

Chapter 6: STANDARDS RELATING TO PRESCRIPTIVE AUTHORITIES AND COLLABORATIVE RELATIONSHIP FOR NATUROPATHIC DOCTORS

Summary: This chapter describes standards by which a naturopathic doctor may prescribe noncontrolled legend drugs and standards for collaborative relationships between a licensed allopathic or osteopathic physician and the naturopathic doctor.

1. Authority to use, prescribe, dispense and order

A naturopathic doctor may prescribe nonprescription medication without limitation. Licensed naturopathic doctors may use, prescribe, dispense, and order via any route of administration ~~certain medicines of mineral, animal, and botanical origin including the following~~ in a manner consistent with naturopathic training and scope of practice pursuant to 32 M.R.S. §12522(4).:

- A. All legend drugs as specified in Section 3 of this chapter ~~Nonlegend medicines derived from animal organs, tissues, and oils, minerals, and plants administered orally and topically;~~
- B. All nonlegend and legend vitamins, minerals, trace minerals, enzymes, foods, nutritional and dietary supplements, fungal and botanical medicines, and homeopathic medicines ~~Noncontrolled legend topical ointments, creams and lotions containing antiseptics;~~
- C. Noncontrolled legend topical, local anesthetics applied to superficial structures for use during minor office procedures as appropriate;
- D. All amino acids, peptides, and amino acid combinations; all organ and gland preparations and extracts, and all biological substances, including extracts and/or their products and residues ~~Noncontrolled legend vitamins, minerals, trace minerals, and whole glandulars including whole gland thyroid;~~
- E. Contraceptive devices ~~except intrauterine devices;~~
- F. Medical appliances and devices that do not require major surgical intervention ~~All homeopathic preparations;~~
- G. Order contrast agents for the purpose of diagnostic imaging ~~Immunizing agents approved by the Bureau of Biologics, United States Food and Drug Administration and listed in the current Recommendations of the United States Public Health Services Immunizations Practices Advisory Committee or the Report of the Committee of Infectious Diseases published by the American Academy of Pediatrics;~~
- H. Medications to partner(s) of patients diagnosed with a sexually transmitted infection without a patient visit by the partner of the patient for Expedited Partner Therapy. For

purposes of this subsection the term “Expedited Partner Therapy” means providing antibiotics or medications to partner(s) without laboratory confirmation or medical examination~~IM injections of vitamins, minerals and medications administered consistent with their scope of practice as a naturopathic doctor and training; and~~

- I. All topical preparations including topical antineoplastics within limitations of 32 M.R.S. §12522(4).

2. Terms of collaborative relationship

- A. During the first year of practice in Maine, ~~It~~ is the responsibility of the naturopathic doctor to enter into a professional relationship with a licensed allopathic or osteopathic physician for the historical review of the prescriptive practice of the naturopathic doctor. The naturopathic doctor must meet with the M. D. or D.O. on a quarterly basis for a period of one (1) year to review the naturopathic doctor’s prescriptive practices.
- B. The naturopathic doctor will keep a duplicate of all prescriptions written for the duration of the one (1) year collaborative relationship. These prescriptions will be reviewed on a quarterly basis with the collaborating physician.
- C. ~~[deleted]~~ Approximately forty five (45) days prior to the licensure expiration date, the board will send to naturopathic doctors in their first year of practice a reporting form for the collaborative relationship. Each naturopathic doctor will submit with the licensure renewal form, the form signed by the collaborating doctor stating that the conditions of the collaborative relationship have been met.

3. Maine Naturopathic Formulary

~~Based on statute Title 32 Chapter 113-B and rule making:~~

- A. The Board adopts and incorporates by reference into this Chapter the formulary classifications listed in the *American Hospital Formulary Service Pharmacologic Therapeutic Classification System (AHFS) (2025)* issued by the American Society of Health System Pharmacists copyright © 2025~~Controlled substances, as specified in the Controlled Substances Act, may not be prescribed.~~

Copies of the AHFS formulary may be purchased from:

American Society of Health System Pharmacists
4500 East-West Highway, Suite 900
Bethesda, MD 20814
Tel: 1-866-279-0681
CustServ@ashp.org
www.ashp.org

- B. Naturopathic Doctors may prescribe medications, in accordance with their training and practice, from all formulary classifications in the AHFS, except those excluded in Section 3(C) of this chapter~~Psychotropic medications may not be prescribed.~~

- C. Naturopathic doctors may not prescribe medications within the following AHFS formulary classifications: ~~IV medications, except rehydration, may not be administered.~~

- i. Controlled Substances
- ii. Psychotherapeutic Agents
- iii. Antimanic agents except for lithium
- iv. General Anesthetics
- v. Antineoplastic agents except topical antineoplastics and the following subcategories in oral and topical form:
 - a. Antimetabolites
 - b. Natural products.
 - Subcutaneous and IV use of Viscum album is authorized.
 - c. Hormonal agents.
 - d. Targeted/miscellaneous antineoplastics.

~~D. Medications which do not fall under the following categories of medications are listed at the end of this document.~~

~~E. Categories of medications which may be prescribed:~~

- ~~1. Amino Acids: (IV use of amino acids excluded.) All amino acids and amino acid combinations to include but not limited to:~~

Acetylcysteine	Glycine	Lysine	Taurine
Alanine	Histidine	Methionine	Threonine
Arginine	Hydroxyproline	N acetylcysteine	Tryptophan
Aspartic acid	Isoleucine	Phenylalanine	Tyrosine
Carnitine	Leucine	Proline	Valine
Glutamic acid	Levocarnitine	Serine	

~~2. Analgesics: Topical analgesics.~~

~~3. Anesthetics: Local and topical anesthetics.~~

~~4. Antimicrobials: (IV use excluded.) All natural antibiotics means antimicrobial, antifungal and antiprotozoal agents that are naturally occurring substances or are manufactured substances that are substantially identical to those naturally occurring substances. Topical medicines means topical analgesics, anesthetics, antiseptics, scabicides, antifungals and antibacterials.~~

Cephalosporins	Tetracyclines
Macrolides	Topical antivirals
Oral antifungals	Topical fungicides
Oral antiparasitics	Topical and ophthalmic antibacterials
Penicillins and cillins	Topical scabicides and pediculoses

~~5. Antiseptics: Topical antiseptics.~~

6. Barrier Contraceptives

7. Bile Salts and Acids:

Chenodeoxycholic acid Ursodeoxycholic acid
Dehydrocholic acid Ursodiol

8. Botanical Medicines: (IV use of botanical medicines excluded.) All botanical extracts and their derivatives to include but not limited to:

Belladonna Hyoseyamus
Caffeine Podofilox
Chapparal Podophyllin
Cineraria maritima Pseudoephedrine
Colchicine Quinine
Ephedra Salicylates
Ergoloid mesylates Sarapin
Ergotamine tartrate

9. Corticosteroids: Topical corticosteroids.

10. Diagnostic Biologicals: Intradermal and topical preparations to include but not limited to:

Allergens Mumps
Candida Tuberculin (OT, PPD)

11. Enzymes: Oral and topical enzymes including debriding agents to include but not limited to:

Amylase Hyaluronidase
Betaine HCl Lipase
Bromelain Pancreatin
Chymotrypsin Pancrelipase
Dornase alpha Papain
Glutamic HCl Trypsin

12. Fluids: For IV hydration and injection:

Dextrose solutions Saline solution
Dextrose and sodium chloride Sterile water for injection
Lactated Ringers solution

13. Homeopathic medicines: All prescription and nonprescription remedies.

14. Hormones: (IV use of hormones excluded.) Controlled anabolic steroids and growth hormones excluded.

Adrenal hormones
Adrenal cortical extract
DHEA

Hydrocortisone and its salts topical and OTC only
 Mometasone furoate topical only
 Pregnenolone
 Triamcinolone and its salts topical only

Calcitonin

Estrogens—

Conjugated estrogens

Dienestrol

Esterified estrogens

Estradiol

Estrone

Estropipate

Ethinyl estradiol

Ethinodiol diacetate

Mestranol

Insulin Preparations

Oral Contraceptives

Progesterone and Progestins

Desogestrel

Medroxyprogesterone acetate

Norethindrone and salts

Norgestimate

Norgestrel

Progestins

Progesterone

Thyroid hormones

15. Immunizations: All immunizations and associated toxoids.

16. Minerals: (IV use of minerals excluded.) All prescription and nonprescription mineral and trace mineral preparations and their derivatives to include but not limited to:

Auranofin	Potassium compounds
Aurothioglucose	Trace mineral compounds—
Calcium compounds	Boron
Fluoride compounds	Chromium
Gold sodium thiomalate	Molybdenum
Iodine	Selenium
Iron salts	Silicon
Magnesium compounds	Vanadium
Manganese compounds	Zinc
Phosphorus compounds	

17. Vitamins: (IV use of vitamins excluded.) All prescription and nonprescription vitamin preparations and their derivatives to include but not limited to:

Vitamin A	Folic acid
Betacarotene and derivatives	Biotin
Thiamin (Vitamin B1)	Ascorbic acid (Vitamin C)

Riboflavin (Vitamin B2)	Vitamin D
Niacin (Vitamin B3)	Calcitriol
Pantothenic Acid (Vitamin B5)	Cacifiediol
Dexpantenol topical use only	Ergocalciferol
Pyridoxine (Vitamin B6)	Vitamin E
Cyanocobalamin (Vitamin B12)	Vitamin K
Hydroxycobalamin, with or	Menadiol
without intrinsic factor	CoQ10 (Ubiquinone)

18. Specific Medications:-

Ammonium lactate
Anthralin
Caffeine
Cholestyramine
Clavulanate (compounds containing)
Coal tar
Epinephrine (For the treatment of anaphylaxis)
Epinephrine bitartrate (As a component of local anesthetics)
Guaifenesin
Nicotine preparations
Oxygen
Pseudoephedrine
Silver nitrate (As a styptic for topical use)
Sucalfate
Thymus extract
Tretinoin

4. Requirements for IV Therapies

- a. A naturopathic doctor prior to ordering and using IV therapy, must establish a therapeutic relationship with the patient and complete a history and examination of that patient.
- b. A naturopathic doctor who orders and uses IV therapy must maintain a current basic life support certification approved by the Board.
- c. A naturopathic doctor must complete an eight-hour course specific to chelation therapy, offered by the Council on Naturopathic Medical Education (CNME) naturopathic medical college, approved by the American Association of Naturopathic Physicians (AANP), or a course pre-approved by the Board prior to ordering and using Chelation therapy. Chelation therapy is limited to the treatment of heavy metal toxicity.
- d. A naturopathic doctor must complete a 16-hour course specific to ozone therapy, offered by a CNME-approved naturopathic medical college, approved by the AANP, or a course pre-approved by the Board prior to ordering and using IV Ozone therapy.

STATUTORY AUTHORITY: 32 MRSA §12522 (4)

EFFECTIVE DATE:
October 31, 1999

EFFECTIVE DATE:

STATE OF MAINE
DEPARTMENT OF THE SECRETARY OF STATE

Notice of Agency Rulemaking Proposal

AGENCY: 02-502 Department of Professional and Financial Regulation, Board of Complementary Health Care Providers

CHAPTER NUMBER AND RULE TITLE: Chapter 6, Standards Relating to Prescriptive Authorities and Collaborative Relationship for Naturopathic Doctors

TYPE OF RULE: Major Substantive

PROPOSAL FILING NUMBER: [Leave Blank - Assigned by the Department of the Secretary of State]

BRIEF SUMMARY: The rulemaking implements PL 2025, c. 150, directing the formulary subcommittee of the Board of Complementary Health Care Providers to update the formulary for naturopathic doctors. The board proposes to adopt and incorporate by reference the formulary classifications listed in the *American Hospital Formulary Service Pharmacologic Therapeutic Classification System* (AHFS)(2025) issued by the American Society of Health System Pharmacists, copyright © 2025. The rule provides that naturopathic doctors may prescribe medications, in accordance with their training and practice, from all formulary classifications in the AHFS, except those as excluded in the rule. The proposed rule also sets forth the requirements a naturopathic doctor must meet before ordering and using IV therapies. A copy of the proposed rule and the rulemaking forms may be accessed at

<https://www1.maine.gov/pfr/professionallicensing/professions/board-of-complementary-health-care-providers>.

PUBLIC HEARING (*include day, date, time, and location*): Wednesday, February 11, 2026 at 9:00 a.m. EST, Office of Professional and Occupational Regulation, located at 76 Northern Avenue, Gardiner, Maine. Individuals may also attend and participate in the public hearing remotely via Zoom. A link to attend and participate in the hearing remotely will be posted on the Board's webpage in advance of the hearing at

<https://www1.maine.gov/pfr/professionallicensing/professions/board-of-complementary-health-care-providers/home/board-meeting-information>.

COMMENT DEADLINE (*include day, date, and time*): Saturday, February 21, 2026 by 5 p.m. EST.

Comments may be submitted in writing: (1) by e-mail to Kristin Racine at kristin.racine@maine.gov or (2) by mail to the Board of Complementary Health Care Providers, 35 State House Station, Augusta, ME 04333-0035.

CONTACT PERSON FOR THIS FILING (*include Name; Mailing address; Telephone number; Fax number; TTY (Teletypewriter) number; and Email address*):

Penny Vaillancourt, Director, Office of Professional and Occupational Regulation
35 State House Station, Augusta, ME 04333-0035

207-441-7153

207-624-8637

TTY users call Maine Relay 711

Penny.Vaillancourt@maine.gov

CONTACT PERSON FOR SMALL BUSINESS IMPACT STATEMENT (*if different*): N/A

FINANCIAL IMPACT ON MUNICIPALITIES OR COUNTIES (*if any*): N/A

STATUTORY AUTHORITY FOR THIS RULE: 32 M.R.S. §§ 12503, 15222(4)

SUBSTANTIVE STATE OR FEDERAL LAW BEING IMPLEMENTED (if different): PL 2025, c. 150, § 2.

AGENCY WEBSITE: <https://www1.maine.gov/pfr/professionallicensing/professions/board-of-complementary-health-care-providers>

EMAIL ADDRESS FOR OVERALL AGENCY RULEMAKING LIAISON: Penny.Vaillancourt@maine.gov

Choose one of the following:

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ADDITIONAL INFORMATION FOR THE WEB NOTICE

DETAILED SUMMARY:

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STATE OF MAINE
DEPARTMENT OF THE SECRETARY OF STATE

Rulemaking Fact Sheet

(see 5 M.R.S. § 8057-A(1))

Agency: 02-502 Department of Professional and Financial Regulation, Board of Complementary Health Care Providers

Name, Address, Telephone Number, and Email Address of Agency Contact Person:

Penny Vaillancourt, Director, Office of Professional and Occupational Regulation

35 State House Station, Augusta, ME 04333-0035

207-441-7153

207-624-8637

Chapter Number and Rule Title: Chapter 6, Standards Relating to Prescriptive Authorities and Collaborative Relationship for Naturopathic Doctors

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Providers, 35 State House Station, Augusta, ME 04333-0035.

Principal Reason(s) or Purpose for Proposing this Rule [see 5 M.R.S. § 8057-A(1)(A)]:

The rulemaking implements PL 2025, c. 150, directing the formulary subcommittee of the Board of Complementary Health Care Providers to update the formulary for naturopathic doctors.

Is Material Incorporated by Reference into the Rule [see 5 M.R.S. § 8056(2-A)]? Yes

Analysis and Expected Operation of the Rule [see 5 M.R.S. § 8057-A(1)(B) & (D)]:

The board proposes to adopt and incorporate by reference the formulary classifications listed in the *American Hospital Formulary Service Pharmacologic Therapeutic Classification System* (AHFS)(2025) issued by the American Society of Health System Pharmacists, copyright © 2025. The rule provides that naturopathic doctors may prescribe medications, in accordance with their training and practice, from all formulary classifications in the AHFS, except those as excluded in the rule. The proposed rule also sets forth the requirements a naturopathic doctor must meet before ordering and using IV therapies.

Brief Summary of Relevant Information Considered During Development of the Rule (including up to 3 primary sources relied upon)[see 5 M.R.S. §§ 8057-A(1)(E) & 8063-B]:

Expertise of the formulary subcommittee members and members of the Maine Board of Complementary Health Care Providers.

Estimated Fiscal Impact of the Rule [*see* 5 M.R.S. § 8057-A(1)(C)]:

No known fiscal impact.

FOR EXISTING RULES WITH FISCAL IMPACT OF \$1 MILLION OR MORE, ALSO INCLUDE:

Economic Impact, Whether or Not Quantifiable in Monetary Terms [*see* 5 M.R.S. § 8057-A(2)(A)]:

Click or tap here to enter text.

Individuals, Major Interest Groups and Types of Businesses Affected and How They Will Be Affected [*see* 5 M.R.S. § 8057-A(2)(B)]:

Click or tap here to enter text.

Benefits of the Rule [*see* 5 M.R.S. § 8057-A(2)(C)]:

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Note: If necessary, additional pages may be used.