicians to prescribe these medications is a crucial step towards achieving this goal. As primary care physicians, our top priority is always our patients and their needs. We chose to study naturopathic medicine because we believe in an integrative approach to healthcare that takes into account both natural and pharmacological options. However, without the ability to prescribe controlled substances, we are limited in our ability to provide the best possible care to our patients. While working in a rural community, it has become even more apparent that provider equality is necessary. Rural community patients appreciate the opportunity to choose a naturopathic physician for a PCP, but the requirement to see a separate provider for a controlled substance is unreasonable, unfair, and inequitable for the patient. I understand that there may be concerns from other parties about the safety of naturopathic physicians prescribing controlled substances, but I would like to point out that there is no data to support these claims. In fact, naturopathic providers in other states have been safely prescribing controlled substances for years, with no reported increase in adverse events. I also understand that there may be concerns from other parties about the need for residencies but I would like to point out again that nurse practitioners are already able to prescribe medications from classes 2-5 without a residency, and there is no reason why naturopathic physicians should not be granted the same privilege. In conclusion, I strongly urge you to support SB 5411 and grant naturopathic physicians the ability to prescribe controlled substances from classes 2-5. This will allow us to provide the best possible care to our patients and ensure that all healthcare providers have equal opportunity to serve their patients in the best possible manner. Thank you for your consideration.

Dr. Nathan  
Wagner, ND

Support

My name is Nathan Wagner, and I am a practicing naturopathic physician in Washington's Klickitat Co. In a rural area such as this, I commonly see patients from neighboring counties due to a general lack of medical services and a further lack of desired naturopathic care. An expansion of naturopathic scope of practice would be of great benefit to practicing physicians and the citizens we serve. Broadening of scope would translate into more comprehensive care with better outcomes, better patient follow up, and overall less disruption for rural patients. My patients are all over the socioeconomic spectrum- those with the most precarious financial situations often have more complex medical situations that are greatly influenced by socioeconomic determinants of health. When one physician can take care of the bulk of their medical needs in one visit, they save valuable time, money, reduce unpaid time-off for health related medical visits, and develop a personal relationship with their provider. There is a common misconception that naturopathic doctors are anti conventional medicine. However, the majority of us believe that there is a time and a place for both approaches. We are happy and thankful to use outcome improving and sometimes life-saving interventions when needed and are limited when those interventions fall outside of our scope of practice. Please consider this perspective when assessing Senate Bill 5411.

Rebecca Wilhelm ND LAc	Support	<p>Hello and thank you for reviewing public letters in regard to scope expansion.</p> <p>I have a small family practice in Mt Vernon- an area of WA with not enough primary care providers. Between my colleague and I, we have about 1500 active patients who see us for general medicine. Our current plan for managing patients who need meds out of our scope is either to send them to our overburdened ER/ urgent care, or to have them attempt to see another primary doctor. Both of these options for managing patients who need acute care provide terrible health care. Sending someone for a \$1000 ER visit is painful. There are limited options for PCPs in our area---wait times to establish with new primary doctors in our area range from 2-6 months, with many practices closed to new patients.</p> <p>An example of this from this week is a long time patient with anxiety who is at the crux of a very painful lawsuit. She has not been sleeping, which is worsening her health. We have tried multiple medications, and have ended up using one for her that has more side effects than one of the more appropriate, controlled medication that I can not prescribe. She doesn't wish to go urgent care to get 7 days of an appropriate sleep medication.</p> <p>I could share so many examples-- they happen weekly. I support ND scope expansion. Thank you for your time.</p>
Angie Cotner	Support	<p>When an ND's patient needs a Valium as a pre-medication for a scheduled MRI and he or she cannot prescribe?When an ND's patient is having a panic attack or going through grief and loss and a short term of lorazepam would be appropriate?When an ND's patient is diagnosed with ADHD and a stimulant is the best and most effective prescription choice?In my 28 years experience as a nurse (24 years in the state of Washington), more and more patients want to have one doctor prescribe, order appropriate labs, imaging and manage their care. Patients desire continuity of care. Patients want a relationship with their doctor, to be heard, known and understood.With a primary care physicians shortage, it would seem wise to increase the scope for ND's to align with the education and training they have received in order to provide quality and efficient care to all patients.Patients needs are the medical fields priority.</p>
Susan Meyer	Support	<p>I really only will see a Naturopath for my health care needs. They are more aligned with my desires for a whole body program of care. They are more interested in treating the cause of a symptom instead of only the symptom itself. Please please allow Naturopaths the ability to expand their scope and be considered primary care providers. I have come to fully trust my Naturopath and his colleagues.</p>

Melanie Trowbridge, ND, LAc	Support	I am a Licensed Naturopathic Physician and Acupuncturist in Washington State. My Undergraduate degree is in Health Psychology. I was trained through Bastyr University, an accredited college located in Kenmore Washington. I passed my board exams and received my license in 2011. My experience as a Naturopathic Physician is that our profession is extensively trained in pharmacology, as well as other Western medical diagnostics and treatments. We are a profession of very careful and caring medical providers, some choosing to practice in Primary Care. The reason that I am in favor of expanding our scope of practice to include the ability to prescribe and manage schedule II-V controlled substances, as well as other scope of practice modifications is that it allows us to better manage these medications and practices in wider patient populations, as well as giving broader access to individuals who choose Naturopathic medicine as their modality of care. I have every confidence that with our extensive training in all up-to-date aspects of body systems, contraindications, pharmacological interactions, and our particular attention to both psychological and physiological mechanisms of action and effects upon particular systems, that Naturopathic Physicians are acutely aware of the importance of precision in this task and role. In my experience, and in being an active member of both our National and State associations of Naturopathic Physicians (AANP and WANP), I have had multiple conversations with my colleagues on prescribing and treating. I have seen extensive and appropriate caution in prescribing and treating in order to do no harm to our patients. We consult with colleagues from our profession regularly, as well as other specialists in various medical fields, and consult the latest in scientific and fact-based research studies to ensure that we are providing safe, effective, and top-quality care to our patients. As well, our continuing education requirements are extensive and also enable us to stay current within advances in medicine, including pharmacology, diagnosis and treatment. There is no doubt in my mind that we are adequately trained to meet the levels of requirements necessary to expand our scope of practice to that of our Primary Care colleagues with alternative licenses. Please consider our background and training, as well as our history as safe, effective, and compassionate providers in Washington State in this addressing of the Sunrise Review for Naturopathic Physicians.
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Dr. Brandy Rose Lipscomb	Support	I am writing in support of Senate Bill 5411 that will expand the scope of naturopathic physicians in WA. I have been a licensed ND in this state since 2006 and I provide excellent, judicious primary care medical services to all ages in Arlington, WA at Essential Wellness. There are many times a month that I have to refer patients elsewhere for mental health prescriptions such as Adderall and anxiety medication. It is rare that I see patients on opiate-based pain relievers but the ability to prescribe a small quantity of such powerful medication when it is deemed medically necessary would be a God-send to my patients. Naturopathic doctors focus on treating their patients with the least force possible and prefer to use natural remedies whenever possible to improve health and welfare. The passage of Senate Bill 5411 would not result in harm or excessive prescriptions of these powerful medications, but it would allow us to fully serve our communities as primary care physicians. It would prevent patients from having to choose between coming to see an ND for care that focuses on holistic medicine or continuing to see their MD or other "prescriber" because of anxiety, insomnia or ADHD. I am in full favor of Senate Bill 5411 as I believe it would benefit the citizens of WA state and improve their ability to choose their care provider according to their beliefs and how they wish to be treated, not according to where they "have to" go to maintain access to medicine.
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Fawnell Myfanwy	Support	Please expand the scope for naturopathic physicians! I moved to the Seattle, Washington area in mid April and had such a hard time getting a primary care doctor due to lack of availability and wasn't able to see one until October. I looked into naturopath as well and they would have been able to see me three months prior to the first pcp however they were unable to assist me with my daily medication requirements. It has been such a struggle and this would have help greatly. Thank you in advance.
Sharon McKeehan	Support	I want Dr Fleming to be my primary health care physician.
J. Andrew Rife, ND, MEd	Support	<p>I have been practicing naturopathic medicine for over 25 years and am the owner of a clinic that employs several other NDs. My practice is a family practice, seeing infants through hospice. I try to utilize dietary and lifestyle approaches as much as possible. I have several areas of expertise within my practice, one of which is ADHD.</p> <p>Having a family practice means unexpected things happen. When a long term patient that considers me their PCP is injured, I am occasionally lacking the tools to manage that severe pain. When a patient loses a family member, for example, I am lacking the benzos to manage that transient situation. And when the ADHD patients need more than what I can offer, I have to send them away for amphetamines.</p> <p>The need for these medications is rare, especially after 25 years of practice, but when I need them, I need them. Having to refer my patients to new, unknown providers during their moments of need is disruptive to the doctor/patient relationship. I would like to see these medications added to our formulary.</p>

Linn J. Wheeling, MBA, CAE	Support	<p>I live and work in Clarkston, Washington, which is in Asotin County, which has a population of over 22,000 residents, with a median age of 45. While Asotin County is home to 3% of the physicians licensed in Washington<sup>1</sup>, the closest Naturopathic Doctor (ND) is 45 miles away. I write to you today to share my unwavering support for NDs, and why passage of SB 5411 is necessary to those of us living on the eastern side of the state so that we have a choice as well as access to primary care naturopathic doctors. I have dedicated my professional life to mission driven not for profit organizations. Full disclosure – two of those organizations have been professional membership organizations advancing healthcare professions with the goal of increasing access to educated, trained, and qualified healthcare practitioners, Physician Associates through the American Association of Physician Associates (AAPA) and NDs through the American Association of Naturopathic Physicians (AANP). I have personally witnessed how the old guard medical doctor community goes about creating fear and mistrust among legislative leaders every time there is an effort to expand access to healthcare. I can only speculate on what their reasoning is – as it certainly cannot be out of concern for patient safety as the data shows that NDs have far fewer disciplinary actions than MD/DOs<sup>2</sup>. For over seven years I have been struggling with a health issue of which not one of the MDs, PA's, or NPs I saw could figure out. It was not until I began working with the AANP and began working with a licensed ND that I am finally finding relief and living an exponentially higher quality of life. I want my neighbors, friends, and fellow citizens in Clarkston and the surrounding areas to have the same access and choice that I have. Please support and steward SB 5411 into law so that NDs can practice and participate fully in providing primary healthcare to all of us in Washington.</p> <p><sup>1</sup>Yen, W. (2020, November). 2019-20 Physician Supply Estimates for Washington State. <a href="https://ofm.wa.gov/sites/default/files/public/dataresearch/healthcare/workforce/physician_supply_2019-20.pdf">https://ofm.wa.gov/sites/default/files/public/dataresearch/healthcare/workforce/physician_supply_2019-20.pdf</a></p> <p><sup>2</sup>Disciplinary Actions Tally by Type – 2010 to Present, Federation of Naturopathic Medical Regulatory Boards, <a href="https://docs.google.com/spreadsheets/d/1FSQxx1ienhHGpCbWPOqrSWQMxYLGTxnpCiSkNy4Rd9s/edit#gid=0">https://docs.google.com/spreadsheets/d/1FSQxx1ienhHGpCbWPOqrSWQMxYLGTxnpCiSkNy4Rd9s/edit#gid=0</a> Accessed 11.17.2023</p>
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Eric Yarnell,  
ND, RH(AHG)

Support

As a naturopathic physician in practice since 1997, mostly in Washington state, I am writing in regard to my support for Senate bill 5411. There is a dire shortage of primary care doctors in Washington, and this bill will help enable naturopathic physicians to fill the void. I have been teaching at the naturopathic medical school, Bastyr University (BU), since 2001 (and have also taught at what is now known as Sonoran University of Health Sciences [SUHS] in Phoenix and Boucher campus of the Canadian College of Naturopathic Medicine in Vancouver, BC) and I can tell you our graduates are ready and waiting to fill these desperately-needed primary care roles. They are well trained in the use of controlled substances (including as part of about 150 hours of classroom training in pharmacology at BU, on top of clinical training hours), and coupled with their patient-centered practices, to take the time and provide the support patients need. They can also simultaneously provide treatment and support around the issues driving the need for controlled substances in most cases, so that ultimately they can reduce or eliminate the need for these medications. The burden now is that patients would have to see two providers, one to get their prescription and then their naturopathic physician separately, and this creates a huge barrier and unnecessary waste. I formerly supervised clinical training shifts for naturopathic students at BU and SUHS for many years. I can attest from this experience that pharmacological therapies were a point of discussion for almost every patient. Either we were evaluating their current medications, deciding whether to add a new prescription, or wondering about altering doses or types of medications to better suit a patient. Frequently at the Bastyr Center for Natural Health clinic, we were met with a situation where clearly a controlled substance was indicated, but we were not able to prescribe it and had to refer patients to other providers for this. It was frustrating and limiting, and could lead to delays stretching into weeks or months to get another appointment with appropriate provider, who then sometimes refused to provide the prescription until the patient essentially repeated past failed treatments we had already used with them. The changes in this bill would enormously improve clinical training, which already provides an excellent base for learning the safe use of these medications, and improve quality of care for patients. It is also notable that NDs in Washington have a mandated 15 hours in pharmacology-specific continuing education requirements to be completed every 2 years, unlike MDs or PAs who have no such requirement. While it is true that naturopathic physicians view drugs in general, and controlled substances in particular, with more suspicion and hesitancy than the average conventional medical provider, I think this is actually a benefit. In naturopathic training, we emphasize a model known as the therapeutic order, in which safer, life-style based and natural therapies are used preferentially, but when necessary drugs, minor surgery, or referral for major surgery have their appropriate place. This both means that NDs are less likely to overprescribe unneeded medications, and to only direct those who truly need controlled substances toward such therapies. It also means naturopathic physicians are more attuned to danger signals that may crop up during treatment with controlled substances, correcting them quickly and efficiently. Members of our profession in other states have already been prescribing many of the controlled substances in question safely for years. I practiced in Arizona from 1999 to 2001 where the scope was much wider, and both personally had good success and safety with such prescriptions and observed or spoke to many students or former students now in full practice who also had success. Patients were far happier when they could have just one primary care doctor who could handle all their needs, including the occasional prescription for a controlled substance. I am also now practicing part time in California which includes a wider scope of controlled substance prescribing. I teach an elective class at Bastyr University's campus in San Diego and so also hear from the students about work with these substances and they have a healthy respect and solid understanding of them. Our track record is very good in these states as well as Oregon, New Mexico, and Vermont where we are also licensed with the broader scope we are looking to obtain in Washington. This should put everyone's minds at ease that we are not actually moving into new territory, but replicating a successful model already implemented in other states that has proven to be safe and to improve patient outcomes. I am in touch former students now colleagues working in more rural parts of Washington, as well as several who work at Health Point clinics in the Puget Sound region, who are constantly frustrated by the constraints of our scope of practice, Their patients in particular simply don't have other options and desperate for more full-scope primary care providers. Having to refer a patient from Methow for a controlled substance prescription can mean a many hour round-trip journey to Everett or Seattle, given the lack of other options closer by. Why should they suffer this added burden and barrier, when Dr. Brendan Smith or Sara Acosta-Smith, ND, could easily and appropriately provide such prescriptions for them as part of the rest of their primary care? And for many of Emer McKenna, ND's immigrant and queer patients at Health Point in SeaTac, even though they surrounded by cities with some of the most advanced health care facilities in the world, it is simply not economically feasible for most of them to have to go to another provider to get a controlled substance prescription. They are just a couple of specific example of colleagues of mine that illustrate a much larger wasted opportunity Senate bill 5411 seeks to correct. The people of Washington cannot afford to have hundreds of primary care naturopathic physicians hobbled and limited; they need our help today.

laurie mccullem Support

I have been using Naturopathic Health Care for my primary care for about 20 years. For me they have always focused on finding the root of my health concerns rather than just giving me medication. I am now 80 years old and in good health. I have to spend a lot of money on my health care because I still have to pay out of pocket for my Naturopathic Care, along with Medicare deduction and over \$300 a month for supplementary insurance. I'm fortunate that I can still afford it but there are a lot of people that would benefit from Naturopathic care that at present can't afford it.

Barb Pexa

Support

I fully support our NDs to expand thier scope of work and gain rights to prescribe patients more prescription drugs, when needed. I have had an ND as my primary care for 15 years, since the birth of my first child with her. Natural care is so much better and holistic. The quality of care is certainly higher also. I had been struggling with a chronic pain issue for a year and a half. I spent \$2,000-\$3,000 out of pocket monthly to deal with that issue. Finally I broke down and asked for pain meds that I needed when it got severe. My natural doc could not get them for me. Having to find a new doc that has never cared for you then asking for pain meds is not a great way to go about things. I found an orthopedic doc that wanted to replace my hip, I am 48. He eventually gave me pain meds towards the end of my issue and fortunately I only needed them for a short period of time before all my natural care solved the problem (without a hip replacement). I believe the traditional doctors and big pharma are fighting this to maintain control. ND cared for patients are much less likely to rely on drugs as that is our mindset and there is less money in that so why would "the system" want to support that?My ND is FAR more educated in all things about my health and body as a holistic view compared to the "traditional doctors" I have seen. Modern medicine is far too specialised these days and our bodies just do not work the way medical school doctors are trained. Our system is not built to prevent poor health. It is built to wait until Americans get very sick then prescribe drugs and expensive procedures to "get healthy". It's absurd. PLEASE EMPOWER OUR NATURAL HEALTH DOCTORS TO DO MORE to keep us healthy from the get go, to stay off meds long term and out of our hospitals. It is healthier and cheaper for all but that is another topic.

Jashar Rentz	Support	I am reaching out to seek your support for Senate Bill 5411, a critical piece of legislation aimed at expanding the scope of practice for Naturopathic Physicians in Washington State. This bill represents a significant step forward in modernizing our healthcare system to better leverage the skills and training of Naturopathic Physicians. By passing SB 5411, the state legislature will enable Naturopathic Physicians to prescribe a wider range of medications, including controlled substances from Schedules II to V. This expansion is necessary for Naturopathic Physicians to provide comprehensive care and manage a full spectrum of health conditions, which is especially crucial for patients in underserved areas who rely on them for primary care. The importance of this legislation extends beyond the profession itself—it directly benefits the residents of our state who will gain improved access to holistic, preventive care. Allowing Naturopathic Physicians to practice to the full extent of their training aligns with their role as primary care providers and reduces the need for patients to seek multiple providers for their care needs, thus alleviating the stress on our healthcare system. The ongoing pandemic has underscored the necessity for competent primary care providers. Naturopathic Physicians, with their unique approach to healthcare, are well-positioned to meet this demand, but only if allowed the full scope of practice that reflects their rigorous training and education. Senate Bill 5411 has been diligently pursued for over a decade, reflecting the pressing need for its enactment. The bill's passage would mark a pivotal moment in the evolution of healthcare delivery in Washington State, ensuring that all primary care providers, including Naturopathic Physicians, are utilized to their fullest potential for the greater good of public health. I urge you to consider the widespread benefits that SB 5411 will bring to our communities and to support its passage. Our collective commitment to health care reform begins with such forward-thinking legislation. Thank you for your time and for your dedication to the health of our constituents.
Sheri Miller	Support	I support approval of Senate Bill 5411 to expand ND prescriptive authority, enable ND's to sign all health care documents, and modernize language to allow naturopathic physicians to serve more fully as 'primary care providers.'
Irene Bokman	Support	I live part of the year in the state of Washington and work with a Naturopathic practitioner while I am there. I have had a very good experience so far. I was quite surprised to find out that my Naturopathic Dr. in Washington was unable to administer the Ketamine therapy that I had been receiving for a mood disorder. I receive this treatment in my state of residency through a Naturopath and have had a very good experience. I asked my Naturopath why she could not administer this therapy. It was explained to me the current status in Washington and so I am writing this to advocate for Naturopath's to be able to include this treatment in their practice.
Dikka Ballantine	Support	Naturopathic healthcare encompasses much of what has helped me through many situations. Naturopathic doctors knowing about things like plants that can alleviate pain and calm the body which eases healing extends health care possibilities. Many situations can be relieved by gentle natural medications which are also soothing. Having the combination of care equally recognized would be a great help when new health situations arise.
Benjamin Girdan do	Support	ND's are great, give them all privileges for being a primary doctor.

Alex	Support	<p>I am a naturopathic physician who practices in Seattle, and I have also practiced in California and Oregon, two states where NDs are able to prescribe controlled substances (CS) III-V with MD/DO supervision in CA, and II-V independently in OR).</p> <p>I would like to support the passage of this Bill but I think we should also make sure that NDs, like other professions, have appropriate training and continuing education to do this safely and effectively.</p> <p>In Washington, current continuing education (CE) rules require a significant portion of ND-sourced continuing education, which limits the time and finances an ND can set aside to improve their knowledge of continuing substance prescribing which is currently mostly available as AMA Category I CE's. For example, if the ND is required to take 20 ND-sourced credits for a year, that's 20 credits less of time and money the ND has to take controlled substance related CE's, which are currently mostly available as AMA Category I.</p> <p>Other health care professionals in Washington who are able to prescribe CS II-V, such as physician assistants, nurse practitioners, and allopathic physicians, and naturopathic doctors in California, Oregon and Arizona who can prescribe controlled substances, can all submit AMA Category I continuing education credits to meet ALL their continuing education requirements without bias. Not so in Washington.</p> <p>NDs in WA can still choose to partake of ND-sourced continuing education, but NDs who want to gain more knowledge and training in prescribing controlled substances, should not be forced to spend limited time and money to partake of ND-sourced continuing education, if in their judgment, their priority for a specific year is to maximize their learning and training regarding controlled substances from AMA Category I sources to do so safely and effectively.</p> <p>I am bringing up continuing education as my main comment, because I believe that an increase in scope of practice is intertwined with continuing education and training that meets the safety and effectiveness necessitated by that increased scope. ND-sourced continuing education activities currently are inadequate to meet controlled substance continuing education needs. That may change in the future, but if we want this Bill to pass now, then current continuing education rules should also let NDs partake of currently available CE's without bias, they happen to be AMA Category I CE's right now.</p>
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Psychiatric Association of Naturopathic Physicians	Support	<p>We received your request for comments regarding the proposed scope expansion for naturopathic physicians (ND) in Washington State through Senate Bill 5411. Our non-profit organization, the Psychiatric Association of Naturopathic Physicians, which represents naturopathic physicians and allied health professionals focused on mental health, support the passage of this bill. We would like to present several arguments to support this. We believe the passage of this bill would be beneficial and necessary for Washington health consumers. Washington state has a shortage of mental health professionals, and therefore, many Washington consumers rely on their primary care providers to provide good mental health care. Naturopathic physicians are an important part of the primary care workforce in Washington. Naturopathic physicians undergo mental health related education and training, including the assessment and diagnosis (DSM-5 based) and treatment (including naturopathic and psychopharmacologic modalities) consistent with our current scope and practice. However, one common situation we encounter is that a large percentage of our patients are on controlled substances, such as sleep medications or benzodiazepines, that they would like to reduce usage of as we start to treat underlying causes and use naturopathic modalities and as they get better. Currently, these clients will have to consult with another provider to get off these controlled substance medications, adding to expense and delays in care. This extra expense and delay can be addressed by permitting NDs to manage these types of medications. We believe that with greater scope comes greater responsibilities. PsychANP is committed to increasing residency opportunities for NDs, and is also committed to producing continuing education opportunities which we will make sure reflects and responds to the increase in scope of practice for NDs in WA state to prescribe controlled substances, including those which relate to mental health. Thank you for your continued support and work to promote the health of Washington state residents.</p>
Lily Skelton	Support	<p>I appreciate the medical care I have received from my Naturopathic physician Please support SENATE BILL 5411.</p>
Leila Kuehner	Support	<p>I am an ND. I see an ND for my own personal health &amp; his name is Dr. Bill Caradonna. He is an ND and a Registered Pharmacist. I find it distasteful that he cannot prescribe certain medications that I may need. I am in awe that the AMA thinks I am not competent enough to fill out a form for a disabled patient to get a discounted ORCA card. My patients would like me to sign paperwork for end of life.</p> <p>Very few MD's want to be PCP's. There is too little money in it &amp; it is too difficult. The AMA is being territorial at the expense of patients in limiting the scope of ND's (who are here to prevent disease and work one on one with patients). Let patients have the choice. If ND's are not respected, then no one will schedule appointments with us. So be it, the market forces will weed out unwanted and unneeded resources.</p> <p>Please contact me to discuss &amp; I will come in person to rake this over. I am not doing this for myself, I have been extraordinarily blessed &amp; am only working (for just about minimum wage when you take into account all the paperwork I need to fill out (chart notes, referrals, prior authorizations, etc.).</p> <p>Work is more like volunteering.</p> <p>It's not about me, it's about you &amp; your family. Do you feel that the allopathic conventional medical system is fit for chronic disease? No, they are absolutely wonderful for acute disease (operations, emergency care, etc.) but not for preventative chronic disease.</p>

Kim Wade	Support	<p>I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state. I find that my naturopathic physicians have been much more in tune with my healthcare needs and are focused on providing a more holistic approach to medicine. In some ways, they are further along in the evolution of medicine but they still use current scientific studies to inform decisions. They are very safe in their approach to using conventional medication to solve medical issues and are, in fact, cautious about jumping there for a solution. Furthermore, there is a shortage of providers who can prescribe these medications. Sometimes several providers need to be contacted in order to find one available to prescribe these medications and then the patient has to wait a month or two for the appointment. The other problem is that a conventional doctor may prescribe these medications spontaneously without putting much thought into whether the patient needs medication or some other intervention. As a person who worked for many years in the healthcare system, I find that conventional doctors tend to treat the patient like they are the symptom, disease, tumor, etc. A naturopath treats the whole patient. They will talk about other factors that may be contributing to the decline in the patient's mental health such as nutrition, lack of mental health therapy, lack of exercise, etc. After assessment, the naturopath may agree that medication is the best route to get the patient where they need to be in order to start practicing better self-care. Patients are better off seeing one provider for "one-stop" shopping. They oftentimes will not make an additional appointment to see a different provider to get their meds filled. Also, if they trust their naturopathic provider, they may not trust another provider or feel ashamed with someone new. I took a seminar about this very problem and how widespread it is in this country. A patient was in an appointment at a clinic that was part of a healthcare system. Since there was a shortage of psychiatrists, only one psychiatrist was available online for about 6 different clinics as a resource to prescribe medication. The clinic knew that if they couldn't prescribe in that appointment, the patient would probably not make another appointment to see a different provider to get medication. The patient may not be in total crisis yet, but their depression and anxiety prevents them from having the energy to keep advocating for themselves. Another reason to allow this bill to go through is continuity of care and hand-offs. Even with EMR's and integrated patient portals, the amount of time one provider spends trying to read another provider's notes or what they prescribed and when takes so much time out of appointments. Often times medication lists don't match up. With all of that said, I understand that allowing this bill to go through may add more to the regulatory plate. I've seen enough regulatory surveys to know. However, in my opinion I think it may prevent patients from spiraling into the depths of despair resulting in them self-medicating, surging EDs that are not equipped to assess patients quickly enough, high admissions into inpatient behavioral health units (if beds are even available), etc. In addition to helping to fill the gap in lack of prescribers, I think most importantly, that Naturopathic Physicians can competently fill these prescriptions and provide the necessary follow-up with their patients.</p>
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Emilie Lantelme, ND	Support	Please pass bill 5411 - we need more ND's to help prescribe these important medications!
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Alison Barnes	Support	ND's as PCP's. Yes, please approve this.
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Tim Zimmer Support Thank you for inviting public comments related to the 2024 Sunrise Review regarding Senate Bill 5411I am an executive in a business that employs 7 Naturopathic Doctors, have personally been under the care of NDs for the past 20 years and refer community and family members to NDs on a weekly basis. It is my personal and professional opinion that expanding the scope of practice for NDs to include the authority to prescribe controlled substances (as notated in the New Sections of SB5411) is in alignment with their education and empowers them to help patients at a foundational level and to collaboratively support prescriptive healthcare in the Allopathic community. The increased authority to sign legal documents, as noted in the bill, and the expansion and update to the language under minor office procedures are all relevant, thoughtful and appropriate changes I fully support. Well done.In closing, I rely on NDs for my primary care and deeply appreciate the opportunity to have their support with my medications and to partake in the intimate times in my life around birth and death. I have witnessed WA state grow in its national recognition of Naturopathic Medicine with regards to safety, efficacy and value to the health of WA state residents and visitors alike. These changes are timely and worthy. Thank you for all of the hard and important work you all do every day to care for the health of WA state!

Connie Aylett Support I would like you to be aware that my primary doctor is a Naturopathic Physician. In the past I found that the naturopath took the time to properly discuss my health and examine me and found that I had cancer. I attended many MD's who were in such a hurry to do the "normal" tests that they totally missed my cancer. My naturopath saved my life.

I am so appreciative of having my Naturopath because they assist me in being in my best health. Also I find that with the shortage of MD's the state should allow people to choose a Naturopath as a primary care provider so that there are more choices for health care versus a shortage.

Dr Jillian Stansbury Support I am in full support for naturopathic scope expansion. I have been in practice for 35 years and was a medical assistant licensed in CA before that. In my decades in practice, I have seen how vital ND services are to my community. From treating urgent situations when patients have nowhere to turn, to getting some palliative care started while patients are waiting 3 and months to get in to see a specialist, to monitoring pharmacy refills and scripts for patients who can't get into other providers prior to Rx depletion and other everyday situations. I have felt that my care was also extremely needed by those patients who don't tolerate chemical medicine, those who have symptoms that defy a diagnosis and get referred around without finding help or answers, and for those whose mental-emotional conditions make them a poor fit for seeking care in the large clinics and HMO. NDs are essential, capable, well-trained, and vital to the nation's healthcare system. On another note - It seems odd to me that NDs will no longer be able to perform simple urinalysis and other routine microscopy tests. I learned to perform such tests as a medical assistant at the age of 18. CMA (certified medical assistants) in medical offices and hospitals across the US perform these lab tests as part of their duties. They are simple, straight forward for anyone to learn, and I have been doing these tests in-house for 40 years now when I include my prior career as a CMA. If CMAs with 6 months' training can perform these tests, surely an ND can perform these tests for ourselves.

Jessica Haselby Support It's my view that ND's should be allowed to prescribe more medications as MD primary care providers do.

Jeremiah Braunstein	Support	I am in favor of Naturopaths having the authority to prescribe standard medication. I regularly have appointment at Sage Med clinic in Bellevue. The Doctors there are well educated and respected. I believe they should have the authority to prescribe medicine.
Dr. Alexis Banducci	Support	I am a practicing naturopathic physician in Olympia, WA. The clinic that I work at is primary care, and I see many of the pediatric population for our clinic. I would like to express my opinion in favor of scope expansion. I have many patients who receive delayed treatment for ADHD due to my inability to prescribe these medications. Additionally, those who come in to me already stable on their stimulant medications have issues maintaining access to prescribing providers or being seen by those providers within a reasonable time frame. This hinders my ability to act as a primary care doctor for my patients. I am also an advocate of expanding the requirements for our continuing education to include a larger accepted list of organizations that are approved for the categories. I would like this to include more conventional medical sources so that I would be able to obtain additional education as it would pertain to an expanded scope.
CRINA BELL	Support	I will like to support bill 5411 in expanding the scope of practice for naturopathic doctors in Washington.
C. Hatt	Support	Please pass Senate Bill 5411 so that our Naturopathic doctors are recognized like primary care physicians.
Kenzie Creager	Support	My NP doctor has been the best primary care physician I have ever had. They know me and my problems better than any general practitioner did and always are look to find the root of the problem not just medicated the symptoms. If you want to change our current healthcare system, we need to support NPs and give them the same rights as general practitioners that's spend a quarter of time with their patients. I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state. I believe that this bill represents a positive step forward in healthcare by aligning the scope of practice for Naturopathic Physicians with their extensive training and legal recognition as primary care physicians. Allowing them to prescribe medications routinely prescribed by primary care providers, as seen in other states like Oregon and Vermont, can contribute to better healthcare outcomes for our community. As a patient of a Naturopathic Doctor, I trust my doctor to prescribe needed medications safely and appropriately. Being able to have all of my needs met by my Naturopathic primary care doctor would help to alleviate the burden of needing to see multiple providers, and greatly benefit patients across the state
Heidi Ochsner RD	Support	<p>Hello I am writing to comment on Senate Bill 5411: Addressing a shortage of primary care services by increasing the scope of practice of naturopathic physicians.</p> <p>My opinion is that this is a great bill and makes perfect sense to enact. My family uses ND care for our primary care and we would love to have our ND be able to support us with the ability to prescribe (and therefore deprescribe - wean off of) controlled substances such as Adderall and Xanax. It also seems silly that NDs can't sign legal documents like birth certificates or disability and that I would have to go to a whole new doctor for that. Also including things like anesthetic injections and repair of minor lacerations into minor office procedures seems like a no brainer. Please enact this logical and utilitarian bill to support better primary care for the citizens of Wa state.</p>

Shari Jansen	Support	<p>I am writing in support of having Naturpathic Doctors to be legally recognized as primary care physicians. I am a 67 yr old woman, now in excellent health. Prior to meeting my Naturpathic, Dr. Stephen LaBreque at SageMed in Bellevue, WA, I had an MD as my primary care doctor for 20+ years. Anytime I went in I received a prescription (band-aid I call them) for whatever I was going through. About 5 yrs ago, I suffered 'calcified breasts' from implant surgery. It was so painful! My MD gave me a pain RX, did not send me to get a mammogram. It got so bad that I had to have surgery and they butchered my breasts due to how far along it had gotten. I am permanently disfigured and all due to my MD not initiating proper investigative medical procedures. Then March 17, 2020, I got Covid. I did not know what hit me. At that time it was early and Dr's did not know what to do to make me feel better. I missed 5 months of work and my MD said 'get plenty of rest'. I was in bed 24 hrs a day for months, weak, I got terrible migraines, constant vomiting, had brain fog so bad I thought I was getting Alzheimers. Again my MD prescribed pain meds for the migraines, nausea meds to help but nothing was ever solved. It was only 'managed or masked'. I have never been the same since that day I got Covid. I aged tremendously, had blood pressure so high I was brought to the ER many times, my migraines became debilitating. Foods were bothering me that never had before. Finally, a client of mine (I am a Realtor) told me of her Naturpathic DR that helped with her arthritic pain and her overall health. She looked like a different person when I saw her. I went to SageMed and Dr. LaBreque's approach was to investigate what the cause of all these illnesses were. Blood work (which my MD never did!), then sessions of questions. The exhaustion I had for three years he said can be solved. He put me on a magnesium IV drip the first day. Within a week I started having more energy. He 'prescribed' supplements that have changed my life. He had me bring in all the vitamins and meds I was on and told me to throw out all the vitamins as they all had filler and were junk. He asked why I was on 7 meds?? Thyroid, Anti-depressants, sleeping meds, blood pressure meds, I didn't even know what half of them were really for. They obviously were not working! He gave me testosterone pellets, gave me progesterone daily pills, and prescribed supplements that he gave a discount on. Then he did an allergy panel on me. I had huge allergies which I had never had in my life. So then I did the 'take away' diet. He then sent me to an Interventional Orthopedic Alternative DR. He did a nerve block on me with PRP therapy and my migraines stopped immediately. He did PRP therapy into my neck that I had suffered for years with an arthritic neck. With PT I am now fully recovered and feel better than I ever have. I lost 40 lbs with their help. My testimony is to please allow Naturpathic Dr's become our primary care Dr's. Mine has literally changed my life!</p>
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Jamie Miller	Support	<p>All patients in our Healthcare system would benefit from the passing of Bill 5411. More patients consider their Naturopathic primary care doctor their primary provider and it would allow for better continuity of care to expand the legal scope of Naturopathic providers. Thank you.</p>
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Sara, Vince and Vinnie Dean	Support	I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state. I believe that this bill represents a positive step forward in healthcare by aligning the scope of practice for Naturopathic Physicians with their extensive training and legal recognition as primary care physicians. Allowing them to prescribe medications routinely prescribed by primary care providers, as seen in other states like Oregon and Vermont, can contribute to better healthcare outcomes for our community. My entire family is under the care of various Naturopathic Doctors as our PCPs. We have been put in the position of having to see other providers for medications for anxiety, ADHD, and insomnia. These experiences have not been positive. Getting to know new providers for the sake of these very common prescriptions has been a waste of time and quite costly. We have also had encounters where these unfamiliar providers did harm in not understanding or honoring our stories, symptoms, and experiences. We love and trust our NDs implicitly, which is why each family member has had their own ND PCP for over a decade now. We trust our doctor to prescribe needed medications safely and appropriately. Being able to have all of our needs met by our Naturopathic primary care doctors would help to alleviate the burden of needing to see multiple providers, and greatly benefit patients across the state.
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Betsy Faulkner RPH	Support	I am a pharmacist in support of senate bill 5411. Our healthcare systems are currently very strained. We constantly have doctors leaving their practice either to retire or seek another field of employment. Many are left without primary care that could be provided by a licensed Naturopathic Physician. Please support this bill to improve patient care.
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Mary Bushey	Support	<p>I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state. I spent the vast majority of my life battling a chronic, undiagnosed illness that was routinely ignored, misdiagnosed, and dismissed by typical Western doctors. I suffered from this illness for over 30 years before I moved to Washington state and my health insurance covered a visit to a naturopathic physician. This physician looked at me from a holistic perspective - it was quite literally the first time in my entire life a doctor asked me about my diet! In addition to running tests for common illnesses, she assessed aspects of my health that no other doctor had taken even a moment to consider. In the end, it was the fact that she had access to (and my insurance covered!) the tests she needed to run AND the fact that she studied medicine through a discipline that encourages a creative, holistic, and people-focused view, that I was able to diagnose and recover from a lifetime of severe food intolerances. With her continued support, I have been able to incorporate healthy diet and lifestyle modifications that have enabled me to heal and thrive. In the meantime, I have watched other members of my family who suffer from similar issues continue to be dismissed by their doctors in states like Florida and Alabama where their options and access to holistic health care are extremely limited. I recommend my doctor to anyone who will listen because whether they are dealing with a typical issue (like Type 2 Diabetes) or an unusual and as of yet non-mainstream disease (like non-celiac gluten sensitivity), she is able to approach it as a well-educated, thoroughly researched physician whose background in naturopathic medicine gives her an added ability to consider and show compassion to the whole patient. I tell everyone - "If you have an infection, she will prescribe antibiotics. If you have high blood pressure, she will educate and encourage you along a path to a healthier diet and lifestyle". THIS is the future of medicine. We have languished, as a nation, for far too long on a piecemeal, profit centered, pill popping approach that is devastating to both the health of our people and the economic impact of medical care in our nation. Every single time my doctor has had to refer me out to a traditional Western physician, I have left the encounter feeling defeated, angry, ignored, and forced to relive the trauma done to me by doctors as a child. At best, I get 5-10 minutes of a polite, but curt, doctor's time and leave with a prescription for a condition I most likely do not have, but I checked 1-3 symptom boxes for and that was enough for them. Every time I have returned to my doctor in tears, thanking her for taking the time to listen to me and see me as a human being. If we continue to hamstring our most innovative and promising physicians by denying them access to basic tools of medicine, they will continue to be dismissed and denigrated as "woo woo" snake oil, along with the many proven interventions to patient diet and lifestyle they regularly prescribe. If we want to create a society in which patients are given the tools and compassionate education necessary to take responsibility for their own healing, with the support and guidance of a qualified physician, we need to empower those physicians. Only by providing these forward-thinking, compassionate, people-focused naturopathic physicians with the tools they need will we be able to provide patients with the confidence and access THEY need to take charge of their health in a sustainable and responsible way. I believe that this bill represents a positive step forward in healthcare by aligning the scope of practice for Naturopathic Physicians with their extensive training and legal recognition as primary care physicians. Allowing them to prescribe medications routinely prescribed by primary care providers, as seen in other states like Oregon and Vermont, can contribute to better healthcare outcomes for our community. As a patient of a Naturopathic Doctor, I trust my doctor to prescribe needed medications safely and appropriately. Being able to have all of my needs met by my Naturopathic primary care doctor would help to alleviate the burden of needing to see multiple providers, and greatly benefit patients across the state.</p>
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Diane Hotrum	Support	<p>I am very much in support of senate bill 5411 Please allow natuo paths To be primary care, physicians Thank you.</p>
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Mark Fussell	Support	<p>Please record me as supporting this bill. I have been using naturopaths for years and they have helped me immensely. When I used a standard GP, they were unable to help some of my issues and the naturopaths were. They deserve to have the same prescriptive rights as GPs.</p>
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kristi zimmer	Support	I am writing to encourage the expansion of the ND scope of practice in WA State as outlined in Senate Bill 5411. I have been using Naturopathic Medicine and Doctors as my primary care providers for myself and my family since 2003. I was surprised to hear of some of the limitations on their scope that would affect me and my family negatively should I be in need of certain primary care tasks. Primarily certain prescriptive rights and end of life documentation. Recently, I have personally experienced end of life circumstances with family members. The administrative process at a time of grieving is already overwhelming and cumbersome. The thought that the physician that has been in charge of my family's healthcare for our entire lives could not sign off on our death is absurd and seems like a major oversight. Additionally, when myself or a family member is experiencing a medical crisis that requires advanced pain medication I'm deeply concerned that we would have to establish care with a new provider to access the medication. During medical crises, the first person we should be able to turn to is the physician that knows us the most and can provide the best care. Delays in accessing this care lead to unnecessary suffering. This is not how medicine was intended to work and anyone restricting this access and jurisdiction is more focused on control than the health and wellbeing of the patients. Please support Senate Bill 5411 and help WA citizens access the care they need from the physicians that provide lifelong care to families and know them best.
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Tina M	Support	I think it is necessary for this bill to be passed. Naturopathy is a different style of treatment. However is still medicine, and are Doctors. Some folks don't want to use Western Medicine practices. There should be a choice
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Dr. Jamie Doughty, ND	Support	I have been a licensed Naturopathic physician for 14 years. The current scope of practice proposal will allow me to better serve patients by deprescribing common medications that many patients seek support from Naturopathic Doctors to discontinue since we can provide supportive measures during the process and also offer safer alternatives. Many of my patients state that they can not get appointments with other providers due to long wait times (sometimes months) to be seen. This leaves them going to the ER or urgent care for non acute conditions and/or medications that could be managed by NDs.
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Please support Senate Bill 5411!

Carry Porter      Support      I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state. I live in rural WA, where access to care can be challenging. E.g., the closest hospital and emergency drop-in clinic is 60 miles from my home. And the only pharmacy within a 90-minute driving radius of my house is open only during normal working hours (M-F, 9 am to 4 pm). Getting medications requires me to take time away from work. Despite these difficulties, I am lucky to be a patient of a talented and skilled Naturopathic Doctor. I trust my doctor to prescribe needed medications safely and appropriately. Being able to have all of my needs met by my Naturopathic primary care doctor would help to alleviate the very real burden of needing to see multiple providers and making separate trips to the pharmacy. It would greatly benefit me, my family, and all other patients in rural parts of the state.

Cory Peffer      Support      I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state.

I believe that this bill represents a positive step forward in healthcare by aligning the scope of practice for Naturopathic Physicians with their extensive training and legal recognition as primary care physicians. Allowing them to prescribe medications routinely prescribed by primary care providers, as seen in other states like Oregon and Vermont, can contribute to better healthcare outcomes for our community.

As a patient of a Naturopathic Doctor, I trust my doctor to prescribe needed medications safely and appropriately. Being able to have all of my needs met by my Naturopathic primary care doctor would help to alleviate the burden of needing to see multiple providers, and greatly benefit patients across the state.

Dr. Jeannette Daneals, NMD, LMT	Support	I understand that currently a proposal is under review to increase the scope of practice of Naturopathic Physicians in Washington state to better align with our education, training and recognition as primary care doctors. I am aligned with this effort and feel strongly that the time is now. Over the last few years I have had an influx of new patients and clients reporting that primary care is hard to find and that it's "impossible" getting basic health care needs met. Clinics and hospitals are short staffed and booked out for months. I believe that this bill would benefit the medical system in the state of Washington. WA state has been ahead of the curve when it comes to acknowledging and respecting the equally arduous medical program that naturopathic doctors endure. Let's give naturopathic doctors like myself a chance to serve humanity with a fuller scope of practice. The below are a list of services that naturopathic doctors are trained and competent to do:• Prescribe controlled substances (Examples: pain medications like Tramadol, ADD meds like Adderall and anxiolytics like Xanax).• Sign legal documents and certificates (birth, death, disability etc) • Perform "minor office procedures" (to include anesthetic injections, repair of lacerations etc) and "physical modalities" (adding durable medical equipment). Unburden the medical system, serve more people and do better for humanity. This bill couldn't come at a better time.Thank you for considering my perspective.
Jade Stefano, ND	Support	I am a naturopathic doctor licensed in WA since 2016. I studied at Bastyr University. I am writing to support the expansion of the naturopathic scope of practice, senate Bill 5411, in order to help address the primary care shortage by leveraging the skills of clinicians who are already licensed in WA state. Naturopathic training is rigorous and includes the modalities proposed in the scope expansion. Everyday we see patients who are waiting sometimes 6 months to get in with a ANRP, MD or PA for primary care. Naturopathic physicians are well positioned to fill this gap as they have extensive training in prescribing medications including controlled substances. If this bill passes it will reduce costs and improve access to primary care for residents in WA state.
Heather Y.	Support	I have benefitted greatly from all the naturopaths I have on my team of care. When I refer them out to family and friends, the smallest difference of ND and MD affects them. They're all doctors who've worked so hard to earn their doctorate, they should be able to provide the same care. My NDs are my primary care and they should be able to announce that as well. Please consider :)
Margaret A. Hart	Support	Please allow my ND, Alethea Fleming, to practice further her medicine with more scope and responsibilities. She is MOST EXCELLENT and helps my particular patient needs. How wonderful to have a doctor to cover all medical needs if possible!
LJ Standish ND, PhD, FABNO AIMS, Institute Bastyr University	Support	I am writing to ask you to support the expansion of naturopathic medical scope of practice so that we can fully serve as primary care physicians. Currently, our limited scope of practice hampers my ability to prescribe necessary drugs to my patients. Naturopathic medical training is focused on making NDs excellent holistic PCP. We need broader scope of practice to adequately serve as primary care doctors.
Mike Lama	Support	I am writing to request that Dr. Alethea Fleming, ND, be able to practice as a primary care physician. This would allow me to see Dr. Fleming as my primary care physician. I cannot do so at this time because of the current regulations and costs involved. I ask that such regulations be changed to include Dr. Fleming and other NDs. She is an able and competent physician, and I would like for her to be my primary care physician.



Joyce Whitson, RN, BSN, MSN	Support	<p>I am a recently retired RN, having worked over 40 years in high risk public hospital settings, the last 30 years of which were here in WA state at the UWMC. I see a MD and ND for my personal care, and am writing in support of Senate Bill 5411.</p> <p>In short, we need more health care practitioners in most sectors in WA state. Perhaps not so much in tertiary settings, we are good at that, but in the primary care realm, with better access for patients to practitioners who can address a multitude of health care issues. Because let's face it, when a person enters the system, they may have one pressing presenting issue but way more often than not, there are layers of issues and related concerns. Humans are complex and I believe an approach to just address one issue, usually with one pill or more, is shortsighted, maybe ineffectual and probably contributes to higher levels of poorer health in the general population.</p> <p>Being very familiar with differing levels of professional preparation required, (MD, ND, DO, ARNP) I take the stand that Naturopathic Physicians are extremely well qualified to fully perform the primary care provider role. Because of who you are, I know I don't need to outline how extensive and thorough the requirements for ND schooling and licensure are. Knowing many people in those other categories as well, I know NDs are as well as if not better prepared than others. For instance, ARNPs. Since I am a RN, don't want to trash my profession but if the BSN degree plus a 3 year DNP program is sufficient to qualify a nurse for full primary care practice, then certainly an undergraduate degree, qualifying prerequisite courses and 4 years of medical school training is sufficient for naturopathic physicians. Honestly. Sheesh. We especially need an expanded work force of PCPs to address our bursting population of people needing care for addiction and mental health issues.</p> <p>In summary, we need more primary care providers in WA state. There are well trained, competent NDs in WA that can help provide needed care to WA state residents, as they do more fully in other states such as Oregon. Naturopathic physicians deserve expanded prescriptive authority, the ability to sign all health care documents, and the ability to prescribe schedule II-V controlled substances. Legal language needs to be brought up to date to allow NDs to serve more fully as primary care physicians. There is absolutely no reason these above rights should not be instituted.</p>
Adelee Mixon	Support	<p>I would like to voice my support for pay parity and expansion of prescribing scope for ND's. They are PCP's for many Washingtonians and need the ability to prescribe appropriate treatments for their patients, similar to other PCP's.</p> <p>They also go through equivalent years of schooling and training to other prescribers in order to be able to serve their patients. They provide the same services if not more, as they often provide mental health services as well. Because of this they should have equal pay to other primary care and specialty physicians.</p>
Donna Picardo	Support	<p>I vote yes to Senate Bill 5411 thank you</p>
Stuart Cardon	Support	<p>Dear DOHI am in favor of expanding NP scope of practice to include prescriptions for medical care. Washington has always been forward thinking in expanding healthcare access to its citizens and this would be one more appropriate step. Best regards Stuart Cardon DPM FACFAS</p>

Jennifer  
Silapie, ND

Support

I am writing in support of Senate Bill 5411 to expand the naturopathic scope of practices to better align with that of other statute-recognized primary care providers in Washington. I am a naturopathic doctor who lives and practices medicine in Klickitat County. I am licensed in both Oregon and Washington and service patients from both states. My practice is 2 miles from the Oregon border. I am particularly in favor of expanding prescriptive authority for naturopathic physicians. I currently hold a DEA license for Washington State. In both states I am recognized as a Primary Care Physician. If I practiced in Oregon I would have the prescriptive authority to prescribe substances in Schedule II through V for all my patients regardless of which state they reside. I have three primary reasons I support expanding prescriptive authority: To help my patients get off of medications they have been prescribed by other physicians. I currently cannot support and monitor a reduction in medication that I do not have authority to prescribe. To avoid duplication of services. I have patients I have been working with for years and they consider me their primary physician. But I have to send them to another doctor to get the medications they may need. Sometimes patients do not have another doctor they know and trust working with and it can take weeks to months to establish care with a PCP. This is both confusing and frustrating to my patients. Promote access to care for people in need for mental health issues. In the last few years ADHD, Anxiety, Depression, Insomnia have been intensified. And again the ability for my patients to get in to seek mental health, psychiatric evaluations or even establish care with a PCP with prescriptive authority is met with long waits to establish care. I can appreciate the safety concerns that come with expanding prescriptive authority to any profession. Naturopathic doctors are well educated and trained in pharmacology, with required ongoing pharmacology CE each year. The profession is dedicated to keeping patients safe and doctors knowledgeable. In addition any profession prescribing scheduled drugs needs a DEA and the prescriber must be registered with the PDMP, both created to promote public safety. Just by holding a DEA to prescribe testosterone and codeine, I am already required to complete an 8 hour training on medication assisted treatment for opioid use disorder even though under the current laws I can't even prescribe life saving medications like buprenorphine. Prescribing medications is usually last on the list of modalities I employ to help people regain mental and physical health. After working intimately with my patients, the ability to prescribe necessary medications or sign health related documents, provides them with the best continuity of care to manage their health and provide them with the types of care they expect from a primary care physician. In short, supporting Senate Bill 5411 would expand access to care in my rural community in a medically safe and thoughtful way. Thank you for your consideration.

Dawn Ipsen,  
PharmD

Support

I'm writing to encourage the Department of Health to deliver a favorable recommendation to the legislature regarding Senate Bill 5411 for increased scope of practice of Naturopathic Physicians (NDs). Specifically, I endorse the proposal for expanded prescriptive authority, the ability to sign all health care documents, and the modernize of language to enable NDs to serve more comprehensively as primary care providers. With over 20 years of experience as a pharmacist working directly with licensed Naturopathic Physicians (NDs) in Washington, I have had the privilege of collaborating with nearly one-half of all licensed, practicing NDs this calendar year alone. My interactions with NDs have consistently revealed their competence, compassion, accessibility, and commitment to fostering positive health experiences and outcomes for their patients. In light of the increasing challenges in accessing affordable healthcare in a timely manner, it is imperative to explore solutions that alleviate the strain on emergency rooms and urgent care centers. Empowering NDs to practice at the top of their license by expanding their scope and utilizing their skills can significantly contribute to meeting this supply-demand gap. Furthermore, the ease of communication within ND offices, as opposed to other healthcare settings, position them well to further provide primary care without delay or loss of continuity. Additionally, the extensive training NDs receive in lifestyle modification, diet and integrative medicine equip them with valuable tools for addressing the root causes of diseases through non-drug interventions. Functional medicine approaches, employed by NDs, have demonstrated positive outcomes and a reduction of issues related to drug abuse and addiction. I have also had direct involvement as part of Bastyr University affiliate faculty, contributing to the education of NDs in the pharmacology series, specifically in dermatology. This experience underscores the ability of NDs to address patient concerns during primary care visits, potentially eliminating the need for immediate referrals to specialists. It is routine that ND pharmacology training address specific medication by therapeutic class with a focus on mechanism of action, dosing and indications, contraindications and cautions, adverse reaction, drug interaction and pharmacology. Furthermore, my role as an educator for the Washington Association of Naturopathic Physicians (WANP) has provided insight into the organization's commitment to continued growth, education, and support for practicing NDs. WANP's dedication to staying current and progressive in delivering necessary training reflects its commitment to maintaining quality care in an ever-changing environment. In conclusion, the expansion of NDs' scope of practice, as proposed in SB 5411, is a positive step toward enhancing healthcare accessibility, improving patient outcomes, and addressing the challenges in our current healthcare system. I urge you to consider and support this crucial initiative for the benefit of both healthcare providers and the communities they serve. Thank you for your time and consideration.

Julie Westman Support My naturopath is my primary care provider. She has diagnosed and helped me manage multiple medical conditions. It is very concerning to me that she is unable to prescribe schedule II-V controlled substances even though her education matches that of medical doctors. If I end up requiring this class of drug, I would not be able to receive a prescription from her even though she manages all of my medical conditions and knows me the best. Limiting her ability to prescribe a class of medications ultimately harms me, the patient, who will be forced to get a lesser medication or see someone with no history or knowledge of my health history. Please put patients first and expand the scope of practice for our very qualified naturopaths. Thank you. Julie Westman 425.726.3132

Wyatt Robinson, PT, DPT, ATC Support o Whom This May Concern,  
My name is Wyatt Robinson and I am a licensed Physical Therapist in WA state. I wanted to write in support of Senate Bill 5411 which would expand the scope of Naturopathic Doctors. They have the appropriate training to properly handle this scope increase and can be an integral part of helping the healthcare crisis of lack of access. This will help streamline care with patients already using NDs as their primary care.  
In my 13 yr career in the state of WA I have worked with countless NDs and am familiar with their curriculum. This gives me the utmost confidence in this move to help all of our patients and the healthcare system as a whole.

Rebecca Meldrum, ND Support This is a brief email in support of Senate Bill 5411, the proposal to increase the naturopathic physician scope of practice. As a licensed naturopathic physician in WA state, I can attest to the amount of rigorous training I went through to obtain my license. This training aligns with that of other prescribers in our state, such as nurse practitioners and conventional physicians.

In my practice, we strongly focus on the foundations of health and the modalities of lifestyle medicine, and when we do this many of my patients need to taper off of current medications because of the tremendous improvements they make for their health. While we can safely do this in alignment with their prescriptive provider, there are often times when patients have been on medications for so long, they are not in communication with the original provider who prescribed the medication. For the times I may have a patient on a controlled substance prescribed by another prescriber, it will be challenging to find a prescriber with the time available to provide the support needed during such a taper. Being able to do this safely with the needed support and guidance in my office would be extremely beneficial, not only for my patients, but for the greater healthcare system, which is not currently set up to support these types of needs, which require time and thorough guidance. Our naturopathic training, and my practice in particular would allow me to practice in such a way that can greatly support this need of behavioral healthcare patients if the naturopathic physician scope of practice is increased.

Emily Grochowski, RDN	Support	I am whole heartedly in favor of Naturopathic Doctors being treated on equal footing as MDs, and as such being able to receiving the credit they deserve with the proposed expansion of their scopes of practice. This would be of massive benefit to the care of many current and potential patients as well as to the healthcare system of Washington as a whole.Thank you for your consideration.
Carla Marie Monica	Support	<p>I am a patient who has found the best care I have ever received with my naturopathic doctor at Tree of Health in Woodinville, WA. My life was literally changed - I no longer have full body pains and gastrointestinal issues- I was never treated for the cause, always just bandaids and prescriptions from previous doctors. It was Dr Apfelbaum who ran several tests to find out why this was happening. I am not on ANY prescription medication and was able to change my life through proper dietary changes and supplements.</p> <p>My mom flew from NJ to meet with Dr Apfelbaum after I told her how amazing she was. My mom was on 14 prescription medications - each to help with side effects from the previously prescribed rx - she has been diabetic for 20 years. With proper dietary changes and supplements guided by Dr. Apfelbaum, my mom was able to COME OFF OF INSULIN. Her primary care doctor in NJ told her it was "a miracle" It was not a miracle, it was PROPER care treated at the root NOT a bandaid.</p> <p>It is wildly absurd to me that naturopathic doctors in WA state cannot prescribe medication that is routinely prescribed by other medical professionals. I am in full support of SB 5411.</p>
Susan Eastman	Support	My name is Susan Eastman and I have been using naturapathic as primary care for years so anything that broadens naturapathic ability to treat and or refer and prescribe is fully supported and encouraged by me. In addition MDs should be encouraged and able to prescribe bioidenticle hormone replacement therapy, including prescriptions for compounding pharmacies. Appreciate any and all efforts to improve healthcare in Wa State.
Veronica M. Gayoso	Support	<p>I am a first year Naturopathic Doctoral student at Bastyr University, Kenmore campus. I am submitting this comment from the lens of a passionate student advocate who strongly believes and embodies the principles and practices of Naturopathic Medicine. NDs receive appropriate and comprehensive training to expand their scope in the realm of pharmaceuticals. NDs are currently an underutilized partner in the public health and primary care realms, and I am CONFIDENT that we can fill the gaps our healthcare landscape is currently experiencing if we obtain a full, non-limiting, scope of practice. I hope that while I am a student who will soon encounter preceptorship with other NDs in the Washington area, I will be able to observe the complete provider experience. This will allow me to best prepare to serve my community once I graduate and enter the profession of healthcare.</p> <p>If you require any additional information, please do not hesitate to contact me.</p>
Reiko Sudduth, MS, RDN	Support	I would like to express my strong support for Senate Bill 5411. The excellent level of care provided by naturopathic physicians (NPs) is one reason that healthcare in Washington is much, MUCH better than other areas in the country. I know, because I work with patients from all over the United States. NPs are able to spend more time with their patients, and provide a more holistic approach to healthcare, for which there is increasing demand as we face increasing chronic and unusual illness. Additionally, this bill will help address the shortage of primary care in the state. Please help WA to continue to be a leader in healthcare and support this bill.

Emily Hazen      Support      I support Senate Bill 5411.

My naturopathic doctor is my primary care provider, and I trust their training, their skills, and their expertise with whole-person health to understand what health care I need. This includes the full scope of practice they've been trained for, including the full scope of medications that other PCPs can prescribe. It would simplify and streamline my and my family's access to the range of primary care services they can safely and competently provide, and greatly reduce wait times, travel time, and time spent searching for other providers who could provide these services to me when they aren't my PCP. It would also have helped my family avoid urgent care and emergency room visits on some occasions.

Please support Senate Bill 5411.

Carrie Lafferty,  
PT      Support      To Whom It May Concern:

I am writing in support of the proposed changes for ND's in WA state. As a medical provider myself (PT) I completely support these changes. I get referrals from ND's into my practice regularly and would welcome the proposed changes as would the patients they refer to me. This would potentially reduce medical costs.

Personally, my Primary Care Provider has been an ND for the 23 years that I have lived in Seattle. I value their holistic view and will always choose an ND for my own PCP care. Allowing them to have the full rights and responsibilities of other PCP's in WA state would be fully welcomed by me. I can see that this could be a benefit to the general public and other providers who may benefit from their perspective.

I am in support.

Lindsay      Support      Greetings,  
I'm very concerned about SB5411 and would like to voice my support to increase the scope of practice of naturopathic doctors..  
I depend on medications to support anxiety and ADHD especially in cases of triggers I can manage ahead of time like medical procedures, travel and public speaking.  
Our naturopathic doctors are needed more than ever.  
Please support this need in this state.  
In gratitude,

Julie Rey Support Hello, I am writing as a long time patient of a naturopathic physician. I have had nothing but extraordinary healthcare from my naturopathic physician, and think of her as my primary care provider. Unfortunately, she is not able to prescribe my ADD medication, and when I went through a procedure was not able to prescribe opioids for short term use. For this reason, I maintain relationships with other physicians, though I don't actually need their advice for medication management. I would trust that my naturopathic physician would receive proper training to prescribe these new medications in her scope, and would trust that she would only prescribe them if she was completely comfortable with their use. Please consider expanding the scope of practice for naturopath positions, as they are perfectly poised to be primary care physicians in our ever expanding and overwhelmed healthcare system.

Andrew Maggetti Support I'm writing to express my support for expanding Naturopathic Medicine's Scope of Practice in Washington. I've been working with Dr. Mandy Gulla for months now and can attest to the high quality of care she provides and her careful consideration in deciding what's best for each patient. I trust her completely and have felt safe under her care. She is extremely thoughtful with each decision she makes.

Thank you for your consideration!

Dr. Jennea Wood, ND Support Dear to whom it may concern,

I am writing in support of Senate Bill 5411 to expand the scope of practice of naturopathic physicians in Washington state. As an ND myself, I have encountered many situations where it was an inconvenience to my patients that I do not have full rights as a primary care physician in the state of Washington. Having practiced in Oregon prior to moving to Washington, I was previously used to being able to prescribe and deprescribe as needed pain medications like Tramadol, ADD meds like Adderall and anxiolytics like Xanax. Some examples of times when the inability to prescribe these medications has negatively impacted my patients in Washington include patients with a severe fear of air travel for whom I would normally prescribe a small number of xanax tabs for an upcoming trip, patients who are stable on their ADD medication and see me for their primary care and would like for me to take over their prescription, patients who are taking a benzodiazepine such as alprazolam for sleep or anxiety and are ready to come off of it but need support with a slow weaning program. These examples represent dozens of my patients who needed to pay additional money to have a visit with another provider to have these needs met when I am trained to safely offer these services.

Please support the expansion of naturopathic scope of practice to remove this burden from healthcare consumers in the state of Washington.

Carole Kirk Support I would like very much for Naturopath Doctors to be covered by my medical insurance. I resent having to pay for insurance and medicare that I cannot use because I have to pay out of pocket to see the doctor of my choice. I would prefer to see a doctor who cares about my health rather than a MD drug pusher. I sincerely support any bill that will allow me freedom of choice in my health care and have it covered by insurance.

Dr. Conor Watters, ND, MSAS Support 11/16/2023  
To: Washington State Department of Health Office of Health Professions  
From: Dr. Conor Watters ND MSAS

I am writing today to voice my support for Senate Bill 5411 ("AN ACT Relating to addressing a shortage of primary care services [...] by increasing the scope of practice of naturopathic physicians". As a Naturopathic Physician performing services in the role of Senior Resident Physician and focusing on Integrative Psychiatry as an area of practice, I would find it very valuable to utilize an expanded scope of practice. Specifically, it would be useful to prescribe stimulant medications for ADHD, benzodiazepine medications for anxiety and panic disorders, and opioid medications for pain management as well as for opioid use disorder (i.e., buprenorphine). It would be especially useful to be able to prescribe ketamine as ketamine-assisted psychotherapy is a large part of my practice and is a helpful intervention for treatment-resistant depression. Also, in line with the WANP's "Proposal to Increase Scope of Practice Cover Sheet" by Angela Ross ND et al., the ability to prescribe these medications would be beneficial for the cases where patient care merits deprescribing or taking over management of these medications from other providers. As the WANP's sheet mentions, trained and licensed NDs have working knowledge of proper prescribing practices of these medications and may also be required to obtain further training to participate in an expanded prescriptive scope. It is for these reasons, amidst the many other benefits in regard to expanded capacity to work as a primary care provider and in regards to being better situated to work in capacities beyond a private practice setting (e.g., in a hospital or community health clinic, etc.), that I support SB 5411 and encourage our legislators to approve this measure.



Sage Wheeler, ND	Support	<p>I am writing in support of Senate Bill 5411 to endorse the expanded scope of Naturopathic Doctors in Washington State. You likely have many comments to read so I will try to be concise. Our duty is twofold: ensure patients are not harmed and ensure patients are well served. We have great models to which we can refer when it comes to patient harm. Oregon, Arizona, Vermont, and several other states allow for a higher prescriptive authority for NDs. The data from these states do not suggest patients are being harmed. In the case of the most harmful drugs, opioids, the rate of adverse events is equal to other medical professionals in the state of Oregon (see attached document for reference), and in no case was a fatality associated with a prescription by an ND. Patients will be better served by primary care physicians that can fully participate in their healthcare. I have many patients that must go to other healthcare providers for their refills when they could easily be refilled in that same visit by me. This is an unnecessary burden on the healthcare system. I also frequently ask my patients about the care they receive during these refill visits and it almost inevitably amounts to nothing. There is no plan to taper off, there is no screening for common long term side-effects or mounting addiction. The average visit duration is 5-10 minutes. I can not speak for all NDs, but our training and philosophies are aligned, and this type of care simply would not happen in my practice. My visits average 45 minutes. My approach is to treat the cause, identify obstacles to cure, and enhance wellness through diet, exercise, nutrient therapy, and hormone support. This approach almost certainly results in the opportunity and need to deprescribe. Poly-pharmacy is far too common in patients with chronic disease. My goal is not to start another pill-mill. My goal is to have the authority to taper patients, safely, off overused and unneeded drugs, and replace them with safer alternatives. I can not taper patients off prescriptions that are not in my authority to prescribe. I can not fix a broken system from which I am excluded. In these deliberations, you will be faced with fear-mongering, horrific anecdotes, and overt protectionism. I ask that you only seek evidence. Ask people to prove what they are saying. I think you will find my community of NDs well prepared to meet that challenge. Thank you for your consideration, and for your service to our state.</p>
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Donald M Blair, DDS, ND	Support	<p>I endorse the acceptance of Senate Bill 5411. I have been practicing dentistry in the State of Washington since 1974. I received an ND degree from Bastyr University in 1982 and have been licensed to practice since graduation. I have many friends in both professions. The naturopathic community is dedicated to professional and honest care. The Naturopaths that I know are knowledgeable and fully capable of providing first rate primary care. I believe that it is in the best interest of the state to allow a full scope of practice in primary care for Naturopaths.</p>
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Emily Whinkin	Support	<p>I believe Bill 5411 will allow NDs to better serve patients, practice primary care to the extent of their training and allow the field to grow in service to relevant and preventive, holistic healthcare.</p>
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Anita Badri	Support	Sending my support for the legislative effort to improve the access to Naturopathic care. My current insurance does not cover my naturopathic care, so it is all out of pocket and expensive for me on my limited retirement budget. I try to coordinate my care between traditional medicine and naturopathy. I prefer limited drug taking. Thank you. Anita Badri
Grace Lasker, PhD, CN, MCHES, CHC	Support	In response to Senator Annette Cleveland (D-49), for a Sunrise Review on Senate Bill 5411 - the WANP's on-going effort to expand naturopathic scope of practice to better align with that of other statute-recognized primary care providers in Washington, I wish to say as a disabled individual who relies solely on naturopathic care as my source of healthcare, please support and expand access for us all to receive this important, life-giving care with more access to services provided, scope of practice, insurance coverage, and reducing costs. We are desperate for more healthcare providers, yet they are already here, willing to help if their scope of practice could be aligned. Empower your healthcare workforce. Support their right to provide safe, important, aligned care.
Ami Karnosh, MSc, Nutrition	Support	I am writing to support full access to Naturopathic care. Not only am I a patient but I work with hundreds of oncology patients and their caregivers each year. Reducing access or keeping restrictions would put our state at a significant disadvantage in healthcare creating a need for people to leave the state for essential services. This already happens on a small scale.  Aligning the scope of practices with that of other statute-recognized primary care providers in Washington is critical for the care of our citizens.
Tricia Cassels	Support	Hi-  My family has been using a naturopathic health care provider for almost 20 years now as our primary care provider. Sometimes we need to go see a different provider to get the appropriate care for my autistic child, as our provider can not prescribe the needed meds. We think it would be beneficial to have our primary care provider prescribe what my child needs, as she knows my child best.  Warmly,

Dr. Prochaska, ND Support

Hi, my name is Dr. LeeAnn Prochaska and I'm a naturopathic doctor practicing in Washington state. I am emailing you in support of the applicant report for the Senate Bill 5411 that will improve the scope of practice for naturopathic physicians. Over the past few years working in Washington as a healthcare provider, I have seen a marked drop off in patient access to healthcare. When encountering my patients, I often hear reports of inability to access their primary care provider in a timely manner, frequently taking several months to see their physician for urgent matters. Patients often complain that their primary care providers do not have time to see them when they are in office and maintaining continuity of care with their physicians is difficult, as their primary care physicians often move on prior to their next follow up. Unexpectedly, I have seen these changes have a negative impact on the people in our community, who often report confusion about their conditions and treatment plans, and express a general feeling of not being heard by their care providers, who are understandably overwhelmed. I do not feel that these remarks are a criticism of our current healthcare providers, but an expected outcome when there are too few primary care providers for too many patients. This bill will allow naturopathic doctors to better serve patients in the role of primary care providers and aid in alleviating the workload of an overwhelmed healthcare system. I hope that you will consider implementing the suggested changes so that our patients, the members of our communities, can be better served and cared for.

Dr. Renee McKinney (Plummer) Support

I am writing in SUPPORT on behalf of the Senate Bill 5411 which aims to expand naturopathic prescriptive authority to include controlled substances in Schedules II through V of the Uniform Controlled Substances Act, sign and attest to any documents or certificates that any PCP is routinely expected to sign, as well as updating language under "minor office procedures" and "physical modalities", and update all RCW to reflect changes for our profession by the established board. I have been practicing as a ND PCP in the state of WA since 2018 and have witnessed the impact that not having a larger prescriptive right has impacted patients. For example, a medication such as Adderall (Amphetamine) is a common medication amongst children and adults used to treat ADHD, a common and more prevalent diagnosis. Since 2020, there has been a mass exodus of MDs, DOs, Psychiatrists, from Washington state, meaning the availability to continue renewal of medications, referrals for specialists to manage said scheduled drugs, as well as establishment of care for new patients have dramatically decreased making this an issue for healthcare providers. Naturopathic doctors can improve the gap in this crisis by increasing our prescriptive rights to help diagnose and treat patients of various conditions, including ADHD, to patients that need to establish care with an available provider. We preach in medicine, first do no harm, but by not making adjustments to these rules when seen fit, could be harming our population as a whole. Most NDs practice primary care and could immediately help take care of this issue. As a previous board member of the Washington Association of Naturopathic Physicians, we have been advocating for this bill to be approved in WA state for over 10 years attempting to increase prescriptive rights as well as the right of equal pay parity for providers. This senate bill 5411 gives an opportunity to help create a myriad of opportunities for patients to only need one healthcare provider managing common conditions as well as get access to naturopathic medicine. Please contact me via email if you have any further questions based upon this submission for the Senate Bill 5411.

Katherine Walter	Support	I'd like to register my support for SB 5411. There's a severe shortage of mental health prescribers. Of the various ways we could lessen that shortage, expanding prescriptive authority for NP's sounds like the best way forward to me. We have many clients who feel more comfortable in the care of a NP, so this would expand access to care.
Lana	Support	I support ND to be my PCP. I have been using NDs for years and believe they should be treated the same as an MD. It should be my choice to see/use who I want and be covered by insurance. If nurse assistants are covered, then by all means NDs should be also. NDs take care of me completely from head to toe and I like that. While MDs certainly have their important place, I truly feel more comfortable having these choices.
Michael Anderson	Support	I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state. I believe that this bill represents a positive step forward in healthcare by aligning the scope of practice for Naturopathic Physicians with their extensive training and legal recognition as primary care physicians. Allowing them to prescribe medications routinely prescribed by primary care providers, as seen in other states like Oregon and Vermont, can contribute to better healthcare outcomes for our community. As a patient of a Naturopathic Doctor, I trust my doctor to prescribe needed medications safely and appropriately. Being able to have all of my needs met by my Naturopathic primary care doctor would help to alleviate the burden of needing to see multiple providers, and greatly benefit patients across the state.
Alexa Lewis	Support	<p>I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state.</p> <p>I believe that this bill represents a positive step forward in healthcare by aligning the scope of practice for Naturopathic Physicians with their extensive training and legal recognition as primary care physicians. Allowing them to prescribe medications routinely prescribed by primary care providers, as seen in other states like Oregon and Vermont, can contribute to better healthcare outcomes for our community.</p> <p>As a patient of a Naturopathic Doctor, I trust my doctor to prescribe needed medications safely and appropriately. Being able to have all of my needs met by my Naturopathic primary care doctor would help to alleviate the burden of needing to see multiple providers, and greatly benefit patients across the state.</p>
Arlene Lim	Support	<p>I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state.</p> <p>I believe that this bill represents a positive step forward in healthcare by aligning the scope of practice for Naturopathic Physicians with their extensive training and legal recognition as primary care physicians. Allowing them to prescribe medications routinely prescribed by primary care providers, as seen in other states like Oregon and Vermont, can contribute to better healthcare outcomes for our community.</p> <p>As a patient of a Naturopathic Doctor, I trust my doctor to prescribe needed medications safely and appropriately. Being able to have all of my needs met by my Naturopathic primary care doctor would help to alleviate the burden of needing to see multiple providers, and greatly benefit patients across the state.</p>

Peggy Williams Scott Support I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state. I believe that this bill represents a positive step forward in healthcare by aligning the scope of practice for Naturopathic Physicians with their extensive training and legal recognition as primary care physicians. Allowing them to prescribe medications routinely prescribed by primary care providers, as seen in other states like Oregon and Vermont, can contribute to better healthcare outcomes for our community. As a patient of a Naturopathic Doctor, I trust my doctor to prescribe needed medications safely and appropriately. Being able to have all of my needs met by my Naturopathic primary care doctor would help to alleviate the burden of needing to see multiple providers, and greatly benefit patients across the state.

Nora McCaughran Support I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state.

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Thank you for your consideration,

Sara Kellogg Support I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state.

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Michelle Neises Support I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state. I personally have a sister, that is a naturopathic physician. She puts in more hours and better care for her typical patient than that of a regular MD. She is underpaid by insurance for the quantity of time and loving care that she puts in for patience. I believe that this bill represents a positive step forward in healthcare by aligning the scope of practice for Naturopathic Physicians with their extensive training and legal recognition as primary care physicians. Allowing them to prescribe medications routinely prescribed by primary care providers, as seen in other states like Oregon and Vermont, can contribute to better healthcare outcomes for our community. As a patient of a Naturopathic Doctor, I trust my doctor to prescribe needed medications safely and appropriately. Being able to have all of my needs met by my Naturopathic primary care doctor would help to alleviate the burden of needing to see multiple providers, and greatly benefit patients across the state.

Nancy Simpson Support I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state.

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Andrew Peterson Support I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state.

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Douglas Montague	Support	<p>I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state. I believe that this bill represents a positive step forward in healthcare by aligning the scope of practice for Naturopathic Physicians with their extensive training and legal recognition as primary care physicians. Allowing them to prescribe medications routinely prescribed by primary care providers, as seen in other states like Oregon and Vermont, can contribute to better healthcare outcomes for our community. As a patient of a Naturopathic Doctor, I trust my doctor to prescribe needed medications safely and appropriately. Being able to have all of my needs met by my Naturopathic primary care doctor would help to alleviate the burden of needing to see multiple providers, and greatly benefit patients across the state.</p>
Tom Denman	Support	<p>I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state.</p> <p>I believe that this bill represents a positive step forward in healthcare by aligning the scope of practice for Naturopathic Physicians with their extensive training and legal recognition as primary care physicians. Allowing them to prescribe medications routinely prescribed by primary care providers, as seen in other states like Oregon and Vermont, can contribute to better healthcare outcomes for our community.</p> <p>As a patient of a Naturopathic Doctor, I trust my doctor to prescribe needed medications safely and appropriately. Being able to have all of my needs met by my Naturopathic primary care doctor would help to alleviate the burden of needing to see multiple providers, and greatly benefit patients across the state.</p>
Erin Denman	Support	<p>I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state.</p> <p>I believe that this bill represents a positive step forward in healthcare by aligning the scope of practice for Naturopathic Physicians with their extensive training and legal recognition as primary care physicians. Allowing them to prescribe medications routinely prescribed by primary care providers, as seen in other states like Oregon and Vermont, can contribute to better healthcare outcomes for our community.</p> <p>As a patient of a Naturopathic Doctor, I trust my doctor to prescribe needed medications safely and appropriately. Being able to have all of my needs met by my Naturopathic primary care doctor would help to alleviate the burden of needing to see multiple providers, and greatly benefit patients across the state.</p>
Kate Gordon	Support	<p>I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state. I believe that this bill represents a positive step forward in healthcare by aligning the scope of practice for Naturopathic Physicians with their extensive training and legal recognition as primary care physicians. Allowing them to prescribe medications routinely prescribed by primary care providers, as seen in other states like Oregon and Vermont, can contribute to better healthcare outcomes for our community. As a patient of a Naturopathic Doctor, I trust my doctor to prescribe needed medications safely and appropriately. Being able to have all of my needs met by my Naturopathic primary care doctor would help to alleviate the burden of needing to see multiple providers, and greatly benefit patients across the state.</p>

Cyndi Cox	Support	<p>I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state.</p> <p>I believe that this bill represents a positive step forward in healthcare by aligning the scope of practice for Naturopathic Physicians with their extensive training and legal recognition as primary care physicians. Allowing them to prescribe medications routinely prescribed by primary care providers, as seen in other states like Oregon and Vermont, can contribute to better healthcare outcomes for our community.</p> <p>As a patient of a Naturopathic Doctor, I trust my doctor to prescribe needed medications safely and appropriately. Being able to have all of my needs met by my Naturopathic primary care doctor would help to alleviate the burden of needing to see multiple providers, and greatly benefit patients across this state.</p>
Halimah Rochfort	Support	<p>I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state.</p> <p>I believe that this bill represents a positive step forward in healthcare by aligning the scope of practice for Naturopathic Physicians with their extensive training and legal recognition as primary care physicians. Allowing them to prescribe medications routinely prescribed by primary care providers, as seen in other states like Oregon and Vermont, can contribute to better healthcare outcomes for our community.</p> <p>As a patient of a Naturopathic Doctor, I trust my doctor to prescribe needed medications safely and appropriately. Being able to have all of my needs met by my Naturopathic primary care doctor would help to alleviate the burden of needing to see multiple providers, and greatly benefit patients across the state.</p>
Lemoine Radford	Support	<p>I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state. I believe that this bill represents a positive step forward in healthcare by aligning the scope of practice for Naturopathic Physicians with their extensive training and legal recognition as primary care physicians. Allowing them to prescribe medications routinely prescribed by primary care providers, as seen in other states like Oregon and Vermont, can contribute to better healthcare outcomes for our community. As a patient of a Naturopathic Doctor, I trust my doctor to prescribe needed medications safely and appropriately. Being able to have all of my needs met by my Naturopathic primary care doctor would help to alleviate the burden of needing to see multiple providers, and greatly benefit patients across the state. I personally benefit from working with Naturopathic doctors. I would benefit even more by their being able to also prescribe and oversee my pharmaceuticals prescriptions in order to make sure everything together is effective. Allopathic doctors often do not know how various supplements interact with pharmaceuticals--Naturopathic doctors do have that expertise. This would enable me to see only one doctor for my general care which would definitely be a cost savings.</p>



Ramin Kazempour	Support	<p>I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state.</p> <p>I believe that this bill represents a positive step forward in healthcare by aligning the scope of practice for Naturopathic Physicians with their extensive training and legal recognition as primary care physicians. Allowing them to prescribe medications routinely prescribed by primary care providers, as seen in other states like Oregon and Vermont, can contribute to better healthcare outcomes for our community.</p> <p>As a patient of a Naturopathic Doctor, I trust my doctor to prescribe needed medications safely and appropriately. Being able to have all of my needs met by my Naturopathic primary care doctor would help to alleviate the burden of needing to see multiple providers, and greatly benefit patients across the state.</p>
None provided	Support	<p>I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state.</p> <p>I believe that this bill represents a positive step forward in healthcare by aligning the scope of practice for Naturopathic Physicians with their extensive training and legal recognition as primary care physicians. Allowing them to prescribe medications routinely prescribed by primary care providers, as seen in other states like Oregon and Vermont, can contribute to better healthcare outcomes for our community.</p> <p>As a patient of a Naturopathic Doctor, I trust my doctor to prescribe needed medications safely and appropriately. Being able to have all of my needs met by my Naturopathic primary care doctor would help to alleviate the burden of needing to see multiple providers, and greatly benefit patients across the state.</p>
Hans Wolfgang Schulze	Support	<p>I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state. I believe that this bill represents a positive step forward in healthcare by aligning the scope of practice for Naturopathic Physicians with their extensive training and legal recognition as primary care physicians. Allowing them to prescribe medications routinely prescribed by primary care providers, as seen in other states like Oregon and Vermont, can contribute to better healthcare outcomes for our community. As a patient of a Naturopathic Doctor, I trust my doctor to prescribe needed medications safely and appropriately. Being able to have all of my needs met by my Naturopathic primary care doctor would help to alleviate the burden of needing to see multiple providers, and greatly benefit patients across the state.</p>
Caleb A. Cox	Support	<p>I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state.</p> <p>I believe that this bill represents a positive step forward in healthcare by aligning the scope of practice for Naturopathic Physicians with their extensive training and legal recognition as primary care physicians. Allowing them to prescribe medications routinely prescribed by primary care providers, as seen in other states like Oregon and Vermont, can contribute to better healthcare outcomes for our community.</p> <p>As a patient of a Naturopathic Doctor, I trust my doctor to prescribe needed medications safely and appropriately. Being able to have all of my needs met by my Naturopathic primary care doctor would help to alleviate the burden of needing to see multiple providers, and greatly benefit patients across the state.</p>

Anita Roberson Support

I am writing in support of Senate Bill 5411. Please consider the following reasons of support:

- I support my Naturopathic Doctor's (ND's) ability to prescribe medicines that they have been trained to prescribe, and sign off on all necessary forms as my PCP. This will minimize obstacles and delay to me getting the care I need. I already consider my ND as my PCP and I believe others ought to as well.
- My naturopath has extensive training and should be recognized to fully practice under this setting, as any PCP does. This would help to reduce costs and increase access to care for me and many other Washingtonians.

I literally put our lives in the hands of my family's NDs. Please approve Senate Bill 5411.

Jacky Paige Support

• "I support my ND having the ability to prescribe medicines that they've been trained to prescribe, and sign off of all necessary forms as my PCP. This will minimize obstacles and delay to me getting the care I need from my primary care provider."

Anita Roberson Support

I am writing in support of Senate Bill 5411. Please consider the following reasons of support:• I support my Naturopathic Doctor's (ND's) ability to prescribe medicines that they've been trained to prescribe, and sign off on all necessary forms as my PCP. This will minimize obstacles and delay to me getting the care I need. I already consider my ND as my PCP and I believe others ought to as well.• My naturopath has extensive training and should be recognized to fully practice under this setting, as any PCP does. This would help to reduce costs and increase access to care for me and many other Washingtonians.I literally put my life in my family's Nhands because of her skillplease approve Senate Bill 5411.

Nido Monwai Support

I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state.

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christopher balder Support

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Kara Montague	Support	<p>I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state. I believe that this bill represents a positive step forward in healthcare by aligning the scope of practice for Naturopathic Physicians with their extensive training and legal recognition as primary care physicians. Allowing them to prescribe medications routinely prescribed by primary care providers, as seen in other states like Oregon and Vermont, can contribute to better healthcare outcomes for our community. As a patient of a Naturopathic Doctor, I trust my doctor to prescribe needed medications safely and appropriately. Being able to have all of my needs met by my Naturopathic primary care doctor would help to alleviate the burden of needing to see multiple providers, and greatly benefit patients across the state.</p>
ROBERT MUELLER	Support	<p>I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state.</p> <p>I believe that this bill represents a positive step forward in healthcare by aligning the scope of practice for Naturopathic Physicians with their extensive training and legal recognition as primary care physicians. Allowing them to prescribe medications routinely prescribed by primary care providers, as seen in other states like Oregon and Vermont, can contribute to better healthcare outcomes for our community.</p> <p>As a patient of a Naturopathic Doctor, I trust my doctor to prescribe needed medications safely and appropriately. Being able to have all of my needs met by my Naturopathic primary care doctor would help to alleviate the burden of needing to see multiple providers, and greatly benefit patients across the state</p>
Brian Keane	Support	<p>I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state. I believe that this bill represents a positive step forward in healthcare by aligning the scope of practice for Naturopathic Physicians with their extensive training and legal recognition as primary care physicians. Allowing them to prescribe medications routinely prescribed by primary care providers, as seen in other states like Oregon and Vermont, can contribute to better healthcare outcomes for our community.</p> <p>As a patient of a Naturopathic Doctor, I trust my doctor to prescribe needed medications safely and appropriately. Being able to have all of my needs met by my Naturopathic primary care doctor would help to alleviate the burden of needing to see multiple providers, and greatly benefit patients across the state.</p>
Marissa Franklin	Support	<ul style="list-style-type: none"> <li>• "I support my ND having the ability to prescribe medicines that they've been trained to prescribe, and sign off of all necessary forms as my PCP. This will minimize obstacles and delay to me getting the care I need from my primary care provider."</li> </ul>
Mary Margaret Moore	Support	<ul style="list-style-type: none"> <li>• I support my ND, who is my PCP, having the ability to prescribe medicines that they've been trained to prescribe, and sign off on all necessary forms as my PCP. This will minimize obstacles and delay to me getting the care I need from my PCP. Enabling well and appropriately trained NDs in this way is a simple way to lessen the strain on the medical system and the strain on individual patients in navigating it.</li> </ul>

DESPINA PASHAIAN	Support	To whom it may concern, I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state. I believe that this bill represents a positive step forward in healthcare by aligning the scope of practice for Naturopathic Physicians with their extensive training and legal recognition as primary care physicians. Allowing them to prescribe medications routinely prescribed by primary care providers, as seen in other states like Oregon and Vermont, can contribute to better healthcare outcomes for our community. As a patient of a Naturopathic Doctor, I trust my doctor to prescribe needed medications safely and appropriately. Being able to have all of my needs met by my Naturopathic primary care doctor would help to alleviate the burden of needing to see multiple providers, and greatly benefit patients across the state.
Susan Neidig	Support	To whom it may concern, I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state. I believe that this bill represents a positive step forward in healthcare by aligning the scope of practice for Naturopathic Physicians with their extensive training and legal recognition as primary care physicians. Allowing them to prescribe medications routinely prescribed by primary care providers, as seen in other states like Oregon and Vermont, can contribute to better healthcare outcomes for our community. As a patient of a Naturopathic Doctor, I trust my doctor to prescribe needed medications safely and appropriately. Being able to have all of my needs met by my Naturopathic primary care doctor would help to alleviate the burden of needing to see multiple providers, and greatly benefit patients across the state.
Christina James	Support	<p>I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state.</p> <p>I believe that this bill represents a positive step forward in healthcare by aligning the scope of practice for Naturopathic Physicians with their extensive training and legal recognition as primary care physicians. Allowing them to prescribe medications routinely prescribed by primary care providers, as seen in other states like Oregon and Vermont, can contribute to better healthcare outcomes for our community.</p> <p>As a patient of a Naturopathic Doctor, I trust my doctor to prescribe needed medications safely and appropriately. Being able to have all of my needs met by my Naturopathic primary care doctor would help to alleviate the burden of needing to see multiple providers, and greatly benefit patients across the state.</p>
Stuart Corcoran and Margaret Dawson	Support	I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state. I believe that this bill represents a positive step forward in healthcare by aligning the scope of practice for Naturopathic Physicians with their extensive training and legal recognition as primary care physicians. Allowing them to prescribe medications routinely prescribed by primary care providers, as seen in other states like Oregon and Vermont, can contribute to better healthcare outcomes for our community. As a patient of a Naturopathic Doctor, I trust my doctor to prescribe needed medications safely and appropriately. Being able to have all of my needs met by my Naturopathic primary care doctor would help to alleviate the burden of needing to see multiple providers, and greatly benefit patients across the state. If politicians are serious about reducing health-care costs, passing this bill would be a step in the right direction.

Omer Khan      Support      I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state.

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Joey Kane      Support      I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state.

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Lisa Redburg      Support      I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state. I believe that this bill represents a positive step forward in healthcare by aligning the scope of practice for Naturopathic Physicians with their extensive training and legal recognition as primary care physicians. Allowing them to prescribe medications routinely prescribed by primary care providers, as seen in other states like Oregon and Vermont, can contribute to better healthcare outcomes for our community. As a patient of a Naturopathic Doctor, I trust my doctor to prescribe needed medications safely and appropriately. Being able to have all of my needs met by my Naturopathic primary care doctor would help to alleviate the burden of needing to see multiple providers, and greatly benefit patients across the state.

Anjana Parker      Support      I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state.

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Cynthia Avanzino Support I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state.

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Linda Erickson Support I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state.

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Shannon Schueren Support I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state. I believe that this bill represents a positive step forward in healthcare by aligning the scope of practice for Naturopathic Physicians with their extensive training and legal recognition as primary care physicians. Allowing them to prescribe medications routinely prescribed by primary care providers, as seen in other states like Oregon and Vermont, can contribute to better healthcare outcomes for our community. As a patient of a Naturopathic Doctor, and a healthcare provider myself, I trust my doctor to prescribe needed medications safely and appropriately. Being able to have all of my needs met by my Naturopathic primary care doctor would help to alleviate the burden of needing to see multiple providers, and greatly benefit patients across the state. I have patients who routinely have to wait 6+ weeks to see their medical primary care providers for acute problems, which is unsafe for patients and unsustainable for our healthcare system. This expansion would greatly alleviate the additional burden on our healthcare system.

jennifer townsan Support I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state.

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Angela Hoefler Support I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state.

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Lara Symonds Support I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state. I believe that this bill represents a positive step forward in healthcare by aligning the scope of practice for Naturopathic Physicians with their extensive training and legal recognition as primary care physicians. Allowing them to prescribe medications routinely prescribed by primary care providers, as seen in other states like Oregon and Vermont, can contribute to better healthcare outcomes for our community. As a patient of a Naturopathic Doctor, I trust my doctor to prescribe needed medications safely and appropriately. Being able to have all of my needs met by my Naturopathic primary care doctor would help to alleviate the burden of needing to see multiple providers, and greatly benefit patients across the state.

Michele Corey Support I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state.

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As a long-time patient of a Naturopathic Doctor for both myself and my family, I trust my doctor to prescribe needed medications safely and appropriately.

It is important for people to have a choice of doctors and to be able to have all of my needs met by my Naturopathic primary care doctor would help to alleviate the burden of needing to see multiple providers, and greatly benefit patients across the state.

Dayana Jimenez Support I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state.

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Eduardo Marinas Support I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state. I believe that this bill represents a positive step forward in healthcare by aligning the scope of practice for Naturopathic Physicians with their extensive training and legal recognition as primary care physicians. Allowing them to prescribe medications routinely prescribed by primary care providers, as seen in other states like Oregon and Vermont, can contribute to better healthcare outcomes for our community. As a patient of a Naturopathic Doctor, I trust my doctor to prescribe needed medications safely and appropriately. Being able to have all of my needs met by my Naturopathic primary care doctor would help to alleviate the burden of needing to see multiple providers, and greatly benefit patients across the state.

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Lillian Schwartz-Fisher	Support	<p>I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state. I believe that this bill represents a positive step forward in healthcare by aligning the scope of practice for Naturopathic Physicians with their extensive training and legal recognition as primary care physicians. Allowing them to prescribe medications routinely prescribed by primary care providers, as seen in other states like Oregon and Vermont, can contribute to better healthcare outcomes for our community. As a patient of a Naturopathic Doctor, I trust my doctor to prescribe needed medications safely and appropriately. Being able to have all of my needs met by my Naturopathic primary care doctor would help to alleviate the burden of needing to see multiple providers, and greatly benefit patients across the state.</p>
THADD STRICKER	Support	<p>I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state.</p> <p>I believe that this bill represents a positive step forward in healthcare by aligning the scope of practice for Naturopathic Physicians with their extensive training and legal recognition as primary care physicians. Allowing them to prescribe medications routinely prescribed by primary care providers, as seen in other states like Oregon and Vermont, can contribute to better healthcare outcomes for our community.</p> <p>As a patient of a Naturopathic Doctor, I trust my doctor to prescribe needed medications safely and appropriately. Being able to have all of my needs met by my Naturopathic primary care doctor would help to alleviate the burden of needing to see multiple providers, and greatly benefit patients across the state.</p>
Christin Lefkow	Support	<p>I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state. I believe that this bill represents a positive step forward in healthcare by aligning the scope of practice for Naturopathic Physicians with their extensive training and legal recognition as primary care physicians. Allowing them to prescribe medications routinely prescribed by primary care providers, as seen in other states like Oregon and Vermont, can contribute to better healthcare outcomes for our community. As a patient of a Naturopathic Doctor, I trust my doctor to prescribe needed medications safely and appropriately. Being able to have all of my needs met by my Naturopathic primary care doctor would help to alleviate the burden of needing to see multiple providers, and greatly benefit patients across the state.</p>

Tiffany Previti	Support	<p>I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state.</p> <p>I believe that this bill represents a positive step forward in healthcare by aligning the scope of practice for Naturopathic Physicians with their extensive training and legal recognition as primary care physicians. Allowing them to prescribe medications routinely prescribed by primary care providers, as seen in other states like Oregon and Vermont, can contribute to better healthcare outcomes for our community.</p> <p>As a patient of a Naturopathic Doctor, I trust my doctor to prescribe needed medications safely and appropriately. Being able to have all of my needs met by my Naturopathic primary care doctor would help to alleviate the burden of needing to see multiple providers, and greatly benefit patients across the state.</p>
Norinda Reed	Support	<p>I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state.</p> <p>I believe that this bill represents a positive step forward in healthcare by aligning the scope of practice for Naturopathic Physicians with their extensive training and legal recognition as primary care physicians. Allowing them to prescribe medications routinely prescribed by primary care providers, as seen in other states like Oregon and Vermont, can contribute to better healthcare outcomes for our community.</p> <p>As a patient of a Naturopathic Doctor, I trust my doctor to prescribe needed medications safely and appropriately. Being able to have all of my needs met by my Naturopathic primary care doctor would help to alleviate the burden of needing to see multiple providers, and greatly benefit patients across the state.</p>
Josie Corsilles	Support	<p>I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state. I believe that this bill represents a positive step forward in healthcare by aligning the scope of practice for Naturopathic Physicians with their extensive training and legal recognition as primary care physicians. Allowing them to prescribe medications routinely prescribed by primary care providers, as seen in other states like Oregon and Vermont, can contribute to better healthcare outcomes for our community. As a patient of a Naturopathic Doctor, I trust my doctor to prescribe needed medications safely and appropriately. Being able to have all of my needs met by my Naturopathic primary care doctor would help to alleviate the burden of needing to see multiple providers, and greatly benefit patients across the state.</p>
Joe Dag	Support	<p>I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state. I believe that this bill represents a positive step forward in healthcare by aligning the scope of practice for Naturopathic Physicians with their extensive training and legal recognition as primary care physicians. Allowing them to prescribe medications routinely prescribed by primary care providers, as seen in other states like Oregon and Vermont, can contribute to better healthcare outcomes for our community. As a patient of a Naturopathic Doctor, I trust my doctor to prescribe needed medications safely and appropriately. Being able to have all of my needs met by my Naturopathic primary care doctor would help to alleviate the burden of needing to see multiple providers, and greatly benefit patients across the state. Thank you for your consideration</p>

Megan Jones	Support	<p>I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state.</p> <p>I believe that this bill represents a positive step forward in healthcare by aligning the scope of practice for Naturopathic Physicians with their extensive training and legal recognition as primary care physicians. Allowing them to prescribe medications routinely prescribed by primary care providers, as seen in other states like Oregon and Vermont, can contribute to better healthcare outcomes for our community.</p> <p>As a patient of a Naturopathic Doctor, I trust my doctor to prescribe needed medications safely and appropriately. Being able to have all of my needs met by my Naturopathic primary care doctor would help to alleviate the burden of needing to see multiple providers, and greatly benefit patients across the state.</p>
Mr. J. Gray	Support	<p>I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state. I believe that this bill represents a positive step forward in healthcare by aligning the scope of practice for Naturopathic Physicians with their extensive training and legal recognition as primary care physicians. Allowing them to prescribe medications routinely prescribed by primary care providers, as seen in other states like Oregon and Vermont, can contribute to better healthcare outcomes for our community. As a patient of a Naturopathic Doctor, I trust my doctor to prescribe needed medications safely and appropriately. Being able to have all of my needs met by my Naturopathic primary care doctor would help to alleviate the burden of needing to see multiple providers, and greatly benefit patients across the state.</p>
Lora Ford, PsyD	Support	<p>I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state.</p> <p>I believe that this bill represents a positive step forward in healthcare by aligning the scope of practice for Naturopathic Physicians with their extensive training and legal recognition as primary care physicians. Allowing them to prescribe medications routinely prescribed by primary care providers, as seen in other states like Oregon and Vermont, can contribute to better healthcare outcomes for our community.</p> <p>As a patient of a Naturopathic Doctor, I trust my doctor to prescribe needed medications safely and appropriately. Being able to have all of my needs met by my Naturopathic primary care doctor would help to alleviate the burden of needing to see multiple providers, and greatly benefit patients across the state.</p> <p>I have been paying out of pocket for decades to get Naturopathic care and feel grateful and privileged that I am able to afford this. I am concerned and feel sad that many others who could benefit from the care cannot afford to pay out of pocket.</p>

Mike P.	Support	<p>I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state.</p> <p>I believe that this bill represents a positive step forward in healthcare by aligning the scope of practice for Naturopathic Physicians with their extensive training and legal recognition as primary care physicians. Allowing them to prescribe medications routinely prescribed by primary care providers, as seen in other states like Oregon and Vermont, can contribute to better healthcare outcomes for our community.</p> <p>As a patient of a Naturopathic Doctor, I trust my doctor to prescribe needed medications safely and appropriately. Being able to have all of my needs met by my Naturopathic primary care doctor would help to alleviate the burden of needing to see multiple providers, and greatly benefit patients across the state.</p>
Aliza Albornoz	Support	<p>I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state. I believe that this bill represents a positive step forward in healthcare by aligning the scope of practice for Naturopathic Physicians with their extensive training and legal recognition as primary care physicians. Allowing them to prescribe medications routinely prescribed by primary care providers, as seen in other states like Oregon and Vermont, can contribute to better healthcare outcomes for our community. As a patient of a Naturopathic Doctor, I trust my doctor to prescribe needed medications safely and appropriately. Being able to have all of my needs met by my Naturopathic primary care doctor would help to alleviate the burden of needing to see multiple providers, and greatly benefit patients across the state.</p>
Maureen Marinkovich	Support	<p>I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state.</p> <p>I believe that this bill represents a positive step forward in healthcare by aligning the scope of practice for Naturopathic Physicians with their extensive training and legal recognition as primary care physicians. Allowing them to prescribe medications routinely prescribed by primary care providers, as seen in other states like Oregon and Vermont, can contribute to better healthcare outcomes for our community.</p> <p>As a patient of a Naturopathic Doctor, I trust my doctor to prescribe needed medications safely and appropriately. Being able to have all of my needs met by my Naturopathic primary care doctor would help to alleviate the burden of needing to see multiple providers, and greatly benefit patients across the state.</p>
Patricia Pullen	Support	<p>I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state.</p> <p>I believe that this bill represents a positive step forward in healthcare by aligning the scope of practice for Naturopathic Physicians with their extensive training and legal recognition as primary care physicians. Allowing them to prescribe medications routinely prescribed by primary care providers, as seen in other states like Oregon and Vermont, can contribute to better healthcare outcomes for our community.</p> <p>As a patient of a Naturopathic Doctor, I trust my doctor to prescribe needed medications safely and appropriately. Being able to have all of my needs met by my Naturopathic primary care doctor would help to alleviate the burden of needing to see multiple providers, and greatly benefit patients across the state.</p>

Margot Richardson	Support	I'm writing to express my absolute support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state. I believe that this bill represents a positive step forward in healthcare by aligning the scope of practice for Naturopathic Physicians with their extensive training and legal recognition as primary care physicians. Allowing them to prescribe medications routinely prescribed by primary care providers, as seen in other states like Oregon and Vermont, can contribute to better healthcare outcomes for our community. I have enjoyed an excellent and highly trusted experience with my Naturopathic Doctor for years. I trust my doctor to prescribe needed medications safely and appropriately. Being able to have all of my needs met by my Naturopathic primary care doctor would help to alleviate the burden of needing to see multiple providers, and greatly benefit patients across the state.
Carol Meshberg	Support	To whom it may concern, I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state. I believe that this bill represents a positive step forward in healthcare by aligning the scope of practice for Naturopathic Physicians with their extensive training and legal recognition as primary care physicians. Allowing them to prescribe medications routinely prescribed by primary care providers, as seen in other states like Oregon and Vermont, can contribute to better healthcare outcomes for our community. As a patient of a Naturopathic Doctor, I trust my doctor to prescribe needed medications safely and appropriately. Being able to have all of my needs met by my Naturopathic primary care doctor would help to alleviate the burden of needing to see multiple providers, and greatly benefit patients across the state.
Gail S Baker	Support	<p>I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state.</p> <p>I believe that this bill represents a positive step forward in healthcare by aligning the scope of practice for Naturopathic Physicians with their extensive training and legal recognition as primary care physicians. Allowing them to prescribe medications routinely prescribed by primary care providers, as seen in other states like Oregon and Vermont, can contribute to better healthcare outcomes for our community.</p> <p>As a patient of a Naturopathic Doctor, I trust my doctor to prescribe needed medications safely and appropriately. Being able to have all of my needs met by my Naturopathic primary care doctor would help to alleviate the burden of needing to see multiple providers, and greatly benefit patients across the state.</p>
Nanette Bamesberger	Support	I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state. I believe that this bill represents a positive step forward in healthcare by aligning the scope of practice for Naturopathic Physicians with their extensive training and legal recognition as primary care physicians. Allowing them to prescribe medications routinely prescribed by primary care providers, as seen in other states like Oregon and Vermont, can contribute to better healthcare outcomes for our community. As a patient of a Naturopathic Doctor, I trust my doctor to prescribe needed medications safely and appropriately. Being able to have all of my needs met by my Naturopathic primary care doctor would help to alleviate the burden of needing to see multiple providers, and greatly benefit patients across the state.

Katrina Gerrits    Support    I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state.

I believe that this bill represents a positive step forward in healthcare by aligning the scope of practice for Naturopathic Physicians with their extensive training and legal recognition as primary care physicians. Allowing them to prescribe medications routinely prescribed by primary care providers, as seen in other states like Oregon and Vermont, can contribute to better healthcare outcomes for our community.

As a patient of a Naturopathic Doctor, I trust my doctor to prescribe needed medications safely and appropriately. Being able to have all of my needs met by my Naturopathic primary care doctor would help to alleviate the burden of needing to see multiple providers, and greatly benefit patients across the state.

Kudrat Parker    Support    I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state.

I believe that this bill represents a positive step forward in healthcare by aligning the scope of practice for Naturopathic Physicians with their extensive training and legal recognition as primary care physicians. Allowing them to prescribe medications routinely prescribed by primary care providers, as seen in other states like Oregon and Vermont, can contribute to better healthcare outcomes for our community.

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Sepideh Abtahi    Support    I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state. I believe that this bill represents a positive step forward in healthcare by aligning the scope of practice for Naturopathic Physicians with their extensive training and legal recognition as primary care physicians. Allowing them to prescribe medications routinely prescribed by primary care providers, as seen in other states like Oregon and Vermont, can contribute to better healthcare outcomes for our community. As a patient of a Naturopathic Doctor, I trust my doctor to prescribe needed medications safely and appropriately. Being able to have all of my needs met by my Naturopathic primary care doctor would help to alleviate the burden of needing to see multiple providers, and greatly benefit patients across the state.



Kara Pomeroy Support I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state.

I believe that this bill represents a positive step forward in healthcare by aligning the scope of practice for Naturopathic Physicians with their extensive training and legal recognition as primary care physicians. Allowing them to prescribe medications routinely prescribed by primary care providers, as seen in other states like Oregon and Vermont, can contribute to better healthcare outcomes for our community.

As a patient of a Naturopathic Doctor, I trust my doctor to prescribe needed medications safely and appropriately. Being able to have all of my needs met by my Naturopathic primary care doctor would help to alleviate the burden of needing to see multiple providers, and greatly benefit patients across the state.

I think this is an important step in providing options to patients.

Vipin Sindhu Support I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state.

I believe that this bill represents a positive step forward in healthcare by aligning the scope of practice for Naturopathic Physicians with their extensive training and legal recognition as primary care physicians. Allowing them to prescribe medications routinely prescribed by primary care providers, as seen in other states like Oregon and Vermont, can contribute to better healthcare outcomes for our community.

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Robin Berry Support I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state. I believe that this bill represents a positive step forward in healthcare by aligning the scope of practice for Naturopathic Physicians with their extensive training and legal recognition as primary care physicians. Allowing them to prescribe medications routinely prescribed by primary care providers, as seen in other states like Oregon and Vermont, can contribute to better healthcare outcomes for our community. As a patient of a Naturopathic Doctor, I trust my doctor to prescribe needed medications safely and appropriately. Being able to have all of my needs met by my Naturopathic primary care doctor would help to alleviate the burden of needing to see multiple providers, and greatly benefit patients across the state.

kimberly hanley	Support	<p>I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state.</p> <p>I believe that this bill represents a positive step forward in healthcare by aligning the scope of practice for Naturopathic Physicians with their extensive training and legal recognition as primary care physicians. Allowing them to prescribe medications routinely prescribed by primary care providers, as seen in other states like Oregon and Vermont, can contribute to better healthcare outcomes for our community.</p> <p>As a patient of a Naturopathic Doctor, I trust my doctor to prescribe needed medications safely and appropriately. Being able to have all of my needs met by my Naturopathic primary care doctor would help to alleviate the burden of needing to see multiple providers, and greatly benefit patients across the state.</p>
Jacqueline Perry	Support	<p>I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state.</p> <p>I believe that this bill represents a positive step forward in healthcare by aligning the scope of practice for Naturopathic Physicians with their extensive training and legal recognition as primary care physicians. Allowing them to prescribe medications routinely prescribed by primary care providers, as seen in other states like Oregon and Vermont, can contribute to better healthcare outcomes for our community.</p> <p>As a patient of a Naturopathic Doctor, I trust my doctor to prescribe needed medications safely and appropriately. Being able to have all of my needs met by my Naturopathic primary care doctor would help to alleviate the burden of needing to see multiple providers, and greatly benefit patients across the state.</p>
Dana Schmeller	Support	<p>I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state. I believe that this bill represents a positive step forward in healthcare by aligning the scope of practice for Naturopathic Physicians with their extensive training and legal recognition as primary care physicians. Allowing them to prescribe medications routinely prescribed by primary care providers, as seen in other states like Oregon and Vermont, can contribute to better healthcare outcomes for our community. As a patient of a Naturopathic Doctor, I trust my doctor to prescribe needed medications safely and appropriately. Being able to have all of my needs met by my Naturopathic primary care doctor would help to alleviate the burden of needing to see multiple providers, and greatly benefit patients across the state.</p>

Jennifer Cobb	Support	<p>I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state.</p> <p>I believe that this bill represents a positive step forward in healthcare by aligning the scope of practice for Naturopathic Physicians with their extensive training and legal recognition as primary care physicians. Allowing them to prescribe medications routinely prescribed by primary care providers, as seen in other states like Oregon and Vermont, can contribute to better healthcare outcomes for our community.</p> <p>As a patient of a Naturopathic Doctor, I trust my doctor to prescribe needed medications safely and appropriately. Being able to have all of my needs met by my Naturopathic primary care doctor would help to alleviate the burden of needing to see multiple providers, and greatly benefit patients across the state. If it wasn't for my ND, I would still be stuck on incorrect medications which created more issues due to being dismissed and misdiagnosed by non ND's.</p>
Janene Cardon	Support	<p>I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state.</p> <p>I believe that this bill represents a positive step forward in healthcare by aligning the scope of practice for Naturopathic Physicians with their extensive training and legal recognition as primary care physicians. Allowing them to prescribe medications routinely prescribed by primary care providers, as seen in other states like Oregon and Vermont, can contribute to better healthcare outcomes for our community.</p> <p>As a patient of a Naturopathic Doctor, I trust my doctor to prescribe needed medications safely and appropriately. Being able to have all of my needs met by my Naturopathic primary care doctor would help to alleviate the burden of needing to see multiple providers, and greatly benefit patients across the state.</p>
Jennifer Rizzo	Support	<p>I'm writing to express my support for Senate Bill 5411, which expands the scope of practice for Naturopathic Physicians in our state. I believe that this bill represents a positive step forward in healthcare by aligning their practices as primary care physicians. Allowing them to prescribe medications routinely prescribed by other primary care providers, as seen in other states like Oregon and Vermont, can contribute to better healthcare outcomes for our community. As a patient of a Naturopathic Doctor, I trust my doctor to prescribe needed medications safely and appropriately. Being able to have all of my needs met by my Naturopathic primary care doctor would make getting my medical care much more efficient. I wouldn't have to see a different dr to get any meds that a NP can't currently prescribe.</p>

Claudia Hansen Support I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state.

I believe that this bill represents a positive step forward in healthcare by aligning the scope of practice for Naturopathic Physicians with their extensive training and legal recognition as primary care physicians. Allowing them to prescribe medications routinely prescribed by primary care providers, as seen in other states like Oregon and Vermont, can contribute to better healthcare outcomes for our community.

As a patient of a Naturopathic Doctor, I trust my doctor to prescribe needed medications safely and appropriately. Being able to have all of my needs met by my Naturopathic primary care doctor would help to alleviate the burden of needing to see multiple providers, and greatly benefit patients across the state.

Bill Bryant Support I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state.

I believe that this bill represents a positive step forward in healthcare by aligning the scope of practice for Naturopathic Physicians with their extensive training and legal recognition as primary care physicians. Allowing them to prescribe medications routinely prescribed by primary care providers, as seen in other states like Oregon and Vermont, can contribute to better healthcare outcomes for our community.

As a patient of a Naturopathic Doctor, I trust my doctor to prescribe needed medications safely and appropriately. Being able to have all of my needs met by my Naturopathic primary care doctor would help to alleviate the burden of needing to see multiple providers, and greatly benefit patients across the state.

Gary A. Ferguson Support I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state. I believe that this bill represents a positive step forward in healthcare by aligning the scope of practice for Naturopathic Physicians with their extensive training and legal recognition as primary care physicians. Allowing them to prescribe medications routinely prescribed by primary care providers, as seen in other states like Oregon and Vermont, can contribute to better healthcare outcomes for our community. As a patient of a Naturopathic Doctor, I trust my doctor to prescribe needed medications safely and appropriately. Thus far in my life, I have always had all of my needs met by my amazing Naturopathic primary care doctor, but extending their ability to prescribe additional medications would help to alleviate the burden of needing to see multiple providers should I ever need them, and would greatly benefit patients across the state.

Nancy Low Support I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state.

I believe that this bill represents a positive step forward in healthcare by aligning the scope of practice for Naturopathic Physicians with their extensive training and legal recognition as primary care physicians. Allowing them to prescribe medications routinely prescribed by primary care providers, as seen in other states like Oregon and Vermont, can contribute to better healthcare outcomes for our community.

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Lisa Kelley Support I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state.

I believe that this bill represents a positive step forward in healthcare by aligning the scope of practice for Naturopathic Physicians with their extensive training and legal recognition as primary care physicians. Allowing them to prescribe medications routinely prescribed by primary care providers, as seen in other states like Oregon and Vermont, can contribute to better healthcare outcomes for our community.

As a patient of a Naturopathic Doctor, I trust my doctor to prescribe needed medications safely and appropriately. Being able to have all of my needs met by my Naturopathic primary care doctor would help to alleviate the burden of needing to see multiple providers, and greatly benefit patients across the state.

Joanna Hamid Support I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state. I believe that this bill represents a positive step forward in healthcare by aligning the scope of practice for Naturopathic Physicians with their extensive training and legal recognition as primary care physicians. As a resident of Washington State, my family and I have successfully leveraged naturopathic physicians for primary care for many years. Allowing them to prescribe medications routinely prescribed by primary care providers, as seen in other states like Oregon and Vermont, can contribute to better healthcare outcomes for our community. As a patient of a Naturopathic Doctor, I trust my doctor to prescribe needed medications safely and appropriately. Being able to have all of my needs met by my Naturopathic primary care doctor would help to alleviate the burden of needing to see multiple providers, and greatly benefit patients across the state.

Leilani Fleming Support To whom it may concern, I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state. I believe that this bill represents a positive step forward in healthcare by aligning the scope of practice for Naturopathic Physicians with their extensive training and legal recognition as primary care physicians. Allowing them to prescribe medications routinely prescribed by primary care providers, as seen in other states like Oregon and Vermont, can contribute to better healthcare outcomes for our community. As a patient of a Naturopathic Doctor, I trust my doctor to prescribe needed medications safely and appropriately. Being able to have all of my needs met by my Naturopathic primary care doctor would help to alleviate the burden of needing to see multiple providers, and greatly benefit patients across the state.

Jacqueline Bruner Support I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state.

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Victor Brooks      Support      I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state. I believe that this bill represents a positive step forward in healthcare by aligning the scope of practice for Naturopathic Physicians with their extensive training and legal recognition as primary care physicians. Allowing them to prescribe medications routinely prescribed by primary care providers, as seen in other states like Oregon and Vermont, can contribute to better healthcare outcomes for our community. As a patient of a Naturopathic Doctor, I trust my doctor to prescribe needed medications safely and appropriately. Being able to have all of my needs met by my Naturopathic primary care doctor would help to alleviate the burden of needing to see multiple providers, and greatly benefit patients across the state.

Jennifer Biggs      Support      I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state. I believe that this bill represents a positive step forward in healthcare by aligning the scope of practice for Naturopathic Physicians with their extensive training and legal recognition as primary care physicians. Allowing them to prescribe medications routinely prescribed by primary care providers, as seen in other states like Oregon and Vermont, can contribute to better healthcare outcomes for our community. As a patient of a Naturopathic Doctor, I trust my doctor to prescribe needed medications safely and appropriately. Being able to have all of my needs met by my Naturopathic primary care doctor would help to alleviate the burden of needing to see multiple providers, and greatly benefit patients across the state.

Jackie Mann      Support      I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state. I believe that this bill represents a positive step forward in healthcare by aligning the scope of practice for Naturopathic Physicians with their extensive training and legal recognition as primary care physicians. Allowing them to prescribe medications routinely prescribed by primary care providers, as seen in other states like Oregon and Vermont, can contribute to better healthcare outcomes for our community. As a patient of a Naturopathic Doctor, I trust my doctor to prescribe needed medications safely and appropriately. Being able to have all of my needs met by my Naturopathic primary care doctor would help to alleviate the burden of needing to see multiple providers, and greatly benefit patients across the state.

Benji Meder      Support      I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state. I believe that this bill represents a positive step forward in healthcare by aligning the scope of practice for Naturopathic Physicians with their extensive training and legal recognition as primary care physicians. Allowing them to prescribe medications routinely prescribed by primary care providers, as seen in other states like Oregon and Vermont, can contribute to better healthcare outcomes for our community. As a patient of a Naturopathic Doctor, I trust my doctor to prescribe needed medications safely and appropriately. Being able to have all of my needs met by my Naturopathic primary care doctor would help to alleviate the burden of needing to see multiple providers, and greatly benefit patients across the state.

Freedom Johnson Support I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state.

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Connie Lacaden Support I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state. I believe that this bill represents a positive step forward in healthcare by aligning the scope of practice for Naturopathic Physicians with their extensive training and legal recognition as primary care physicians. Allowing them to prescribe medications routinely prescribed by primary care providers, as seen in other states like Oregon and Vermont, can contribute to better healthcare outcomes for our community. As a patient of a Naturopathic Doctor, I trust my doctor to prescribe needed medications safely and appropriately. Being able to have all of my needs met by my Naturopathic primary care doctor would help to alleviate the burden of needing to see multiple providers, and greatly benefit patients across the state.

Portia Wilcock Support I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state. I believe that this bill represents a positive step forward in healthcare by aligning the scope of practice for Naturopathic Physicians with their extensive training and legal recognition as primary care physicians. Allowing them to prescribe medications routinely prescribed by primary care providers, as seen in other states like Oregon and Vermont, can contribute to better healthcare outcomes for our community. As a patient of a Naturopathic Doctor, I trust my doctor to prescribe needed medications safely and appropriately. Being able to have all of my needs met by my Naturopathic primary care doctor would help to alleviate the burden of needing to see multiple providers, and greatly benefit patients across the state.

Emma Hattori Support I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state.

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Treasure Stevenson Support I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state.

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Claire Bryant Support I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state. I believe that this bill represents a positive step forward in healthcare by aligning the scope of practice for Naturopathic Physicians with their extensive training and legal recognition as primary care physicians. Allowing them to prescribe medications routinely prescribed by primary care providers, as seen in other states like Oregon and Vermont, can contribute to better healthcare outcomes for our community. As a patient of a Naturopathic Doctor, I trust my doctor to prescribe needed medications safely and appropriately. Being able to have all of my needs met by my Naturopathic primary care doctor would help to alleviate the burden of needing to see multiple providers, and greatly benefit patients across the state.

Tani Hunt Support I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state.

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Lauren Harris      Support      I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state.

I believe that this bill represents a positive step forward in healthcare by aligning the scope of practice for Naturopathic Physicians with their extensive training and legal recognition as primary care physicians. Allowing them to prescribe medications routinely prescribed by primary care providers, as seen in other states like Oregon and Vermont, can contribute to better healthcare outcomes for our community.

As a patient of a Naturopathic Doctor, I trust my doctor to prescribe needed medications safely and appropriately. Being able to have all of my needs met by my Naturopathic primary care doctor would help to alleviate the burden of needing to see multiple providers, and greatly benefit patients across the state. I have been working with my Naturopath for 12 years and he gives excellent care, better than I have gotten from MDs.

Melanie Anderson      Support      I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state. I believe that this bill represents a positive step forward in healthcare by aligning the scope of practice for Naturopathic Physicians with their extensive training and legal recognition as primary care physicians. Allowing them to prescribe medications routinely prescribed by primary care providers, as seen in other states like Oregon and Vermont, can contribute to better healthcare outcomes for our community. As a patient of a Naturopathic Doctor, I trust my doctor to prescribe needed medications safely and appropriately. Being able to have all of my needs met by my Naturopathic primary care doctor would help to alleviate the burden of needing to see multiple providers, and greatly benefit patients across the state.

L. A. Kane      Support      I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state.

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Michelle Hammers      Support      I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state.

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Nicole Hozan	Support	<p>I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state. I believe that this bill represents a positive step forward in healthcare by aligning the scope of practice for Naturopathic Physicians with their extensive training and legal recognition as primary care physicians. Allowing them to prescribe medications routinely prescribed by primary care providers, as seen in other states like Oregon and Vermont, can contribute to better healthcare outcomes for our community. As a patient of a Naturopathic Doctor, I trust my doctor to prescribe needed medications safely and appropriately. Being able to have all of my needs met by my Naturopathic primary care doctor would help to alleviate the burden of needing to see multiple providers, and greatly benefit patients across the state.</p>
Cory Adam Baker	Support	<p>I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state.</p> <p>I believe that this bill represents a positive step forward in healthcare by aligning the scope of practice for Naturopathic Physicians with their extensive training and legal recognition as primary care physicians. Allowing them to prescribe medications routinely prescribed by primary care providers, as seen in other states like Oregon and Vermont, can contribute to better healthcare outcomes for our community.</p> <p>As a patient of a Naturopathic Doctor, I trust my doctor to prescribe needed medications safely and appropriately. Being able to have all of my needs met by my Naturopathic primary care doctor would help to alleviate the burden of needing to see multiple providers, and greatly benefit patients across the state.</p>
Lauri Benblatt	Support	<p>I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state.</p> <p>I believe that this bill represents a positive step forward in healthcare by aligning the scope of practice for Naturopathic Physicians with their extensive training and legal recognition as primary care physicians. Allowing them to prescribe medications routinely prescribed by primary care providers, as seen in other states like Oregon and Vermont, can contribute to better healthcare outcomes for our community.</p> <p>As a patient of a Naturopathic Doctor, I trust my doctor to prescribe needed medications safely and appropriately. Being able to have all of my needs met by my Naturopathic primary care doctor would help to alleviate the burden of needing to see multiple providers, and greatly benefit patients across the state.</p>
Maureen Kane	Support	<p>I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state.</p> <p>I believe that this bill represents a positive step forward in healthcare by aligning the scope of practice for Naturopathic Physicians with their extensive training and legal recognition as primary care physicians. Allowing them to prescribe medications routinely prescribed by primary care providers, as seen in other states like Oregon and Vermont, can contribute to better healthcare outcomes for our community.</p> <p>As a patient of a Naturopathic Doctor, I trust my doctor to prescribe needed medications safely and appropriately. Being able to have all of my needs met by my Naturopathic primary care doctor would help to alleviate the burden of needing to see multiple providers, and greatly benefit patients across the state.</p>

Kim McCullough Support I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state. I believe that this bill represents a positive step forward in healthcare by aligning the scope of practice for Naturopathic Physicians with their extensive training and legal recognition as primary care physicians. Allowing them to prescribe medications routinely prescribed by primary care providers, as seen in other states like Oregon and Vermont, can contribute to better healthcare outcomes for our community. As a patient of a Naturopathic Doctor, I trust my doctor to prescribe needed medications safely and appropriately. Being able to have all of my needs met by my Naturopathic primary care doctor would help to alleviate the burden of needing to see multiple providers, and greatly benefit patients across the state.

Kim Baruffi Support I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state.

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Cat Citron Support I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state. I believe that this bill represents a positive step forward in healthcare by aligning the scope of practice for Naturopathic Physicians with their extensive training and legal recognition as primary care physicians. Allowing them to prescribe medications routinely prescribed by primary care providers, as seen in other states like Oregon and Vermont, can contribute to better healthcare outcomes for our community. As a patient of a Naturopathic Doctor, I trust my doctor to prescribe needed medications safely and appropriately. Being able to have all of my needs met by my Naturopathic primary care doctor would help to alleviate the burden of needing to see multiple providers, and greatly benefit patients across the state.

Karin McCloskey Support I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state.

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Linda Cloes Support I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state. I have found that my naturopathic physicians have been so much more comprehensive in my care.

I believe that this bill represents a positive step forward in healthcare by aligning the scope of practice for Naturopathic Physicians with their extensive training and legal recognition as primary care physicians. Allowing them to prescribe medications routinely prescribed by primary care providers, as seen in other states like Oregon and Vermont, can contribute to better healthcare outcomes for our community.

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Imoayeri Support

Sergey Nefedyev	Support	<p>I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state.</p> <p>This bill represents a positive step forward in healthcare by aligning the scope of practice for Naturopathic Physicians with their extensive training and legal recognition as primary care physicians. Allowing them to prescribe medications routinely prescribed by primary care providers, as seen in other states like Oregon and Vermont, can contribute to better healthcare outcomes for our community.</p> <p>As a patient of a Naturopathic Doctor, I trust my doctor to prescribe needed medications safely and appropriately. Being able to have all my needs met by my Naturopathic primary care doctor would help to alleviate the burden of needing to see multiple providers, and benefit patients across the state.</p>
Jennifer Schuyler	Support	<p>I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state.</p> <p>I believe that this bill represents a positive step forward in healthcare by aligning the scope of practice for Naturopathic Physicians with their extensive training and legal recognition as primary care physicians. Allowing them to prescribe medications routinely prescribed by primary care providers, as seen in other states like Oregon and Vermont, can contribute to better healthcare outcomes for our community.</p> <p>As a patient of a Naturopathic Doctor, I trust my doctor to prescribe needed medications safely and appropriately. Being able to have all of my needs met by my Naturopathic primary care doctor would help to alleviate the burden of needing to see multiple providers, and greatly benefit patients across the state.</p>
Barbara Lyle	Support	<p>I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state. I believe that this bill represents a positive step forward in healthcare by aligning the scope of practice for Naturopathic Physicians with their extensive training and legal recognition as primary care physicians. Allowing them to prescribe medications routinely prescribed by primary care providers, as seen in other states like Oregon and Vermont, can contribute to better healthcare outcomes for our community. As a patient of a Naturopathic Doctor, I trust my doctor to prescribe needed medications safely and appropriately. Being able to have all of my needs met by my Naturopathic primary care doctor would help to alleviate the burden of needing to see multiple providers, and greatly benefit patients across the state.</p>

Cindy Kay Peterson Support I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state.

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Vanessa Padelford Antrim Giuliano Support I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state.

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As a patient of a Naturopathic Doctor, I trust my doctor to prescribe needed medications safely and appropriately. Having all of my needs met by my Naturopathic primary care doctor would be most effective and efficient; it would alleviate the overwhelming burden of and time spent having to coordinate and see multiple providers, and greatly benefit patients across the state.

Jessica Blake Support I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state. I believe that this bill represents a positive step forward in healthcare by aligning the scope of practice for Naturopathic Physicians with their extensive training and legal recognition as primary care physicians. Allowing them to prescribe medications routinely prescribed by primary care providers, as seen in other states like Oregon and Vermont, can contribute to better healthcare outcomes for our community. As a patient of a Naturopathic Doctor, I trust my doctor to prescribe needed medications safely and appropriately. Being able to have all of my needs met by my Naturopathic primary care doctor would help to alleviate the burden of needing to see multiple providers, and greatly benefit patients across the state.

Sanjay Gangadhara Support I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state.

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Martha Baskin	Support	<p>I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state. I believe that this bill represents a positive step forward in healthcare by aligning the scope of practice for Naturopathic Physicians with their extensive training and legal recognition as primary care physicians. Allowing them to prescribe medications routinely prescribed by primary care providers, as seen in other states like Oregon and Vermont, can contribute to better healthcare outcomes for our community.</p> <p>As a patient of a Naturopathic Doctor, I trust my doctor to prescribe needed medications safely and appropriately. Being able to have all of my needs met by my Naturopathic primary care doctor would help to alleviate the burden of needing to see multiple providers, and greatly benefit patients across the state.</p>
Holly Goodwin	Support	<p>I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state.</p> <p>I believe that this bill represents a positive step forward in healthcare by aligning the scope of practice for Naturopathic Physicians with their extensive training and legal recognition as primary care physicians. Allowing them to prescribe medications routinely prescribed by primary care providers, as seen in other states like Oregon and Vermont, can contribute to better healthcare outcomes for our community.</p> <p>As a patient of a Naturopathic Doctor, I trust my doctor to prescribe needed medications safely and appropriately. Being able to have all of my needs met by my Naturopathic primary care doctor would help to alleviate the burden of needing to see multiple providers, and greatly benefit patients across the state.</p>
Terri Downey	Support	<p>I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state. I believe that this bill represents a positive step forward in healthcare by aligning the scope of practice for Naturopathic Physicians with their extensive training and legal recognition as primary care physicians. Allowing them to prescribe medications routinely prescribed by primary care providers, as seen in other states like Oregon and Vermont, can contribute to better healthcare outcomes for our community. As a patient of a Naturopathic Doctor, I trust my doctor to prescribe needed medications safely and appropriately. Being able to have all of my needs met by my Naturopathic primary care doctor would help to alleviate the burden of needing to see multiple providers, and greatly benefit patients across the state. There is a great need for more primary Dr's in Washington. Naturopathic Doctors are highly trained and I think they fit the need for more primary doctors in Washington and around the country.</p>

Karen Johnson    Support    I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state.

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Not only that, but personally Naturopathic Doctors have made a huge difference in managing my health and health issues. I can't imagine where I would be without their diligent care and the depth of support they provide. This change would make Naturopathic Doctors even more effective in their care for me and for others.

Michael Anderson    Support    I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state.

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Sean Quinn    Support    Hello, I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state. I believe that this bill represents a positive step forward in healthcare by aligning the scope of practice for Naturopathic Physicians with their extensive training and legal recognition as primary care physicians. Allowing them to prescribe medications routinely prescribed by primary care providers, as seen in other states like Oregon and Vermont, can contribute to better healthcare outcomes for our community. As a patient of a Naturopathic Doctor, I trust my doctor to prescribe needed medications safely and appropriately. Being able to have all of my needs met by my Naturopathic primary care doctor would help to alleviate the burden of needing to see multiple providers, and greatly benefit patients across the state.



Jess Bombacie Support I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state.

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Jauna Gutierrez Support that this bill represents a positive step forward in healthcare by aligning the scope of practice for Naturopathic Physicians with their extensive training and legal recognition as primary care physicians. Allowing them to prescribe medications routinely prescribed by primary care providers, as seen in other states like Oregon and Vermont, can contribute to better healthcare outcomes for our community.

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Mike Choi Support I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state. I believe that this bill represents a positive step forward in healthcare by aligning the scope of practice for Naturopathic Physicians with their extensive training and legal recognition as primary care physicians. Allowing them to prescribe medications routinely prescribed by primary care providers, as seen in other states like Oregon and Vermont, can contribute to better healthcare outcomes for our community. As a patient of a Naturopathic Doctor, I trust my doctor to prescribe needed medications safely and appropriately. Being able to have all of my needs met by my Naturopathic primary care doctor would help to alleviate the burden of needing to see multiple providers, and greatly benefit patients across the state.

Candis Houser Support I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state.

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Jennifer Hill	Support	<p>I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state.</p> <p>I believe that this bill represents a positive step forward in healthcare by aligning the scope of practice for Naturopathic Physicians with their extensive training and legal recognition as primary care physicians. Allowing them to prescribe medications routinely prescribed by primary care providers, as seen in other states like Oregon and Vermont, can contribute to better healthcare outcomes for our community.</p> <p>As a patient of a Naturopathic Doctor, I trust my doctor to prescribe needed medications safely and appropriately. Being able to have all of my needs met by my Naturopathic primary care doctor would help to alleviate the burden of needing to see multiple providers, and greatly benefit patients across the state.</p> <p>On a personal note, switching from my conventional PCP to a naturopath a few years ago has been life changing for me! I can't imagine the situation I would be in if I had not made the change. This bill would be an amazing step forward for so many Washingtonians!</p>
Lisa Howard	Support	<p>I am a patient of many naturopathic doctors over the course of my life. I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state. The knowledge, skill, and approach to actual health and healing is second to none!!! I have so many personal and family stories that have been extremely remarkable!!! I believe that this bill represents a positive step forward in healthcare by aligning the scope of practice for Naturopathic Physicians with their extensive training and legal recognition as primary care physicians. Allowing them to prescribe medications routinely prescribed by primary care providers, as seen in other states like Oregon and Vermont, can contribute to better healthcare outcomes for our community. As a patient of a Naturopathic Doctor, I trust my doctor to prescribe needed medications safely and appropriately. Being able to have all of my needs met by my Naturopathic primary care doctor would help to alleviate the burden of needing to see multiple providers, and greatly benefit patients across the state. By determining the root cause of many illnesses has proven to reduce overall healthcare costs and give the responsibility back to the patient as wellness care.</p>
Robert Rogers	Support	<p>I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state.</p> <p>I believe that this bill represents a positive step forward in healthcare by aligning the scope of practice for Naturopathic Physicians with their extensive training and legal recognition as primary care physicians. Allowing them to prescribe medications routinely prescribed by primary care providers, as seen in other states like Oregon and Vermont, can contribute to better healthcare outcomes for our community.</p> <p>As a patient of a Naturopathic Doctor, I trust my doctor to prescribe needed medications safely and appropriately. Being able to have all of my needs met by my Naturopathic primary care doctor would help to alleviate the burden of needing to see multiple providers, and greatly benefit patients across the state.</p>

James Goldbaum	Support	<p>I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state.</p> <p>I believe that this bill represents a positive step forward in healthcare by aligning the scope of practice for Naturopathic Physicians with their extensive training and legal recognition as primary care physicians. Allowing them to prescribe medications routinely prescribed by primary care providers, as seen in other states like Oregon and Vermont, can contribute to better healthcare outcomes for our community.</p> <p>As a patient of a Naturopathic Doctor, I trust my doctor to prescribe needed medications safely and appropriately. Being able to have all of my needs met by my Naturopathic primary care doctor would help to alleviate the burden of needing to see multiple providers, and greatly benefit patients across the state.</p>
Sachin kothari	Support	<p>I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state.I believe that this bill represents a positive step forward in healthcare by aligning the scope of practice for Naturopathic Physicians with their extensive training and legal recognition as primary care physicians. Allowing them to prescribe medications routinely prescribed by primary care providers, as seen in other states like Oregon and Vermont, can contribute to better healthcare outcomes for our community.As a patient of a Naturopathic Doctor, I trust my doctor to prescribe needed medications safely and appropriately. Being able to have all of my needs met by my Naturopathic primary care doctor would help to alleviate the burden of needing to see multiple providers, and greatly benefit patients across the state.</p>
Heather Lenihan	Support	<p>I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state.</p> <p>I believe that this bill represents a positive step forward in healthcare by aligning the scope of practice for Naturopathic Physicians with their extensive training and legal recognition as primary care physicians. Allowing them to prescribe medications routinely prescribed by primary care providers, as seen in other states like Oregon and Vermont, can contribute to better healthcare outcomes for our community.</p> <p>As a patient of a Naturopathic Doctor, I trust my doctor to prescribe needed medications safely and appropriately. Being able to have all of my needs met by my Naturopathic primary care doctor would help to alleviate the burden of needing to see multiple providers, and greatly benefit patients across the state.</p>
Valerie Minor	Support	<p>I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state.</p> <p>I believe that this bill represents a positive step forward in healthcare by aligning the scope of practice for Naturopathic Physicians with their extensive training and legal recognition as primary care physicians. Allowing them to prescribe medications routinely prescribed by primary care providers, as seen in other states like Oregon and Vermont, can contribute to better healthcare outcomes for our community.</p> <p>As a patient of a Naturopathic Doctor, I trust my doctor to prescribe needed medications safely and appropriately. Being able to have all of my needs met by my Naturopathic primary care doctor would help to alleviate the burden of needing to see multiple providers, and greatly benefit patients across the state.</p>

Diane Thomas    Support    I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state. I believe that this bill represents a positive step forward in healthcare by aligning the scope of practice for Naturopathic Physicians with their extensive training and legal recognition as primary care physicians. Allowing them to prescribe medications routinely prescribed by primary care providers, as seen in other states like Oregon and Vermont, can contribute to better healthcare outcomes for our community. As a patient of a Naturopathic Doctor, I trust my doctor to prescribe needed medications safely and appropriately. My Care with my Naturopathic Doctor has changed my life. Being able to have all of my needs met by my Naturopathic primary care doctor would help to alleviate the burden of needing to see multiple providers, and greatly benefit patients across the state.

Ed Swaya    Support    I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state.

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Jen Lampe    Support    I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state.

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<p>Jamie Finch &lt;finch.jamie@g mail.com&gt;</p>	<p>Support</p>	<p>I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state. I believe that this bill represents a positive step forward in healthcare by aligning the scope of practice for Naturopathic Physicians with their extensive training and legal recognition as primary care physicians. Allowing them to prescribe medications routinely prescribed by primary care providers, as seen in other states like Oregon and Vermont, can contribute to better healthcare outcomes for our community. As a patient of a Naturopathic Doctor, I trust my doctor to prescribe needed medications safely and appropriately. Being able to have all of my needs met by my Naturopathic primary care doctor would help to alleviate the burden of needing to see multiple providers, and greatly benefit patients across the state.</p>
<p>Elizabeth Bintner</p>	<p>Support</p>	<p>I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state.</p> <p>I believe that this bill represents a positive step forward in healthcare by aligning the scope of practice for Naturopathic Physicians with their extensive training and legal recognition as primary care physicians. Allowing them to prescribe medications routinely prescribed by primary care providers, as seen in other states like Oregon and Vermont, can contribute to better healthcare outcomes for our community.</p> <p>As a patient of a Naturopathic Doctor, I trust my doctor to prescribe needed medications safely and appropriately. Being able to have all of my needs met by my Naturopathic primary care doctor would help to alleviate the burden of needing</p>
<p>Terri Haney</p>	<p>Support</p>	<p>I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state.</p> <p>I believe that this bill represents a positive step forward in healthcare by aligning the scope of practice for Naturopathic Physicians with their extensive training and legal recognition as primary care physicians. Allowing them to prescribe medications routinely prescribed by primary care providers, as seen in other states like Oregon and Vermont, can contribute to better healthcare outcomes for our community.</p> <p>As a patient of a Naturopathic Doctor, I trust my doctor to prescribe needed medications safely and appropriately. Being able to have all of my needs met by my Naturopathic primary care doctor would help to alleviate the burden of needing to see multiple providers, and greatly benefit patients across the state.</p>
<p>carl woestwin</p>	<p>Support</p>	<p>I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state. I believe that this bill represents a positive step forward in healthcare by aligning the scope of practice for Naturopathic Physicians with their extensive training and legal recognition as primary care physicians. Allowing them to prescribe medications routinely prescribed by primary care providers, as seen in other states like Oregon and Vermont, can contribute to better healthcare outcomes for our community. As a patient of a Naturopathic Doctor, I trust my doctor to prescribe needed medications safely and appropriately. Being able to have all of my needs met by my Naturopathic primary care doctor would help to alleviate the burden of needing to see multiple providers, and greatly benefit patients across the state.</p>

Julie Nyberg	Support	<p>I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state.</p> <p>I believe that this bill represents a positive step forward in healthcare by aligning the scope of practice for Naturopathic Physicians with their extensive training and legal recognition as primary care physicians. Allowing them to prescribe medications routinely prescribed by primary care providers, as seen in other states like Oregon and Vermont, can contribute to better healthcare outcomes for our community.</p> <p>As a patient of a Naturopathic Doctor, I trust my doctor to prescribe needed medications safely and appropriately. Being able to have all of my needs met by my Naturopathic primary care doctor would help to alleviate the burden of needing to see multiple providers, and greatly benefit patients across the state.</p>
Robin Porter	Support	<p>I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state.</p> <p>I believe that this bill represents a positive step forward in healthcare by aligning the scope of practice for Naturopathic Physicians with their extensive training and legal recognition as primary care physicians. Allowing them to prescribe medications routinely prescribed by primary care providers, as seen in other states like Oregon and Vermont, can contribute to better healthcare outcomes for our community.</p> <p>As a patient of a Naturopathic Doctor, I trust my doctor to prescribe needed medications safely and appropriately. Being able to have all of my needs met by my Naturopathic primary care doctor would help to alleviate the burden of needing to see multiple providers, and greatly benefit patients across the state.</p>
Rachel Garces	Support	<p>I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state. I believe that this bill represents a positive step forward in healthcare by aligning the scope of practice for Naturopathic Physicians with their extensive training and legal recognition as primary care physicians. Allowing them to prescribe medications routinely prescribed by primary care providers, as seen in other states like Oregon and Vermont, can contribute to better healthcare outcomes for our community. As a patient of a Naturopathic Doctor, I trust my doctor to prescribe needed medications safely and appropriately. Being able to have all of my needs met by my Naturopathic primary care doctor would help to alleviate the burden of needing to see multiple providers, and greatly benefit patients across the state.</p>

Natalie Jones	Support	<p>I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in Washington State.</p> <p>I believe that this bill represents a positive step forward in healthcare by aligning the scope of practice for Naturopathic Physicians with their extensive training and legal recognition as primary care physicians. Allowing them to prescribe medications routinely prescribed by primary care providers, as seen in other states like Oregon and Vermont, can contribute to better healthcare outcomes for our community. Access to primary care providers in Washington is getting increasingly difficult. By opening this up, more patients can see doctors in a timely manner.</p> <p>As a patient of a Naturopathic Doctor, I trust my doctor to prescribe needed medications safely and appropriately. Being able to have all of my needs met by my Naturopathic primary care doctor would help to alleviate the burden of needing to see multiple providers, and greatly benefit patients across the state.</p>
Mary Ellen Mullen	Support	<p>I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state.</p> <p>I believe that this bill represents a positive step forward in healthcare by aligning the scope of practice for Naturopathic Physicians with their extensive training and legal recognition as primary care physicians. Allowing them to prescribe medications routinely prescribed by primary care providers, as seen in other states like Oregon and Vermont, can contribute to better healthcare outcomes for our community.</p> <p>As a patient of a Naturopathic Doctor, I trust my doctor to prescribe needed medications safely and appropriately. Being able to have all of my needs met by my Naturopathic primary care doctor would help to alleviate the burden of needing to see multiple providers, and greatly benefit patients across the state.</p>
Janis Bombacie <janisbombacie@gmail.com>	Support	<p>I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state. I believe that this bill represents a positive step forward in healthcare by aligning the scope of practice for Naturopathic Physicians with their extensive training and legal recognition as primary care physicians. Allowing them to prescribe medications routinely prescribed by primary care providers, as seen in other states like Oregon and Vermont, can contribute to better healthcare outcomes for our community. As a patient of a Naturopathic Doctor, I trust my doctor to prescribe needed medications safely and appropriately. Being able to have all of my needs met by my Naturopathic primary care doctor would help to alleviate the burden of needing to see multiple providers, and greatly benefit patients across the state.</p>

Susan Turteltaub Support I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state.

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Vincent Dean Support I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state.

I have been seeing a Naturopathic Physician for fifteen plus years. The experience has been nothing short of stellar. These professionals need all the tools they can get to keep our communities healthy.

I believe that this bill represents a positive step forward in healthcare by aligning the scope of practice for Naturopathic Physicians with their extensive training and legal recognition as primary care physicians. Allowing them to prescribe medications routinely prescribed by primary care providers, as seen in other states like Oregon and Vermont, can contribute to better healthcare outcomes for our community.

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Lisa Marlow Support I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state. I believe that this bill represents a positive step forward in healthcare by aligning the scope of practice for Naturopathic Physicians with their extensive training and legal recognition as primary care physicians. Allowing them to prescribe medications routinely prescribed by primary care providers, as seen in other states like Oregon and Vermont, can contribute to better healthcare outcomes for our community. As a patient of a Naturopathic Doctor, I trust my doctor to prescribe needed medications safely and appropriately. Being able to have all of my needs met by my Naturopathic primary care doctor would help to alleviate the burden of needing to see multiple providers, and greatly benefit patients across the state. The quality of care I have received over the years from her, has literally changed my life.

Jennifer Dardzinski Support I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state.

I believe that this bill represents a positive step forward in healthcare by aligning the scope of practice for Naturopathic Physicians with their extensive training and legal recognition as primary care physicians. Allowing them to prescribe medications routinely prescribed by primary care providers, as seen in other states like Oregon and Vermont, can contribute to better healthcare outcomes for our community.

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Tammy Cotton Support I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state.

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Robert Ermtson Support I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state. I believe that this bill represents a positive step forward in healthcare by aligning the scope of practice for Naturopathic Physicians with their extensive training and legal recognition as primary care physicians. Allowing them to prescribe medications routinely prescribed by primary care providers, as seen in other states like Oregon and Vermont, can contribute to better healthcare outcomes for our community. As a patient of a Naturopathic Doctor, I trust my doctor to prescribe needed medications safely and appropriately. Being able to have all of my needs met by my Naturopathic primary care doctor would help to alleviate the burden of needing to see multiple providers, and greatly benefit patients across the state.

Stephen Frazzini Support I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state.

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Christi Carlson	Support	<p>I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state.</p> <p>I believe that this bill represents a positive step forward in healthcare by aligning the scope of practice for Naturopathic Physicians with their extensive training and legal recognition as primary care physicians. Allowing them to prescribe medications routinely prescribed by primary care providers, as seen in other states like Oregon and Vermont, can contribute to better healthcare outcomes for our community.</p> <p>As a patient of a Naturopathic Doctor, I trust my doctor to prescribe needed medications safely and appropriately. Being able to have all of my needs met by my Naturopathic primary care doctor would help to alleviate the burden of needing to see multiple providers, and greatly benefit patients across the state.</p>
Susan Leipzig	Support	<p>I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state. I believe that this bill represents a positive step forward in healthcare by aligning the scope of practice for Naturopathic Physicians with their extensive training and legal recognition as primary care physicians. Allowing them to prescribe medications routinely prescribed by primary care providers, as seen in other states like Oregon and Vermont, can contribute to better healthcare outcomes for our community. As a patient of a Naturopathic Doctor, I trust my doctor to prescribe needed medications safely and appropriately. Being able to have all of my needs met by my Naturopathic primary care doctor would help to alleviate the burden of needing to see multiple providers, and greatly benefit patients across the state.</p>
Kumi Okada	Support	<p>I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state.</p> <p>I believe that this bill represents a positive step forward in healthcare by aligning the scope of practice for Naturopathic Physicians with their extensive training and legal recognition as primary care physicians. Allowing them to prescribe medications routinely prescribed by primary care providers, as seen in other states like Oregon and Vermont, can contribute to better healthcare outcomes for our community.</p> <p>As a patient of a Naturopathic Doctor, I trust my doctor to prescribe needed medications safely and appropriately. Being able to have all of my needs met by my Naturopathic primary care doctor would help to alleviate the burden of needing to see multiple providers, and greatly benefit patients across the state.</p>
Shakila A Banu	Support	<p>I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state.</p> <p>I believe that this bill represents a positive step forward in healthcare by aligning the scope of practice for Naturopathic Physicians with their extensive training and legal recognition as primary care physicians. Allowing them to prescribe medications routinely prescribed by primary care providers, as seen in other states like Oregon and Vermont, can contribute to better healthcare outcomes for our community.</p> <p>As a patient of a Naturopathic Doctor, I trust my doctor to prescribe needed medications safely and appropriately. Being able to have all of my needs met by my Naturopathic primary care doctor would help to alleviate the burden of needing to see multiple providers, and greatly benefit patients across the state.</p>

Lisa Marlow Support To whom it may concern,I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state.I believe that this bill represents a positive step forward in healthcare by aligning the scope of practice for Naturopathic Physicians with their extensive training and legal recognition as primary care physicians. Allowing them to prescribe medications routinely prescribed by primary care providers, as seen in other states like Oregon and Vermont, can contribute to better healthcare outcomes for our community.As a patient of a Naturopathic Doctor, I trust my doctor to prescribe needed medications safely and appropriately. Being able to have all of my needs met by my Naturopathic primary care doctor would help to alleviate the burden of needing to see multiple providers, and greatly benefit patients across the state.Thank you for your consideration,

Michael Gerdes Support I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state.

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Cynthia Brown Support I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state.

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Deanne Johnson	Support	<p>To whom it may concern, I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state. I believe that this bill represents a positive step forward in healthcare by aligning the scope of practice for Naturopathic Physicians with their extensive training and legal recognition as primary care physicians. Allowing them to prescribe medications routinely prescribed by primary care providers, as seen in other states like Oregon and Vermont, can contribute to better healthcare outcomes for our community. As a patient of a Naturopathic Doctor, I trust my doctor to prescribe needed medications safely and appropriately. Being able to have all of my needs met by my Naturopathic primary care doctor would help to alleviate the burden of needing to see multiple providers, and greatly benefit patients across the state. Thank you for your consideration,</p>
Blake Miller	Support	<p>I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state.</p> <p>I believe that this bill represents a positive step forward in healthcare by aligning the scope of practice for Naturopathic Physicians with their extensive training and legal recognition as primary care physicians. Allowing them to prescribe medications routinely prescribed by primary care providers, as seen in other states like Oregon and Vermont, can contribute to better healthcare outcomes for our community.</p> <p>As a patient of a Naturopathic Doctor, I trust my doctor to prescribe needed medications safely and appropriately. Being able to have all of my needs met by my Naturopathic primary care doctor would help to alleviate the burden of needing to see multiple providers, and greatly benefit patients across the state.</p>
Margaret Colony	Support	<p>I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state.</p> <p>I believe that this bill represents a positive step forward in healthcare by aligning the scope of practice for Naturopathic Physicians with their extensive training and legal recognition as primary care physicians. Allowing them to prescribe medications routinely prescribed by primary care providers, as seen in other states like Oregon and Vermont, can contribute to better healthcare outcomes for our community.</p> <p>As a patient of a Naturopathic Doctor, I trust my doctor to prescribe needed medications safely and appropriately. Being able to have all of my needs met by my Naturopathic primary care doctor would help to alleviate the burden of needing to see multiple providers, and greatly benefit patients across the state.</p>
Blake Ilstrup, JD	Support	<p>I have been seeing naturopaths as my primary care provider for over 15 years with great results. I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state. I believe that this bill represents a positive step forward in healthcare by aligning the scope of practice for Naturopathic Physicians with their extensive training and legal recognition as primary care physicians. Allowing them to prescribe medications routinely prescribed by primary care providers, as seen in other states like Oregon and Vermont, can contribute to better healthcare outcomes for our community. As a patient of a Naturopathic Doctor, I trust my doctor to prescribe needed medications safely and appropriately. Being able to have all of my needs met by my Naturopathic primary care doctor would help to alleviate the burden of needing to see multiple providers, and greatly benefit patients across the state.</p>

Liz Ebeling	Support	<p>I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state. I believe that this bill represents a positive step forward in healthcare by aligning the scope of practice for Naturopathic Physicians with their extensive training and legal recognition as primary care physicians. Allowing them to prescribe medications routinely prescribed by primary care providers, as seen in other states like Oregon and Vermont, can contribute to better healthcare outcomes for our community.</p> <p>As a patient of a Naturopathic Doctor, I trust my doctor to prescribe needed medications safely and appropriately. Being able to have all of my needs met by my Naturopathic primary care doctor would help to alleviate the burden of needing to see multiple providers, and greatly benefit patients across the state.</p>
Lias Hazen	Support	<p>I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state.</p> <p>I believe that this bill represents a positive step forward in healthcare by aligning the scope of practice for Naturopathic Physicians with their extensive training and legal recognition as primary care physicians. Allowing them to prescribe medications routinely prescribed by primary care providers, as seen in other states like Oregon and Vermont, can contribute to better healthcare outcomes for our community.</p> <p>As a patient of a Naturopathic Doctor, I trust my doctor to prescribe needed medications safely and appropriately. Being able to have all of my needs met by my Naturopathic primary care doctor would help to alleviate the burden of needing to see multiple providers, and greatly benefit patients across the state.</p>
Mallorie Hazlewood	Support	<p>I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state. I believe that this bill represents a positive step forward in healthcare by aligning the scope of practice for Naturopathic Physicians with their extensive training and legal recognition as primary care physicians. Allowing them to prescribe medications routinely prescribed by primary care providers, as seen in other states like Oregon and Vermont, can contribute to better healthcare outcomes for our community. As a patient of a Naturopathic Doctor, I trust my doctor to prescribe needed medications safely and appropriately. Being able to have all of my needs met by my Naturopathic primary care doctor would help to alleviate the burden of needing to see multiple providers, and greatly benefit patients across the state.</p>
Brittany Smith	Support	<p>I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state.</p> <p>I believe that this bill represents a positive step forward in healthcare by aligning the scope of practice for Naturopathic Physicians with their extensive training and legal recognition as primary care physicians. Allowing them to prescribe medications routinely prescribed by primary care providers, as seen in other states like Oregon and Vermont, can contribute to better healthcare outcomes for our community.</p> <p>As a patient of a Naturopathic Doctor, I trust my doctor to prescribe needed medications safely and appropriately. Being able to have all of my needs met by my Naturopathic primary care doctor would help to alleviate the burden of needing to see multiple providers, and greatly benefit patients across the state.</p>

Doreen Duff	Support	<p>We strongly support Senate Bill 5411, which aims to broaden the scope of practice for Naturopathic Physicians in our state.</p> <p>This bill is a step forward by aligning the scope of practice for Naturopathic Physicians as primary care physicians. They should be able to prescribe medications routinely prescribed by primary care providers, (like Oregon and Vermont), and can contribute to better healthcare outcomes.</p> <p>As a patient of a Naturopathic Doctor, I trust my doctor to prescribe needed medications safely and appropriately. Having all of my needs met by my Naturopathic primary care doctor would help to alleviate the need to see multiple providers, and greatly benefit patients.</p>
Linda Johnson	Support	<p>I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state. I believe that this bill represents a positive step forward in healthcare by aligning the scope of practice for Naturopathic Physicians with their extensive training and legal recognition as primary care physicians. Allowing them to prescribe medications routinely prescribed by primary care providers, as seen in other states like Oregon and Vermont, can contribute to better healthcare outcomes for our community. As a patient of a Naturopathic Doctor, I trust my doctor to prescribe needed medications safely and appropriately. Being able to have all of my needs met by my Naturopathic primary care doctor would help to alleviate the burden of needing to see multiple providers, and greatly benefit patients across the state.</p>
Michael Ross DC, CSCS, DACRB	Support	<p>I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state.</p> <p>I believe that this bill represents a positive step forward in healthcare by aligning the scope of practice for Naturopathic Physicians with their extensive training and legal recognition as primary care physicians. Allowing them to prescribe medications routinely prescribed by primary care providers, as seen in other states like Oregon and Vermont, can contribute to better healthcare outcomes for our community.</p> <p>As a patient of a Naturopathic Doctor, I trust my doctor to prescribe needed medications safely and appropriately. Being able to have all of my needs met by my Naturopathic primary care doctor would help to alleviate the burden of needing to see multiple providers, and greatly benefit patients across the state.</p>
Tina Harcrow	Support	<p>I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state.</p> <p>I believe that this bill represents a positive step forward in healthcare by aligning the scope of practice for Naturopathic Physicians with their extensive training and legal recognition as primary care physicians. Allowing them to prescribe medications routinely prescribed by primary care providers, as seen in other states like Oregon and Vermont, can contribute to better healthcare outcomes for our community.</p> <p>As a patient of a Naturopathic Doctor, I trust my doctor to prescribe needed medications safely and appropriately. Being able to have all of my needs met by my Naturopathic primary care doctor would help to alleviate the burden of needing to see multiple providers, and greatly benefit patients across the state.</p>

Karen Dawson    Support    I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state. I believe that this bill represents a positive step forward in healthcare by aligning the scope of practice for Naturopathic Physicians with their extensive training and legal recognition as primary care physicians. Allowing them to prescribe medications routinely prescribed by primary care providers, as seen in other states like Oregon and Vermont, can contribute to better healthcare outcomes for our community. As a patient of a Naturopathic Doctor, I trust my doctor to prescribe needed medications safely and appropriately. Being able to have all of my needs met by my Naturopathic primary care doctor would help to alleviate the burden of needing to see multiple providers, and greatly benefit patients across the state.

Andrea Finley    Support    I support SB 5411 and urge you to approve this bill in order to decrease the patient's burden of unnecessary referrals and long wait time with alternate providers who don't know us like our naturopaths. My naturopath has extensive training and should be recognized to fully practice under this setting, as any PCP does. This would help to reduce costs and increase access to care for me and many other Washingtonians.

Thanks for your attention to this critical matter,



Lily Stokely, ND Support I am the clinic founder and co-owner of One Connection Healthcare, an integrative primary care clinic offering care to the chronically ill, those with mental health conditions, complex trauma and eating disorders. We are also a CNME residency host site with Institute for Natural Medicine (INM) funding to train residents within naturopathic medicine as well as a student preceptor site. In my time as a primary care physician and clinic owner I have seen numerous examples of harm due to naturopathic physicians' limitations on prescriptive rights. I'd like to provide several real life examples of cases where advanced ability to prescribe could have prevented harm as well as saved on healthcare dollars. The first case is a 23 year old female experiencing severe anxiety after sexual assault while traveling. Sleep became highly disrupted after the assault and she began exhibiting signs of psychosis due to lack of sleep. I used all of the tools in my tool box including high dose herbs, nutraceuticals, counseling and medications within my scope in Washington state. The level of dysregulation for this individual was severe and nothing was able to get her to sleep. What she needed was a benzodiazepine, however due to the complexity of her trauma and decreased access and availability of prescribing providers of this medication class, she was not able to see another provider in a timely way that felt safe for her. She ended up entering full psychosis within the week and was hospitalized in a residential facility where she then experienced further trauma from the providers where she was seeking care. Had I had access to prescribing benzodiazepines safely in this scenario to get her to sleep effectively sooner in her presentation of PTSD and severe insomnia I sincerely believe she would not have needed higher level of care or had to experience the further medical trauma with the care she received in that facility. This was a preventable crisis that was restricted by limited prescriptive access. The second case is a 32 year old female with a chronic history of atypical anorexia nervosa with a recent diagnosis of ADHD. Eating disorder specialists in most cities are extremely limited. I am one of less than a dozen providers in this area specializing in medical management of eating disorders. The complexity of ADHD management amidst a restrictive eating disorder history is complex. I felt the individual needed Vyvanse or a very low dose of a stimulant medication while being monitored cautiously with her eating disorder team to ensure that restrictive behavior was not enhanced by the medication. Had I been able to be a prescribing provider for these medications I would have managed this myself, reducing the possibility of referring to another prescribing provider who may not have eating disorder expertise. Instead I did have to refer for this individual to have medication access. The prescribing provider specialized in ADHD, but not eating disorders even though they claimed to have experience there. The provider started them on a high dose of a stimulant which sent the individual into a fully restrictive relapse of their eating disorder within several weeks. They also ended up in higher level of care to be able to gain access to a prescriber with eating disorder experience while receiving intensive residential treatment. Prior to the medication stimulus of relapse this individual was stable in recovery and I believe they could have avoided the relapse had a competent provider with a speciality supporting the complexity of their conditions were able to prescribe. Naturopathic doctors have a diverse realm of subspecialties that are needed within the healthcare field and the complex nature of human conditions often overlaps with needs for diverse medications. Not always would I choose to treat ADHD with medications, but when needed these are life altering medications that can change the course of an individual's ability to engage in expectations of our culture. Additionally, without prescriptive rights of these medications it would be considered unethical for me to remove someone from the medication, which I often find are being over prescribed, particularly within the eating disorder field. The nation is deficient in primary care physicians as well as psychiatric medication prescribers. Primary care physicians play an essential role in a bridge to psychiatric care support and sometimes are the only provider seeing a patient in a crisis while sometimes patients may wait up to 6 months to see a prescribing psychiatric provider. It is dangerous to have primary care physicians limited in prescriptive ability and it is causing further harm to patients to restrict access in this way. It is unethical to name naturopathic doctors as primary care physicians within Washington state without giving full prescriptive rights. I am in strong favor of expanding the scope of prescriptions with the sunrise review and feel it is essential for the safety and wellbeing for patients within our care as well as furthering access to qualified healthcare providers in a time of need.

Dave Pear Support I am a former NFL player with dementia. Kabran Chapek, ND-Amen Clinics Seattle has really helped me with my head injuries and medical needs from my NFL injuries. Without his help I am not sure where I would be. Thank you Dr Chapek!

Shannon Support I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state.

Ressler

I personally have benefitted from the care of a Naturopath and have found the care to be comprehensive, thorough, and fact based. I am a 50 year old woman in good health and fortunate not to have health issues that can only be addressed by an MD. I believe the pro-active nature of my care that I'm receiving from my Naturopath will continue to keep me healthy and keep medical costs down as I age. My Naturopathic doctor keeps a birds-eye view of my total health by seeing me multiple times per year, performing comprehensive testing, taking time to read and analyze my tests (with me), and having creative solutions for my health issues. I have full confidence in him prescribing medications and overseeing my access to specialists.

I support expanding the practice for naturopathic Doctors in Washington!

Dr. Gulla	Support	<p>Thank you for your time today. I am writing to you today as a long practicing Naturopathic physician who has been involved in education in the field of Naturopathy for over a decade. I am an adjunct professor at Bastyr University, currently serve as Treasurer and Chair of the Finance Committee of the Washington Association of Naturopathic Physicians, and have contributed to our board certification examination. I am writing today in support of these proposed changes to scope in our current sunrise review. We are all aware that Washington State has a shortage of health care providers and physicians. Naturopathic physicians help fill that need. Naturopathic physicians in Washington state are held to a high standard of training, safety, and competence, and anyone who says otherwise is likely speaking out of professional bias or a misunderstanding of the professional values and educational standards that naturopaths in Washington state must adhere to. As naturopaths, we fundamentally use a therapeutic order that begins by establishing foundations of health in our patients including exercise, lifestyle, and dietary interventions. When we do prescribe pharmaceutical medicine, we provide adjunct treatments to help mitigate toxic side-effects. Instead of a "pill for every ill" and a focus on medicating symptoms, we consider a patient's physiology as a whole system. We focus on identifying root causes and removing obstacles to health which often include removing addictive substances that are harmful. In contrast, as a primary care physician, I often witness failures of the conventional medicine system on a regular basis that would be laughable if they weren't so detrimental. One of the obstacles to health that I help my patients overcome is addiction. I am a huge advocate for sobriety. I presented at the WANP on the Naturopathic approach to Alcohol cessation. In my over decade in practice, I have never prescribed codeine, so I certainly cannot be accused of abusing my prescriptive powers. However, I believe my patients would benefit if I had the ability to support and titrate patients safely off of drugs and alcohol with an increased scope of options. Our naturopathic physicians are trained to the highest possible standards and work diligently to support individual patients on their health journey and often form a team of professionals to best support their goals. I strongly urge the department to increase the scope in the sunshine review and strengthen Washington's holistic whole person care options and improve patient care. Thank you for your time and attention to this matter.</p>
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Shea Hamilton	Support	<p>I have opted to see a Naturopath as my primary care physician because I want a doctor who can take a holistic approach to my health and well-being. To have to see another provider simply because of these rules is incredibly frustrating. Having to find care elsewhere to fill my ADHD medications is neither efficient nor a good approach to my healthcare. I want my PCPs scope to match their training. Please support Senate Bill 5411!"</p>
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joelle king	Support	As a long-term patient of naturopathic doctors, every day I am grateful to them for the fact that I am not crippled or suffering an irreversible condition—partly due to their skills. I am rehabilitating incredibly difficult injuries under their care and guidance. I also am thankful to them as they assisted me by constantly working with difficult insurance companies and offering sliding scale care.I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state.I believe that this bill represents a positive step forward in healthcare by aligning the scope of practice for Naturopathic Physicians with their extensive training and legal recognition as primary care physicians. Allowing them to prescribe medications routinely prescribed by primary care providers, as seen in other states like Oregon and Vermont, can contribute to better healthcare outcomes for our community.As a patient of a Naturopathic Doctor, I trust my doctor to prescribe needed medications safely and appropriately. Being able to have all of my needs met by my Naturopathic primary care doctor would help to alleviate the burden of needing to see multiple providers, and greatly benefit patients across the state.
Gwyn Howard	Support	I support SB 5411 and support my ND having the ability to prescribe medicines that they've been trained to prescribe, and sign off of all necessary forms as my PCP. This will minimize obstacles and delay to getting the care I need from my primary care provider.
Jennifer Gibbs	Support	I'm writing this email in support of expanding naturopathic doctors' prescriptive authority to include controlled substances in schedule II - V drugs There is a severe shortage of primary care healthcare workers in Washington state. Naturopathic Doctors have equivalent if not more training and expertise than others in the healthcare profession with that prescriptive authority. I am in full support of expanding their scope of practice to include these medications to be able to give more effective, continuous care to patients.
Margaret Whetham	Support	I totally support any bill that will permit naturopaths to be able to prescribe medications as MD's do. I have found my best holistic care in the naturopath community. It would be great not to have to swing back to an MD to get certain prescriptions. Naturopaths are my preferred go-to for total health care.  Please support Senate Bill 5411.
Susan Fuller	Support	I support my ND having the ability to prescribe medicines that they've been trained to prescribe, and sign off of all necessary forms as my PCP. This will minimize obstacles and delay to me getting the care I need from my primary care provider.
Kimmie Choi	Support	I'm writing to express my strong support for Senate Bill 5411, which aims to enhance the scope of practice for Naturopathic Physicians in our state.I believe that this bill represents a positive step forward in healthcare by aligning the scope of practice for Naturopathic Physicians with their extensive training and legal recognition as primary care physicians. Allowing them to prescribe medications routinely prescribed by primary care providers, as seen in other states like Oregon and Vermont, can contribute to better healthcare outcomes for our community.As a patient of a Naturopathic Doctor, I trust my doctor to prescribe needed medications safely and appropriately. Being able to have all of my needs met by my Naturopathic primary care doctor would help to alleviate the burden of needing to see multiple providers, and greatly benefit patients across the state.

Rilla Westermeyer MD	Support	<p>Thank you for the opportunity to provide comment on the sunrise review of the naturopathic scope of practice. I am a physician practicing Family Medicine in Spokane, WA. I am opposed to the proposed naturopathic scope of practice expansions. I strongly urge the Department of Health to oppose all elements of the proposal, which would compromise the safety of our patients and the effectiveness and quality of care delivered in our state. Naturopathic education does not prepare a naturopath to accurately diagnose or provide the medical treatment considered in the application. As a physician, I completed four years of medical school where I received a comprehensive medical education. I completed didactic courses in pharmacology, as well as the clinical application of pharmacology. After graduation and passing the USMLE I spent 3 years completing a residency where I learned to perform my duties safely and effectively. By contrast, a naturopath's education emphasizes "natural healing" and not evidence-based practices and methods. The focus on "natural healing" does not allow for the same level of emphasis on treating many medical conditions. Naturopaths are not required to complete residency. The education and training of a naturopath is not equivalent to that of a physician and does not prepare a naturopath to safely perform the duties contemplated in SB 5411. The proposal under review would grant a naturopath prescriptive authority for schedules II-V without stipulating any additional education and training. Schedule II drugs are classified as such because of the high potential for abuse, psychological dependence, or physical dependence, as well as the potential for adverse interactions with other drugs and conditions. While Schedule II drugs are those that have the highest potential for abuse, all scheduled drugs can be dangerous when misprescribed and/or misused, which is why they are scheduled in the first place. There is no shortcut to being able to safely prescribe controlled substances. Comprehensive medical education and training are required to be able to understand not only a given drug and condition, but also how that drug may interact with other drugs a patient may be taking or other conditions they may have. The proposal would also modify the current "minor office procedure" provision within the naturopathic practice act to include "primary care services" and "procedures incident thereto of minor injuries" without providing context or specificity. The proposal also considerably broadens the allowance for naturopaths to perform "injections." These updates to the naturopathic minor office procedures provision would open the door to any number of interpretations without ensuring that requisite education and training have been attained. In any scope of practice proposal, the consideration of patient safety and ensuring high-quality care are paramount. The risks associated with allowing underqualified providers to perform unspecified procedures and treat undefined levels of injuries outweigh any potential benefits. Thank you for the opportunity to share my concerns with this proposal. Again, I urge the department to oppose all elements of the proposal.</p>
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Miriam Mirdoch	Support	<p>I'm a 73 year old woman who has kept healthy and pharmaceutical drug free because of complimentary and alternative medicine. I've found that western medicine is good at diagnosis and surgical techniques but falls short of causes and prevention of certain conditions, where a naturopath has helped me in my life. Please give them more leverage and respect in our health care system</p>
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Jackie K      Support      Natural Path Physicians go through the same amount of schooling and education as any other physician. They know better how to work with the body more naturally and use healthier treatments. They have the knowledge to know when something more is needed. They should have the same prescribing privileges as any other physician. I trust my natural path more than my reg Dr because I prefer to work with my body and not introduce pharm that only take care of the symptoms! I want to heal and pharm do not heal your body, they only alleviate symptoms and cause more side effects!! simply do not take many pharm and any limited ones that I do take are the last resort!! Give them the same privileges.

Evonne Noble      Support      Dear DOH,

My ND is in effect my PCP. While often we are treating from a preventative, holistic model, the times when I have been ill and needed particular treatments, I was shocked that she could not have the full range of treatment options to prescribe for me. Usually when a controlled substance is needed, the acuity is higher, and this puts a heavy burden on me the patient to then have to seek out other care, find a Dr with openings, the delay to GET an appointment, transfer medical history, and the negative impact on my physical, emotional, and financial well being in the process.

We are lucky that in the PNW we have such rigorous ND training, such a high standard of care provided by that professional community. I believe that the WAC is there to protect the public. The current limitations do not serve public health well. An expansion of ND privileges is an important part of ensuring more people have access to doctors that function as quality primary care especially in the face of our current shortage.

It also is a step towards undoing the politics and power games in the medical field where each group lobbies to control a particular domain, seeing other practitioners as a threat rather than seeing our communities in desperate need of care from all clinicians who can responsibly provide it.

NDs are not woo-woo witch doctors playing games. Their treatment philosophy is evidence based, validated and their training more and more adopted by the medical mainstream. The current limitations are a reflection of historical (and still existing) prejudice

Thank you for considering my input on your decision making.

Stephen Justin Smitherman ND, DC, MS	Support	<p>Hello, I am Dr. Stephen Justin Smitherman. I maintain a license in and practice in Washington and Oregon. My practice is on the Oregon border in Vancouver, Washington. Every single day for years I have been practicing in my Oregon location with the scope that Washington naturopathic doctors are looking for in Washington. I have no malpractice claims against me, no board complaints against me, and a lot of happy patients who I have helped with a lot of problems. It is in truth very silly that crossing the border changes my scope. I am just as competent in Washington as I am in Oregon. It is however sad that I often have to tell my Washington patients that I cannot offer them the same level of care as my Oregon patients. I have to make referrals for very simple things that I do every day in Oregon when I am in Washington. This costs the patient more money, and wastes a lot of time on an already strained healthcare system. I am sure that other associations will give comments against Naturopathic Doctors to protect their piece of the pie, or what have you... but I work with actual practicing physicians who are overworked, and overstressed. Those real life practicing physicians and nurse practitioners are more than welcoming to another teammate lightening the load of primary care in particular. Please release the unnecessary shackles on naturopathic doctors so that we can better serve the community, and have more opportunity ourselves to fulfill our potential.</p>
Dr. Ilana Gurevich	Support	<p>I am writing to say I am in favor of Senate Bill 5411. I am a naturopathic physician who practices naturopathic medicine in both Washington and Oregon. My scope in Oregon already includes these parameters that are being proposed in Washington state. Our training as naturopathic physicians allows us to practice as primary care providers, and also allows us to remove some of the burden off of the medical system by carrying a large Primary care load. It also allows patients to be able to access the type of primary care provider that resonates with their medical needs. We are trained in prescribing medications from Schedule III-V. And we also are required to get extra training as well.</p> <p>I am in favor of this bill since it makes access for patients better.</p>
Dr. Elissa Mendenhall N.D.	Support	<p>Good morning!</p> <p>I'm writing to express my support of this expansion. I practice with licenses in multiple states, holding my longest licensure in the state of Oregon which has had near-full prescriptive capacity since 2012. My understanding is that there have been relatively few issues with this. In California where I also practice I can directly prescribe schedule IV and testosterone. My understanding is this has been relatively problem-free as well. There were initial concerns in Oregon, which was effectively addressed with additional required education for physicians. Washington and California have added similar requirements, so I believe the way has already been paved for this to be successful in Washington. ND education for pharmacy is on par if not exceeding in hours with other mid-level practitioners.</p> <p>It certainly behooves the residents of Washington to have more access to full-capacity primary care physicians, and this expansion will achieve that goal.</p>
Camille Urueta, LMT	Support	<p>I just want to write in support of this decision. With the medical system under even more stress than ever, access to care and medicine will be harder to receive. Also I know many people, myself included, that have a naturopath as their primary care. So having to go to a MD GP for something simple, and possibly waiting months for that appointment, is an exercise that wouldn't be needed. Thank you for listening.</p>

Dr. Lauren  
Gresham, ND,  
MPH

Support

Hello there, My name is Dr. Lauren Gresham and I am a practicing naturopathic physician in the greater Seattle area. I am extremely thrilled that the Department of Health is considering modifications to our scope and know that the proposed changes would have immensely profound impacts on my patient population. While I recognize that the majority of the language of the bill modification is centered more on expanding primary care access, the proposed changes still have huge benefit to my patients, even though I provide limited primary care. My patient population is folks with chronic and persistent pelvic pain in addition to other sexual dysfunction. Patients may suffer from this for a variety of etiologies, but a major source of this issue is muscular dysfunction. The use of intravaginal valium is an essential tool to help the muscles of the pelvis relax and is an important augment to other work in the area, such as collaboration with pelvic floor physical therapists. Additionally, patients may have nerve sensitization from chronic pain and the use of topical ketamine can interrupt this abnormal nerve signaling and be an essential element of their recovery. Due to our current scope, I do not have the ability to provide these essential interventions to my patients, despite my training and expertise in this particular field of medicine. I am a little unclear if this particular sunrise bill also includes changes to allow access to botulinum toxin (ie. "botox"), but this is another intervention that would be paramount to my patients in that botox can also be wildly helpful for relaxing the muscles of the pelvis. I also think the proposed changes would be critical for my naturopathic peers. Our average visit with our patients is between 45-60 minutes. During our longer visits, we have the ability to understand the actual behavior and attitudes around any controlled substance prescribed to our patients. I sincerely do not believe that this expansion would increase problematic controlled substance use, but enable more providers to track patients more diligently. And when we do interact with patients that may be struggling with controlled substances, our elongated visits enable us to understand more of the root causes and connect our patients to appropriate intervention services to support their recovery. Overall, I am ecstatic that the Department of Health is considering these changes and really wish to impress that this would be so impactful for my patients. Due to few providers specializing in sexual medicine and pelvic floor issues, it can be extremely challenging to send my patients to their medical doctor for intravaginal valium or topical ketamine. In my experience, most medical doctors deny this request due to them having no experience or training with this intervention and therefore, are not ethically able to monitor and manage it. Please approve the changes so the burden of pelvic pain can be improved for my patient base!



Deb Langhans Support Washington State Senate Health and Long Term Care Committee: I have used naturopathic physicians for the past 40 years as my primary source of medical care. I have never been disappointed. Unlike allopathic physicians, naturopaths are trained to ferret out the root cause of the problem(s) rather than simply treat the symptoms. They're trained to honor the body's natural defense mechanisms, e.g., immune system, to help maintain health and balance. And speaking of balance, naturopathic physicians treat the whole person--body, mind, heart, spirit. As a veteran wholistic life coach, I know this is the most comprehensive and effective approach to health & well-being. I believe it's imperative that naturopathic physicians be given the respect and latitude they deserve to maximize their ability to successfully serve patients in WA State. For this reason, I'm in full support of any proposal that promotes substantial increases to naturopathy's scope of practice. Such a clear signal of validation could be an important factor in other states' decisions moving forward. Washington State citizens are entitled to the most effective & comprehensive healthcare options, and supporting naturopathy is an important, empowering step in that direction. Thank you for your serious consideration of my comments.

Stephanie Adam Support I'm writing in support of increasing the prescribing abilities of naturopathic doctors. I have a complex medical history that traditional medical doctors were never able to take the time to untangle and figure out. In fact, the traditional medical doctors have probably damaged my health by their hastily written prescriptions and/or even their lack of wanting to prescribe something because of biases. I'm thriving now under naturopathic care for things like POTS, iron deficiency, anxiety, diabetes, etc. From what I've seen, I never feel rushed, and they never tell me it's all in my head or "that's just the way it is." I think they would be very conscientious with the added responsibilities of having access to prescribing more restricted medications.

Stacey B Support I have greatly benefited from naturopathic services. As a cancer survivor, I have many long term effects that need to be addressed. To have my ND be able to address more,, the expansion of their scope of practice would be beneficial to my overall wellness journey. I like to go to just one doctor for services. My preference is my ND.

Carolyn Grout, OD Support Hello,  
I am an optometrist in Spokane. I have family members who have issues getting in to see Dr.'s in town. The naturopaths I know are educated, and want to serve their patients.

I am FOR expanding their scope of practice and feel it would enhance every person who lives in Washington State.

Thomas Young, ND	Support	<p>Greetings. I am Dr. Thomas Young, a credentialed naturopathic physician for 35 years. Currently, there are four categories of providers in Washington State who provide primary care services. Those providers are MD, DO, ND and ARNP. Only the ND provider has limited controlled substance prescription rights. The limited prescription rights of the ND complicates patient care and makes it more expensive. Patients who need a single dose prescription to travel and sleep comfortably on the airplane have to go to another provider who doesn't even know them. Others who need a pain medication for 2-3 days after a dental or other procedure also need to get it from a prescriber who is unfamiliar with their particular health needs. Additionally, the limits on prescription rights make it difficult for naturopathic doctors to do primary care at Indian Health Services, Molina, AppleCare and hospital based services. Naturopathic physicians have an excellent record of reducing and limiting the use of harmful and addictive medications because we have so many other tools within our treatment modalities. By expanding the prescription rights, naturopathic doctors will not be the source for more addictive drugs prescriptions and more addicted patients but, would instead be the solution offering alternatives to those addictive drugs. In conclusion, I strongly support the expanded prescription proposal for naturopathic doctors.</p>
Jennifer Strode	Support	<p>Hi! To whom this message is received by please consider to expand naturopathic medicine in the medical field. I am a forty year old who has worked in the medical field for almost twenty years and was just recently diagnosed with breast cancer. I notice that the majority of physicians don't offer natural care or medicine to patients before other options which I don't think is the safest way to help patients. I believe patients should have the right to chose what kind of care they are receiving and that natural remedies can work well for some patients and that this is the safer way to treat patients first before man made medications that can sometimes lead to more serious side effects. Thank you for considering my vote to expand natural medicine!</p>
Mia Roozen	Support	<p>External Email</p> <p>I love having my primary care physician as a naturopathic doctor and would not have it any other way. I have tried the traditional route for my medical needs and as a highly sensitive female with a history of trauma, not only is the traditional route not healing for me; it is ineffective. If that was the only route available to me, I would not go to see a doctor at all. I would figure out a mix of acupuncture and other approaches. Not only is the naturopathic approach less invasive, more holistic and preventative, it is also less expensive for my insurance provider. It is based on listening to the client and their needs. This approach has made me feel like I am in good hands.</p> <p>. One example of its effectiveness is, as I was going through menopause, I went through a phase of heavy bleeding. Everyone who I spoke with who had that experience had surgery to stop the bleeding. Working with my nd, I used a regimen of herbs I took orally and a topical progesterone cream. The bleeding stopped and when it recurred, I repeated the procedure. No surgery was needed. As well, I didn't need to miss work at all during a very demanding time. That is just one example of how effective this approach is to people's overall physical well being. I can not recommend the naturopathy enough.</p>
Maureen Estep	Support	<p>I am writing to urge you to pass Bill 5411. The already challenging healthcare system is further complicated for those of us who have been healed by and rely on Naturopathic care. Today, I have to see an additional doctor to duplicate my care just to access the medications I need. Passing this bill will allow for holistic patient care without further burdening the system.</p>
Nason Fox	Support	<p>I want my Naturopathic doctor to be able to be my Primary Care Provider (PCP) and have full scope ability to treat my health and also prescribe the same as a MD doctor.</p>
Amani Loutfy	Support	<p>I'm writing in support of Senate Bill 5411. Please continue to expand the scope of naturopathic doctors in Washington state</p>

Tom Melancon	Support	My Naturopathic Physician is as important to me as my Regular MD. She provides more preventative care than any doctor I've ever had and I'm healthier than most people 20 years younger than me.
Shayna Collins, MS, LMHC, LPC Faculty Counselor	Support	I am a licensed mental health counselor working in a Washington state community college health center. I STRONGLY support expanding naturopathic physician scope of practice. We all know that there is a shortage of primary care physicians nationally that's contributing to our current health care crisis. It would significantly expand access to allow NDs to prescribe more medications. Our community college health center is lucky enough to have an ND on staff. It would be a godsend to our students for our doctor to be able to treat more conditions (which she already does in Oregon). Our students are on medical wait lists for months and frequently can't afford health services. Please open up more opportunities for Washington residents to get more access to medical care.
Melanie Gillespie	Support	<p>I am writing to urge that SB 5411 be passed to allow Naturopathic Physicians to better treat patients. The shortage of care options is significant and growing. Expanding the existing network's ability to help patients is efficient and effective. Additionally, it is inefficient to force patients who are getting results from Naturopathic Physicians to split their medical resources if they need certain medications and have to find a different kind of doctor to obtain them. This also splinters the effectiveness of care overall.</p> <p>Thank you for advocating for patients across the state.</p>
Whitney C	Support	I'm writing to request that you allow naturopathic doctors to have all the same prescribing abilities and "normal" doctors. NDs have helped me overcome far more internal issues than regular doctors and they should be allowed to be someone's PCP if that's what we want. Individuals should be able to choose what doctor they feel most comfortable with and have full prescribing capabilities.
Michael Dawson	Support	<p>My name is Michael Dawson. My wife and I live on Vashon Island. On the island there are limited options for primary care physician services and as retirees on a fixed income, having to go off island for these services is at best inconvenient and expensive, and at worst a threat to our ongoing good health. Our primary care physician is an ND. The clinic that we frequent, Vashon Natural Medicine, serves about half the residents on our island.</p> <p>This is why we support SB5411 and why we hope that you will too.</p>
Jen Bernard	Support	I strongly believe that it would be very beneficial to expand the scope to NDs to prescribe any medication that they believe is necessary in the healing process. I have found great benefit in working with my ND for acute pain related to injuries and it has been an inconvenience that I've needed to seek out other physicians for prescription medication when I trust my ND more. I have appreciated the fact that my ND is not quick to jump to prescriptions or invasive intervention for the first method of treatment as physicians in modern medicine seem to do. I also believe that more people would be open minded to seeing NDs if they had the ability to prescribe these medications when needed. NDs provide so much more education and are less likely to prescribe people toxic drugs that will only impact long term health so the more people we have seeing NDs, the healthier our population will become.

Bronwyn Cusson	Support	<p>My name is Bronwyn Cusson, and I would like to comment in favor of expanding the prescription of schedule 2-5 substances to Naturopaths in the state of Washington.</p> <p>As someone who has been on over 50 different medications throughout my teens and adulthood to treat my crippling mental health issues, and autoimmune disease, it would be endlessly beneficial to myself and others to have my primary care doctor, who is a naturopath, be able to provide me more adequate care without having to seek a second physician.</p> <p>I hope you are able to take my personal experience and comment on this expansion into account</p>
H. Kate Johnson President Law Seminars International	Support	<p>Please sign the Bill to make it possible for ND's to expand their scope of practice. They are incredible valuable for health care in the US. We have had year's of experience with ND's and they deserve to have their practice valued. Say yes to the Bill. The whole country will benefit.</p>
Jennifer Mogensen	Support	<p>I am guardian for my adult son with a disability. I am encouraged by the conversation for this proposal to offer naturopathic options. It is an appropriate decision as all people should have a choice of medical options.</p>
Mai Linh Olmstead	Support	<p>I am in support of the bill expanding the scope of ND prescriptive authority to include controlled substances in Schedule II through V of the Uniform Controlled Substances Act; enabling NDs to sign and attest to any documents or certificates that any primary care provider is routinely expected to sign (including adoption exams, hospice orders, etc); update defining language and update the RCW to reflect that the profession is regulated by an established board rather than by the Office of the Secretary of Health.</p> <p>NDs need to be compensated by insurance at parity with ARNPs/MDs for the same visit. They are currently reimbursed approximately 60% of what an ARNP/MD does for the same visit.</p> <p>I have received excellent care from Kelly Wright, ND, and Kimberly Allen, ND at the Vashon Natural Medicine practice since 2016. ND physicians are integral to my health care.</p>

Jason Black	Support	<p>I am writing in support of expanding the scope of practice for naturopaths in Washington. I don't want to get into the details of my personal health situation, but I have a condition that requires some forms of care that are not typical for ordinary adult family medicine providers. After considerable searching, the best person I could find to provide me with the care I need happens to be a naturopath. Certain aspects of my care require skin treatments which can be quite painful. I am typically quite averse to medications, but in this instance there are some topical medications that could make my treatments much easier to endure, but which fall outside of her ability to legally prescribe. This might sound like a matter of minor inconvenience or temporary discomfort, but it is more than that. In the days leading up to my treatments, I have a higher level of stress and nervousness about the ordeal I'm going to have to endure. Then of course the treatments themselves are, depending on the severity of my symptoms on the day, like willingly subjecting yourself to torture. Not only is this directly painful, but it is very taxing. I leave those appointments drained and exhausted, short tempered, with no ability to do anything useful with the rest of my day. All I can do is rest and recover from the trauma of it. This has impacts on my family as well, who have to deal with my crappy mood and pick up slack around the house. If my doctor could prescribe something more effective than topical lidocaine (which helps, to be sure, but hardly enough), then those treatments might change from being a several-day roller coaster of stress, discomfort, and recovery, to being more like any other ordinary errand. And that would be a significant benefit to my quality of life. But she can't, so this is what I have to go through. I have had well-meaning friends and family tell me that I could find those drugs if I really wanted to. They don't come right out and say it, but of course they mean "you could find a dealer". They're right. I could. But I'm not going to seek medications illegally, with all the legal and safety risks that entails, nor should I have to. I trust my doctor, with her years of training and clinical experience, to determine the a treatment plan that will work best for me. She should be allowed to prescribe medications fitting that plan. Please trust her as much as I do to provide me with the care I need.</p>
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Laura Eastman, ND Tilia Natural Health	Support	<p>I am a Naturopathic Physician and support this bill 100%. My patients and I are very frustrated at not being able to discuss the medications in this scope increase within the context of our doctor-patient relationship. I know my patients very well due to longer visits and the length of our relationships, and having to refer them to other doctors simply for these prescriptions is not the best use of insurance dollars or doctors time.</p>
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Melissa Lange Support

I am writing in support of SB 5411, which is currently undergoing a Sunrise Review. I am currently a student clinician in the Doctor of Naturopathic Medicine program at Bastyr University. As I am in my final year of training, I can attest to the rigor, quality and adequacy of the training our providers undergo, with a curriculum that prepares graduates for excellence in primary care, and includes in-depth pharmaceutical education. In addition to pharmacology, we are trained in both didactic and clinical settings to screen for and coordinate care with licensed providers who hold complete prescriptive rights to advocate for appropriate management of controlled substances. Given the provider shortages that have escalated to alarming rates within the last few years following the COVID-19 pandemic, it has become obvious - even during my limited clinical experience - that our current healthcare system is failing; largely due to critical shortages in appropriately credentialed providers. Healthcare accessibility is poor and continuing to worsen; as a student clinician, I have experienced the frustration of being required, by law, to refer someone out for something we could more than reasonably address with expanded prescription rights. Instead, patients are forced to wait for months on already overburdened waitlists to receive the care they require. The bottom line: Worsening accessibility to healthcare providers with comprehensive rights to serve at the front lines of primary care is a threat to both public safety and to public health. Naturopathic physicians are currently recognized as primary care providers within the state of Washington; as such, it is critical for our profession to be granted expanded prescriptive rights so that we can better contribute to solutions for the ongoing healthcare crisis at hand. In closing, I urge those conducting this review to think big-picture; consider the naturopathic medical community of Washington State as an ally in the comprehensive care of our communities.

Dr. January  
Austin  
Naturopathic  
Doctor Lower  
Elwha Health  
Department

Support

I am writing to you today in support of expanding naturopathic physician scope of practice as written in the proposed bill. I am a naturopathic physician working in a rural area of Washington. My ability to provide quality healthcare to patients is often impacted by the current restrictions in place. This often delays patient care and causes gaps in their care. I am fully trained and have the knowledge to be able to provide the services proposed and would be able to do so if I were licensed in Oregon, where I attended naturopathic medical school. The main areas I see patient care impacted are with my pediatric patients with ADHD and opioid dependent patients. I am unable to prescribe a taper off opioids to patients who I consider should not be on opioids. I often have to defer these patients to other providers, this takes time and is a health risk. Sometimes, the patient was open to tapering off the medication during the visit with me but changes their mind by the time they see the provider they are referred to. This creates a missed opportunity to assist these patients to safely taper off ever increasing doses of opioids, during an opioid crisis. With my pediatric patients with ADHD, the first line of treatment recommended by the American Academy of Pediatrics is stimulants. As NDs are currently unable to prescribe them in WA ST these patients experience a delay in care in rural settings. My pediatric patients either have to get established with a new PCP, in spite of having a therapeutic relationship with me as their PCP and being my patient for most of their life, or they need referred out of the area for medication management. If they choose to go to a new PCP the wait time is currently 3-6 months at most facilities in our area. If they choose to be referred, the travel time could mean a more than 2 hour drive if their referral is accepted. Unfortunately, these referrals often get denied with a response stating they are not taking patients with ADHD needing stimulant medications because it is within the scope of the PCP. During this long process, this child is not getting the recommended treatment, which impacts their daily life with social, emotional and academic barriers. Thank you for your thoughtful consideration of the needed expansion of naturopathic physician's scope of practice to better serve patients in Washington State and alignment of their scope with their extensive medical training.

Terrance  
Manning II, ND,  
RMSK, MA

Support

I am a naturopathic physician practicing in neighboring Oregon. I have been a licensed naturopathic physician for 7 years, of which three of them I completed a AANMC accredited residency under the supervision of a medical doctor interventional radiologist. I serve on the Oregon Pain Management Commission, I am an elected board member to the Oregon Association of Naturopathic Physicians, I serve as Vice President of a specialty society called the Naturopathic Orthopedic Medicine Academy, and I am a subject matter expert and serve on the assessment committee for the Alliance for Physician Certification & Advancement musculoskeletal sonography specialty board exam. I am writing to express my support for the Washington Association of Naturopathic Physicians proposal to increase their scope of practice, specifically Senate Bill 5411. As someone who practices to the full extent of my scope of practice as my state allows me, I do not see any reason why naturopathic physicians in Washington should not be afforded the same privileges. Naturopathic physicians have standardized training, provide safe and effective care, as well as serve the public to the highest of professional standards. I would hope, given the paucity of high quality primary medical care, that you would consider allowing the naturopathic physicians to practice to the highest level of their training. My practice specialty is interventional orthopedics. I routinely utilize in office minor surgical procedures with minimal to no sedation and delivery therapies to treat musculoskeletal pathologies using fluoroscopic and ultrasound guidance. These procedures often result in acute, moderate to severe, post procedure pain and require narcotics to manage. I do not prescribe narcotics for chronic pain management but use them judiciously and specifically for post procedure pain. Furthermore, the procedures I perform occasionally require light sedation with an anxiolytic such as benzodiazepines. I, like all licensed naturopathic physicians, have been trained in prescribing these medications, have DEA registration, and use them safely on a regular basis. In fact, I happen to work in a clinic with a medical doctor who is double board certified in Pain and Physical Medicine and Rehabilitation. As per our clinic policies, we are required to perform quarterly peer to peer evaluations. These evaluations have never had a concern from my medical doctor colleagues regarding either my interventional skills, safety of interventions, interventional outcomes, nor my narcotic medication prescribing. There is no reason, other than the current legislative restraints, that my colleagues in Washington should not have similar scope of practice and be able to help their patients with both interventions and narcotic medications. In addition, I would like to bring to your attention, Oregon Rule Chapter 850-060-0212. This rule, instituted by the Oregon Board of Naturopathic Medicine, clearly defines and delineates the necessary training requirements in order for me to perform the interventions that I do. I might suggest that the State of Washington could adapt something similar to these rules (or use them as a guideline) so as to ensure the competency of the Washington naturopathic doctors with respect to in office interventions and withhold the highest standards of public safety. Lastly, as a member of the Oregon Pain Management Commission, I work with other healthcare practitioners to develop opioid prescribing and pain management trainings for licensees of many various professions. We are all very familiar with the "opioid epidemic", but as a member of the OPMC, I hear public testimony over and over again from patients and patient advocates who cannot find professionals to prescribe the indicated and needed palliative medications for their persistent and non-curable pain. There is a time and place for safe and responsible opioid prescribing. Washington naturopathic physicians should at least have the option to choose not to prescribe opioids. In summary, increasing the scope of naturopathic medicine in the state of Washington will increase access to medical care, reduce overall healthcare system costs, and improve the sustainability of independent small businesses. Thank you for your due diligence and serious consideration of Senate Bill 5411.



Chris Cotner, ND	Support	<p>Thank you for giving the WANP the opportunity to share personal testimonies regarding the practice of naturopathic physicians caring for Washington citizens. I have been practicing full-time as a naturopathic physician in the state of Washington since 2003. This has been an overall rewarding experience with challenges and obstacles in areas—a few of which I hope we can significantly improve together. The three main obstacles I have repeatedly faced practicing as a naturopathic physician are limited prescription authority, insurance parity/coverage issues, and representing my patients in legal matters/documents. I will give brief examples of each, and further information will be happily shared if you so desire. It is a frustrating moment to be sure when a well-established patient that trusts me comes to me for help and must be turned away and denied the proper treatment they need because of limitation with what I can prescribe. Explaining to them the why is not soothing and only frustrates them more. Their response is always, “you should be able to do that as a physician.” I adamantly agree. Many patients do not even know that what they need, or what they are asking for help with, involves a controlled substance. An example is managing panic attacks with a benzodiazepine in a patient that just experienced significant trauma in their life. My patient just wants to feel calm, live a higher quality life, and has partnered with me to help them. How does this play out? My patients must try to schedule with someone they now understand to be able to prescribe what they need and feel like they are now drug seeking. The time to get a new intake appointment with a new provider can be weeks or even months. We all know that scenario. The new treating physician now has a new patient looking for a medication to manage their panic attacks. The MD or ARNP or PA say to the patient, “why did you not go to your primary care physician for this?” And they explain, “because my primary care physician is an ND, and they are not allowed.” Often, I will have tried Hydroxyzine or perhaps a supplement, but these may not work, then the patient loses trust and hope, and is more frustrated. They are currently still suffering through this whole ordeal with panic attacks, not sleeping well, and dysfunctional through the day. Awkward all around for everyone involved. I have lost dozens and dozens of patients because I could not provide them with the care they needed during a most difficult time for them. P.S. The number of patients I have lost due to not being able to manage an ADHD stimulant medication top the charts!! personally feel very confident to be able to prescribe controlled substances safely and responsibly, including educating the patient about additional risks with these medications. Honestly, I hope more can be done to include NDs equally on insurance plans. Patients’ insurance plans change, and may change often, frequently prohibiting their being treated by a naturopathic physician, so they must decide to look for another provider or pay out-of-pocket. I even have a team of insurance credentialing and verification experts from Optum Health working to help me and too often we lose this battle. Lawyers, judges, and other legal experts have denied my testimony and chart notes or disallowed me to complete legal forms for patients because I was not specifically an MD. What does the patient do now? They can go stand in line for who knows how long to see an MD and see if this new provider wants to take on their legal and health issues with them. These examples reveal situations with so much lost time, energy, and money because of underutilized resources that naturopathic physicians can very competently provide.</p>
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Valerie Leonard	Support	<p>I’m writing to express my support for Senate Bill 5411 and for expanding the scope of practice for Naturopathic Physicians in Washington State. I am a Seattle resident, and my whole family (husband, two sons, and I) all use a Naturopathic Physician as our PCP (Primary Care Physician). We want to urge the board to support NDs in our state, so that they are able to provide patients with a full scope of options for the highest quality of care. Thank you for your consideration.</p>
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Stormy Howell, Support  
Treatment Program Manager, Klallam Counseling Services

I wish to write in support of expanding the scope of practice for naturopathic physicians. I believe to do so would reduce so many of the barriers that individuals are facing with lack of access to health care providers. There is no question as to the shortage of healthcare providers, especially in rural areas, and to increase the scope of practice for ND's would open up a whole group of healthcare workers who are able to provide primary care services in an office setting.

Additionally, the holistic approach that ND's offer provides a very different whole person centered view to health care. I work in a Substance Use Disorder treatment facility with an ND on staff. I have been able to witness first-hand the impact of the holistic care has made for many of our clients. To increase their scope of practice would benefit so many individual people and the healthcare system as a whole.

Wahji Kasten Support  
ND LAc, Naturopathic Doctor and Licensed Acupuncturist

My name is Wahji Kasten. I am a practicing Naturopathic Physician in the state of Washington. I have worked for the Lower Elwha Klallam Tribe since 2016 as a primary care provider. It has been a privilege to work for a tribe, and as an Indigenous woman myself I have been able to provide culturally appropriate care to the local community. I pursued a naturopathic medical degree because it gives me additional tools, such as botanical medicine, to help my patients achieve better health. I have a thorough understanding about drug-herb interactions and I am able to counsel my patients about safety, I am grateful that this was part of my education in medical school.

I also have an in-depth understanding of the opioid epidemic that everyone in North America has been dealing with for the past decade and longer. I am currently completing my Master in Public Health at Johns Hopkins University as a Bloomberg Fellow with a focus in Addiction and Overdose. I can confidently say that Naturopathic Physicians play a vital role in addressing this public health crisis. Increasing the scope of Naturopathic Physicians will allow us to address the opioid epidemic with safe and effective pharmacology.

I am in full support of increasing the scope of naturopathic physicians to allow them to prescribe schedule II-V drugs, just as they are able to in Oregon. Naturopathic Physicians are educated and trained as primary care physicians, which includes pharmacology. When Naturopathic Physicians apply for a DEA license they are required to complete buprenorphine training, just like other providers.

I sincerely believe that to effectively address the very real public health crisis that was created by the overprescribing of opioids, the opioid overdose crisis, it will take many different professionals and Naturopathic Physicians play a role. There will always be patients that will seek out Naturopathic medical care, by providing Naturopathic Physicians with all of the tools available to primary care providers they can more effectively help their patients. I am confident that we have enough education and continuing education resources to safely prescribe schedule II-V drugs, just like our colleagues in other states.

Lis Johnson	Support	<p>I am writing this letter in support of Senate Bill 5411. It is no overstatement to say that I would not be alive today without the insight and concern of my naturopathic doctor, Patrick Donovan. Dr. Donovan retired in recent years but his influence and impact on my health continues. When I moved here 15 years ago, I was suffering from a chronic G.I. issue that no one seemed to be able to diagnose. I saw a half dozen doctors and it reached the point where it was suggested that I see a psychiatrist because tests would not reveal the problem. Dr. Donovan was the seventh doctor I saw and he diagnosed me after an hour of listening to me talk about my health history. I had celiac disease. After taking the genetics test, his diagnosis was confirmed. For nearly 8 years I had suffered. I had also had a colon resection that was made necessary by the damage the celiac had done to my G.I. tract. Because he listened, because he understood, because he cared to give me as much time as necessary in order to hear what was happening, I finally got an answer and a plan of action. He did not rely on tests, until after we had spent a considerable amount of time discussing my concerns and my symptoms. I have never had a regular MD take that much time or interest in an issue that did not reveal itself through tests. In fact, I had one MD tell me that we just had to accept that this "problem" was something beyond our ability to see — that's no way to live a good life. I continued to see Dr Donovan until his retirement and I still use many of the strategies and natural products he prescribed to keep my G.I. tract in good condition. In fact, my current gastroenterologist worked in concert at Dr Donovan for a continuum of care they gave me the best outcome possible once I had a diagnosis. Naturopathic physicians approach their work in a different way. They listen, they don't always rely on tests and they have a broader view of health than many regular MDs. Dr Donovan prescribed a compounded medication for my celiac-related migraines, and there was one ingredient that he did not include because he was not allowed so the medication wasn't as effective as it would have been otherwise. Giving naturopathic doctors the ability to write broader prescriptions like this and others will help patients like myself live healthier happier lives.</p>
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Sue Kimpton	Support	<p>I would very much appreciate my ND being able to prescribe medications that are currently outside of the scope of their practice. My ND is my primary care physician.</p> <p>When I needed additional medication for sleep while traveling overseas, I have had to find an MD, schedule a separate wellness appointment and duplicate annual visits with the MD if I needed that prescription filled. It was time consuming, expensive and unnecessary.</p> <p>My ND is thorough, efficient and well schooled. It would be of tremendous benefit to all to keep health care under the umbrella of one primary physician.</p>
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Becky Shimko,  
Lead  
Substance Use  
Disorder  
Professional,  
Klallam  
Counseling  
Services

Support

I am sending this email in regards to expanding the scope of naturopathic medicines scope of practice. I currently work in a Native American drug/alcohol outpatient treatment program. We currently have a naturopathic doctor on staff full time to assist with our clients with their medical needs. One of the issues we run into when dealing with the fentanyl/heroin epidemic is that our medical provider cannot provide MAT services to our clients. This is a huge barrier in the tribal community and also in the larger community. The fentanyl epidemic has currently put our county in the number one spot for fatal overdoses. We are working hard to reduce the overdose rate by handing out Narcan in the community. We want to fight this epidemic with everything we have, but we need your help by changing the scope of practice to include Medical Assisted Treatment. If this scope of practice was changed we could offer more effective services to our community and help save lives. On a more personal note: I also think the scope of practice should be expanded to also include cosmetic injectable treatments, to include Botox and other approved fillers. This helps increase self-esteem and also has been proven to help with people suffering from migraine headaches. I find it almost insulting to Naturopathic MD's that they are unable to provide cosmetic procedures, but a Register Nurse with less education is able too. It is my understanding that Oregon has changed this scope of practice in their state and Naturopathic Doctors are able to provide this service in their state. I think Oregon is a great example of how we need to expand the scope of naturopathic medicine in Washington. Thank you for taking the time to read this.

Debra L. Ellis,  
CPC, COC,  
CPI, Lead  
Medical Biller,  
Lower Elwha  
Health Clinic

Support

I am currently a medical biller and also a patient of a naturopathic provider.

As a medical biller I have seen the issues that face our Tribal Health Clinic and the shortage of primary care providers. Our clinic is constantly in need of additional medical providers to meet the needs of our community. We are proud to say that we have 2 naturopathic providers currently. If our current naturopaths were able to fully address and meet the needs of those in most need, such as the ability to prescribe Schedule 2-5 controlled substances, would greatly aid in access to care for all our patients.

The issue of CMS/Medicare, Tricare, Triwest, ChampVA, et al, any Federal insurance program-does not cover ND services. This is another barrier to access of medical care for those patients that have coverage through those programs. I would like to see a change at the Federal level also.

My choice in provider is also a naturopath. Thankfully, I am quite healthy and currently not in need of Schedule 2-5 medications. But, if and when I may be, my provider must reach out another provider that is able to prescribe those medications. As a patient, I find this less than optimal.

Please consider the proposed changes.

Dr. Chrysalis Sabatinos	Support	As a Naturopathic Physician and Primary Care Provider in Washington the expansion of scope being considered in the Bill would mean a great deal to my patients and those patients of my colleagues. The expansion in scope would allow us to truly act as PCP's and allow for continuity of care for our patients in need. It would decrease the time many patients wait for specialists while in crisis. In addition it would decrease the burden on emergency rooms. Naturopathic Physicians are trained in pharmacology and many of us carry DEA to be able to meet the needs of our patients. Allowing this change would only benefit Washingtonians and their overall health care needs. We are and have been acting as PCP's since 1919, please make the change to allow us to keep fulfilling the role.
Lydia LaSalle, ND, Skagit Family Health Clinic, Mt Vernon, WA	Support	I am writing regarding the new proposal to expand licensure for Naturopathic Doctors. As an ND who works in primary care with an average of 18-25 patients per day, my current scope of practice severely limits me in providing the kind of care any primary care provider should be able to. I work in a conventional clinic with mostly ARNPs and I am very often having to inter-refer to my colleagues in order to prescribe ADHD medications, sign necessary paperwork or even prescribe a one-time benzo pre-procedurally. This limits patient's access to adequate health-care and is an absolutely necessary change to continue providing primary healthcare services as a Naturopathic Physician. I do believe that this increase of scope will allow NDs to provide necessary primary care services in a safe, competent, evidence-based manner. Thank you for your consideration
Erica Wood	Support	I fully support this proposal to expand the scope of naturopathic practice to better align with that of other statute-recognized PCPs in WA state. As a Naturopathic Doctor who is practicing primary care, it is on going frustration for both patients and providers that we cannot have more prescriptive rights to medications, particularly ADHD treatments. It creates a large gap in care when a patient who wants to either 1) taper off or 2) Start a medication; needs to wait 6-12 weeks just to get in with a prescribing provider. I can't advise a patient on tapering or what would be a good fit for them, since it is not in my scope and this creates disorder for the patient.
Joshua Njenga	Support	Thanks for accepting public comments. I am in favor of the above physicians being allowed to prescribe schedule 2-5 after they take a special course or class on opioid prescription and pain management.

Ralene Vaughn Support

My name is Ralene and I am a Registered Nurse in Washington. I have had the privilege of working with a variety of healthcare providers in my nursing practice and also for my own personal health. After years of seeking help for a medical concern through traditional routes to no avail, I sought care from a naturopath. She was able to identify the underlying cause of my symptoms and prescribe a treatment that fully resolved my condition. I now continue to keep my primary care with a wonderful naturopath. I greatly appreciate the time, breadth of knowledge and teaching they provide. However, if patients need a medication that is on the scheduled list, they run into major barriers for care. Urgent care settings and most specialists, unless it is their area of specialty, refuse to prescribe scheduled medications. If a patient's primary care provider is a naturopath, they are likely to be under-treated due to the current restrictions. Utilization of the emergency department for scheduled prescriptions that could otherwise be prescribed by the provider who knows the patient best is an egregious misuse of that healthcare setting and may still not provide the patient with adequate prescription intervention while recommending the patient return to their primary care provider for treatment. I have also run into barriers facilitating patient care under the Death With Dignity Act when a patient has a naturopath for their primary care. This led to delays in patient services as specialists are significantly backlogged due to the pandemic and mass exodus of providers from burnout over the past three years. Allowing naturopathic doctors to sign these forms and provide these prescriptions is essential to advocating for patients in our state. I am certain you will consider many aspects of risks and benefits for this matter, but hope that this barrier to care will be removed for the health, safety and fiscal responsibility of our communities.

Sonja Wingard BSN.RN	Support	As a registered nurse who cared for my dear brother in the last days of his battle with cancer I had a front row seat in pain management ...or lack of it. My sister had died of melanoma at age 32 after a two year battle with cancer while using the western model of medicine. My brother pursued a more natural treatment approach. Therefor he had no MD to prescribe adequate pain meds until hospitalized the last two days of his life. His main health care provider was a naturopath for many years.On his last plane ride home he couldn't sit for plane takeoffs and was lying on airport floors trying to relieve his metastatic back pain. I was giving him IV Talwin obtained on a trip to Mexico in a tiny plane bathroom. He was 6 feet 2 inches and I was 5 feet 8 inches and we had to squeeze in there for privacy.If his naturopath had been allowed to prescribe pain meds it would've made everyone's life... and his death...much easier.Now, years later, I have been fighting cancer. Will my naturopath or my naturopathic oncologist be allowed to manage my pain? That would be very helpful at some point in the end stages.If I can offer any further information I am happy to.
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Terri Rossi MS, BCTMB, LMT, CFP Board Certified Therapeutic Massage & Bodyworker, Licensed Massage Therapist – Clinical, Certified Feldenkrais® Practitioner	Support	My comments regarding:  The proposal under review includes, among other additions, the ability to prescribe Schedule II to V controlled substances. The applicant group for this proposal is the Washington Association of Naturopathic Physicians (WANP).  I have had the pleasure of using Naturopathic Physicians to support my medical needs. My interactions with ND providers has always been professional and incredibly well informed in the area of treatment with supplements and prescription drugs. And I have found my NDs to be as well versed – and often better – as my MD and DO providers in regards to medication recommendation and management. My ND providers have always managed my prescription drugs in a manner that is knowledgeable and respectful of my needs and wishes, therefore, I feel comfortable in allowing NDs to prescribe Schedule II and V controlled substances.
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Jacqueline Freeman	Support	I have received excellent care from NDs and appreciate the thoroughness of their practice and knowledge.  I support expanding their scope of practice.
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Amy R Dyer	Support	<p>I work in the western medicine healthcare system, I have for 25 years. However, since the pandemic, I have transferred my care to largely eastern medicine and now see a naturopathic doctor that has an integrated practice. It is the best of both worlds. It allows me to invest in my wellness, as I can work with a provider who shares my interest in finding the causes of a symptom, rather than masking it with a big pharma medication. If however, I need time to work on the base issue, and need western medicine drugs, I have the option. It would be beneficial for these primary providers to be able to have full prescriptive rights. It would provide for continuity of care and it would allow for these providers to be involved holistically with their patients. It would enable these providers to work with patients closer, as they generally do, and educate and monitor all aspects of care and medications. So much lacks in education of the general public in regards to wellness and health. We currently have a huge need for providers to lighten the burden we are experiencing within our healthcare system. Allowing full prescriptive rights to these naturopathic physicians would help to bridge the gap. It would allow a whole new sector of providers to practice holistic, integrative medicine. I look forward to seeing the information that is gathered in regards to this matter. I imagine that his change of practice could impact the current climate of healthcare shortcomings.</p>
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Rosemary Song	Support	<p>I am a resident of WA state, a healthcare provider in one of our major hospital systems, a registered voter, and a patient of a Naturopathic Doctor. I am very supportive of this expansion of ND's scope of practice. My family also transitioned fully to ND as PCP during the pandemic as they were the only doctors we could find to help us in our Covid recovery. Having an ND as our PCP has served us well and I'd love to see ND's scope move closer to encompassing all aspects of patient care. Thank you for the opportunity to provide public comment.</p>
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Quinn Webb      Support      I hope this email finds you well. As a passionate and dedicated naturopathic medical student, I wanted to share my thoughts on the importance of expanding our scope of practice to improve access to care and address the shortage of primary care providers in our healthcare system. Through my experience as a student clinician, I have witnessed the incredible potential of naturopathic medicine to empower patients, implement lifestyle changes, and provide pharmaceuticals and higher-force interventions when needed. This holistic approach not only treats the symptoms but also seeks to address the root causes of illnesses, fostering a deeper understanding of their health and bodies among patients. The core philosophy of naturopathic medicine revolves around personalized, patient-centered care. We emphasize prevention and health promotion, striving to guide individuals toward better health by making informed choices and embracing holistic practices. This approach results in more engaged and informed patients who are actively involved in their healing journey. However, one of the most compelling reasons to expand our scope of practice is to tackle the significant healthcare disparity that plagues rural communities in Washington and many other regions. It is disheartening to see individuals in these underserved areas having to endure hours of travel just to see a healthcare provider in a larger city like Seattle. Often, they must do so because there are no primary care providers available near them, leaving many without access to essential healthcare services. Expanding our scope of practice would help bridge this gap in healthcare access. By providing care in these underserved areas, we can offer patients healthcare that addresses their healthcare needs conveniently and comprehensively. This not only saves patients time and resources but also eases the burden on overcrowded urban healthcare centers. Our ability to offer a range of treatments, from natural interventions to pharmaceuticals when necessary, positions us as a versatile and adaptable healthcare solution. In situations where patients require conventional medical treatments, we can collaborate with other healthcare providers, ensuring the best possible care for our patients. This interprofessional collaboration can help alleviate the shortage of primary care providers and provide a more comprehensive healthcare experience for patients in need. In conclusion, as a medical student, I have seen firsthand the transformative power of naturopathic medicine in empowering patients, addressing the root causes of illness, and fostering greater awareness of their health. Expanding our scope of practice is not only a means to enhance the quality of care but also a crucial step in improving healthcare access for underserved populations, particularly in rural communities. I believe that this change can help bridge the gap in healthcare and provide a more equitable healthcare system for all. Thank you for taking the time to consider these thoughts. I look forward to discussing this matter further and working together to make a positive impact on the healthcare landscape.

Michelle Carmody      Support      This proposal is sensible and needed.

Genevieve Courtney ND Support It is a regular occurrence that I cannot fully provide PCP care to my patients due to the current ND scope of practice. For example, a patient comes in on a controlled substance (like an ADHD medication) that they have been stable on for years. I cannot prescribe this medication for this patient. Thus this patient must have a 2nd provider that they see. This requires additional unnecessary office visits for this patient and additional strain on our healthcare system. Please expand our scope of practice to that of all other PCPs in Washington State.

Tamar Blau ND Support I am a naturopathic physician who sees a large number of patients for management of mental health symptoms. Over the last several years I've received more and more referrals from mental health counselors in order to help patients with psychiatric medication management. This number has grown as the number of psychiatric providers has decreased relative to patient need. I've been lucky to be able to access excellent continuing education to improve my competence in prescribing non controlled psychiatric medications. However there are two areas where my hands are tied, requiring my patients to see multiple providers, those being treatment of ADHD and treatment of insomnia. While I have many tools in the non controlled substance as well as diet/lifestyle supplements to help with insomnia and ADHD symptoms, patients often require scheduled drugs to achieve optimal results for these health concerns. Patients are often frustrated that they need to find another provider to prescribe some of their medications when they already have established care with me, and have built trust with me. Over and over I hear a strong desire for me to be able to manage all of their medications. As Naturopathic physicians we have the education and the tools to help our patients achieve optimal health, and the ability to prescribe certain controlled sleep and ADHD medications would vastly improve the care that I am able to provide for my patients.

Thank you for taking the time to consider this.

Anita Torres Support Why couldn't they prescribe Scheduled II-V Before they are medical professionals right. I take it Schedule of a higher degree would include hallucinogenic type meds in small milligrams for example?  
My answer is Yes let them use the medications for those that cannot find relief in other medications or therapies. The mind can heal itself if led in the correct direction and frequency.

Joy Arianashira Support Naturopathic physicians should be given license to prescribe schedule II-V controlled substances. Please consider how helpful this will be to so many of us.

Audrey Adams    Support    My family gets medical care at a naturopathic clinic in Bellevue. My husband has Parkinson's disease with advanced dementia and suffered a massive drug reaction in a hospital 3 years ago that disables him to this day. I have Type II Diabetes, treated holistically without drugs. My adult son has autism and a multitude of food allergies and chemical sensitivities, which I also suffer from. My son and I struggle with heavy metal toxicity and are hyper-reactive to most drugs, including OTCs like acetaminophen. All 3 of us are in recovery from Lyme disease. Allopathic care, generally speaking, only treats one part of the body or one condition at a time, rather than the whole person. Out of dire necessity, about 95% of our medical care is naturopathic, even though naturopathic care is not covered by any of our various insurances. The only medication that is covered by our insurance is my husband's Levadopa. My son requires Methyl-B12 shots 3 times a week and in 20 years it has never been covered by any insurance. He needs compounded methylated B12, dosed consistently for the rest of his life---but the bill is "on us"---while our insurance rates pay for everyone else's stack of drugs. To add insult to injury, when our naturopathic physician needs lab tests---even routine tests---in order to get it covered, we have to make an appointment with an MD and convince him to order the tests that our naturopathic doctor requires. Usually, it takes an excessive amount of time to get that MD appointment (we've already waited for our ND appointment), so we are forced to pay out of pocket most of the time, even for standard labs such as cholesterol or A1C. I am 68 and, other than babies four decades ago, I have had no surgeries and no hospitalizations. I am intolerant to chemicals so I can't take the drugs most people my age take, even if I wanted to, which I don't. My husband, son and I would be in a terrible situation if we weren't able to pay for our naturopathic care. It's a tragedy that so many people cannot afford it and therefore have no access to the holistic care they need. Absolutely ANYTHING you can do to make naturopathic care more accessible and more affordable would be a huge help to many thousands of Washingtonians, including us.

Gary Piscopo,  
ND, LAC

Support

I am writing in support of the increased scope of practice for naturopathic physicians. My primary focus in doing so is the state of healthcare in my community based in Central Washington. I have worked in healthcare since my enlistment in the military in 1976. I have worked in research, provided care in small clinics, and have done inpatient medical care in hospitals, including a VA hospital and three psychiatric facilities. I know what it is like to work on a functional unit with competent staff providing quality medical care. That standard of care is rapidly vanishing in the US healthcare system. To give one example, over the past decade two of the major healthcare providers in our community, Wenatchee Valley Clinic and Central WA Hospital, merged to become Confluence Health. During the pandemic and the immediate post pandemic period, Confluence lost hundreds of healthcare providers. My understanding is that they lost over 900 nurses alone. There is no possible way for a healthcare organization to bounce back in the short term from that kind of hemorrhaging. As you can predict, the result of this massive loss of professional staff has been grim in my community. Many of our patients have to wait months to get care. Referrals to some departments go through something akin to a triage process and it is not uncommon for them to be denied. A standard sleep study takes on average 6 months to obtain. Confluence has so few staff that they can only do colonoscopies for patients with pathology. Screening is now done instead with FIT tests. It is like we are now doing healthcare in a second world country. Confluence is not alone in this. Most hospitals in WA State are facing serious challenges. There are many articles and commentaries about the dire state of the US medical system, like this one from Time magazine: <https://time.com/6246045/collapse-us-health-care-system/> The system is trying its best, but without healthcare providers, there is no way to deliver adequate care. Licensed naturopathic physicians can be an excellent resource during these difficult times. Our state organization has already sent you the details as to how and why we are such a resource. I would only like to add that expanding the scope of naturopathic physicians could help alleviate the very serious shortage of licensed providers in WA state. Physician extenders can only go so far. Please help those of us in the trenches deliver the kind of medical care our country used to be able to provide on a routine basis. Thank you for your consideration.

Theresa Martez, ND, Naturopathic Advantage, LLC	Support	I have read through the Sunrise document to increase the scope of practice for Naturopathic physicians in WA state. I have been a Primary Care Provider as a Naturopathic physician since 2013 and a practicing ND since 20006. I regularly see 25 patients weekly, including Apple Care/Molina/Community United patients. The overwhelming majority of my patients use me as their PCP. It is extremely disappointing to tell them that I can't prescribe or refill their ADHD medications or their anti-anxiety/depression medications, etc. What is the point of acting as a PCP, when some patients will need to establish with another healthcare provider just to get these medications?I currently carry an expensive license with the DEA to prescribe testosterone, and that has been incredibly helpful to many of my patients. With a lack of PCP's around our area, it can sometimes take patients months to get an appointment. Allowing ND's the access to prescribe other controlled substances will improve our patients' quality of healthcare and allows ND's to participate in care equally to other medical professions (ARNP, MD, etc). We currently are required to have 60 hours of Continuing Education every two years, and it would be fairly easy to include updates to medications/pharmaceuticals within these 60 hours.Thank you for considering an expansion of our scope! It is truly appreciated
Stewart Wright	Support	I fully support Senate Bill 5411 to expand naturopathic scope of practice to better align with that of other statute-recognized primary care providers in Washington.
Erinn O'Brien, ND	Support	<p>My name is Erinn O'Brien and I am a licensed naturopathic physician in WA state practicing primary care and serving pediatric patients and adult women. I am in support of Senate Bill 5411 because it would directly affect my ability to provide primary care services to my patients on a regular basis.</p> <p>One example of how this bill will benefit the patient population I serve is by allowing me to prescribe and monitor stimulants for my patients with ADHD. Access to prescribing health care providers has been incredibly challenging throughout the pandemic, particularly for my patients who are on Medicaid. Specialists are referring back to the patient's primary care doctor for medication management. While I am licensed as a primary care doctor and follow AAP guidelines for screening throughout infancy, childhood and adolescence, this is one area where I am not permitted to serve my patients. Additionally most PCPs will not see a patient for adjunctive care for medication management. I am urging my patients, many of whom I serve their entire families and have trusted and knowing relationships with, to transfer care so that their child can have greater access to a medication that is first line treatment for a common medical condition.</p> <p>Senate Bill 5411 is fundamental in increasing access to needed medical care for so many families under the care of naturopathic physicians and will better enable us to serve our patient's needs more appropriately and result in a decrease of delay of care.</p> <p>Thank you for your consideration,</p>
Ann Vaughn	Support	Be nice for insurance companies to cover naturalpathic under
Andrew Lisitsky	Support	I fully support this change. The training and knowledge of these professionals is on par with PCP's especially in regards to the use of medicine. It is more likely for a PCP to prescribe addictive class med than any NP so the worry about abuse is unfounded. They should not be hamstrung by the traditional roles of medical doctors.

Suhyeon In,  
ND (she/her),  
Naturopathic  
Physician

Support

My name is Suhyeon In and I am a naturopathic physician that practices primary care at a busy outpatient clinic in Seattle, WA. A significant portion of our patient population are on Medicaid and often encounter many challenges in access to necessary healthcare due to the incomplete scope of my primary care as a naturopathic physician.

I am writing to express my support and the pressing need for a change in regulation within the field of naturopathy, which would significantly benefit the public, while also ensuring the highest standards of patient care and safety. The proposed change in regulation for naturopathic physicians is imperative to address the shortage of primary care services in WA and meet the evolving healthcare needs of the public. By expanding prescriptive authority, allowing naturopathic physicians to sign and attest to various documents within the primary care scope, and updating defining language, we can ensure that naturopathic medicine remains a relevant and effective component of the healthcare system. This change will benefit patients, naturopathic physicians, and the delivery of healthcare in our community.

Expanding naturopathic prescriptive authority will expand access to primary care and a wider range of treatment options, especially for patients seeking holistic and naturopathic care. Patients will benefit from a more comprehensive approach to healthcare, where naturopathic physicians can provide a broader spectrum of treatments - including controlled substances - when necessary. Integrating naturopathic medicine into the healthcare system can reduce healthcare costs by preventing unnecessary referrals to specialists.

To ensure public safety, the legislation would undoubtedly also need to establish rigorous minimum training and education requirements for naturopathic physicians seeking prescriptive authority for controlled substances - these requirements should align with industry standards and include comprehensive training on the safe and responsible use of these substances. Robust safeguards will ensure public safety by encompassing strict monitoring, reporting, and accountability mechanisms to prevent misuse of controlled substances. Additionally, ongoing education and certification requirements should be imposed on naturopathic physicians to keep their knowledge and skills up to date.

This change in regulation will positively impact both NDs and patients. Patients will benefit from a more comprehensive and holistic approach to healthcare, resulting in improved health outcomes and potentially lower costs and less delayed access to care. Naturopathic physicians will have a broader scope of practice, enabling them to provide more comprehensive care to their patients. Naturopathic physicians will also bear the responsibility of adhering to strict guidelines and regulations to ensure patient safety which will elevate their educational standards to match other providers with the same authority. The legislation will facilitate greater collaboration between naturopathic physicians and other primary care providers, promoting a more integrated healthcare system. This would address the primary care shortage in WA and lead to improved coordination of care and better overall health outcomes for patients.

I earnestly request your support in advancing this legislation for the betterment of public health. Please do not hesitate to reach out if you have any questions. Thank you in advance for your time and efforts.

Jessie Schuh Support

I wanted to open my letter by thanking the department of health for even considering expanding the scope of naturopathic practitioners. I am extremely excited to see where this leads. A little about myself. I am a receptionist at a naturopathic office in Mountlake Terrace, Washington. I had little to no education about the scope of a naturopathic doctor until I started working here. Since I started working here, my whole life has changed for the better. I have been encouraged to start working on my mental health and my physical health not just with suppliments and the like but with anti-depressants and anti-anxiety medication. Working with these amazing doctors has opened my eyes to a type of practitioner that I didn't even know was a possibility for me. Doctors who aren't "the earth can heal your body" types that I thought all naturopathic doctors were, but use science backed medicine to help you in ways that you had never even thought of. The doctors here are some of the smartest, hardest working, and the best listeners in the medical field, in my opinion. Naturopathic doctors, in my experience, are more likely to listen to you when you tell them something is happening in your body, like when I was put on stimulant medications as a child and the doctors kept telling me that it was fine that being dizzy is normal and to give it 90 days to even itself out. Turns out it was making me faint when standing but no one was listening to me. I mentioned that my anxiety meds were making me not sleep well and my naturopathic doctor had me off it and on a different one by the end of the week. I have also been on the side of the medical system that makes you jump through hoops just to get scheduled with a psychiatrist to even think about getting medicated. I have felt the frustration as a Medicaid patient of not being able to find any psych providers that accept my insurance let alone accepting new patients. I must get care virtually from Spokane in order to get any psych care for the last 3 years. All of these long-winded stories are just to say that I believe whole heartedly that naturopathic doctors are some of the best medical care that a person can get. Having their scope opened to controlled substances will not only give these amazing practitioners new ways to help their patients but also help with the immense strain already on the already spread paper thin psychiatry community. And help those on Medicaid to get care where there is next none available currently.

Thomas A. Griffith ND      Support      I'd like to express support of the proposed expansion of Naturopathic Physicians" scope of practice to include controlled substances contained in Schedules II through V. I have been a primary care naturopathic physician in Olympia, Wa. since 2006 running my own private family practice for the last 17 plus years providing high quality care for local families. Since the Covid 19 pandemic, with increasing administrative and inflammationary costs of doing business, I was sadly forced to seek out more financially secure employment. In applying for primary care jobs, I was surprised to find that my services as an ND were not only accepted but actually invited into the fold of the medical community. I interviewed for a position at a rural hospital in Grays Harbor and have been fortunate enough to be one of the ND's in Wa. state hired as primary care providers in a rural hospital. The acceptance of an ND is proportional to the desperate need of primary care providers. ND's like me finally have an opportunity to meaningfully contribute to the solution of Primary Care shortages across the state! I will now be able to focus my practice on providing population based healthcare to critically underserved populations. They will benefit from the expertise I bring as an ND in preventive holistic care. For all the increased access for me and for patients that this type of ground breaking position brings, as an ND, my contributions will be still be hamstrunged. Without a full prescriptive scope, I cannot add to the solution of the substance abuse crisis in my rural county hospital. Medically Assisted Therapy is a critical example where a need exists and Naturopathic Physicians, who are adequately regulated and trained, can be a part of the solution. Many of us have been waiting for the call. Please help us to answer.

Mary Klubben      Support      I am greatly appreciative of the wholistic care I receive from my ND and frequently recommend family, friends, and colleagues to see her or any ND. The quality of care I receive from her and her partners far exceeds that of my traditional providers and my health and wellness is vastly improved because of it.

Please expand the scope that ND's can provide in WA state. As a risk manager, I firmly believe this is a strong mitigant to control future healthcare costs in WA and improve the lives of our families and neighbors.

Cathy Brinton, ND      Support      I would like to see the naturopathic scope of practice broadened to better align with that of other statute-recognized primary care providers in Washington. I am a primary care physician in the state of Washington and I am an ND. I have been practicing in the state of Washington since 1998. I find it to be an ongoing, time consuming, frustration that I have to coach my patients on what to ask for and then refer them to someone else to get basic primary care prescriptions and procedures done. In my case, the procedures that I would like to be able to get done are almost entirely imaging that the patient's insurance will not cover unless an MD, NP, etc orders them. Expanding prescription rights and bringing procedures in line with what other primary care providers can do should make insurance companies more likely to cover what ND's order for their patients. It will certainly increase my ability to care for my patients.



Alyssa Falk	Support	I support allowing naturopaths the ability to prescribe these substances because I believe naturopathy to be a valid means of medical care for many people. I personally have been helped greatly by naturopaths when traditional Western approaches to medicine failed me; so allowing them greater ability to help people will add valuable perspective to our medical system.
Nadynne Suderman	Support	<p>I want to support Naturopathic physicians.</p> <p>My Naturopath doctor is great. She can give me the physical examinations I need, she prescribes natural over the counter supplements I need that work for stomach problems like digestion and the same for acid reflux. She can check for food allergies which can bring multiple health problems. She can prescribe hormones when the body is depleted of them. This increases energy, avoids depression and gives people back their active sex lives which is also healthy for the aging body.</p> <p>I recommend Naturopathic doctors as a primary care doctor because they don't just cover up the problems and then take drastic measures after bad health has occurred, Naturopathic doctors are preventative care doctors who can stop health problems in their tracks before they even occur.</p> <p>I am casting my vote for Naturopath doctors to increase their patients and patient care and to make it a legal and vital addition to medical health plans everywhere in the state of Washington- Especially Medicare and Medicare advantage.</p> <p>Thank you for your time and consideration regarding naturopath doctors.</p>
Howard Zinn	Support	I would like to register my support of SB 5411 that increases the scope of practice for licensed naturopaths in Washington State. It is common sense to enable these professionals to engage in a scope of practice concomitant with their professional training in order to greater enhance the availability of healthcare in communities in Washington State, especially those that are underserved.
JH	Support	<p>I am writing to express my strong support for the proposal to allow naturopaths to prescribe controlled substances under appropriate regulatory oversight. I believe that this initiative aligns with the principles of patient care, accessibility, and the least restrictive regulatory approach. Naturopaths have been providing holistic and alternative healthcare services for many years, focusing on natural remedies and patient-centered care. They often treat the root causes of health issues and emphasize preventive measures. However, the current restrictions on prescribing controlled substances limit their ability to provide comprehensive care to their patients, especially in cases where these substances might be beneficial. Several reasons for allowing naturopaths to prescribe controlled substances:</p> <ol style="list-style-type: none"> <li>1. Expanded Access to Healthcare: Allowing naturopaths to prescribe controlled substances can increase access to healthcare services, particularly in underserved or rural areas where there may be a shortage of medical professionals. This could help address health disparities and ensure that all individuals receive the care they need.</li> <li>2. Holistic Patient-Centered Care: Naturopaths are trained to provide holistic, patient-centered care. Allowing them to prescribe controlled substances in specific cases would enable them to consider a wider range of treatment options and provide a more comprehensive approach to healthcare.</li> <li>3. Cost-Effective Healthcare: By expanding the role of naturopaths, we can potentially reduce healthcare costs. Patients can receive a broad spectrum of care from a single provider, thus reducing the need for referrals to specialists and the associated costs.</li> </ol> <p>I entrust that Washington State will continue to be a leader in equitable and effective healthcare access and recognize the value and expertise of licensed professionals without excessive government oversight.</p>
Jennifer Todd	Support	Please allow naturopaths to prescribe NDs!

Luciano  
Garofalo , ND,  
MS

Support

I am a naturopathic physician (ND) and pediatric primary provider in Tacoma, WA. Our clinic is the only one in Pierce County where NDs provide full-spectrum primary care for Medicaid patients, including immunizations and evidence-based routine health screening. As a pediatrician, SB 5411 will be critical to my patients getting their health needs met. I am designated as a Center of Excellence with the WA Healthcare Authority to diagnose autism and prescribe therapy. A lot of my patients have neurodiversity, including autism, ADHD, aggressive behavior, and more. For some of them, stimulant medications like methylphenidate and other controlled substances are what enable them to successfully attend school and thrive in other areas of life. I'm well trained to manage these patients, including their medications—but my licensure does not allow it. The primary care shortage in this area is dire, especially when it involves mental health. I regularly get patients from Seattle Children's specialty clinics who see me for primary care. Children's providers are overburdened and rely on me to manage these patients, but when stimulant medications are involved, it puts an undue strain on families and providers alike. Real world example: Just this week, I received a methylphenidate refill request from my 6-year old patient who was recently admitted to Seattle Children's for violent behavior and suicidal ideation. They were stabilized with methylphenidate in the hospital and sent back to me for follow-up care. This patient now has a mere few days left on their stimulant prescription and the parents asked me to fill it. This family is now going to struggle to get the attention of someone at Children's who can refill the prescription, and is likely to fall through the cracks. The only place for them to go for an urgent prescription would be the Emergency Department. We also have adult primary care patients at our clinic with substance use disorders who require treatment with medications like buprenorphine. Likewise, SB 5411 will enable these patients to get their health needs met in one location and reduce the strain on our local healthcare system. SB 5411 will significantly bolster the primary care workforce in WA. I have so many colleagues here who are waiting to step into a larger role in our local healthcare system, and they're well-trained to do it. I was trained in Oregon where NDs have full prescriptive authority, and many of them will be testifying to how it enables them to meet the needs of patients in that state, especially low-income patients. Thank you for reading my testimony. I am available any time for further discussion.

Terri Haaga

Support

As someone who has utilized Naturopathic Physicians throughout my adult life, I totally support the expansion of the scope of practice for them. They are medical doctors, and should be able to do things like prescribe medications. I was working with one about 10 years ago, and had to be sent to a prescriber to get the meds prescreened that I needed for depression issues. I found my ND to be very knowledgeable and could have done it herself except for the law. I realize that this is not going to change anything, but today I would continue to work with that same ND, but I am on Medicare, which does not honor naturopathy as a medical practice I can use. I do see my ND periodically and have to pay out of pocket as I trust her medical judgement. And she know me which I find is extremely helpful.

Karl Craine, Executive Director, Law Seminars International	Support	Hello—I'd like to voice my support for the proposal to expand prescriptive authority and enable Naturopathic physicians sign and attest to the types of documents that primary care physicians typically sign. It also makes sense to update the RCWs to reflect that the profession is regulated by an established board rather than the Secretary of Health. For the past 20 plus years, my primary care physician has been an on-island Naturopath. She is one of the best diagnosticians I've encountered over my 72 years and seamlessly integrates naturopathic remedies and the ones that a traditional MD would prescribe. She should be recognized and paid the same as any other primary care physician. Thanks for your consideration of these comments.
Mary Anito & Josh Jensen	Support	We support the application to increase the naturopathic physician scope of practice. As a family, our primary care is all through our ND who spends time with each of us, cares about our history and isn't simply waiting the obligatory 15-30 to move to their next patient. She's available, professional, and competent. She uses science to lead her direction while understanding each patient as an individual. We trust her with our children and ourselves. Please support this application.
Dr Lana Ferris	Support	<p>I am writing in support of expanding the naturopathic scope of practice in WA state to include schedule II-IV drugs. I am a naturopathic doctor practicing in Vancouver, WA and specialize in mental health. Naturopathic doctors have adequate training and education to safely prescribe schedules II-IV medications and are able to in other states such as Oregon. Requiring adequate continuing education credits and DEA licensing should be done in order to ensure safe prescribing and education just like with MD and DO's. Disallowing NDs to prescribe schedule II-IV substances is discriminatory and unfair as we have the same training that medical doctors, osteopaths, and physician assistants do and they can prescribe.</p> <p>You should expand prescriptive rights to improve patient care. I routinely have to refer patients out for stimulant or benzodiazepine prescriptions. Having to refer out disrupts the continuity of their care and is often a barrier to patients accessing medication. Psychiatrists and psychiatric nurse practitioners often have long waitlists and patients go without stimulant or benzo prescriptions due to lack of provider availability.</p> <p>In summary please expand naturopathic doctors scope of practice in WA state as NDs have adequate education to prescribe these medications safely, are able to in other states, and it would improve quality of patient care</p>
Dr. Chelsea Gordon, Flourish Family Medicine	Support	I am writing today to express my support in expanding scope of prescriptive rights in WA state.
Tracy Pitcock	Support	I feel fortunate to live in a state that licenses Naturopathic Doctors. I have been seeing a Naturopathic doctor for the entire 18 years I have lived in Washington state. I would scrimp and save to see one over a MD if my insurance didn't cover. I feel fortunate that I have been able to do this. I urge you to let Naturopathic doctors have full scope of options to provide the highest quality of care.
Laura Gibbons, WA state resident.	Support	I use a naturopathic doctor as my primary care physician and support Senate Bill 5411 so that she has the treatment options she may need for my health. Please pass this bill.

Amanda Baltazar	Support	<p>I am a Washington resident and I see both a naturopath and a GP for my medical care. I fully support extending prescriptive authority to all naturopaths in the state in order to make it easier to obtain prescriptions when needed, as well as faster.</p> <p>For many individuals this could also mean requiring just one doctor appointment versus two.</p> <p>I urge the passing of this bill.</p>
Teresa Anderson, Brier, Wa	Support	<p>I am in support of expanding Naturalopaths authority as indicated in an 5411.</p>
Dr. Megan Anderson Saunders, ND	Support	<p>Hello, I am writing in my support of SB5411. As a naturopathic provider, I am the primary care physician for over 50% of my patients doing wellness exams, managing medications, Pap smears, etc. With a number of primary care physicians decreasing statistically across the country, naturopathic physicians are uniquely positioned to fill this gap offering comprehensive Integrative primary care. Updating our scope of practice in the state of Washington would allow us to continue to provide as much needed service to Washington state constituents.</p>
Kelly Wright, ND	Support	<p>As a Naturopathic Physician, I have been practicing primary care in my hometown of Vashon Island for over 25 years. Our island is only accessible by ferry, and my office serves approximately half of Vashon Island's population. Our patient population is 40% Medicaid and 25% Medicare, and we have the only on-island 24 hour pager/physician service as well. I ask that you please support the expansion of our scope of practice, so we can continue to support our patients for all of their primary care requirements. For example, now there are often forms that we cannot sign, which forces patients to go off of Vashon and re-establish care for another appointment. The expansion of SB 5411 includes: "enable naturopathic physicians to sign and attest to any documents or certificates that any primary care provider is routinely expected to sign". For our patients, this provision alone would save our patients a lot of time and money. We have provided care to our community through the pandemic, but struggle to have enough medical resources for referrals for our patients. The expansion of this bill would both assist our patients, and all people in rural areas of Washington State who are in need of primary care. Many thanks for your support,</p>

Shelby Woods	Support	<p>I am writing to express my strong support for the proposal submitted by the Washington Association of Naturopathic Physicians (WANP) to expand the scope of practice for naturopathic physicians. As a resident of Washington State, I have personally experienced the positive impact of naturopathic medicine on my health and well-being. I have been using naturopathic medicine for many years to address a range of health issues, including chronic migraines, chronic gut issues, fatigue, anxiety, depression, and overall preventative healthcare. In many ways, my naturopathic physicians have saved my life and given me hope in areas where I had none and traditional western medicine fell short. In the face of chronic health challenges, I have found solace and healing through naturopathic medicine. My journey with chronic migraines, for instance, was a never-ending cycle of debilitating pain and ineffective treatments through conventional medicine. Naturopathic care offered me a different, holistic approach that addressed the root causes of my migraines and provided natural, sustainable solutions. Similarly, my naturopathic physicians have guided me in managing chronic gut issues, fatigue, anxiety, and depression with personalized treatment plans that go beyond merely suppressing symptoms. Through this approach, I have learned ways to cope with the above conditions and not let them take over my life. My quality of life has greatly improved due to the help of my naturopathic physicians, allowing me to regain control over my health and well-being. Expanding the scope of practice for naturopathic physicians to include the ability to prescribe schedule II-V controlled substances, as proposed by WANP, is a significant step forward in enhancing their ability to provide comprehensive and holistic care to patients. While naturopathic medicine already offers valuable non-invasive and natural treatment options, the inclusion of controlled substances could further broaden their toolkit for addressing complex health conditions. This expansion aligns with the sunrise criteria outlined in RCW 18.120.010 by improving patient safety and access to care. For patients like myself, this change represents the potential for even more effective and well-rounded healthcare, where naturopathic physicians can continue to excel in addressing the root causes of health issues. The proposal also carries immense potential for increasing access to alternative healthcare options. Given the rise in chronic health conditions and the need for patient-centered care, empowering naturopathic physicians with the ability to prescribe controlled substances can address the demand for holistic healthcare services. It can also relieve some of the burden on our already overstretched healthcare system. With naturopathic physicians well-equipped to provide a wide range of treatments, patients would have greater flexibility in choosing the type of care that best aligns with their values and preferences. In conclusion, I urge the department to seriously consider the benefits that this proposal offers to the residents of Washington State. The positive impact that naturopathic medicine has had on my life is just one example of how this approach can enhance health and well-being. By expanding the scope of practice for naturopathic physicians, we can improve patient access to holistic, patient-centered care and empower practitioners to continue addressing the complex health needs of Washington's residents. I am confident that this change will benefit not only individuals like myself but also our broader community by providing a valuable and integrative healthcare option. Thank you for your attention to this important matter.</p>
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Dr. Mary Koehnke	Support	<p>I would like to submit comment in support of Senate Bill 5411. I'm a primary care Naturopathic Physician and am board certified in Naturopathic Pediatrics. I practice in community health, serving children who are both medically and socially vulnerable. It's imperative, for their health and safety as well as ease and coordination of care, that I'm able to provide a full scope of primary care services. Although I've been practicing primary care pediatrics for 11 years, some of the restrictions on Naturopathic medical licenses have created an unnecessary burden for myself and my patients. I'm hopeful that with the passing of Senate Bill 5411, Naturopathic Physicians will have more legal capability to provide complete primary care to our patient population without undo restriction.</p>
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<p>Krystal S. Plonski, ND, LAc, FABNP, Licensed and Board Certified Pediatric Naturopathic Physician and Acupuncturist</p>	<p>Support</p>	<p>My name is Dr. Krystal Plonski, ND, LAc, FABNP. I am a board certified ND specializing in pediatrics practicing in Washington State. I have been in practice since 2014, completed a CNME certified ND pediatric residency, and have been in primary care practice during this time. After review of the Senate Bill 5411, I would like to extend my support for expansion of the scope of practice to include these amendments and definitions. Practicing as a pediatric ND in Washington, limitations to my scope of practice come up with patients for the diagnosis of ADHD or pain in pediatric patients, specifically. Rather than referring out to specialists with long wait times for starting or discontinuing these medications, effective treatment can occur in my office with expansion of my ND scope, which benefits not only the patient and their family, but the healthcare system at large. I do support that additional CME requirements and DEA requirements should also reflect this change in scope of practice for patient safety and continuity of care between MDs, ARNPs, PA-C's, and NDs alike.</p> <p>Thank you for your time and attention to this message of support.</p>
<p>Carol Lehman</p>	<p>Support</p>	<p>Hello,</p> <p>I want to write in support of a bill that would help to further legitimize the health services that naturopaths provide. I have seen the same naturopath for 23 years as my main medical provider. In working for Seattle Public Schools, I have been fortunate to be able to access a health care plan that provides for naturopathic care and as a recent retiree have been fortunate to find an advantage plan that will allow me to continue this care, though probably at a bit higher cost than a traditional GP.</p> <p>My yearly appointments are always an hour and follow-up visits are a half hour and I feel that gives me quality time to discuss my concerns and not feel rushed through an assembly line. Continuing to support and increase the services a naturopath can provide and pushing for increased insurance coverage of these services will expand and improve the quality of medical care available to all WA residents.</p>
<p>Tabitha Milian</p>	<p>Support</p>	<p>Hello, I am writing to say it would be more than helpful to expand the scope of practice for naturopath physicians. I was introduced to naturopathy through a close friend of mine many years ago. I enjoyed the attentive and holistic care I received that considers more than my physiology for health. I have been thrilled to even have a primary care provider that is a naturopath, I am on medicaid and often it feels I only get the care that is given, not the care that is in line with my ideas of holistic health and wellness. I receive this type of care from my naturopath. Sadly I am not able to address my mental health needs with my naturopath pcp beyond herbs, diet, physical exercise, and seeing a therapist. I have struggled with my mental health since I was a child and to be able to get a prescription for anxiety from a health care provider that I have built a trust with over the years, and to know that they respect my values around health and wellness and be able to create a plan for taking pharmaceuticals if we both agree it would be beneficial; this would help me to address my mental health needs that have impacted my life for a long time now. Please help us expand the scope of practice to these highly trained medical Dr.'s. They deserve to take care of their patients in a holistic way. Thank you for your time.</p>

Kerry Dyer      Support      I am writing in support of naturopathic care, and for them to be recognized, and covered by all insurances as primary care, and integrated more into outpatient and inpatient settings. I know our law states that they should be allowed to see patients but we know that they cannot be primary care for Kaiser. We know that they are not excepted into providence on site, family, healthcare clinics. They are not providers and urgent care, etc. they are not integrated into our traditional medical system . Besides, the fact we have a shortage of general practitioners, naturopaths are not utilized or accepted enough.

I have been a patient of naturopaths in different states on and off for over 20 years. Just like other medical providers some are a better fit for me and some are not. I find their care tends to be extremely compassionate, and they tend to be excellent listeners and tend to take more time to get a full history from their patients than other pcp providers I have seen.

One example is as a child. I used to get strep throat every year and I was on antibiotics once or twice a year for that. I was recommended by a new naturopath in Portland Oregon to consider taking echinacea and goldenseal when I start feeling rundown prior to getting strep throat. I am now in my late 40s and I've only had strep throat once since that suggestion was made. That suggestion helped transform my life and career to helping others. I'm not a naturopath, but I am in the CAM field. And I do know that if more patients had more access to naturopaths that there would be more compliance in healthcare. naturopaths are a much better fit for some people who don't want to see a traditional western medical type doctor - therefore they end up getting extremely ill and waiting till they have to go to the ER. If they were educated or knew about naturopaths, that would likely be averted, and that would also save millions of dollars or more in our healthcare system as a state and country. Most people don't know what naturopaths are, because they are not integrated or necessarily respected. And this is awful. Their training is fantastic in our state, and in Oregon, and most other states. In fact, it should be mandated that every medical facility have a natural path on staff to give another type of insight or opinion into patient care when patients are not responding to traditional treatment, etc. Therefore, I'd recommend that naturopaths, have the full extent of prescribing power, and the scope of practice a medical doctor has within their training. And that they're not be subject to discrimination based on their field of practice.

Kara Marklin      Support      Hello, I recently moved to a smaller town than what I'm accustomed to. The local medical system is over burdened and appointments with primary care M.D. s are 6 months out in my experience. Using a naturopathic Dr. as my primary care provider has helped me get regular appointments in a timely manner. I am writing to express my support for expansion of prescription privileges for naturopaths. I believe this will help not only patients but will alleviate a bit of stress on the medical system by allowing us to go to one appointment instead of two. Thank you for your time.

Megan McFarland- Waldrop	Support	<p>I understand you are seeking public comment on WANP's Effort to Expand Naturopathic Scope in Washington state, particularly as it relates to controlled substances Schedule 2-5. While I have not personally needed controlled substances from my Naturopath, I am under the impression she would be as qualified, if not more than my other/traditional primary care provider. After a couple visits with my FNP at the hospital this year, I felt disappointed in my limited options for care, limited time to discuss things, and limited guidance. My FNP seemed quick to write prescriptions, when I wanted to know if there were other options. In one exam, she jumped to a conclusion before receiving culture/lab results and had me start an antiviral medication. The tests came back negative two weeks later, as I was sure they would. There was no follow-up to my initial concern, in-person or otherwise. After that experience, I made an appointment with a new-to-me Naturopath, who is also a doctor and a midwife. I felt lucky she was covered by my insurance and only a half-an-hour away. (My FNP is only 10 minutes away, but I think she is the only option covered by our insurance in the rural area where we live.) During that time, I also found out I was pregnant. At my first appointment, I received an hour and a half of the Naturopath's attention, which was about an hour and fifteen minutes more than I would have received with my FNP. I've since had a subsequent appointment, which lasted an hour. If all goes well with this pregnancy, I hope my Naturopath/Midwife will be the one to deliver our baby. I come from a family of people who appreciate science and Western medicine, (including a sister I am close with who is an FNP, and my mother who is a Medical Laboratory Scientist/Technologist). I wondered if my experience with a Naturopath would feel divorced from the aspects of "traditional" medicine that I continue to respect and appreciate. However, it has been just the opposite experience. My Naturopath does not seem to be "holding out" on anything with me. She is open and eager to run tests, labs, ultrasounds, even genetic screens where appropriate. She runs the standard screens for depression, (and it's really nice that I don't have to repeat my answers to three different people like I do at the hospital). She has modern equipment, communicative staff, and feels accessible. I also have family members who need antidepressants, and/or have needed them for seasons of life. It is aggravating to think they might not be able to receive the same inclusive, holistic care from a Naturopath because of these needs. I believe that when health requires specialty treatment, it becomes more pathologizing. People with mental illness (whether permanent or temporary) do not need additional stigma, or more gaps in their care plans. This only increases the chances they will either give up, or not get the right type of treatment. I think continuity of care is key. My Naturopath asks good questions and pays attention to my answers. I imagine her other patients receive the same thorough analysis, which would be critical when deciding whether to prescribe or de-prescribe controlled substances. I know not every Naturopath is the same, but that goes for MDs and FNPs, as well. In general, I believe the intent of naturopathic care is to take a more holistic approach to peoples' health, which in my mind, can only be a good thing. Specialization has a dark side, as does "Big Pharma", and our instituted social hierarchy which allows certain medical professionals to "coast", (whether that be into retirement and/or under the radar – without the same level of oversight or scrutiny other professionals receive). I ask that you do please consider increasing the naturopathic physician scope of practice in Washington State. Respectfully, Megan McFarland-WaldropElma, Washington October 25, 2023</p>
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Dr. Suzanne  
Way, N.D.,  
L.Ac.

Support

Attn: Department of Health I am a Naturopathic Physician in practice now for 29 years. The majority of patients I serve live in rural Snohomish county and surrounding suburbs. They are often seeking out a new primary care provider who has a more integrative view on health and disease prevention. I am in favor of the changes proposed in our Sunrise Review Application-SB5411. As a primary care provider in Washington State, I continue to come across barriers to fully serve my patients with regard to prescriptions. It is especially difficult if the patient wants to discontinue their sleep medications (Ambien, Lunesta etc.), or their anti-anxiety medications such as the benzodiazepine class. Also I have had several patients requesting to be taken off the amphetamine class of drugs used for their ADD or ADHD. These de-prescribing cases have to be sent back to the prescribing physician for management. However, often the patient does not receive the best results, partly due to prescribing physician's resistance. Ideally when I am able to prescribe these drugs, facilitating a drug tapering program is then feasible. As it stands now, the patient can continue to see me for natural health care services, but must see the other provider as well. Simplification of the patient care model by expansion of our prescriptive authority (II-V) will eliminate extra cost in the health care system by avoiding unnecessary duplication of services as described above. A good example of this was a patient I was treating recently for chronic pain. He was able to get completely off his opiate medication (under other prescriber's direction). After this I subsequently changed his prescription to Low Dose Naltrexone. His pain levels dropped remarkably and have remained low. Another therapy listed for approval is Cosmetic Botox Therapy. This is an incredibly safe procedure with increasing popularity. I plan to have things in motion for training once this is approved. Many of our naturopathic physicians may wish to provide this service in the future.

Beth Bylund

Support

Please consider Naturopathic Medicine in patient care- I have had such success with my health plan combining this and western medicine-  
Sincerely,

Terry Falk

Support

Hi, I currently have had a Naturopathic doctor for the past 5 years as my primary care doctor. I trust my doctor with my health and want him to be able to have full scope of practice. It does not make sense for me to need to see another doctor for specific controlled substances.

Thank you,

Dr. Shawn  
Morris

Support

I am writing to express my strong support for the proposal to increase the scope of practice for naturopathic physicians in Washington State. I believe that granting naturopathic physicians the ability to prescribe Schedule II to V controlled substances is a vital step in extending life-saving treatment to rural communities and ensuring that all Washington residents have access to comprehensive healthcare. Naturopathic physicians have demonstrated their commitment to holistic and patient-centered care over the years. NDs are well-equipped to provide a wide range of healthcare services and are often the primary healthcare providers for many individuals in rural communities. However, current limitations on prescribing controlled substances restricts their ability to manage and treat certain health conditions effectively. This proposal addresses this issue by expanding their scope of practice, ultimately benefiting the patients they serve. In rural areas of Washington State, access to medical care is often limited, and many residents face challenges in obtaining timely and appropriate treatment. By allowing naturopathic physicians to prescribe a broader range of medications, including Schedule II to V controlled substances, we can improve healthcare access in underserved communities. This change will be particularly beneficial for patients suffering from chronic pain, mental health disorders, and addiction, where timely access to treatment can be life-saving. As we continue to address the opioid epidemic, NDs can play a vital role in extending access to evidence-based treatments, while considering the unique needs of each patient and taking an integrative approach. NDs are the only primary care providers trained extensively in pharmacology along with evidence-based integrative therapies, including physical medicine, nutritional medicine, botanicals, counseling, and mind-body approaches. NIH's National Center for Complementary and Integrative Health recognizes the important role integrative approaches can play in addressing chronic pain, substance use, and other conditions. By expanding scope, patients will have preferential access to holistic, whole-person care, aligning with the goals and mission of the State Department of Health and the Washington State Health Care Authority. I encourage the Health and Long Term Care Committee to seriously consider the benefits of this proposal and its potential to address the healthcare disparities in rural communities. While certain special interest groups may express reservations about ND readiness to expand scope, they may not be familiar with the extensive medical training and board requirements that apply to NDs. I encourage the committee to directly review the extensive requirements for obtaining a naturopathic physician license and compare curricula and requirements to allied health professionals. The training for NDs is far more intensive and rigorous than other allied health professions, including ARNPs and PAs, who currently have greater prescriptive scope in Washington State. It is essential that all Washington residents have access to the care they need, regardless of where they live, and expanding the scope of practice for naturopathic physicians is a significant step toward achieving this goal. I hope that you will give this proposal your full support, and I trust that the Department of Health and the legislature will take this opportunity to enhance healthcare access for all Washington residents. Thank you for your dedication to improving healthcare in our state. I look forward to the positive impact that this proposal can have on the lives of many Washingtonians.

Rebecca Reeves Support Hello, I have been a patient of a naturopathic physician for nearly 15 years. I have found this modality of healthcare vastly superior to that provided by other types of medical practices. The doctors are able to spend more time with each patient, use approaches that seek to treat the causes, rather than the symptoms, and don't rush to prescribe pharmaceutical medication when a simpler approach with diet tweaks or supplements can help immensely. However, it is critical that these providers are able to prescribe the same medications as MDs, should those be necessary for a patient. The philosophy of naturopathic care leans heavily on preventative measures that if done well by a patient vastly increase their lifespan and enjoyment of life without pain or symptoms, and it saves the patients and the system money as patients are able to stay healthier, requiring less medical intervention as they age. I have found naturopathic care to be very human-centered and personal. I feel I am being heard and believed. Even if this modality isn't for everyone, this type of care needs to be available as one of the options for patients, and having comprehensive naturopathic care available will increase access to healthcare for patients that aren't being served well currently. Please consider those that currently distrust our medical system, and know how important this modality of kind, human-centered care can be. These NDs undergo extensive training and are doctors, and I believe their scope of practice should reflect that. Thank you for your time and consideration.

Chris Pohl, FNP Support To Whom It May Concern, I am writing to express my strong support for SB 1544, which aims to expand the scope of practice for naturopathic physicians (NDs) in Washington State. As a Family Nurse Practitioner (FNP) with years of experience in primary care, I have had the privilege of collaborating with NDs and have witnessed the invaluable contributions they make to the healthcare system. My interactions with NDs in primary care have illuminated the unique skills and knowledge they bring to patient care. Their holistic approach to medicine, blending traditional and evidence-based natural therapies, complements the conventional healthcare model and offers patients a broader spectrum of treatment options. This approach has consistently yielded positive outcomes for patients under their care. However, I have also observed the significant obstacles NDs face due to practice limitations. These limitations not only hinder their ability to provide comprehensive care but also restrict patient access to their services. In a time when our healthcare system is grappling with a severe primary care provider shortage, it is essential that we leverage the skills and expertise of healthcare professionals like NDs to improve access to quality care. SB 1544 represents a vital step towards enhancing patient access to healthcare services while alleviating the burden on our already overwhelmed primary care system. By expanding the scope of practice for NDs, we can tap into a valuable resource that will help meet the growing healthcare needs of our community. I urge you to support SB 1544 and help ensure that naturopathic physicians can practice to the full extent of their training and expertise in Washington State. This legislation has the potential to improve the overall health and well-being of our residents while addressing the primary care provider shortage issue that plagues our healthcare system. Thank you for your dedication to improving healthcare in Washington State. I trust that you will consider the positive impact this legislation can have on our community and support SB 1544.

Kristina Pfeil	Support	<p>Naturopathic care is healthcare and brings resources to chronic conditions and especially women's health. Please pass this bill.</p> <p>Kristina Pfeil</p>
Dr. Jessica Mitchell	Support	<p>To Whom It May Concern,</p> <p>This letter is in support of the expansion of Naturopathic Physician scope of practice as outlined in RCW 18.120.010. I am writing as the Dean of the College of Naturopathic Medicine at Sonoran University of Health Sciences located in Tempe, Arizona. Information regarding the training on controlled substances within my program was submitted by the WANP in the Application Report. I believe this more than demonstrates that our graduates are well trained on the use of controlled substances and that this scope of practice increase is safe. I am open to answering any questions you have regarding my program. Please do not hesitate to reach out at <a href="mailto:j.mitchell@sonoran.edu">j.mitchell@sonoran.edu</a>.</p>
Deb Hemingway	Support	<p>Please support Senate Bill 5411. The only time in the last 45 years that I've not had a naturopath as my primary care physician, was for about five years with an M.D. who had created a group of physicians who regularly researched, shared and used alternative medicine options. Especially in our present economic system for healthcare, MDs are very hard pressed to be able to adequately learn about and use the many less expensive and improved outcomes that naturopaths can provide or to easily include a naturopath's expertise in their practices. Just yesterday in a webinar, we heard from the University of Washington's Osher Center for Integrative Medicine Dr. Iman Majd about this problem. So it's vital that naturopaths be able to cover more allopathic options and more easily work with MDs to improve medical care for people. The increase in chronic disease, drop in U.S. longevity and greater understanding of how individualized care is needed, demands that we expand our ability to better care for people. That includes allowing naturopaths to prescribe II to V controlled substances. In fact, I would trust any of my naturopaths to handle such drugs with far more wisdom and responsibility than most MDs.</p>
Claire Hannes ND	Support	<p>I am writing in support of the expansion of naturopathic doctor's scope in WA state. As we are licensed primary care physicians, our scope should reflect this in order to improve patient care and fill needed gaps within primary care.</p>

Josh Martin, Chief Executive Officer Support Grays Harbor Public Hospital District No.1, dba- Summit Pacific Medical Center, is a Critical Access Hospital and employs 2 Naturopathic Physicians. Both of these providers joined our organization over 6 years ago and have been essential to our care team and creating primary care access to many residents in our community. In fact, these Naturopathic Providers have some of the largest patient panels of all our employed primary care providers but still have many constraints that prohibit them to provide adequate care.Regarding The proposal under review including the ability to prescribe Schedule II to V controlled substances.The current bill would expand naturopathic prescriptive authority to include controlled substances in Schedules II through V of the Uniform Controlled Substances Act as necessary in the practice of naturopathy; enable naturopathic physicians to sign and attest to any documents or certificates that any primary care provider is routinely expected to sign.The scope of practice we are seeking in the current bill is already in place in Oregon and Vermont. Additionally, naturopathic physicians licensed in Arizona can legally prescribe controlled substances in Schedules III through V, plus morphine in Schedule II and any other drugs that have been reclassified from Schedule III to Schedule II since 2014; those in California are legally permitted to prescribe controlled substances in Schedules III through V under the supervision of a physician or surgeon; and those in New Mexico may prescribe all controlled substances in Schedules III through V except for benzodiazepines, opiates, or opiate derivatives.Also, it is very important to mention that when a patient is seeing a naturopathic physician for primary care and needs any of the above medications to treat appropriate conditions, a separate visit would then need to be scheduled for the patient to see a traditional provider simply for the prescription. This places an financial burden on the Medicaid system which pays on a per visit basis, resulting in duplication of care. Allowing Naturopathic Physicians to operate in their licensed capacity of primary care physician, would solve this problem.

Alaron Lewis Support I am writing to support the expansion of naturopathic proscription authority. I am a university professor who has experienced health care from both traditional medicine and naturopaths. I have also looked the curriculum for Naturopathic training. Naturopaths are trained and prepared for patient care in ways that are very similar to MD's. They take a more holistic approach, which can be transformative in certain situations. My husband has a severe gluten allergy that was only successfully identified after we talked to a Naturopath and were convinced to do an elimination diet. Traditional allergy testing was useless.

Naturopaths play an important role in our medical eco system, they are well trained and responsible, and should be given the opportunity to expand the scope of their practice with the power to proscribe

David Kirske Support I am very supportive of this bill, since I consider my ND to be my primary care provider.Thank you,

Susan Crampton Davis Support I think we have evolved to understand that naturopathic medicine is a valid care provider and should be included as primary care providers.

Daniel Walker	Support	My name is Daniel Walker and I am 62 years old. I have been seeing my Naturopathic doctor for a few years now. I fully support SB 5411 to provide the full scope of primary care services. My doctor has provided excellent and expert care at the same level or above many of the MD's I have seen in my life time. I would like to see her be able to provide the full scope of services I know she has the skills and care to deliver.
Tracy Gnojek m	Support	Hello, I'm writing to support greater access for my ND. My current provider is Dr. Kim Celmer. Her knowledge of the body's systems is outstanding and she has helped me in many situations. Her logic and awareness of the interrelatedness between supplements and health concerns has improved my quality of living. Please give ND doctors more access.
Suzanne Winqvist	Support	My ND is far superior to my MD. I have several auto immune disease and hyperlipidema. I am healthy today because of here knowledge and expertise!  I am on Medicare , which does not cover my visits. I find that appalling! Save money with preventative care and nutrition instead drugs. I would love to have them recognized and covered my all insurances, medical facilities etc.
Pamela Pakker-Kozicki	Support	Once diagnosed with breast cancer, I knew I was going to go through chemo and radiation. At the suggestion of a friend who had already gone down that road, I found a naturopathic oncologist, Dr. Tracy Thomas, near me at Northwest Natural Health. Dr Tracy Thomas was trained in both Naturopathy and in Oncology. I had the confidence that the allopathic doctors would take care of the tumor in my breast BUT it was my naturopath who steered me towards taking supplements for the health of my digestive tract. I had heard horror stories of mouth canker sores from my sister, nausea and diarrhea from others and not being able to eat during chemo treatments. Following my naturopath's suggestions, I began taking G-I Formula to bolster my entire digestive tract from my mouth to my lower digestive tract. While it was not a pleasant experience, I got through chemo with little or no side effects, thanks to my doctors AND my naturopath. Going through radiation, I slathered myself with calendula infused with other herbs and, after seven weeks of radiation targeting my breast cancer, I had a bad sunburn-like skin but much much better than my doctor's other radiation patients who had terrible skin pustules. Naturopaths must have access to our records to be able to coordinate with the regimen prescribed by allopathic doctors. I thank my stars I had Dr. Tracy Thoams to treat the rest of my body while the allopathic doctors treated my cancer. Please pass Senate Bill 5411.

Anthony Pavlovic Support I recently learned the Washington State Department of Health is conducting a review to potentially expand the scope of naturopathic practice in Washington and is interested in hearing about patient experiences, specifically related to our care with a naturopathic physician (ND).I've been working with Dr. Kelsey Klausmeyer from the Institute of Complementary Medicine for years now and can, without hesitation, say he's saving my life. Prior to working with him I experienced numerous health issues, both mental and physical, and doctors prescribed medications to help but it never seemed to actually fix any problems. Dr. Klausmeyer ran labs and blood work that showed my various body systems that are performing poorly and likely play a role in my health struggles. Through his careful observations and the coordinated care at ICM my symptoms have started to recede and it seems like it's doing so because they're healing me at the root.For all intents and purposes, I consider Dr. Klausmeyer my primary care physician. Unfortunately I still need to work with a doctor through UWMedicine in order to continue receiving certain medications. I wish Dr. Klausmeyer was able to have a full scope of practice so I can turn to him and the staff at ICM for all of my health needs.If you need any more information, please reach back out. We share the same goal: to ensure public safety and evaluate how this expansion can enhance healthcare access and reduce costs.

Tom Cain Support I have been seeing Naturopathic physicians since the late 1980s. I have been a patient of Janci Karp ND at the Institute of Complimentary Medicine for many years.

She is an extraordinary physician, and I have received the utmost in care from her. I believe her scope as my naturopathic physician should equal her responsibilities as a recognized primary care provider.

Renee Gallagher Support I am writing to share my support of expanding naturopathic prescriptive authority and enable NDs to serve as primary care providers. My naturopaths have provided me with exceptional care over the years. I trust them with my care and health and believe that their scope of practice should match their responsibilities as recognized primary care providers.

On several occasions, my ND was not able to prescribe medications that would have been helpful - so I then needed to seek treatment elsewhere - costing additional money and time.

Please consider expanding ND prescriptive authority and allow NDs to serve as primary care providers. The best care I have received in my 20 years as a Washington state resident have been from naturopaths. They offer a holistic model of care that is difficult to find elsewhere. The skillset of the naturopaths I work with is exceptional.

Alejandra Fuentes	Support	<p>I am writing to share my support of expanding naturopathic prescriptive authority and enable NDs to serve as primary care providers. My naturopaths have provided me with exceptional care over the years. I trust them with my care and health and believe that their scope of practice should match their responsibilities as recognized primary care providers. Please consider expanding ND prescriptive authority and allow NDs to serve as primary care providers. My naturopath is the person I prefer to work with as a primary care physician because she has an amazing skill set and is able to approach my health concerns in a way that aligns with my values. Thanks for your consideration.</p>
Jennifer Hagstrom	Support	<p>I support naturopath doctors in the roll of primary care &amp; to expand their scope of practice.</p> <p>I've personally utilized a Washington State licensed Naturopath Doctor to help me manage my autoimmune disease for the past 15 or more years. My ND has helped me with lifestyle changes, symptom management, prescriptions, lab draws &amp; recommended yearly screening for all the usual things my MD has recommended.</p> <p>When our child was diagnosed with pediatric cancer (stage 4 Hepatoblastoma), we advocated for Naturopathic remedies for symptom management &amp; immediately reached out to a pediatric oncology Naturopathic doctor.</p> <p>I was encouraged by the conscious effort to communicate &amp; collaborate with our traditional oncology team at Seattle Children's Hospital to compliment his chemotherapy treatments &amp; NG tube feeding needs. Having the collaborative approach between the specialties was key in our son's therapy &amp; recovery.</p> <p>Thank you for your time and consideration.</p>
MM	Support	<p>I have to pay over \$300 to visit a primary care physician just for the purpose of getting a sleeping aid for when I travel internationally. Please make it possible for my ND, Dr. Kim Celmer, to prescribe medications like zolpidem.</p>
Angela C. LeClair, ND	Support	<p>Be the change that provides more well-trained, conscientious primary care providers to an underserved populace. Please promote the expansion of naturopathic prescriptive authority. If it is a matter of education - Naturopathic Universities would be happy to comply with any requirements to further the scope of their graduates. Tests and preceptorships could be required to demonstrate sufficiency and compliance. Local hospitals and public universities need to extend their Emergency Rooms and Urgent Care Centers to promote the hands-on training required. It is absurd that graduates of 2-year graduate nursing programs and Physician's Assistants are providing care that Naturopaths cannot not although we carry the legal liability of non-surgeon MDs. Particularly with the shortage of providers, a change is warranted and our profession is now regulated by an established board rather than by the Office of the Secretary of Health (effective 2011). Be the change and update the RCW!</p>



Lisa Caldwell	Support	<p>Please vote yes on Senate Bill 5411 to expand the authority of Naturopathic Doctors. My naturopath has been my primary care doctor for more than a decade. Five years ago I became chronically ill. I saw numerous MD's and specialist MD's for months and none of them knew what was wrong with me. My naturopath in my second month of being ill said, "I think this is neurological." She referred me to two neurologists. She was absolutely correct that I had a neurological disorder.</p> <p>My naturopath, Dr Kim Celmer, keeps herself very informed and updated on the medical research and studies, she has up to date knowledge of alternative treatments and she is incredibly committed to helping her patients.</p> <p>Please vote yes on Senate Bill 5411.</p>
Cara Brooke	Support	<p>I'm writing because I believe Naturopathic physicians should be able to serve as primary care doctors in Washington state. For years I've seen a naturopath for all of my primary care needs, basic checkups, annual exams, blood work etc. not only have I received top notch primary care treatment, when I've needed more in-depth care to get at the root of a healthcare issue I am covered there too. Naturopaths are invaluable members of our healthcare landscape. I consider mine to be my primary care physician. I don't see another doctor for basic visits but yet I have to pay a \$40 copay, a disparity that I believe is wholly unfair.</p>
Jenee Colton	Support	<p>I write in support of Senate Bill 5411 to expand the scope of naturopathic physicians in WA state. I have been a patient of naturopathic physician for over 15 years now. My journey to better health is due almost solely to ND care. Twenty years ago, I was 34, working full time and struggling to function with IBS-D, anxiety, panic attacks, complete insomnia, GI pain, chronic pain from autoimmune disease and arthritis and fatigue. I saw gynecologists, rheumatologists, physical and mental therapists, endocrinologists, GI specialists and went through lots of testing with no underlying diagnoses beyond medical names for my symptoms. It wasn't until I saw a naturopath who could use lab testing and their knowledge of the endocrine, reproduction, GI, and neurotransmitters to understand what was going on and how to fix it that I could start seeing my health improve. Their appreciation for the variation between individuals and the focus on outcome, i.e. symptom improvement, are just some of the reasons naturopaths are extremely effective. Naturopaths fill in a gap in western medicine that addresses people who are ill but not yet bad enough to test as clinically positive by Western medicine standards. If I was not treated by a naturopath, I would have needed to quit work and go on disability at 35 years old. It is a shame if our government would allow a profession to be so limited by law that they were not able to help the thousands of people who slip between the cracks of our traditional healthcare system every day. Naturopaths can successfully treat patients much more effectively than medical doctors in many cases. For example, a naturopath diagnosed my intestinal infection and treated it so that my IBS-D and abdominal pain disappeared in less than 1 year and I no longer needed medication. I've never met anyone seeing a western doctor for IBS who became symptom free without being on long term prescription drugs. Naturopaths provide a critical service in health care. Please let them practice medicine to their full ability and help people in Washington State.</p>

Arlene Poulsen	Support	It is only right that ND's are fully accepted as health providers. They have to have extensive training like MD's but they definitely practice with the "first do no harm." They are more in tune with how to recognize the inter-relatedness of the whole body rather than just treating the symptoms. I have been provided successful care by naturopaths, who also spend more time with you, but had to stop as my insurance was very limited with coverage and I couldn't afford it. Please step into the future of complementary medicine!
Jill Aldridge	Support	I'm writing in support of the in-depth review aimed at evaluating whether naturopathic scope of practice in Washington should be expanded. How Naturopathic practice has helped me: <ul style="list-style-type: none"> <li>• access to compounding pharmacies with medications that have helped me more than standard RX</li> <li>• much faster to get an appointment with a naturopath than a PCP, especially after the pandemic</li> <li>• more time spent with naturopath than PCP</li> <li>• more access to helpful different modalities than current standard of care that resulted in reduced return visits to the doctor, less prescriptions, and improved wellness</li> <li>• having to see a PCP because the Naturopath was unable to prescribe a specific medication</li> </ul> Many thanks for your consideration.
Marta Hunt	Support	Please pass Senate Bill 5411! Naturopaths deserve to have full scope of practice. This will help everyone who receives medical care of any kind as well. We need to enable more practitioners and relieve the burden on the medical system as it now exists. We are fortunate to have ND's willing and ready to do a fuller scope of practice. Enable them by passing this bill, please.
Carol Lehman	Support	I want to write in support of a bill that would help to further legitimize the health services that naturopaths provide. I have seen the same naturopath for 23 years as my main medical provider. In working for Seattle Public Schools, I have been fortunate to be able to access a health care plan that provides for naturopathic care and as a recent retiree have been fortunate to find an advantage plan that will allow me to continue this care, though probably at a bit higher cost than a traditional GP.  My yearly appointments are always an hour and follow-up visits are a half hour and I feel that gives me quality time to discuss my concerns and not feel rushed through an assembly line. Continuing to support and increase the services a naturopath can provide and pushing for increased insurance coverage of these services will expand and improve the quality of medical care available to all WA residents.
Bill Franks	Support	Yes, modernize the language to allow Naturopathic Physicians to serve more fully as "primary care providers".
Blyth Claeys	Support	Please approve this bill so that my primary care doctor, Dr. Bizzy Riley, can meet all of my medical needs. It is so unnecessary to have me maintain two different doctors.
Ruby Cacchione	Support	Yes I support this bill! My Natropathic doctor is the best and I trust her with my health I know she wants to find root causes for illness and not just prescribe a pill to cover symptoms. When medicine is needed she should be allowed to serve me more fully.
Steven Fenwick, PhD, LMHC, SUDP, Licensed Mental Health Counselor, Substance Use	Support	I am writing to support Senate Bill 5411 to give naturopathic physicians the same prescriptive authority to prescribe controlled medications as other physicians. With the current shortage of physicians I believe that naturopaths are an important resource and should be able to have the same prescriptive authority as any other doctor or nurse practitioner.

Disorder  
Professional

Molly K.  
Linden, MSN

Support

As the Washington State Secretary of Health, I believe you are currently accepting input from Washington State health care consumers regarding the possible expansion of Naturopathic Medicine roles in Washington State. I would like to share several anecdotes regarding my 20+ years experience in receiving care from my Naturopathic Physicians. I should also add that I am a retired RN with 43 years of clinical experience in acute care and teaching. I hold a Masters degree in Nursing from the University of Washington. In the late 1990s, I developed a severe case of urticaria. I began the traditional route by seeking care from a dermatologist (MD). The work up was thorough including a skin biopsy. I received steady courses of steroids for 9 months - without resolution. A friend of mine (a medical surgeon) became concerned regarding the long term course of steroids and suggested I seek another opinion. I went to the Bastyr Institute. The naturopath I saw conducted a thorough assessment and ordered an elixir (oral compound with several organic ingredients). As a western health care trained person I was skeptical but proceeded with the plan of 1 tsp. of this elixir QD. Within 3 days - my urticaria was gone. It never returned. In 2005, I was diagnosed with several sinus infections. I received numerous courses of antibiotics with only short term relief. I was referred to an ENT surgeon. He took films and shared that I was in need of sinus surgery. I decided to obtain a second opinion from a naturopath. The ND reviewed the films and noted that they were "normal". She could find no medical indication to proceed with surgery. I went to another surgeon (ENT) who reviewed these films and stated: "I agree. Your sinuses look healthy. You don't need surgery". Of note: the ND ordered saline sprays, warm packs to the sinuses twice a day - and my sinus infections never returned. In 2014, I returned to my PCP/ND for an annual physical and follow up of a DEXA report. My PCP/MD was concerned about my diagnosed osteopenia and rather insistent that I start an oral biophosphonate. My mother had taken Fosamax briefly. I witnessed the difficulty (jaw and back pain) that she developed and had concerns. My ND ordered naturopathic supplements to address bone loss. On a repeat DEXA a year later, my DEXA demonstrated improvement in my bone density. In each of these scenarios, it was the ND that "turned the ship around". In each situation, the medical risks were significant (long term steroid use, sinus surgery and biophosphonate treatment). I have received health care from wonderful MDs AND NDs. As a health care consumer with a critical eye based on experience and education - I am grateful that BOTH disciplines are available. In my opinion and from my experience, Naturopathic physicians are an essential component in addressing Washington State health care needs. I would add another note: I am now on Medicare. Because Medicare does not recognize NDs as medical physicians - any care I seek from my long term ND/PCP - is not reimbursed. I find this unacceptable. My ND/PCP knows me. She has my history. She has never failed to assess, diagnose and develop a treatment plan that was not "spot on". This can not be said for several MDs I have sought out for care (outlined above). If we are serious about delivering continuity of care - by competent, educated, trained physicians - we must include our State's naturopaths into this community. Some might suggest: "If you think your ND is so great - just go to him/her". Hmm...but with our current health care regulations - that also means - I will pay 100% out of pocket - without the traditional "insurance" rate. When you are retired - on a fixed income - this is quite a challenge - that most retirees - cannot afford. And this adds to the expanding volume of Washington state consumers who are seeking medical care from a stretched MD/NP community. I appreciate this opportunity to provide input regarding my whole hearted support for the expansion of Naturopathic Medicine expansion in Washington. I have been blessed to receive exceptional care from this community.

Margie Willis	Support	I was fighting endometrial cancer when I returned to naturopathic medicine. I visited my naturopath monthly during my chemo and radiation treatments, for 6 months. Monthly I received acupuncture which resulted in NO medication for nausea, less pain and discomfort from all side effects of chemo and radiation. My Dr. Suggested supplements and dietary changes which also attributed to my overall health. Not once did my Dr. Say do not take chemo or radiation, I also received help with detoxing after my treatments were completed. Naturopathic medicine is crucial in the body's healing process. I strongly agree that naturopathic Doctors should be included in all health plans, and all main stream Doctors should know about alternative healing processes for the body.
Emily Rae	Support	I am for this bill to allow naturopaths to provide further services as a primary care doctor. I would benefit from this.
Sandra Millett, Isabella Millett, Amanda Millett	Support	I am casting my vote in support for Naturopaths to be able to prescribe certain medications to provide support for their patients

Christina Moon	Support	<p>My name is Christina Moon and I am writing in hopes that you will expand the naturopathic scope in Washington State. Please allow my ND to be my true primary care provider.</p> <p>I trust my ND with all aspects of my healthcare. I've never had a doctor provide me with so much time and care.</p> <p>It takes a lot of time out of both of our days to circle in the "primary care provider" assigned to me through my insurance company.</p> <p>I hope that in the near future that my ND alone can focus on my well-being and write orders for all of my needs.</p>
Mattie Johnson	Support	<p>My children's PCP is an ND. Please expand ND prescriptive authority, enable NDs to sign all healthcare documents, and modernize language to allow naturopathic physicians to serve more fully as primary care providers, including being able to prescribe meds for ADHD&gt;</p>
Dr. Emily Lesnak	Support	<p>I co-own Neighborhood Naturopathic in West Seattle where I work as a naturopathic physician. I provide primary care services for all ages. Many patients establish care at our clinic because the wait at other primary care clinics is 3+ months from now. I see many children as part of my family practice and I end up having to refer out for ADHD stimulant medication prescriptions since this is not covered under our current scope of practice. These children have a delay in getting prescribed medications because the wait to be seen is long. This delay in medication prescribing affects both their school and home life. SB5411 would allow me to prescribe these medications so that my patients can be treated promptly and without having to be seen and wait to be seen elsewhere. I do also have adult patients that will sometimes need a short-term benzodiazepine prescription for anxiety when flying or anxiety when getting specific medical imaging or a procedure done and in this case I am not able to prescribe and so they have to be seen by a psychiatrist, which is also difficult to get into and taking up space from someone who really needs these limited services. SB5411 would allow me to prescribe benzodiazepine medications when needed for these rare cases instead of clogging up the medical system. SB5411 would benefit my patients, who often have trouble establishing with other primary care clinics, in that they would not need to be referred elsewhere for medications that I could very well prescribe. I would not need to send a patient in pain to the emergency department or urgent care, I would not need to send my pediatric patient elsewhere for ADHD medication, and I would not need my otherwise well patient who has a fear and anxiety of flying to a psychiatrist. Naturopathic physicians are well-trained primary care family medicine physicians and we can help solve the primary care doctor shortage. I appreciate you taking the time to read this message. Please reach out if you have any questions.</p>

John Dodge	Support	<p>In my years of being treated by a Naturopath, I have had only positive experiences. Naturopaths provide a community service that goes beyond traditional medical care. It would help Naturopaths if they had the ability to make a full range of prescriptions and not be limited to a few medications. It is in the public interest to promote this form of treatment.</p> <p>I would appreciate your passing SB 5411.</p>
JoAnn Yanez, ND, MPH, CAE Executive Director, Association of Accredited Naturopathic Medical Colleges	Support	<p>On behalf of the Association of Accredited Naturopathic Medical Colleges (AANMC), the membership organization for federally recognized programs of naturopathic medicine in the United States and Canada, thank you for the opportunity to provide feedback during the sunrise review comment period in support of naturopathic physicians (Chapter 18.36A RCW, Naturopathy; Chapter 246-836 WAC, Naturopathic Physicians) licensed in Washington State. Naturopathic medicine is a distinct primary health care profession that combines the traditions of natural healing with the rigors of modern science. Naturopathic doctors (NDs) are trained as primary care providers who diagnose, treat, and manage patients with acute and chronic conditions, addressing disease and dysfunction at the levels of body, mind, and spirit. NDs concentrate on whole patient wellness through health promotion and disease prevention, seeking to identify the underlying causes of the patient's condition. NDs care for patients of all ages and genders, offering individualized, evidence-informed therapies that leverage the least harmful and most effective approaches to support the body's inherent ability to restore and maintain optimal health. Graduates of accredited programs receive a doctorate in naturopathic medicine from regionally and programmatically accredited institutions, following four years of in-residence didactic and over 1200 hours of clinical training. This is similar to the biomedical and clinical requirements for other medical degrees such as medical doctors (MDs), nurse practitioners (NPs), and doctors of osteopathy (DOs). The AANMC publishes the Core Competencies of the Graduating Naturopathic Student, which outlines stringent guidelines and expectations for clinical and professional practice among licensed naturopathic doctors who have graduated from accredited naturopathic programs. These competencies encompass various areas, including medical assessment and diagnosis, patient management, communication and collaboration (including mandated reporting requirements), professionalism, career development and practice management, systems-based practice and practice-based learning, research, and scholarship. Accredited naturopathic medical schools train their students to meet the AANMC Clinical Competencies and prepare them for the Naturopathic Physician Licensing Examination (NPLEX) as administered by the North American Board of Naturopathic Examiners (NABNE). All accredited naturopathic medical schools provide high-level pharmacology training, including coverage of controlled substances, pharmacology, pharmacognosy, drug-herb, and drug-nutrient interactions. Further, comparisons between naturopathic and conventional primary care programs (MD/DO, ARNP) demonstrate similarities in foundational medical training. I am happy to provide documentation demonstrating the rigorous training and standards that accredited naturopathic graduates complete. In consideration of this training, we are in full support of the expansion of naturopathic scope as proposed by the Washington Association of Naturopathic Physicians (WANP) in Senate Bill 5411. We are confident that naturopathic physicians are competent to safely and carefully engage in a full primary care scope of practice, including advanced prescriptive authority.</p>
Jennifer Pere	Support	<p>Please vote this Bill 5411. Naturopathic Medical Doctors provide comprehensive care that is truly holistic, preventative and health promoting. I choose ND care as my primary because they promote wellness as well as provide sick care that frankly is not in the scope of most medical doctors. Please give them full scope to provide primary care.</p>

Krystal  
Rodriguez,  
Bellingham  
resident

Support

I would like to share my experience with a naturopathic doctor and how it has differed from other doctor experiences for me and those I know. I absolutely support the expansion of the scope of naturopathic practices in WA. For nearly 10 years, I have used a naturopathic doctor, Kim Celmer in Seattle, as my primary care physician. I sought this option out while I lived in Ellensburg where access to quality medical professionals is limited. I have now moved to Bellingham where I have more options, but I consider my 2-hour drive to see her well worth my time. Below has been my experience with a naturopathic doctor:

- She takes the time to listen to my health concerns. Annual appointments are always an hour. Virtual (love this option!) follow ups are as long or short as needed. Appointments never feel rushed and I always feel heard. I'm 52 yo and I've never had this type of experience with my primary provider.
- She gets to the root of my symptoms (sometimes through lab work) instead of trying to address the symptoms through medication. Her goal is to keep me from having the symptoms by discovering what is causing it.
- She not only works through my current symptoms, she identifies other whole-health issues I need to address to maintain good health, usually based on my age and gender.
- She stays on top of medical research! She was quick to identify my pre-menopausal symptoms and suggest hormone replacements, which is still considered by many to be the wrong solution because of incorrect information from years ago.
- She cares about my well-being by asking questions to discover any other concerns I may have. She's very thoughtful during my appointments. I have recommended Dr. Celmer to many friends and family. I'll share the experience of two that decided to see her:

- Sister - Experiencing swollen ankles, persistent rashes, and other symptoms. Due to the additional "member" charge Dr. Celmer's office charges for the additional time they spend with patients, she opted to see her own primary provider. She left that appointment with the advice to reduce her salt intake. She finally saw Dr. Celmer who immediately recognized she needed to "put out the fire" in my sister's body. My sister called me to say "I see why you love her" because Celmer listened, recognizing she had multiple issues going on with her body.
- Male friend - Not a fan of annual preventative care visits or discussing general health issues, I convinced him to see Celmer. He walked away from his first visit saying "I couldn't believe how quickly that visit went" and "we covered so much". He's been committed to seeing her annually for the past 8 years. I'm confident it's because she, because of the naturopathic experience, has created a much more valuable primary care provider experience. Should Dr. Celmer retire, I will definitely seek another naturopathic doctor for my medical care. It's holistic, thorough, and attentive. So different. It's past time for the state to acknowledge these doctors equally. I look forward to following this bill.

Hannah Alhajhja	Support	<p>I am writing to encourage you to support SB 5411 and increase the scope of naturopathic practitioners. Please help more people gain access to naturopaths as primary care providing physicians. A naturopath clinic has changed my family's life for the better and I want more people to obtain a doctor-patient relationship like the one I have with our doctors at Neighborhood Naturopath in West Seattle. After several years of being a Kaiser Permanente member and watching its services truly disintegrate (ex., and this is merely one of dozens of such examples: when our family got scabies, they scheduled us for an appointment six months later, and we were only able to get that appointment by staying on the phone on hold for over 6 hours), it has been a blessing and a relief to discover a functional naturopathic office with a supported administrative staff and practitioners who are not so overwhelmed that they can barely pay attention to us. Naturopath primary care providers listen and talk broadly about the things that actually impact our health and well being: how do you sleep? how do you eat? what do you do? These should be obviously necessary questions, but in the crush of medical practices MDs rarely ask you such key questions, they are breathless and running to the next patient. I was rarely able to see my actual PCP, instead passed off to different residents; we'd spend the entire 15-20 minute session trying to develop a patient history I'd already given countless times. Naturopaths make all the difference and surely save insurance companies money for doing substantive preventive care. I do not want to have to be referred out to an MD for certain things currently out of an ND's scope, I want to stick with the doctors who know me. Finally!</p>
sabrina reyes-peters	Support	<p>I am writing in support of SB5411. I have used naturopathic doctors since 2008, and they have been infinitely more helpful to me than standard MDs. They have had more availability, and always take my concerns seriously with a mind to address the root issues.</p> <p>However, NDs still are restricted since in many areas of law they are not considered physicians, even though they have the same education. They are limited in what they can prescribe, and how they can operate and be compensated as a primary care provider. In fact, many insurance companies do not recognize NDs as primary care providers and will not apply insurance benefits to visits. Giving them more permission as doctors is a step in the right direction and will benefit a lot of people. I hope this bill passes.</p>
Emily Schauer	Support	<p>Outdated laws and language currently limits NPs ability to provide full primary care which is both frustrating and unnecessary for both naturopathic physicians and patients. I've had phenomenal care from my naturopaths and would love to see their ability to provide care expanded.</p> <p>I support SB5411.</p>
Emily Turk, MPH	Support	<p>I fully support SB5411, as it would enable my family to continue to have the same "medical home." My Naturopath currently serves as our family doctor including pediatrics for my child, women's health services for myself, and a general practitioner. I would appreciate, as a single parent, not having to go to multiple doctors and have all of our health needs met in one clinic (with the exception of specialists of course).</p> <p>My naturopath has been our family doctor for 10+ years. We rarely have the need to see a medical doctor, and really would only have to if these limitations continue to exist for NDs. SB5411 would reduce the unnecessary back 'n forth between different doctors and pharmacies, reduce stress, and make my life, and that of my children, much easier!</p> <p>Thank you for supporting the continued health and well-being of my family.</p>
Marcy Rebar	Support	<p>I have a wonderful Naturopathic doctor. She is so smart, practical, and extremely knowledgeable in naturopathic medicine as well as western medicine. I can't imagine not having her as a physician. Please consider expanding naturopathic doctor prescription authority enabling NDs to sign all healthcare documents, and modernize language to allow NDs to serve as primary care providers. We, the patient, should be able to decide who we want as a physician to take care of all our healthcare needs.</p>



Rocio Luquero	Support	I believe ND has the same or more knowledge to ba family doctors . I support this bill
Patricia Connell, RN, PhD, AHN-BS, QTTT, CCHT, RsPM	Support	I have used naturopathic care for several decades. I was misdiagnosed by 2 MD gastroentrolgist with a an incurable gut condition thyat was only disgnised by and treated by competent, GI Naturopathic physicians. I am firtunate to have a PCP who is open to working with an ND so that when my ND wants lab rtests or beleives that a prescription is needed - my PCP will order so that I do not have to pay out of pocket. As it is I pay out of pocket for ND visits. Would be wonderful for them to be treated and considered a effective and necessary as MDs, DOs or DCs are. I encourage you to pass legislation that ecpands there legal status.
Erin Munavu	Support	Thank you for ensuring our primary care doctors, who are all NDs, can care for us as any primary care doctor would be able to!
Tina Mansfield, MA, MHP, LMHC	Support	My Naturopath is my PCP and many I know are in the same situation. Their function and capacity needs to be expanded. Please please please vote yes on this!!!!
MILO MINNISm>	Support	ND's are essential to staying healthy. They are a second opinion when your MD has no solution's to your medical issues. Without an Naturopathic Doctor I would not have the regular support I need. ND training is a thorough and extensive medically as an MD so they should have all the powers as an MD. Please pass this bill SN5411.
Stephen Wangen, ND	Support	<p>I am writing in support of expanding the scope of naturopathic doctors to be commensurate with that of other statute-recognized primary care providers in Washington.</p> <p>I have been a practicing ND for 24 years, and there are countless times when I was unable to provide adequate care to patients when I knew exactly what was needed, due to the limited scope of my license.</p> <p>Expanding our scope to accommodate our full training and knowledge base will not only allow more people to access more health care, it will positively impact the entire medical system in the state of Washington and put us at the forefront of healthcare nationwide.</p> <p>I appreciate your time and consideration in this important matter.</p>
Ariel Hubbard, LMT	Support	I am writing to expand naturopathic scope of practice to better align with that of other statute-recognized primary care providers in Washington.I think this bill should expand naturopathic prescriptive authority to include controlled substances in Schedules II through V of the Uniform Controlled Substances Act as necessary in the practice of naturopathy; enable naturopathic physicians to sign and attest to any documents or certificates that any primary care provider is routinely expected to sign; update defining language under "minor office procedures" and "physical modalities"; and update the RCW to reflect that naturopathy is now regulated by an established board rather than by the Office of the Secretary of Health (effective 2011).There is a severe shortage of healthcare practitioners and a demand for naturopaths and I feel expanding the scope for naturopathic doctors would make a tremendous difference for the community at large. I am always trying to refer my clients to a doctor and they consistently have difficulty finding appointments through a regular MD, and they are always looking for Naturopaths.

Leslie Collins m>	Support	<p>I am writing in support of SB 5411 which would expand prescriptive authority for naturopathic physicians, enable naturopaths to sign all healthcare documents, and enable them to serve more fully as primary care providers. I have been seeing a naturopathic physician as my primary care provider for three years and the experience has been overwhelmingly positive. After many years going to conventional doctors who have little time to focus on preventive care or management of chronic health issues, I finally have a doctor who is knowledgeable, engaged, and takes the time to understand my health issues and help me manage them. Under her care, I've lost 70 pounds, brought my asthma under control, reversed my prediabetes, brought my blood pressure under better control, and eliminated the need for two medications. The only problems I have encountered while under the care of my naturopath have been related to state regulations, including the following:</p> <p>In the summer of 2021, I experienced a herniated disc and my naturopath did not have the authority to prescribe pain medications. During this time, the pain from my herniated disc was intolerable and none of the naturopathic remedies or alternative therapies touched the pain. I had a surgeon but he would not prescribe pain medication pre-surgery referring me instead to my primary care physician who was unfortunately prevented by law from prescribing the pain medication I needed because she is a naturopath. As a result, I ended up in ER for pain management and then had to establish care with another provider for the pain. This not only increased my cost of care, but also made it very difficult to control the level of pain I had during the incident. Had my naturopath been able to prescribe pain medications I would have had better care, more consistent pain management for my acute pain, and lower medical costs.</p> <p>From my perspective, naturopathic physicians are best suited to be primary care physicians because of their focus on prevention and the time they take to understand the health and well-being of a particular individual so they can coordinate care. Unlike many of the people I know who complain of long wait times, short doctor visits and unmet health needs, I feel that I am getting excellent health care with my naturopathic primary care physician. I just wish that she had all of the tools in her bag to manage my care. In particular, I hope that if I ever have to suffer through a herniated disc again, that she will be able to escalate to traditional pain meds if needed. As my primary care physician, I expect that my naturopathic physician will have the authority needed to fully coordinate my care. For these reasons I support SB 5411.</p>
Siera Pleskac	Support	Please pass Senate Bill 5411! I am in favor of allowing naturopathic physicians to be primary care providers.
Linda Walmer	Support	The NDs I have used for years have been instrumental in treating the rare disease that I was diagnosed with. Their willingness to read very specific pubmed articles, think outside the box, and be willing and able to really spend time with me has been key to our success in management of the disease. Please extend their abilities to help patients in equal share to traditional MDs.
Nadine Waldmann	Support	I support SB5411. With the month-long waits for specialty clinics and main stream hospitals, my family and I rely on local, neighborhood naturopaths for care. Their services to the community are invaluable in this time of an overburdened medical system.
Laura Thompson	Support	I am writing in support of SB5411. I have been under naturopathic care for 6+ years and my baby's primary physician is an NP as well. We have had only positive experiences with the amount of time they take to truly listen and search for root causes. I feel like a human being and not a number. I hope naturopathic care will only expand and become more accessible to all Washingtonians. Since getting my master of science degree, evidence-based care is a big priority of mine. The naturopaths I work with are up to date on latest research and often better equipped to treat some of the chronic difficult issues that many conventional MDs often ignored or brushed aside during my visits.

Zam DeShields	Support	<p>I'd like to submit comments about the Naturopath scope of work. I have found working with my ND as my primary care provider to be the most beneficial of the providers I see for my chronic illness. It is frustrating to have their scope limited, meaning I have to see other physicians for random things, such as controlled substance medication management.</p> <p>Please consider revising the scope to include all that an MD can do.</p>
Keegan	Support	<p>I am writing to say that for decades I have been waiting for my ND's scope of practice to reach everywhere an MD's does. My ND is my primary, however because her scope of practice is limited I have to keep an MD around, which has shown to be impractical, incredibly frustrating, and in the end my care is what always seems to be compromised. My ND is and always will be my primary. She is better than any MD our town has to offer by leaps and bounds. Let her do her job and care wholly for her patients.</p> <p>Increase ND's scope of practice!</p>
Dianne Dyer retired RN	Support	<p>Please expand the approved scope of practice of Naturopathic Practice so that they are able to fully practice as Primary Care Physicians and receive reimbursement through Medicare. I live on Lopez Island where there is only one MD. Appointments are difficult to get whether for routine or urgent care. The shortage of Primary Care Physicians here and elsewhere, led me to seek care with a Naturopathic Physician, Althea Fleming. The exam I received from my Naturopathic Physician was the most comprehensive exam I had received in years. Her referrals were extensive, and she took in to consideration what services I should seek elsewhere so that my Medicare insurance could be billed. My first choice would be to have her manage my care. Primary care Physicians, particularly in rural areas are in shorts supply. Naturopathic Physicians could help fill this gap, if their scope of practice is expanded.</p>
Jean Long	Support	<p>Please support providing Primary Care Physicians status for Naturopathic Physicians so that I may have freedom to choose health care that is appropriate to my individual health. A Naturopathic Physician is my current choice for primary care, but I am denied insurance coverage for her care.</p>
Sandi Davidson	Support	<p>It is my preference to see an Naturopathic Doctor as my primary doctor and want my ND to be able to practice fully as a primary care physician.</p>
Brenda Kovach	Support	<p>Please vote to support Naturopathic Physicians being able to practice fully as Primary Care Physicians!</p> <p>My care and my family's health care has been significantly limited by my ND not being reimbursed by my insurance, and her not being able to provide prescriptions for mental health conditions.</p>

Kelly Case	Support	<p>I am hoping that we can expand the scope of practice for naturopathic doctors. I have an autoimmune disease that took 17 years to get diagnosed. My regular doctors had 15 minute appointments that didn't meet my needs but my naturopath saw me for 45 min to an hour and was able to help me make diet and lifestyle changes to support my chronic illness.</p> <p>But my naturopath is listed as a specialist and so costs more on insurance to see. She is unable to order tests that we decide to do, or orser medications I need. This leads me to having to do rounds of appointments. First I see the naturopath to get the insight and information I need, then I need to see a regular doctor to order tests. Then the regular doctor to get the results. Then back to the naturopath to figure out the lifestyle changes based on test results. It's expensive and very time consuming on top of an energy limiting chronic illness.</p> <p>Please increase the scope of care for naturopathic doctors so that patients don't have to bear the costs of our current system and have essentially 2 separate primary care doctors at our own expense.</p>
Brittany Chitwood	Support	<p>I live in the state of Washington and trust my ND with my healthcare. Unfortunately, as the system is currently set up, I have to go to another doctor as well to manage things Id rather keep seeing my ND for OR I have to make the choice to pay out of pocket. It would make my life easier and also keep my care more consistent if the scope of NDs is expanded in WA state. Those of us who trust our NDs with our healthcare trust that this expansion will better enable our practitioners to prescribe and treat for issues they currently are restricted from despite having both the education and capacity to handle them. I fully support the expansion of scope of practice for NDs practicing in WA.</p>
Edith Walden	Support	<p>I have been using a naturopathic doctor (ND) as one of my medical providers for over 30 years. I have to pay out of pocket and there are procedures and medicines she cannot prescribe, so I have to then go to my primary care physician with the information and request them. I receive far better care and attention (a standard office visit is 45 minutes) from her than I do from my overloaded and rushed PCP. Medicare does not cover the cost.</p> <p>Please allow NDs to practice fully in our state as primary care physicians, with all privileges.</p>
Gale Marple	Support	<p>I love my naturopathic doctor! She has been a great help to me. I still use MDs for many issues, but would prefer to go to my ND for primary care.</p> <p>Please expand the scope of what services a naturopath doctor can do!</p>
Elizabeth Shirk	Support	<p>Please expand the scope of Naturopath services.</p> <p>I depend on my naturopath as my primary source of medical care. Sadly, I also have to have a traditional physician only for ordering blood work and refilling prescriptions. This is an inefficient use of medical care providers.</p>
Stella	Support	<p>Dear DOH, I would like my ND doctor to be able to function in a more expanded way and be able to serve me like a primary care physician.</p>

Shelley Maydole	Support	<p>My primary care physician is awesome. She is a naturopath and very intelligent and effective in her job. I have heard that decisions are being made about some drugs to prescribe &amp; etc.</p> <p>Please allow her fully practice as a primary care physician, so that we can get great care.</p>
Carol Hage Wall	Support	<p>I encourage the state of Washington to expand the abilities of NDs to expand their services . I would love for my ND to be able to be our GP and to be able to accept Medicare insurance.</p> <p>Our ND offers wise advise that has helped us a lot to expand our health</p>
Karen Gilbert, RN, MN	Support	<p>I am writing to request the expansion of the scope of practice for naturopathic physicians in Washington State. I am a retired nurse practitioner (educated at the University of Washington School of Nursing) and fully understand the educational and practice requirements for a provider. I would like my naturopathic doctor to become my primary care provider, however her licensed scope of practice is too limited for that to occur, at present.I urge you to expand the scope of practice for naturopaths so they can practice to the full extent for which they have been trained.Thank you for the opportunity to give my input and I appreciate your work for all of us! Don't hesitate to contact me if I can be helpful in your evaluation process.</p>
Judy Redmayne	Support	<p>I want to lend my support to Bill 5411. I regularly see a naturopath and also visit Bastyr University for the acupuncture clinic. The suggestions and insights I receive from these professionals are usually more helpful than what I receive from my physician at Kaiser Permanente. I would go to Kaiser and the emergency room for life-threatening care, but day-to-day care for health issues like energy levels, digestive issues, and depression I have found my naturopath and Bastyr to be more helpful. Western medicine is helpful in certain areas, but in most areas it is lacking.</p>
Teresa Bessett	Support	<p>My name is Teresa Bessett, age 68 and I live in Mount Vernon, Washington. Before I was eligible for Medicare, my physician was Dr. Althea Fleming, a Naturopathic doctor in Anacortes. Unfortunately, I had to stop seeing her because Dr. Fleming is unable to take Medicare and I miss her every day, these 4 years later.</p> <p>If we demand Naturopath's are made to adhere to the same standards, practices and rules applied to "Normal" physicians, and they are, then there is no reason why they should not be able to expand their scope of function and practice fully as a primary care physician, just as they are trained(!), including more insurance inclusion and pay parity, and Medicare.</p> <p>Thank you for your time and attention, I appreciate it.</p>
Andrea St. Clair, MA, SUDP, CC	Support	<p>re. upcoming legislation, I would like my Naturopathic Physician (ND) to be able to practice fully as a primary care physician.</p> <p>Thank you for your consideration,</p>

Barbara Cooper	Support	Please consider extending the scope of practice for Naturopath Doctors. They are often the primary care practitioners for many people. The more areas that they can prescribe medications, order lab work and get better reimbursement will make a big difference to their patients
Rollanda Sitko	Support	Regarding the sunrise review in the state of Washington for Naturopathic medicine;I would like to know if there is any specific place or person to contact in the hopes of expanding the scope of practice for Naturopath's.I have been seeing both a regular M.D. and a Naturopath for over 20 years. I have had times when my Naturopath solved health problems that the M.D. did not.My Naturopath has always treated me in a "safe and sane" manner, which hasn't always been the way an M.D. has.The last 5 years it has been extremely difficult to get an appointment with my regular M.D. I have had to wait months. I have NEVER had to wait more than a week to see my Naturopath.My husband called to make an appointment with an M.D. as a new patient this past February 2023. They were accepting new patients, but the earliest appointment they had was in January 2024!!He took the appointment, which is still almost 3 months away, so has gone without a regular M.D. for almost a year now and he is in his seventies with several health conditions. If we have anything pressing regarding our health, we have to go to a walk in clinic or the emergency room, a better option than dying while waiting for your appointment with the M.D.Expanding the scope of what Naturopath's can do and opening the door for better insurance coverage and Medicare coverage would be such a blessing in the lives of those who have to wait for weeks and even months to be seen. In addition, I would like to know if there is any way for me to keep track of the sunrise review and find out the outcome.
ALEXIS GENTRY	Support	<p>I utilize my naturopathic doctor as much as possible. I am grateful that she accepts insurance, and that my coverage allows for her as a provider.</p> <p>I am requesting that the ND designation in WA state be expanded to allow for them to function fully as Primary Care Providers.</p> <p>Not only do we need more PCPs desperately, but we also need to be able to centralize our care with fewer appointments and less cost of bureaucracy (communication between offices, billing from two providers instead of one).</p> <p>This would greatly benefit the system as a whole, and the patients especially.</p>
kathy lester >	Support	<p>Please allow Naturopathic doctor to widen their ability to function as a primary doctor. This will save people money not having to go to 2 doctors for treatment.</p> <p>Naturopathic doctors have the time to spend with their patients to get a full picture of what is going on with their patients, not just collecting physical symptoms. For people with health problems from emotional issues this extra time their doctor spends with their clients collects valuable information and give the client the feeling of being heard.</p> <p>We need to be expanding health care where possible and this is away to do it easily.</p>
Kathleen Kaska	Support	I want my naturopathic ND, to be able to practice fully as a primary care physician.

Dana Stone	Support	Please expand a Naturopath's scope of practice. I love Dr.Aletha Fleming in Anacortes. It is much easier to get an appointment with her than with my regular primary care doctor. She has helped me way more than my primary care doctor in managing my health.
Juby Fouts	Support	<p>WE HAVE A PROBLEM IN THE USA. The time has come to STOP our servitude to BIG PHARMA! I am a retired RN and EMT who has worked for years watching Health Care in America decline dramatically. There is an exception to this phenomenon. Washington's Naturopathic Physicians serve their patients by working together with them to improve their health-- not by prescribing more drugs to "fix" them. Insurance companies, in turn, are part of this decline, caused by supporting this push for chemical "fixes".</p> <p>Of course there is a place for essential drugs, which Naturopaths support. My personal Primary Care Physician agrees with my Naturopath scientifically! Why doesn't our LEGISLATURE agree?</p> <p>Please vote to support legislation recognizing the improved NATUROPATHIC medical care especially of ELDERS like me</p>
Barbara Gaffney	Support	I am writing to support an expansion of Naturopathic functions so that my ND can fulfill more of the practices of a primary care provider. I have been a patient of Dr Alethea Fleming for several years, but have had to augment her care with another PCP. My hope is that can change. If NDs were also able to accept Medicare this would increase access to good medical care for those of us who need the care, understanding and time that NDs spend with their patients.

Suzan Brawnlynm>	Support	<p>I started attending ND seminar's in Massachusetts in 1993. Although, at the time, ND's weren't allowed to practice in MA, it was interesting that ND's from WA, and Bastyr College were the main presenters at these seminars. This is when I began my journey for more holistic health care. I have utilized an ND as my PCP in 3 different states since 2002, in AK, OR and WA. In addition I have been using holistic practices , (acupuncture, chiropractic, massage, homeopathic and other practices since 1994 in other states such as MA, AR, AK, and OR. I have been fortunate to have had good health, and care and found these practices to support my ND in OR and AK. However, I am challenged now with living in WA, and NOT being able to have my ND be my PCP as I now receive Medicare. I still see her, and pay out of pocket, an expense that does cause some difficulty especially in this economy. Something that ITi is frustrating that Medicare doesn't support ND's and their support, NS even more frustrating that some 2ndary insurances state that they do but woefully, really they don't. This additional expense for me, when I can't find care or assistance through allopathic medicine, angers and frustrates me tremendously. I want my ND to be able to practice fully as a primary care physician, as they are trained so that I can receive the care I need and deserve. I have had to use Urgent Care in a rural area of WA that is unsatisfactory in facility, abilities, knowledge and care. I have had missed diagnosis, belated care and improper connection due to the setup of the Urgent Care facility. My ND is not located in the town I currently reside in, and can't assist me in the care I want, need or deserve. In order to even get a PCP, I have to travel 45 miles to the nearest city to find a PCP that might be able to assist me. I have been very unhappy with the "allowance" of care my ND is available to perform in WA. I didn't have this problem when I lived in AK or OR. Please hear this request and others that might be filtering in as you review this process. Please open our ND's scope is expand so that they can function better as a primary care physician, which also means more insurance inclusion and pay parity including Medicare.</p>
Lori Sherick >	Support	<p>Naturopaths are vital to the health care system. My family has been under the care of naturopaths for years. Their holistic approach should be recognized and their scope broadened.</p>
Cynthia Burica	Support	<p>Please strongly consider allowing Naturopathic Doctors to have the same rights &amp; responsibilities as any MD; they have the same training &amp; a better concept of how best to treat the overall patient, not just the symptom!!</p>
Moriah L. Armstrong, M.Ed.	Support	<p>I am writing because I understand that the naturopathic medicine scope of practice is currently under sunrise review in the state of Washington. If the scope of practice was expanded slightly for my Naturopathic Doctor, she could do much more including prescribe Xanax for an anxious patient who needs an MRI, manage ADHD medications, better help patients who have opioid use disorder, and ultimately what this means is that if my Naturopathic Doctor's scope of practice is expanded, she can function better as a primary care physician, which means more insurance inclusion and pay parity including Medicare. This would be of great benefit to many of us who seek the kind of broader service a Naturopathic Doctor, who is fully trained to be a primary care doctor, can offer in terms of care beyond simply prescribing medicines or tests which is what I feel most frequently happens with my regular MD primary care Doctor. I hope my comments will be included in your sunrise review,</p>



Dr. Alethea Fleming, ND	Support	<p>Please support the expansion of the current scope of practice for naturopathic physicians. I work largely with the elderly and anything that will put us on the path to being accepted by Medicare would help address the national shortage of primary care physicians. Every year patients have to choose another provider because I am not covered under Medicare when they transition onto Medicare and the first step to having Medicare inclusion is having a scope of practice that reflects our training.</p> <p>In the shorter term, it's painful that a Physician's Assistant (who has a little more than two years of post bacc training compared to ND's four years) can prescribe more broadly than I can. I want to be able to write for a benzodiazepine when I have an anxious patient who needs an MRI or has to go on an overseas flight with acrophobia. I want to be able to assist my patients who have opioid dependency in decreasing their usage. I want to be able to sign documentation like POLST forms which would make tremendous sense since I can sign death certificates. Please help NDs provide more broad and appropriate care so we can fully be the primary care physicians we are trained to be.</p>
Corinne Salcedo	Support	I want my naturopath to be able to prescribe fully as they are trained to do. Thank you.
evangeline beeks	Support	I would like very much for my naturopathic physician to be able to function fully as a primary care physician. Thank you.
Suzette Richards	Support	I want my ND, Alethea Fleming, to be able to practice as a primary care physician. Her care for me is excellent.
Stacy Marie Bigbee	Support	I ask that approve to expand the scope of naturopathic medicine in Washington. I want my ND to be able to practice fully as my primary care physician, as she is trained so that my family can get the care we truly need and deserve.

Dr. Allison Apfelbaum	Support	<p>To the WA state department of health and all parties involved in Senate Bill 5411, increasing the scope of Naturopathic Physicians: It gives me great pleasure to write in comment from the perspective of a primary care provider in the state of WA. When I graduated from my 4 years of medical school, I was accepted into a two-year residency in primary care in a more rural part of WA state. I was able to see how dire the need for primary care was in a rural setting, where access was more limited than a metro area. There I learned the ins and outs of billing insurance, prescribing to pharmacies, and making referrals for imaging and to outside providers. I am grateful to know that in the state of WA, Naturopathic Doctors can provide expansive care to the community by accepting insurance and prescribing medication. Looking back on the last ten years of practice, I have learned the limitations of the scope of ND's in our state, and how greatly it impacts our patients. Patients will always seek out our medicine, whether we are in a licensed state or not. For example, in a state like Pennsylvania where ND's are not yet able to take insurance, people will pay cash to see an ND. I also see states like Oregon, Arizona and Vermont, who have a full scope of practice including prescription authority, and are able to successfully fill the gaps in primary care. Patients should be able to see the doctor of their choosing, and not feel limited in what that provider can offer them for care. It frustrates me, that these limitations exist in WA state, where we are practicing primary care. If ND's could prescribe the full scope that they are trained in, it would save money for the healthcare system and prevent emergencies. Removing the limitation on ND's prescription authority, would prevent patients from going to the emergency room. When patients need care, they need to be able to go to their primary doctor. The wait for seeing a psychiatrist can be months out, and if a patient needs to take a benzodiazepine RX, they need their primary care provider to prescribe this. If a patient needs an acute pain management medication, they need access through their primary care doctor. If a patient needs a disability waiver, they need their primary doctor to write it. When a child needs to be evaluated for ADHD, they will start at their primary pediatric provider, who may also be a Naturopathic provider. When a patient wants to get on or off ADHD medication, they need help from their primary care provider. When my patients have the choice of waiting months for the specialist or being seen immediately at the ER for a medication refill, they will go to the already overwhelmed ER. ND's are the answer to the primary care provider shortage. We are the point of care between specialists and the patient. I spend more time with my patients than any other type of medical provider. First visits are an hour, follow ups are at least 30 minutes. During this time, we discuss preventative screenings, medication/ supplement interactions, vaccination schedules, prevention lab work and more. The number of patients I have prevented going to the emergency room is endless. It takes time to explain the why behind getting vaccinated, or going in for a screening colonoscopy for example. This time builds trust, strengthening the patient-doctor relationship. Patients need to be able to continue care with the provider of their choice in any situation, especially something that requires acute care with a prescription. To deny patients access to care, is to put their safety at risk, and this is undeniably of utmost importance when considering the position on our scope expansion bill. Naturopathic doctors are experts in primary care. Our education trains us in an out of hospital clinic setting, specifically designed for preventative and primary medicine. It is a known statistic that primary care makes up the lowest percentage specialty of choice for allopathic medical doctors. WA state already has a below average primary care provider to resident ratio, and as the population grows this ratio is becoming larger. In fact, WA state doesn't even make the top 20 in the country, with rural areas being even more disproportionately affected. The pandemic has also made these gaps even larger, and many physicians are retiring or dropping out of insurance networks. Just 3 days ago, the President of the AMA "sounded the alarm on a national physician shortage", citing 2 out of 3 medical doctors experiencing burnout. The standard medical system is failing at meeting the needs of patients, and seemingly also in their own profession. This bill would not solve all of these complexities, but limiting the prescriptive authority scope to trained primary care providers, is not helping the situation. I hope that when considering the "expansion of our scope in WA state" it be viewed as more of a removal of the limitation in the scope that we are already trained in. We deserve this, our patients deserve this, and the state of the healthcare system in Washington requires it. Thank you for your time in consideration of Senate Bill 5411,</p>
Wendy Rabel	Support	I would very much like my ND, Dr. Alethea Fleming, to be able to act fully as my Primary Care Physician. It would be much more efficient for the patient.
Denise Wolf	Support	My Naturopath is my Primary Care doctor. Please expand her scope of practice. Eventually, I will be on Medicare and will still need her expert care. She was the Doctor that looked at the Whole Me and figured out how to get me functional enough to work and enjoy life! Other doctors just looked at parts of me -their specialty- and did not
Julie	Support	I support NP's to be considered Primary Physicians. They are trained and already are seen this way by their patients.
Sara Joy	Support	I would like my ND to be able to practice as my primary doctor
Sara	Support	Please expand ND's capacity to serve, especially as we approach this phase where there are not going to be enough drs in the country.

Lisa Lizbet Janette	Support	Please let my ND give me full care, prescribe medications, take all medicare plans and just fully act as my primary care physician. I've just signed up for Medicare to start 2/1/24 and will very much miss having my naturopath as the leader of my medical team. Dr. Alethea Fleming is amazing. I don't want a medicare advantage plan either. I want traditional medicare with a medigap plan.
Madonna Docken	Support	Please expand the scope of naturopathic drs. so they can treat patients more fully as primary care physicians and be recognized and covered by insurance. My naturopath knows more about my health than my current primary care dr. because she has/takes more time and is holistic in her approach, therefore treating the whole person
Mike Steiner	Support	I would like to be on record as stating that that I want my Naturopathic Doctor (and all ND's) to be able to practice fully as a primary care physician. My current ND, Alethea Fleming, does a great job and gives excellent care and health advice.  Feel free to contact me if you have any questions or would like to discuss.
Sally DeFehr	Support	I support the effort to allow Naturopathic doctors to fully practice the role of primary care physician.
Nancy Mitchell	Support	Alethea Flemming, ND - should be available as Primary Care Provider on Medicare and all insurances. I am a patient who has highly negative reactions to standard pharma - especially blood pressure and vascular. Also need to go beyond standard PC as there is a genetic variant that reduces ability to absorb Vitamin B and to complete methylation processes. Most traditionally trained providers tell me they cannot help. Please add Naturopathic care providers as primary care providers to all insurances including Medicare. Much Needed!
Joan H. Palmer	Support	I am IN FAVOR of naturopathic physician services being covered under Medicare. This is way overdue.
Kalynn CarrollGillis	Support	I am writing in as support of my Naturopathic doctor Althea Fleming. I would love for her to be able to practice fully as a primary care physician and insurance to be able to cover her services. We do not have enough coverage here in this valley and having more access would be so appreciated.
Megan Taylor, ND	Support	I am a naturopathic physician and primary care provider in my community of West Seattle. While I am able to provide most of the care necessary for my patient population, I am frequently frustrated by limitations by my formulary in Washington state. I previously practiced in Oregon, where the scope of my practice matched my training, and I was easily able to take over ADHD medication prescribing for a patient when appropriate, or provide short prescriptions for certain anxiolytics and sleep medication for severe insomnia due to loss or a flying phobia. Instead, I have had to find workarounds in my practice in Washington state, which are often frustrating and confusing for patients, result in delays and unnecessary visits with other providers, and can frequently result in less-than-ideal medical care. Per my education, as a graduate of the National University of Natural Medicine in Portland, OR, I received countless hours of training in pharmaceutical prescribing and have completed 100s of hours of additional training to maintain my licensure. In order to maintain my DEA license, I am also required to complete an additional 8 hours of training specifically in opioid and substance use disorders. I feel confident that, were my scope expanded to match my training, I could truly provide comprehensive primary care and keep my patients safe in the process.

Dr. Iris Cutler, DAHM, EAMP	Support	Thank you for the opportunity to advocate for Naturopathic doctors! As an acupuncturist, many of my clients (as much as half) see naturopathic doctors as their primary care physicians. I've heard patients time and time again rave about the quality of care they received from their NDs in seeing results that they hadn't been able to get with their MDs. For patients with histories of medical trauma, I recommend NDs who can meet with the clients for un-rushed appointments so they can build trust with quality care physicians again. I see folks who've been helped by NDs with chronic gut issues, reproductive health issues, insomnia, and menopausal symptoms, all who preferred to continue seeing their ND for primary care of their previous experience with MDs for the highly personalized care where they saw sustainable results for chronic conditions that they weren't be able to get previously with their MDs. I strongly believe Naturopaths should be able to practice as primary care physicians for these reasons. Thank you for receiving my message and for your continued work for our communities!
Joan Tezak	Support	Naturopathic Doctors are more skilled, better trained and extremely more caring to address the root of a medical problem. With the extreme shortage of medical professionals, this is a perfect opportunity to recognize and actually help with this dire situation. Naturopathic Doctors are highly qualified to practice as a primary care physician and should be covered under Medicare and all insurance companies.
Sheila	Support	Naturopathic Providers are trained to provide Primary Care and I feel that they should be allowed to practice what they have been trained to practice. I am a registered nurse who holds certifications in wound and ostomy care and am currently preparing to sit for my addiction medicine nurse certification. I also see a Naturopathic provider but also have to have a traditional Medical Doctor because my Naturopathic provider cannot be my primary care provider. I feel that my Naturopathic Provider has a much deeper understanding of nutrition and health as well as mental health compared to many MD. I feel that the ND really has the opportunity to look at the WHOLE patient from a physical, emotional, environmental and nutrition perspective. I definitely get that when I see my ND vs my MD! As humans we are inundated with advertising and shops that want us to buy unhealthy foods and drinks....starbucks, McDonalds, Pizza shops..as well as being bombarded by social media and a culture of distrust and very short attention span as well as a society where we are allowed to constantly interrupt each other. Oh, and did I mention the word accountability almost doesn't exist. I feel my ND is able to examine me physically and emotionally and is able to help me with a care plan to help me achieve better health. My MD doctor doesn't even touch me and never asks how I am doing emotionally. She wants to give me medications instead of developing a care plan that includes nutrition, exercise, mental health support. My MD is owned by a corporation and is supposed to see me in 15 minutes and would rather give me a pill or tell me to make another appointment because she can only see me for one diagnosis. I have never had a discussion with any of my MD now or in the past who has taken such care in understanding me than my ND. I would greatly appreciate it if my ND's Scope of Practice was expanded. I am also very interested in the possibility for ND's to be allowed to manage Substance Use Disorders. We need more providers out there in the community that can help to care for people caught in this epidemic! Thank goodness the xwaiver is gone. Let's get ND trained up to help care for our community of folks with Substance Used Disorders!
Chandra Mays	Support	I would like my ND to practice fully as a primary care physician.

Sheri MacIntosh	Support	I wanted to write to you to express how much I love and have come to depend on her. Dr. Alethea Fleming in Anacortes has been providing the best of care for me. I do struggle with the scope limitations of the care she can offer. She listens, guides and is always there for me, it would be great if she could be able to assist me more.
Marianne Brunner	Support	I and my family have been going to a Naturopath as our primary doctor for over 20 years. I had no idea moving forward (and as I get older) that they would be restricted in solving all of my medical needs. I love our approach in looking for alternatives before jumping on the OVER PUSHED pharmaceutical band wagon!! BUT if I need something in the future, the thought of having to switch primary doctors to get it is ridiculous, expensive, time consuming and not in my best interest.
Evin Opp	Support	Hello! Evie here from Anacortes, Washington. I just wanted to write a short email saying that I want my Naturopathic Doctor to be able to practice fully as a primary care physician! I know there will be a vote in the near future, please consider how necessary long term, preventative care can positively affect Washingtonians.
Nancy Spencer	Support	Thank you for the opportunity to respond to this sunrise matter regarding Naturopathic health care. My family has been greatly helped over many years by this kind of care, and I am excited to learn that there might be an expansion of scope of practice for Naturopathic Doctors. It is very encouraging that in Washington State there is a means to choose the style and form of healthcare that most meets the needs of some of its citizens. Greater access to naturopathic care and greater affordability will be broadly accepted by Those who recognize the benefits for themselves and their families. Thank you again for allowing me to render my opinion,
Dr. Andy Russell, DAHM, LEAMP	Support	<p>I want to submit a comment in support of SB5411. I believe the scope of NDs in WA state should match their primary care provider status. As both a patient of naturopathic physicians, and a Doctor of Acupuncture and Herbal Medicine who regularly works with NDs on shared patient care, I agree strongly with the reasons laid out by the Washington association of Naturopathic Physicians below:</p> <ul style="list-style-type: none"> <li>• The extensive training of naturopathic physicians</li> <li>• The patient experience of having an attentive provider who listens carefully to them</li> <li>• The naturopathic foundations that teach us to use the lowest force effective intervention</li> <li>• The goal to keep patients safe by helping them taper off potentially addictive controlled substances (as indicated) and by using many other modalities before considering a controlled substance prescription</li> <li>• Patient and practitioner stories of needing to maintain care with multiple providers/offices just for a prescription of ADHD meds or some Xanax for situational panic or anxiety</li> <li>• Patient and provider experience in rural communities where there are not a lot of primary healthcare providers</li> <li>• Experiences of prolonged wait times to schedule with other providers</li> <li>• Need for additional prescribers of life-saving medications for substance use disorders</li> <li>• Impact in time, money, and travel when patients have to maintain care with multiple providers</li> <li>• Experiences from patients and doctors on the border of Washington and Oregon or doctors maintaining licensure in both states describing how training is not different but scope is</li> <li>• Clinicians with multiple credentials (in order to utilize more advanced scope) and comparing clinical training of each</li> </ul>

Amanda	Support	I am writing as someone who has greatly benefited from having a naturopath as my primary care physician for the last 5 years, specifically around my menopausal changes that have hugely impacted my life. Seeing a naturopath is wholly different from any other health care I've ever received in that she always has enough time for me and sees me as a whole person, not the symptom I'm coming in for. She has always - 100% of the time - been able to help me. This is not true for my husband, who also sees her, but who cannot get all of his meds through her currently. Please expand her, and all naturopaths' scope of practice so that they can better serve all types of clients. The health care system would be better off for it, as would all of the clients who are lucky enough to discover the superior care found when you have a naturopath as your primary care provider!
Taunya Gren	Support	<p>I've recently adopted a new daughter with a number of mental and physical health issues. She'd been seeing a regular primary care physician before the adoption that had massively over prescribed antidepressants inappropriate for a teenager or child. They have been causing tremors, facial and body tics and other problematic health issues. When she came to me here in Washington, we established with a naturopathic primary care Dr.</p> <p>Her Naturopaths have been wonderful. They've been able to identify her scoliosis, give her appropriate therapy and diagnose Marfan syndrome which is helping her finally conquer the pain she's been in most of her life. HOWEVER, they can't titrate her down off the damaging anti-depressant and they can't prescribe a new one more appropriate for a child. It's horrifying and stupid that such things are limited for otherwise wonderful primary care doctors.</p> <p>I'm really hoping SB 5411 passes. With the shortage of healthcare providers in our state (and our country), making it possible for primary care ND's to do their job more functionally just makes sense to me.</p>
Jeremy Norris, PsyD	Support	I am writing to voice support for expanding scope of practice for naturopathic physicians. I have worked with four different ND's in my adult life and have found them to be thoughtful, responsible and conscientious practitioners. As a psychologist I would rather see prescriptive abilities increased for naturopathic physicians than psychologists, especially based on comparative training. In this era of much more demand than supply for healthcare providers it makes sense to equip the providers we have with as many tools as possible. Thank you for considering my input.
Michael Quintus	Support	I would like my ND to be able to practice fully as a primary care physician.
Andy Storms	Support	<p>I rely on my naturopath for my primary care. I think the holistic approach is generally the best way to address my healthcare issues, but there are times where pharmaceuticals are necessary, and I would love to be able to get everything I need in one place. I currently have a separate doctor for controlled substances, and it feels unnecessary and fractured.</p> <p>So, I just wanted to voice my position on this issue. Please pass Senate Bill 5411.</p>
Brad Jensen	Support	I would like Naturopathic doctors to prescribe all medications for the treatment of ADHD. It would be most helpful for patients like me to see just one doctor for care and medication prescriptions.
Not provided	Support	I would like my ND, Dr Flemming, to be able to practice fully as a primary care physician, as she is trained to do so that I can get the care I need an deserve.

Gwen Proffit	Support	<p>I believe the medical fields needs to give Naturopathic Drs the ability to perscribe any medication within their scope of practice. These Drs have done more research on the current disease that are now arising that were never a problem back to the old days. They understand hormonal issues and neurological issues better than a regular MD. They take the time to specify their current area of focus to focus directly on the patients needs.</p> <p>I personally have spent over \$100k in medical bills over the past 5 years to gain no help in my current diagnosis. So much as spent 2 different times receiving Electro Shock Therapy to only gain memory loss, more brain inflammation and no gain for my Disorder that is caused by the food we eat and my body not personally working with the pharmacist medications perscribed for me. I have tried every Antidepressant known in the psychiatrist department to gain no advance or healing in life. A brain scan, and supplements and specialized testing discovered what I truest have and I haven't been stronger or healthier in my personal life. And this is coming from an Athlete that has played at a World Class Level and been through nasty divorce and abusive Ex husband that got away with stuff that wasn't true.</p> <p>All because the medical field wants to give meds and not really look into how the meds affect the body or how it breaks it down.</p> <p>If we can gain knowledge in electronics so quickly why can't we use the knowledge to study the patient genes and more to help cut back on the pain and suffering or better yet the patient that we're put in hospital because of wrong medications and become suicidal or the patients that actually committed suicide due to the wrong medications.</p> <p>Use technology to gain something in this world and help America get healthy again!</p>
Laura Thompson	Support	<p>I whole heartedly support Naturopathic physicians to act as primary care physicians including, among other additions, the ability to prescribe Schedule II to V controlled substances. The applicant group for this proposal has the Washington Association of Naturopathic Physicians (WANP).</p>
Pamela Angeles-Bloomingle	Support	<p>I'm a 64 year old female who has chosen to work with a Naturopathic Doctor (ND) as my primary care doctor. He</p> <p>It's essential that ND's are given all the advantages available in order to continue ti provide the best of care for their patients.</p> <p>As I transition in late 2024 to Medicare I want to be able to continue with seeing an ND as my primary care doctor &amp; in a timely manner. It's important that I get the best care possible &amp; that includes allowing for the passage of SB5411.</p>
Nancy Fisher-Allison	Support	<p>I am writing to express support for expanding the scope of practice for naturopathic doctors. As someone who chooses to receive care from an ND, I can attest to the great value of this medical service. Although I do see an MD for certain needs, I know that naturopathic care contributes significantly to my health in areas such as nutrition and glucose control. As a Medicare recipient, I have to pay out of pocket to see a naturopathic provider. Fortunately, I am able to do so, but this is far from true for most other Washington seniors. Please expand the scope of care for Washington State's naturopathic doctors so that they can serve as primary care providers for those who prefer this form of medical care, and also to allow the more equitable application of insurance benefits.</p>

Jane Wagner	Support	<p>Please grant naturopathic physicians the ability to prescribe medications the same as other physicians. They have the same training and are being unfairly limited in being able to serve patients like myself. I also would like Medicare and all insurances to cover their services. I would like my primary care naturopathic doctor to be able to take care of me in the same way other physicians.</p> <p>My health care is being compromised by limiting their scope of practice.</p>
Kabran Chapek, ND	Support	<p>I am writing in support of increasing Naturopathic Physicians' scope of practice in WA state. I have been practicing in WA since 2006 and have a primary focus in mental health and brain injury. I refer out many patients for stimulant prescriptions that could be managed under my care(average of 35per year for co-management). These are medications that significantly increase people's ability to function in work and school and are well within Naturopathic physicians training and experience to prescribe.</p> <p>Reviewing my records an average of 35 patients are referred out each year by me for stimulant medications which added substantial cost, and time waiting for medication.</p> <p>In addition to increasing our scope of practice for brain related issues including stimulant medications for ADHD it would be helpful to be able to prescribe other medications such as benzodiazepines for as needed anxiety concerns and procedures such as an MRI or for phobia such as airplane travel. Medication is not always part of an overall plan to help the patient and usually includes botanical medicine, nutrients, amino acids, behavioral change, exercise, diet and adequate sleep. However often a stimulant medication is often needed to help allow the patient to be able to function in their life. I see this as a necessary medication so will refer patients to another provider as this is a functional disability for many patients and without it their ability to is seen as a necessary part of their care. Referring patients to other providers drops the ball on continuity of patient care as they are vulnerable to not following up, paying additional fees and waiting for needed care sometimes weeks or months.</p> <p>Please support the increased scope of practice of naturopathic doctors in WA state.</p>
Jan Whiting	Support	<p>For over ten years I have been able to depend on my ND, Alethea Fleming to evaluate and care for my needs, surpassing my expectations. I am 79yrs. Old and have had my family doctor leave their practice and been reassigned another new doctor 4 times in 20 years. I can depend on my ND. I send my bloodwork and evaluations to her as she is the one who explains and can assist me with my meds and if she could order tests for me, it would be wonderful. There is not a rush to get me out of the office as she allows one hour for my yearly visit. My primary care doctor is so overloaded I am lucky to get 10 minutes with him after the nurse gets vitals and history. Please expand her ability to fully care for me.</p>



Shannon Korrell	Support	<p>I am writing to add my voice to the many who NEED their Naturopathic Doctors to have their scope of practice considered as fully practicing Primary Care Physicians. It was only recently that I discovered that my insurance company does not regard them as PCPs even though my ND has done more to improve my health than any conventional PCP ever has. Please stop letting insurance companies and outdated information on Naturopathic medicine limit a much needed sector of healthcare for millions of patients, especially those of us with chronic disease who have been failed over and over again by the conventional healthcare model. I should not have to consider my ND a "specialist" when she is fully trained and educated to function as my Primary Care Physician.</p> <p>Thank you for your attention to this matter.</p>
Roxilyn Smith	Support	<p>My naturopath is capable and trained in providing many of the controlled substances and minor office procedures that myself and other patients have to be referred out of the clinic for. Please approve this bill in order to decrease our burden of unnecessary referrals and long wait times with alternate providers who don't know us like our naturopaths. Please value the health of all Washingtonians and pass this bill!</p>
Izze Drot	Support	<p>I support my naturopathic doctor having the ability to prescribe medications that they've been trained to prescribe, and sign off of all necessary forms as my PCP. This will minimize obstacles and delay to me getting the care I need from my primary care provider. I support this senate bill.</p>
Tina Hoxie BSN, RN	Support	<p>Please consider expanding scope of practice for Washington state Naturopathic Doctors. My Naturopathic Doctor is a valuable part of my healthcare team, yet she is limited to some extent in what she order or prescribe, necessitating the need for me to also have a primary care physician . Given the shortage of primary care physicians in our state, it makes sense in many ways to expand scope of practice for NDs so as they could help lower this demand for PCPs. Sincerely, Tina Hoxie BSN, RN.</p>
Deana Wiatr	Support	<p>"I see an ND as my PCP, and it is frustrating to have to find care elsewhere to [fill my ADHD medications/prescribe Xanax for my flying phobia/sign my Orca disability application]. I want my PCP's scope to match their training. Please support Senate Bill 5411!"</p> <p>Currently, we are trying to find a Dr. who will evaluate him for ADHD and there are huge waits to get in, whereas my Naturopath has been his pediatrician since he was born and knows the entire health history. Very frustrating.</p>
Allison Huffman LMFT	Support	<p>My family and I highly support the bill to give naturopathic doctors the status of primary care doctors and the rights there in. The best doctors we've had have been ND's.</p>
A.K. Mangat	Support	<p>To Whom It May Concern: As a Washington State resident who has benefited from naturopathic care, I am writing to urge your support for SB5411. I have designated my naturopath as my primary care physician and would welcome an expanded role for these critical providers.</p> <p>I support my naturopathic doctor having the ability to prescribe medicines that they've been trained to prescribe and sign off on all necessary forms as my primary care physician. This will minimize obstacles and delays to me getting the care I need from my primary care provider.</p> <p>Please support Senate Bill 5411.</p>

Kelly Vale	Support	<p>in support of passing SB 5411. I have received amazing care from my ND but as someone diagnosed with ADHD, I have been forced to seek out a whole other doctor, a psychiatrist, to prescribe me my ADHD medication because my primary care provider is unable to do so. Because of this, my health care cost has doubled as I do not have the insurance to cover both health care providers. On top of that, it makes me miss double the amount of work because I have to make twice the amount of appointments. I believe there is no logical reason that my ND should npt be able to prescribe this life stabilizing medication for me or any other Washington state ND for that matter. I hope you take my story and the others who have reached out seriously as this notion would fundamentally change the lives of many and help people get the care they deserve and need with out so much headache.</p>
Mary Burki	Support	<p>I support increasing the scope of naturopathic physicians.</p>
Jeff Woodruff	Support	<p>I am writing in support of expanding Naturopathic prescriptive authority. As a long term, generally dissatisfied, patient of allopathic providers I recently moved my primary care needs to a Naturopathic physician. I can say unequivocally that I feel significantly more cared for than I ever have. Spending the required time with me, thinking of my medical needs holistically all improves outcomes for my health.</p> <p>Limiting the scope of practice for these physicians is problematic and seemingly rooted in motives that are not in my, the patient, best interests. In that regard, I support SB5411.</p>
Kimberly LeMaire	Support	<p>I'm writing today in strong support of this bill.I have had a Naturopath as my PCP for over 15 years now and I have always found the quality of a Naturopath's expertise to far exceed that of a standard medical school-trained doctor. I also worked as a physical therapist for 30 years and had exposure to many MDs throughout my career and once again, have found Naturopaths to have a greater breadth of knowledge that seems inclusive of what MDs seem to know.My ND spends 30 mins at minimum with me for every visit and knows my full history. MDs do not have this luxury, yet they are allowed to prescribe drugs that could significantly impact long-term health. I was prescribed a PPI at a very high dose for many years by a gastroenterologist that has contributed to a few downstream health conditions I now have. I am confident that had I been seeing a ND at the time, she would have alerted me to the dangers of taking that drug.Please support SB5411 to give NDs the powers they are qualified to have.</p>

Lela Altman,  
N.D., L.Ac.,  
FABNG

Support

I am a naturopathic physician writing in support of Senate Bill 1541, which seeks to expand the scope of practice of naturopathic physicians, including increasing the prescriptive rights to include schedule II-V drugs. I have been a primary care physician in Washington State for over 12 years in various settings that required me to prescribe and manage medications for patients. During my first year of residency, I had the opportunity to see patients at the Tulalip tribal reservation through Indian Health Services as well as see hundreds of patients at the Bastyr clinic and community outreach clinics, while receiving clinical mentorship. Through my entire second year of residency, I maintained a patient panel at Health Point Community Health Center in Kent, WA. Providing primary care to underserved populations in addition to seeing patients at the Bastyr clinic. My third year of residency focused on evidence-based medicine (EBM) and clinical research in addition to patient care. I also have also worked amongst MD's, PA's and DO's at the Center for Integrative Medicine at Virginia Mason Hospital in downtown Seattle for 3 years. I now currently have a private practice where I serve as a primary care provider and am full time teaching faculty at Bastyr University. During this time, there have been several times that I had to refer my patient to another provider that they did not know and had never seen before, to prescribe a medication that was outside of my prescriptive authority. This leads to extra cost, delayed or inadequate care, and frustration for the patient. This has also led to patients not following the recommended course of treatment because they did not want to find another doctor that they did not necessarily trust to prescribe the medication. As a naturopathic physician, many people come to see me because they do not trust the conventional medical community. If I recommend a pharmaceutical, they trust that I would not recommend it unless it was absolutely indicated. However, if they see a conventional provider who recommends a pharmaceutical medication, they just assume that that is "par for the course" and the recommendation that every patient gets. Therefore, I am often able to get patients to take pharmaceuticals that are highly indicated and important for their health, when other practitioners are not able to. In these cases, my limited prescriptive rights may stop these patients from ever getting the care that they need. As I am sure you know, there is also a huge shortage of primary care providers. According to a survey done by the Washington State Hospital Association, it takes on average 29 days to get into a primary care appointment in Seattle. Naturopathic physicians are trained to be primary care providers and can help fill this gap, however, they are limited by their decreased scope of practice. Having worked in community health, I can attest to the fact that the decreased scope of practice for naturopathic physicians makes it difficult to want to hire a naturopathic physician to work in community health, as there tends to be a lot of prescription management in these settings. This is especially a shame because there is a lack of providers willing to work in community health and naturopathic physicians are excited about filling this need. Additionally, naturopathic physicians have been highly interested in providing primary care in rural areas, where sending somebody to another doctor for a prescription may not even be an option. The scope limitation that naturopathic doctors contend with limits their ability to provide care for people in rural areas. Oregon and Vermont, who also rely on naturopathic physicians as primary care providers, have moved to give these providers a wider scope of practice due to their level of competence and training in pharmacology. I strongly encourage you to allow Washington State to do the same. Thank you for your time. Please do not hesitate to reach out if you have any questions.

Dr Elisha  
Bokman ND,  
LAc

Support

I'm a Naturopathic Dr/Acupuncturist licensed in Washington state. I'd like to express my support for SB 5411. In my practice I work with patients dealing with mental health disorders and addiction. There is a crisis and a shortage of providers in these specialties. There are times where I have been limited in my ability to provide optimal care for my patients due to restrictions in my prescribing rights. In my practice ketamine therapy is the main drug that comes up as an issue. I'm having to refer to other providers, often nurse practitioners who have no additional training beyond what I've received. This is now preventing me from providing excellent care and helping people that are in desperate need for solutions that work such as ketamine therapy. I urge you to consider the passing of SB 5411. Naturopathic Doctors have the training and expertise to fill the current gaps in healthcare. Please allow us to be of service.

Dr. Michael Rak	Support	<p>Thank you for the opportunity to allow my profession to voice opinions on this important issue. I have been reflecting on this since the topic arose. My personal practice supports those with fairly intense chronic illness. Many of my patients have been to numerous doctors and continue to have major struggles with their health. I am able to support those with severe sleep issues and severe pain issues to promote long term healing of these conditions and to reduce their future disease burden. However, myself and my colleagues are lacking in tools to provide acute care for these issues. Because of this, my patients often need to seek care from other providers that often don't have the visit time or particular expertise to understand how the relevant drugs will interact with the complexity of the patient's pathology, increasing their risk. There are certainly some providers that are able to provide this service, but getting in to see them can be challenging for an acute issue and when this happens in an acute care setting, these patients are often labeled as 'drug-seeking' which is obviously counter-productive. When we attempt to nurture a relationship with prescribing providers for 'at risk' patients, the provider will often defer visits with these patients due to the lack of a current need. Beyond this, we are often meeting patients who have current prescriptions of controlled substances. As we promote greater healing and resilience of these cases, we can reach a point where they appear to be over-medicated on these controlled substances. Because we do not have prescriptive rights, the deprescribing has to go through the originating prescriber and having the patient return to the originator can be problematic and may interrupt the continuity of care leading to greater risk. Furthermore, for some of the controlled substances, regular monitoring of blood levels is necessary to assure a proper dose. All too often, we are working with patients in which this aspect of management (and safety assurance) is not accomplished. Because of the regular relationship that Naturopathic Physicians commonly have with their patients, and their focus on preventative support, we are a great option for filling this role of support. This should reduce risk. If the system of healthcare in this country worked perfectly, there would likely not be a need for me to write this letter, however in its current state there remains a considerable need for patients to have better management of this aspect of healthcare and Naturopathic Physicians are in an opportune place to provide support. This change in prescriptive rights will help to reduce overall risk to the patient by leveraging the typically-close relationship between an ND and their patient in the utilization of these powerful prescriptives. Please feel free to reach out to me directly or through my clinic of One Connection Healthcare.</p>
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Mark Wade	Support	<p>I would like my Naturopathic Doctor to be able to practice fully as a primary care physician. They are able to take the time to really get to know me and my health issues. Thank you.</p>
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Holland Support My primary care at Institute of Complementary medicine emailed me about submitting a story to support your effort to protect and promote and I'm not sure my story is exactly what you're looking for but happy to help in any way I can! I am incredibly fortunate that the healthcare provider of my current employer is accepted by my naturopathic physician but I'm likely going to be changing careers soon and am very worried, as the health insurance plans that offer coverage for my naturopathic physicians office is very slim. Currently, I have to pay an annual fee on top of my monthly insurance plan fees and copays to see my physician but the care that I've received from her is 100x better than the care I had received from two other primary care providers that I had met with. Additionally, I do have ADHD and because of legal requirements, I have to meet with a psychiatrist separately every 3 months because my naturopathic physician can't prescribe me those medications -- even though she has way more context and knowledge on the other medications/supplements I am taking and how my ADHD medication is interacting with my health overall. Again, happy to expand or offer additional context if that's helpful! Just let me know.

Desiree DuPuis Support I am writing because I think it's important you know that I would like my ND to be able to practice fully as a primary care physician, as they are trained, so that I can get the care I need and deserve.

I appreciate your attention to this matter and recognition that action on your part may be necessary for this to become reality.

Emily Buffi Support To whom it may concern,

I support SB5411! My ND is my PCP and I will continue to go to ND's for my medical needs. I support my ND having the ability to prescribe medicines that they've been trained to prescribe, and sign off of all necessary forms as my PCP. This will minimize obstacles and help me get the care I need from my primary care provider. Now more than ever, we need health care providers that can fully meet the rising needs of people like me.

Phoenix Star

Support

To whom it may concern:I would like to express my support for SB5411 and encourage others to support it as well. I currently live in Seattle and see a naturopathic physician as my primary care physician. As someone with Ehlers-Danlos Syndrome, a genetic collagen disorder that affects my entire body, I have found the holistic approach of NDs to be much better suited to addressing my health concerns versus the "you have five minutes, let's focus on one symptom" approach I found far too common with other doctors previously. I feel blessed to have moved a decade ago to Washington where we have such a great naturopathy system. I finally got years of mysterious health issues diagnosed and treated in large part to the diligence of naturopathic physicians and I am now back in college pursuing my own future career in healthcare. Unfortunately, due to outdated laws, my primary care physician sometimes can't sign the forms or prescribe the meds I need and I am forced to wait to be seen by an additional healthcare provider who does not understand the complexity of my case. SB5411 seems a common sense bill to eliminate not only that waste of my time and money but also the waste of doctor resources in an already overburdened medical system. Please give SB5411 your support! Thank you for your time!