

Chapter 18.22 RCW
PODIATRIC MEDICINE AND SURGERY

Sections

- 18.22.003 Regulation of health care professions—Criteria.
- 18.22.005 Legislative finding—Purpose.
- 18.22.010 Definitions.
- 18.22.013 Podiatric medical board—Membership.
- 18.22.014 Board—Officers—Members' compensation and travel expenses.
- 18.22.015 Board—Duties—Rules.
- 18.22.018 Application of uniform disciplinary act.
- 18.22.021 License required.
- 18.22.025 License required to practice podiatric medicine and surgery.
- 18.22.035 Practice of podiatric medicine and surgery—Quality—Definition—Prescriptions—Limitations.
- 18.22.040 Applicants—Fee—Eligibility.
- 18.22.045 Postgraduate training license.
- 18.22.060 Examination—Date, location, and application—Reexamination.
- 18.22.082 License—Reciprocity.
- 18.22.083 License—Examination to determine professional qualifications.
- 18.22.110 License—Display.
- 18.22.120 License renewal.
- 18.22.125 License—Inactive status.
- 18.22.191 Rules and regulations.
- 18.22.210 Unlawful practice—Evidence of.
- 18.22.220 Violations—Penalty.
- 18.22.230 Exemptions.
- 18.22.240 Pain management rules—Repeal—Adoption of new rules.
- 18.22.250 Podiatric physician health program—License surcharge.
- 18.22.800 Opioid drug prescribing rules—Adoption.
- 18.22.810 Opioid drugs—Right to refuse.
- 18.22.950 Short title.

Actions for negligence against, evidence and proof required to prevail: RCW 4.24.290.

Health professions account—Fees credited—Requirements for biennial budget request—Unappropriated funds: RCW 43.70.320.

Rebating by practitioners of healing professions prohibited: Chapter 19.68 RCW.

RCW 18.22.003 Regulation of health care professions—Criteria.
See chapter 18.120 RCW.

RCW 18.22.005 Legislative finding—Purpose. The legislature finds that the conduct of podiatric physicians and surgeons licensed to practice in this state plays a vital role in preserving the public

health and well-being. The purpose of this chapter is to establish an effective public agency to regulate the practice of podiatric medicine and surgery for the protection and promotion of the public health, safety, and welfare and to act as a disciplinary body for the licensed podiatric physicians and surgeons of this state and to ensure that only individuals who meet and maintain minimum standards of competence and conduct may obtain a license to provide podiatric services to the public. [1990 c 147 s 1; 1982 c 21 s 1.]

RCW 18.22.010 Definitions. As used in this chapter, the following terms have the meanings indicated unless the context clearly requires otherwise.

(1) "Podiatric physician and surgeon" means an individual licensed under this chapter.

(2) "Board" means the Washington state podiatric medical board.

(3) "Department" means the department of health.

(4) "Secretary" means the secretary of health or the secretary's designee.

(5) "Approved school of podiatric medicine and surgery" means a school approved by the board, which may consider official recognition of the Council of Education of the American Podiatric Medical Association in determining the approval of schools of podiatric medicine and surgery. [1990 c 147 s 2; 1982 c 21 s 2; 1973 c 77 s 1; 1955 c 149 s 1; 1941 c 31 s 1; 1921 c 120 s 1; 1917 c 38 s 1; Rem. Supp. 1941 s 10074.]

RCW 18.22.013 Podiatric medical board—Membership. The Washington state podiatric medical board consists of seven members that are appointed by the governor. All members must be residents of the state. Two members must be consumers whose occupation does not include the administration of health activities or the providing of health services and who have no material financial interest in providing health care services or fiduciary relationship to a health care delivery system. Five members must be podiatric physicians and surgeons who at the time of appointment have been licensed under the laws of this state for at least five consecutive years immediately preceding appointment and shall at all times during their terms remain licensed podiatric physicians and surgeons.

Board members serve five-year terms. No person may serve more than two consecutive terms on the board. Each member shall take the usual oath of a state officer, which must be filed with the secretary of state, and each member shall hold office for the term of appointment and until a successor is appointed and sworn.

Each member is subject to removal at the pleasure of the governor. If a vacancy on the board occurs from any cause, the governor shall appoint a successor for the unexpired term. [2020 c 248 s 1; 1990 c 147 s 3; 1982 c 21 s 8.]

Secretary of health or designee ex officio member of health professional licensure and disciplinary boards: RCW 43.70.300.

RCW 18.22.014 Board—Officers—Members' compensation and travel expenses. The board shall meet at the places and times it determines

and as often as necessary to discharge its duties. The board shall elect a chairperson and a vice chairperson from among its members. Members must be compensated in accordance with RCW 43.03.265 in addition to travel expenses provided by RCW 43.03.050 and 43.03.060. The board is a class five group for purposes of chapter 43.03 RCW. A majority of the board members appointed and serving constitutes a quorum for the transaction of board business. The affirmative vote of a majority of a quorum of the board is required to carry a motion or resolution, to adopt a rule, or to pass a measure. [2022 c 240 s 29; 2020 c 248 s 2; 1990 c 147 s 4; 1984 c 287 s 26; 1982 c 21 s 9.]

Legislative findings—Severability—Effective date—1984 c 287:
See notes following RCW 43.03.220.

RCW 18.22.015 Board—Duties—Rules. The board shall:

- (1) Administer all laws placed under its jurisdiction;
- (2) Prepare, grade, and administer or determine the nature, grading, and administration of examinations for applicants for podiatric physician and surgeon licenses;
- (3) Examine and investigate all applicants for podiatric physician and surgeon licenses and certify to the secretary all applicants it judges to be properly qualified;
- (4) Adopt any rules which it considers necessary or proper to carry out the purposes of this chapter;
- (5) Adopt rules governing the administration of sedation and anesthesia in the offices of persons licensed under this chapter, including necessary training and equipment;
- (6) Determine which schools of podiatric medicine and surgery will be approved. [2007 c 273 s 28; 1990 c 147 s 5; 1986 c 259 s 18; 1982 c 21 s 10.]

Effective date—Implementation—2007 c 273: See RCW 70.230.900 and 70.230.901.

Severability—1986 c 259: See note following RCW 18.130.010.

Director of licensing or director's designee ex officio member of health professional licensure and disciplinary boards: RCW 43.70.300.

RCW 18.22.018 Application of uniform disciplinary act. The uniform disciplinary act, chapter 18.130 RCW, governs unlicensed practice, the issuance and denial of licenses, and the discipline of licensees under this chapter. [1987 c 150 s 10; 1986 c 259 s 17.]

Severability—1987 c 150: See RCW 18.122.901.

Severability—1986 c 259: See note following RCW 18.130.010.

RCW 18.22.021 License required. It is a violation of RCW 18.130.190 for any person to practice podiatry in this state unless the person first has obtained a license therefor. [1987 c 150 s 11.]

Severability—1987 c 150: See RCW 18.122.901.

RCW 18.22.025 License required to practice podiatric medicine and surgery. No person may practice or represent himself or herself as a podiatric physician and surgeon without first applying for and receiving a license under this chapter to practice podiatric medicine and surgery. [1990 c 147 s 7.]

RCW 18.22.035 Practice of podiatric medicine and surgery—Quality—Definition—Prescriptions—Limitations. (1) A podiatric physician and surgeon is responsible for the quality of podiatric care.

(2) The practice of podiatric medicine and surgery is the diagnosis and the medical, surgical, mechanical, manipulative, and electrical treatments of ailments of the human foot.

(3) Podiatric physicians and surgeons may issue prescriptions valid at any pharmacy for any drug, including narcotics, necessary in the practice of podiatry.

(4) Podiatrists shall not:

(a) Amputate the foot;

(b) Administer spinal anesthetic or any anesthetic that renders the patient unconscious; or

(c) Treat systemic conditions. [1990 c 147 s 6.]

RCW 18.22.040 Applicants—Fee—Eligibility. Before any person may take an examination for the issuance of a podiatric physician and surgeon license, the applicant shall submit a completed application and a fee determined by the secretary as provided in RCW 43.70.250. The applicant shall also furnish the secretary and the board with satisfactory proof that:

(1) The applicant has not engaged in unprofessional conduct as defined in chapter 18.130 RCW and is not unable to practice with reasonable skill and safety as a result of a physical or mental impairment;

(2) The applicant has satisfactorily completed a course in an approved school of podiatric medicine and surgery;

(3) The applicant has completed one year of postgraduate podiatric medical training in a program approved by the board, provided that applicants graduating before July 1, 1993, shall be exempt from the postgraduate training requirement. [2000 c 171 s 4; 1993 c 29 s 2; 1990 c 147 s 8; 1982 c 21 s 5; 1979 c 158 s 18; 1973 c 77 s 4; 1971 ex.s. c 292 s 19; 1955 c 149 s 2; 1935 c 48 s 3; 1921 c 120 s 3; 1917 c 38 s 6; RRS s 10079.]

Severability—1971 ex.s. c 292: See note following RCW 26.28.010.

RCW 18.22.045 Postgraduate training license. The board may grant approval to issue a license without examination to a podiatric physician and surgeon in a board-approved postgraduate training program in this state if the applicant files an application and meets all the requirements for licensure set forth in RCW 18.22.040 except for completion of one year of postgraduate training. The secretary

shall issue a postgraduate podiatric medicine and surgery license that permits the physician to practice podiatric medicine and surgery only in connection with his or her duties in the postgraduate training program. The postgraduate training license does not authorize the podiatric physician to engage in any other form of practice. Each podiatric physician and surgeon in postgraduate training shall practice podiatric medicine and surgery under the supervision of a physician licensed in this state under this chapter, or chapter 18.71 or 18.57 RCW, but such supervision shall not be construed to necessarily require the personal presence of the supervising physician at the place where services are rendered.

All persons licensed under this section shall be subject to the jurisdiction of the podiatric medical board as set forth in this chapter and chapter 18.130 RCW.

Persons applying for licensure pursuant to this section shall pay an application and renewal fee determined by the secretary as provided in RCW 43.70.250. Postgraduate training licenses may be renewed annually. Any person who obtains a license pursuant to this section may apply for licensure under this chapter but shall submit a new application form and comply with all other licensing requirements of this chapter. [1993 c 29 s 1.]

RCW 18.22.060 Examination—Date, location, and application—Reexamination. (1) The date and location of the examination shall be established by the board. Applicants who have met the requirements for examination under RCW 18.22.040 will be scheduled for the next examination after the filing of the complete application. The board shall establish by rule the examination application deadline.

(2) An applicant who fails to pass an examination satisfactorily is entitled to reexamination upon the payment of a fee for each reexamination determined by the secretary as provided in RCW 43.70.250. [1990 c 147 s 9; 1985 c 7 s 11; 1982 c 21 s 7; 1975 1st ex.s. c 30 s 16; 1973 c 77 s 6; 1965 c 97 s 1; 1957 c 52 s 14. Prior: (i) 1921 c 120 s 5; 1917 c 38 s 9; RRS s 10082. (ii) 1921 c 120 s 4; 1917 c 38 s 7; RRS s 10080.]

RCW 18.22.082 License—Reciprocity. An applicant holding a license to practice podiatric medicine and surgery in another state may be licensed without examination if the secretary determines that the other state's licensing standards are substantively equivalent to the standards in this state. [1990 c 147 s 10.]

RCW 18.22.083 License—Examination to determine professional qualifications. Before being issued a license to practice podiatric medicine and surgery, applicants must successfully pass the examinations administered by the national board of podiatry examiners and an examination administered or approved by the board to determine their professional qualifications. The examination administered by the board shall include the subject areas as the board may require by rule.

The board may approve an examination prepared or administered, or both, by a private testing agency, other licensing authority, or association of licensing authorities.

The board may by rule establish the passing grade for the examination. [1990 c 147 s 11; 1982 c 21 s 13.]

RCW 18.22.110 License—Display. Every holder of a podiatric physician and surgeon license shall keep the license on exhibition in a conspicuous place in the holder's office or place of business. [1990 c 147 s 12; 1973 c 77 s 9; 1957 c 52 s 15. Prior: 1917 c 38 s 2, part; RRS s 10075, part.]

RCW 18.22.120 License renewal. The board shall establish by rule the requirements for renewal of licenses and relicensing. Administrative procedures, administrative requirements, and fees shall be established as provided in RCW 43.70.250 and 43.70.280. [1996 c 191 s 7; 1990 c 147 s 13; 1985 c 7 s 13; 1982 c 21 s 14; 1975 1st ex.s. c 30 s 18; 1973 c 77 s 10; 1971 ex.s. c 266 s 4; 1965 c 97 s 2; 1955 c 149 s 6. Prior: (i) 1921 c 120 s 5, part; 1917 c 38 s 9, part; RRS s 10082, part. (ii) 1921 c 120 s 9; RRS s 10096.]

RCW 18.22.125 License—Inactive status. (1) An individual may place his or her license on inactive status. The holder of an inactive license shall not practice podiatric medicine and surgery in this state without first activating the license.

(2) The inactive renewal fee shall be established by the secretary under RCW 43.70.250, but may not exceed twenty-five percent of the active license renewal fee. Failure to renew an inactive license results in cancellation in the same manner as an active license.

(3) An inactive license may be placed in an active status upon compliance with the rules established by the board.

(4) The provisions of this chapter relating to the denial, suspension, and revocation of a license are applicable to an inactive license, except that when proceedings to suspend or revoke an inactive license have been initiated, the license remains inactive until the proceedings have been completed. [1990 c 147 s 14.]

RCW 18.22.191 Rules and regulations. The secretary shall have the power and duty to formulate and prescribe such rules and regulations as may be reasonable in the proper administration of this chapter. In addition to any other authority provided by law, the secretary may:

(1) Set all fees required in this chapter in accordance with RCW 43.70.250;

(2) Establish forms necessary to administer this chapter;

(3) Maintain the official department record of all applicants and licensees. [1990 c 147 s 15; 1955 c 149 s 13.]

RCW 18.22.210 Unlawful practice—Evidence of. It is prima facie evidence of the practice of podiatric medicine and surgery or of holding oneself out as a practitioner of podiatric medicine and surgery within the meaning of this chapter for any person to treat in any manner ailments of the human foot by medical, surgical, or

mechanical means or appliances, or to use the title "podiatrist," "podiatric physician and surgeon," or any other words or letters which designate or tend to designate to the public that the person so treating or holding himself or herself out to treat, is a podiatric physician and surgeon. [1990 c 147 s 16; 1982 c 21 s 17; 1973 c 77 s 17; 1935 c 48 s 4; 1921 c 120 s 6; 1917 c 38 s 10; RRS s 10083.]

RCW 18.22.220 Violations—Penalty. Every person violating, or failing to comply with, the provisions of this chapter shall be guilty of a gross misdemeanor. [1955 c 149 s 10; 1917 c 38 s 21; RRS s 10094.]

RCW 18.22.230 Exemptions. The following practices, acts, and operations are excepted from the operation of the provisions of this chapter:

(1) The practice of podiatric medicine and surgery by an individual employed by the government of the United States while the individual is engaged in the performance of duties prescribed by the laws and regulations of the United States;

(2) The practice of podiatric medicine and surgery by students enrolled in a school approved by the board. The performance of services must be pursuant to a course of instruction or assignments from an instructor and under the supervision of the instructor;

(3) The practice of podiatric medicine and surgery by licensed podiatric physicians and surgeons of other states or countries while appearing at educational seminars;

(4) The use of roentgen and other rays for making radiograms or similar records of the feet or portions thereof, under the supervision of a licensed podiatric physician and surgeon or a physician;

(5) The practice of podiatric medicine and surgery by externs, interns, and residents in training programs approved by the American Podiatric Medical Association;

(6) The performing of podiatric services by persons not licensed under this chapter when performed under the supervision of a licensed podiatrist if those services are authorized by board rule or other law to be so performed;

(7) The treatment of ailments of the feet by physicians licensed under chapter 18.57 or 18.71 RCW, or other licensed health professionals practicing within the scope of their licenses;

(8) The domestic administration of family remedies or treatment by prayer or spiritual means in accordance with the creed or tenets of any well recognized church or religious denomination. [1990 c 147 s 17; 1982 c 21 s 19; 1973 c 77 s 19; 1955 c 149 s 12.]

RCW 18.22.240 Pain management rules—Repeal—Adoption of new rules. (1) By June 30, 2011, the board shall repeal its rules on pain management, WAC 246-922-510 through 246-922-540.

(2) By June 30, 2011, the board shall adopt new rules on chronic, noncancer pain management that contain the following elements:

(a) (i) Dosing criteria, including:

(A) A dosage amount that must not be exceeded unless a podiatric physician and surgeon first consults with a practitioner specializing in pain management; and

(B) Exigent or special circumstances under which the dosage amount may be exceeded without consultation with a practitioner specializing in pain management.

(ii) The rules regarding consultation with a practitioner specializing in pain management must, to the extent practicable, take into account:

(A) Circumstances under which repeated consultations would not be necessary or appropriate for a patient undergoing a stable, ongoing course of treatment for pain management;

(B) Minimum training and experience that is sufficient to exempt a podiatric physician and surgeon from the specialty consultation requirement;

(C) Methods for enhancing the availability of consultations;

(D) Allowing the efficient use of resources; and

(E) Minimizing the burden on practitioners and patients;

(b) Guidance on when to seek specialty consultation and ways in which electronic specialty consultations may be sought;

(c) Guidance on tracking clinical progress by using assessment tools focusing on pain interference, physical function, and overall risk for poor outcome; and

(d) Guidance on tracking the use of opioids.

(3) The board shall consult with the agency medical directors' group, the department of health, the University of Washington, and the largest professional association of podiatric physicians and surgeons in the state.

(4) The rules adopted under this section do not apply:

(a) To the provision of palliative, hospice, or other end-of-life care; or

(b) To the management of acute pain caused by an injury or a surgical procedure. [2010 c 209 s 1.]

RCW 18.22.250 Podiatric physician health program—License surcharge. (1) To implement a podiatric physician health program as authorized by RCW 18.130.175, the board shall enter into a contract with a physician health program or a voluntary substance use disorder monitoring program. The podiatric physician health program may include any or all of the following:

(a) Contracting with providers of treatment programs;

(b) Receiving and evaluating reports of suspected impairment from any source;

(c) Intervening in cases of verified impairment;

(d) Referring impaired podiatric physicians to treatment programs;

(e) Monitoring the treatment and rehabilitation of impaired podiatric physicians including those ordered by the board;

(f) Providing education, prevention of impairment, posttreatment monitoring, and support of rehabilitated impaired podiatric physicians; and

(g) Performing other related activities as determined by the board.

(2) A contract entered into under subsection (1) of this section shall be financed by a surcharge of \$70 per year or equivalent on each license issuance or renewal to be collected by the department from every podiatric physician licensed under this chapter. These moneys must be placed in the health professions account to be used solely for

implementation of the podiatric physician health program. [2024 c 15 s 5; 2022 c 43 s 1; 2017 c 22 s 1.]

Findings—2024 c 15: See note following RCW 18.71.310.

RCW 18.22.800 Opioid drug prescribing rules—Adoption. (1) By January 1, 2019, the board must adopt rules establishing requirements for prescribing opioid drugs. The rules may contain exemptions based on education, training, amount of opioids prescribed, patient panel, and practice environment.

(2) In developing the rules, the board must consider the agency medical directors' group and centers for disease control guidelines, and may consult with the department of health, the University of Washington, and the largest professional association of podiatric physicians and surgeons in the state. [2017 c 297 s 2.]

Findings—Intent—2017 c 297: "The legislature finds that in 2015 an average of two Washington residents died per day in this state from opioid overdose and that opioid overdose deaths have more than doubled between 2010 and 2015.

The legislature finds that in 2015 an average of two Washington residents died per day in this state from opioid overdose and that opioid overdose deaths have more than doubled between 2010 and 2015.

The legislature further finds that medically prescribed opioids intended to treat pain have contributed to the opioid epidemic and although Washington has done much to address the prescribing and tracking of opioid prescriptions, more needs to be done to ensure proper prescribing and use of opioids and access to treatment. This includes allowing local health officers to access the prescription monitoring program in order to provide patient follow-up and care coordination, including directing care to opioid treatment programs in the area as appropriate to the patient following an overdose event.

The legislature intends to streamline its already comprehensive system of tracking and treating opioid abuse by: Reducing barriers to the siting of opioid treatment programs; ensuring ease of access for prescribers, including those prescribers who provide services in opioid treatment programs, to the prescription monitoring program; allowing facilities and practitioners to use the information received under the prescription monitoring program for the purpose of providing individual prescriber quality improvement feedback; and requiring the boards and commissions of the health care professions with prescriptive authority to adopt rules establishing requirements for prescribing opioid drugs with the goal of reducing the number of people who inadvertently become addicted to opioids and, consequently, reducing the burden on opioid treatment programs." [2017 c 297 s 1.]

RCW 18.22.810 Opioid drugs—Right to refuse. By January 1, 2020, the board must adopt or amend its rules to require podiatric physicians who prescribe opioids to inform patients of their right to refuse an opioid prescription or order for any reason. If a patient indicates a desire to not receive an opioid, the podiatric physician must document the patient's request and avoid prescribing or ordering opioids, unless the request is revoked by the patient. [2019 c 314 s 3.]

Declaration—2019 c 314: "The legislature declares that opioid use disorder is a public health crisis. State agencies must increase access to evidence-based opioid use disorder treatment services, promote coordination of services within the substance use disorder treatment and recovery support system, strengthen partnerships between opioid use disorder treatment providers and their allied community partners, expand the use of the Washington state prescription drug monitoring program, and support comprehensive school and community-based substance use prevention services.

This act leverages the direction provided by the Washington state interagency opioid working plan in order to address the opioid epidemic challenging communities throughout the state.

Agencies administering state purchased health care programs, as defined in RCW 41.05.011, shall coordinate activities to implement the provisions of this act and the Washington state interagency opioid working plan, explore opportunities to address the opioid epidemic, and provide status updates as directed by the joint legislative executive committee on health care oversight to promote legislative and executive coordination." [2019 c 314 s 1.]

RCW 18.22.950 Short title. This chapter shall be known as the Podiatric Physician and Surgeon Practice Act. [1990 c 147 s 19.]