

**10 GCA HEALTH AND SAFETY
CH. 12 MEDICAL PRACTICES**

**CHAPTER 12
MEDICAL PRACTICES**

PART 2

- Article 11. Chiropractic.
- Article 12. Clinical Psychology.
- Article 13. Individual, Marriage and Family Therapy.
- Article 14. Occupational Therapy.
- Article 15. Physical Therapy.
- Article 16. Physician Assistant.
- Article 17. Podiatric Medicine.
- Article 18. Speech Language Pathology.
- Article 19. Veterinary Medicine.
- Article 20. Respiratory Therapy.
- Article 21. Nutritionist/Clinical Dietitian.
- Article 22. Nursing Home Administrator.
- Article 23. Social Work Practice Act.
- Article 24. Anesthesiologist Assistant Act.
- Article 25. The Joaquin (KC) Concepcion II Compassionate Cannabis Use Act of 2013.

**ARTICLE 11
CHIROPRACTIC**

SOURCE: This Article was enacted in its entirety by P.L. 24-329:4 (Aug. 14, 1998).

NOTE: P.L. 24-329:16 added the following uncodified language with respect to codification:

“Section 16. Reserving and Amending Specific Chapters.

Subsequent Chapters after Chapter 23 up to Chapter 30 of Title 10 of the Guam Code Annotated shall be reserved for the Board of Allied Health Examiners. Chapter 9 through Chapter 30 of Article 12 of Title 10 of the of the Guam Code Annotated are hereby amendable through the Administrative Adjudication Law, Rule Making Procedures.”

However, the stated Chapters have long been occupied by other subject matter which has not been repealed. The Compiler is uncertain of the meaning of this Section.

**10 GCA HEALTH AND SAFETY
CH. 12 MEDICAL PRACTICES**

- § 121101. Definitions.
- § 121102. Qualifications for Licensure.
- § 121103. Graduate of Foreign School of Chiropractic.
- § 121104. Exceptions to Licensure Requirements.
- § 121105. Specialty Board Certification.
- § 121106. Use of Diagnostic X-Rays by Licensees.
- § 121107. Determination of the Need for Care.

§ 121101. Definitions.

For purposes of this Article, the following words and phrases have been defined to mean:

(a) Accredited School of Chiropractic means a school of chiropractic accredited by the Council of Chiropractic Education (“CCE”).

(b) Chiropractic means the science, art and philosophy of things natural, the science of locating and removing interference with the transmissions or expression of nerve forces in the human body by the correction of misalignments or subluxation of the articulations and adjacent structures, more especially those of the vertebral column and pelvis, for the purpose of restoring and maintaining health. It shall include the use of all natural agencies to assist in the healing art, such as food, water, heat, cold, electricity and mechanical appliances. The use of X-ray procedures shall be limited to skeletal X-rays and shall exclude the therapeutic use of X-radiation, the use of contrast studies that introduce dyes, isotopes or similar contrast media through the skin, orally, via cathertization or retrograde into any body cavity. It shall exclude operative surgery, prescription, or use of drugs or medicine, and laboratory procedures involved in the penetration of human tissues.

(c) Doctor of Chiropractic means a person who has completed training in chiropractic and received a Doctor of Chiropractic (“D.C.”) degree from a school accredited by the CCE.

**10 GCA HEALTH AND SAFETY
CH. 12 MEDICAL PRACTICES**

(d) Internship means a training program in the United States approved by the CCE.

(e) Licensed chiropractor means a person who is validly and currently licensed to practice chiropractic on Guam.

(f) Practice of Chiropractic means to represent directly or indirectly, publicly or privately, an ability or willingness to provide for the treatment by means of manipulation of the spine and prevention of human illness in accordance with the principles of chiropractic. Any person who is not licensed to practice chiropractic under these rules and regulations shall not hold out to the public, advertise, declare, represent or in any way proclaim to practice chiropractic, or use any titles, words, letters, signs, devices, techniques, maneuvers or modalities that could represent that he or she is authorized to prescribe or engage in the area of chiropractic or spinal manipulation, as defined under these rules and regulations.

(g) Spinal manipulation means a procedure that utilizes a carefully graded thrust, either manually or mechanically, that is applied across the spinal apophyseal or sacroiliac joints at the end of passive range of motion into the paraphysiological range of motion, often causing the sudden liberation of synovial gases characterized by an audible popping or cracking sound for the purpose of restoring a joint to its normal alignment and mobility and improving and maintaining the function of the nervous system.

§ 121102. Qualifications for Licensure.

Any person desiring a license to practice chiropractic on Guam shall make a written application to the Board on application forms provided by the Board. The applicant must provide proof of the following:

(a) graduation from a school or college of chiropractic, accredited by the CCE;

(b) completion at least one (1) year of an internship training program satisfactorily;

**10 GCA HEALTH AND SAFETY
CH. 12 MEDICAL PRACTICES**

- (c) pass all exams currently given by the National Board of Chiropractic Examiners;
- (d) pass all other exams as required by the Board; and
- (e) a current Basic Cardiac Life Support Certification (“BCLS”), whether the license is new or being renewed.

§ 121103. Graduate of Foreign School of Chiropractic.

Upon recommendation of the Board, a person who is a graduate of a foreign school of chiropractic may be issued a license; provided, such graduate can furnish proof of each of the following:

- (a) completion of a minimum of three (3) years pre-professional training at a college or university accredited by the appropriate accrediting body of that foreign country; fifty percent (50%) of this training must have been in the basic sciences;
- (b) graduation from a school of chiropractic accredited or approved by the country in which it is located (Curriculum at the school of chiropractic must have a minimum period of eight (8) semesters, or the equivalent of not less than four thousand two hundred (4,200) credit hours; provided, that such accrediting agency has a reciprocal agreement with the CCE.); and
- (c) pass the National Board of Chiropractic Examiners qualifying examination.

§ 121104. Exceptions to Licensure Requirements.

This Article shall not be construed to prohibit a person who is a regular student in an accredited school of chiropractic from performing duties or actions assigned by the student’s instructors, or working under the direct supervision of a licensed chiropractor.

§ 121105. Specialty Board Certification.

The Board recognizes only those national specialty boards which are recognized by the American Chiropractic Association.

**10 GCA HEALTH AND SAFETY
CH. 12 MEDICAL PRACTICES**

§ 121106. Use of Diagnostic X-Rays by Licensees.

(a) All licensees must comply with rules and regulations established by the Guam Board of Allied Health Examiners and the Department of Public Health and Social Services governing the use of X-rays in the healing arts.

(b) Licensees shall be allowed to prescribe X-ray procedures, and interpret and analyze the resultant radiographic images. Any patient who is administered an X-ray for chiropractic reasons, however, must first be examined by a chiropractor licensed on Guam to determine the need for the X-ray.

(c) Licensees are limited to the following uses of X-rays:

(1) no licensee shall use X-ray procedures that require the penetration of human tissues or cavities using needles, wires, catheters or syringes to introduce dyes, isotopes or any type of contrast media, orally or retrograde;

(2) no licensee shall use X-rays for therapeutic use; and

(3) no licensee shall advertise free or discounted X-ray services, or indiscriminately use X-ray practice for unethical purposes.

§ 121107. Determination of the Need for Care.

Determination of a patient's need for care shall be within the sole discretion of a licensed chiropractor, and is considered an inherent part of the scope of practice of the licensee's discipline.

**ARTICLE 12
CLINICAL PSYCHOLOGY**

- § 121201. Definitions.
- § 121202. Qualifications for Licensure.
- § 121203. Graduates of Foreign Schools.
- § 121204. Exceptions to Licensure Requirements.
- § 121205. Prescriptive Authority.

**10 GCA HEALTH AND SAFETY
CH. 12 MEDICAL PRACTICES**

§ 121201. Definitions.

For purposes of this Article, the following words and phrases have been defined to mean:

(a) Clinical Psychologist means a person who has received training in clinical psychology from an accredited school in the U.S. and has completed the internship requirements.

(1) Training means a doctoral level training in clinical psychology at an accredited institution of higher learning in the U.S. The doctoral level training in clinical psychology shall require the applicant to provide evidence of having satisfactorily completed education in the following areas:

(A) biological basis of behavior, physiological psychology, comparative psychology, neuropsychology, sensation, perception and psychopharmacology;

(B) cognitive-affective basis of behavior, learning, thinking, motivation and emotion;

(C) social basis of behavior, social psychology, group process, organizational and systems theories;

(D) individual differences, personality theory, human development and abnormal psychology; and

(E) research design and methodology, statistics and psychometrics.

(2) Accredited means that the college or the university has met the standards as established by the Middle States Association of Colleges and Secondary Schools, the New England Association of Colleges and Secondary Schools, the North Central Association of Schools and Colleges, the Western Association of Schools and Colleges, or by other accrediting agencies.

**10 GCA HEALTH AND SAFETY
CH. 12 MEDICAL PRACTICES**

(3) Internship means a training program that is supervised by a doctoral level, licensed clinical psychologist, or approved by the American Psychological Association and can be demonstrated to be of high quality.

(b) Clinical Psychology means a subspecialty in psychology which is primarily concerned with assessing and alleviating emotional, mental and behavioral disorders in a hospital, institution or other clinical setting.

(c) Fee means any charge, monetary or otherwise, whether paid directly, or on a prepaid capitation basis, by a third party, or a charge assessed by a facility for services rendered.

(d) Foreign School means any college or division of a university in a country other than the United States that offers the degree of doctor in clinical psychology.

(e) License means that the person named on the certificate has been found qualified to engage in the practice of clinical psychology, and has been awarded a license by the Board to practice clinical psychology.

(f) Practice of Clinical Psychology means:

(1) a person who represents himself to be a clinical psychologist when he holds himself out to the public by any title or description of services incorporating the words "clinical psychology," "clinical psychologist," or offers to render or renders services as defined below to individuals, groups, organizations or the public;

(2) the rendering to individuals, groups, organizations or the public any psychological service involving the application of principles, methods and procedures of understanding, predicting and influencing behavior, such as the principles pertaining to learning, perception, motivation, thinking, emotions and inter-personal relationships; the methods and procedures of interviewing, counseling and

**10 GCA HEALTH AND SAFETY
CH. 12 MEDICAL PRACTICES**

psychotherapy; constructing, administering and interpreting tests of mental abilities, aptitudes, interests, attitudes, personality characteristics, emotion and motivation, and of assessing public opinion;

(3) the application of said principles and methods, including, but not limited to, diagnosis, prevention and amelioration of adjustment problems, and emotional and mental disorders of individuals and groups, hypnosis, educational and vocational counseling, personnel selection and management, the evaluation and planning for effective work and learning situations, advertising and market research and the resolution of interpersonal and social conflicts; or

(4) psychotherapy by the use of learning, conditioning methods and emotional reactions, in a professional relationship, to assist a person or persons to modify feelings, attitudes and behavior which are intellectually, socially or emotionally mal-adjustive or ineffectual.

§ 121202. Qualifications for Licensure.

(a) The applicant must have a doctorate in clinical psychology from an accredited college or university of the U.S.

(b) The applicant must have completed two (2) years of internship, of which at least one (1) year must be after receiving the doctorate.

(c) The applicant must have successfully completed the Examination for Professional Practice in Psychology administered by a state, territory or district of the United States.

§ 121203. Graduates of Foreign Schools.

Foreign clinical psychologists who meet all the requirements as established by the rules and regulations of this Article, and are found to be qualified by the Board, may be issued a license to practice clinical psychology on Guam.

§ 121204. Exceptions to Licensure Requirements.

**10 GCA HEALTH AND SAFETY
CH. 12 MEDICAL PRACTICES**

No person may practice clinical psychology on Guam who is not licensed as a clinical psychologist by the Board. However, these rules and regulations shall not be construed to prohibit the following:

(a) an employee of a Federal government agency performing his official duties;

(b) a clinical psychologist regularly licensed in another state of the U.S. consulting with a licensed clinical psychologist on Guam; or

(c) a person who is a regular student in clinical psychology or a related field performing duties or functions assigned by his instructors, or who is working under the direct supervision of a licensed, clinical psychologist.

2018 NOTE: Subsection/subitem designations altered pursuant to authority granted by 1 GCA § 1606.

§ 121205. Prescriptive Authority.

A clinical psychologist may administer, prescribe and dispense any licensed drug in accordance with 10 GCA § 12827 and any other rules and regulation established by the Board.

**ARTICLE 13
INDIVIDUAL, MARRIAGE AND FAMILY THERAPY**

SOURCE: Entire Article added by P.L. 24-329:6 (Aug. 14, 1998). Repealed by P.L. 33-154:7 (May 17, 2016), and reenacted “with Public Law 33-054, as amended pursuant to” P.L. 33-154.

2016 NOTE: Sections 1 through 21 of P.L. 32-054 (July 5, 2013) set forth the educational and professional requirements for licensed professional counselors, licensed mental health counselors, and marriage and family therapists. However, this public law did not repeal and reenact the provisions as a new Article 13 of Chapter 12 of Title 10 GCA; rather, P.L. 32-054:23 instructed that the provisions be published “as changes to the Allied Health regulations.” In P.L. 33-154:1 (May 17, 2016), the Legislature stated its intent “to rectify this situation by repealing §§ 121301 through 121305 of Article 13, and reenact Article 13 with Public Law 32-054, as amended pursuant to this Act.” Accordingly,

**10 GCA HEALTH AND SAFETY
CH. 12 MEDICAL PRACTICES**

pursuant to P.L. 33-154, Article 13 was repealed and reenacted with the provisions of P.L. 32-054, as amended by P.L. 33-154.

- § 121301. Licensed Professional Counselor.
- § 121302. Licensed Mental Health Counselor.
- § 121303. Marriage and Family Therapist.
- § 121304. Scope of Practice. [Repealed]
- § 121305. Privileged Communication. [Repealed]

§ 121301. Licensed Professional Counselor.

(a) Definitions. In this Article:

(1) *Accredited educational institution* shall mean any educational institution which grants a doctoral or master's degree and is accredited by a regional accrediting body in the United States or by another accrediting or recognized approval agency recognized by the Board, including state, national or foreign approving agencies.

(2) *Clinical supervision* shall mean the supervision of no more than six (6) persons at the same time who are acquiring and completing clinical experience in accordance with Guam law. Clinical supervision is that aspect of instructional supervision which draws upon data from direct firsthand observation of actual teaching, or other professional events, and involves face-to-face and other associated interactions between the observer(s) and the person(s) observed in the course of analyzing the observed professional behaviors and activities and seeking to define and/or develop next steps toward improved performance. This includes, but is not limited to the following: case consultation, the assessment and diagnosis of presenting problems, development and implementation of treatment plans, and the evaluation of the course of treatment.

(3) *Consultant* shall mean a credentialed professional who provides expert service, advice, or makes recommendations for a fee or pro bono, by phone, internet, in person, or by other means to an individual licensed in Guam as a Licensed Professional Counselor for the purposes of maximizing therapeutic benefit for a client.

**10 GCA HEALTH AND SAFETY
CH. 12 MEDICAL PRACTICES**

(4) *Licensed Professional Counselor* shall mean a person licensed in Guam to practice Professional Counseling as defined in these rules and regulations.

(5) *National Counselor Examination for Licensure and Certification (NCE)* shall mean the examination compiled by the National Board for Certified Counselors (NBCC).

(6) *Professional Counseling* shall mean the use of psychotherapeutic techniques in the delivery of services to individuals and groups in order to diagnose and treat mental, emotional and nervous disorders, whether these are behavioral, cognitive or affective. Professional Counseling includes, but is not limited to:

(A) assessment and diagnosis of presenting problems through inquiry, observation, evaluation and integration of diagnostic information;

(B) designing and developing treatment plans by incorporating and integrating recognized psychotherapeutic theories in establishing treatment goals and interventions collaboratively with clients; and

(C) implementing and evaluating the course of treatment by incorporating psychotherapeutic theories to assist individuals and groups.

(7) *Counseling* shall mean a specialized, formal interaction between a Licensed Professional Counselor, or other Mental Health Professional, and a client in which a therapeutic relationship is established to help resolve symptoms of mental disorders, psychosocial stress, family problems or other difficulties which is designed to enhance problem solving skills and coping abilities as identified in a treatment plan.

(8) *Individual Counseling* shall mean planned interventions to assist a client to enlarge competencies, and increase problem solving skills and coping abilities according to identified treatment goals.

**10 GCA HEALTH AND SAFETY
CH. 12 MEDICAL PRACTICES**

(9) *Group Counseling* shall mean the gathering together of unrelated individuals at the direction of a group facilitator or counselor for a therapeutic purpose.

(10) A *Mental Health Intern License* designation shall mean a person who is seeking licensure and is acquiring the three thousand (3,000) hours of post-graduate clinical experience in accordance with this Article for purposes of acquiring and ultimately meeting the requisite requirements for full licensure as an Individual, Marriage and Family Therapist (IMFT), Certified Professional Counselor (CPC), Licensed Clinical Social Worker (LCSW), Licensed Mental Health Counselor (LMHC), Licensed Professional Counselor (LPC), Marriage and Family Therapist (MFT), or other license deemed by the Board to be substantially equivalent to these professions, who is licensed and authorized to provide such supervision in the United States, its territories or a foreign country determined to be acceptable on a case-by-case basis by the Board. To be eligible for the intern license, the applicant shall have completed all of the other criteria required for qualification for his or her respective field for licensure pursuant to § 121301(b)(1)(A), § 121302(a), § 121302(b) or § 121303(b), respectively, of this Article.

(b) Qualifications for Licensure.

(1) The provisions of this Act shall take effect two years after enactment. At that time, the Board shall issue a license as a Licensed Professional Counselor to an applicant who:

(A) has a doctorate or master's degree from an accredited educational institution with a program in psychology, counseling, marriage and family therapy, clinical social work or other psycho-therapeutic discipline. The applicant must be able to show documentation of:

(i) a minimum of seventy-two quarter hours or forty-eight semester hours of graduate studies (as suggested by the Counsel for Accreditation of

**10 GCA HEALTH AND SAFETY
CH. 12 MEDICAL PRACTICES**

Counseling and Related Educational Programs [CACREP]) that:

(ii) includes course content in the following areas:

(aa) Human Growth and Development;

(bb) Social/Cultural Foundations;

(cc) Counseling Theories and Techniques;

(dd) Group Work;

(ee) Career and Lifestyle Development;

(ff) Appraisal (test and measurements for individuals and groups);

(gg) Research and Program Evaluation;

(hh) Professional Orientation (to counseling); and

(ii) Professional Ethics; and

(iii) includes a practicum, consisting of a minimum of one hundred hours; and

(iv) includes an internship, consisting of a minimum of six hundred hours;

(B) has completed a minimum of three thousand hours of documented post-graduate clinical experience and one hundred hours of supervision by a licensed Individual, Marriage and Family Therapist (IMFT), Certified Professional Counselor (CPC), Licensed Clinical Social Worker (LCSW), Licensed Mental Health Counselor (LMHC), Licensed Professional Counselor (LPC), Marriage and Family Therapist (MFT), Clinical Psychologist, Psychiatrist or other license deemed by the Board to be substantially equivalent to these professions, who is licensed and authorized to provide such supervision in the United States, its territories or a foreign country determined to

**10 GCA HEALTH AND SAFETY
CH. 12 MEDICAL PRACTICES**

be acceptable on a case by case basis by the Board. The three thousand hours of post graduate clinical experience may include, but is not limited to: face-to-face treatment of clients, keeping clinical notes, supervision, treatment team meetings, consultation, education, treatment planning, observation and other activities generally recognized to be part of clinical practice. A minimum of one thousand five hundred hours of the three thousand hours of post-graduate clinical experience must be in the face-to-face treatment of individuals or groups;

(C) has successfully passed the National Counselor Examination for Licensure and Certification (NCE) which has been conducted in a manner approved by the National Board for Certified Counselors (NBCC), and

(D) has documented completion of training by a professional association or educational institution and approved by the Board that consists of at least six hours of professional ethics, three hours of culturally competent counseling practices with Micronesian communities in Guam and one hour of mandated reporting.

(2) For an individual who has not engaged in post-graduate experience or cannot document a minimum of three thousand hours of post-graduate clinical experience under the supervision of a licensed IMFT, CPC, LCSW, LMHC, LPC, MFT, Clinical Psychologist, Psychiatrist or other license deemed by the Board to be substantially equivalent to these professions, who is licensed and authorized to provide such supervision in the United States, its territories or a foreign country determined to be acceptable on a case by case basis by the Board; such individual may practice under an internship program approved by the Board prior to engagement in that program in order to gain that supervision in Guam. The three thousand hour internship program may include, but is not limited to: face-to-face treatment of clients, keeping clinical

10 GCA HEALTH AND SAFETY
CH. 12 MEDICAL PRACTICES

notes, supervision, treatment team meetings, consultation, education, treatment planning, observation and other activities generally recognized to be part of clinical practice. A minimum of one thousand five hundred hours of the three thousand hours must be in the face-to-face treatment of individuals and groups, and a minimum of one hundred hours must be supervision. To provide such supervision in Guam, a person must be a licensed Individual Marriage and Family Therapist, Licensed Professional Counselor, Marriage and Family Therapist or Licensed Clinical Social Worker licensed in Guam who has held a license for a minimum of five years; or a Clinical Psychologist or Psychiatrist licensed in Guam who has held a license for a minimum of three years.

(3) Individuals who hold a current, valid license issued by a state of the United States, its territories or foreign country, approved by the Board on a case-by-case basis as a Certified Professional Counselor, Licensed Clinical Counselor of Mental Health, Licensed Clinical Mental Health Counselor, Licensed Mental Health Counselor, Licensed Mental Health Practitioner, Licensed Professional Counselor of Mental Health, Professional Counselor, Marriage and Family Therapist, or other license deemed by the Board to be substantially equivalent to the Guam License for Licensed Professional Counselor, shall be eligible for the Guam license for a Licensed Professional Counselor.

(4) (A) The Board *shall* issue a “Professional Counselor Intern License” and number to an applicant who has satisfied all of the applicable requisite provisions of qualifications for licensure pursuant to Subsection (1)(A) of this Section, and who is acquiring the three thousand (3,000) hours of post-graduate clinical experience required for licensure, as provided pursuant to Subsection (1)(B) of this Section.

(B) The Board *shall* provide the application form to be completed by an applicant for a Mental Health Intern License.

**10 GCA HEALTH AND SAFETY
CH. 12 MEDICAL PRACTICES**

(c) Exceptions to Licensure.

(1) No person may practice professional counseling in Guam who is not licensed as a Licensed Professional Counselor by the Board, unless such practice is approved by the Board or other Guam licensing Board. However, this Article does not prohibit:

(A) an employee of the Federal government from performing official duties on federal property;

(B) an LCSW, PC, LPC, CPC, LMHC, MFT, Psychologist or Psychiatrist, currently licensed in another jurisdiction of the United States from consulting with or advising a Licensed Professional Counselor in Guam. However, the consultant, if not licensed in Guam may not provide services to a client directly; or

(C) an active student in good standing as a requirement of a university program for completion of a degree, or a person who is engaged in the completion of the requirement of three thousand hours of post-graduate clinical experience to become licensed as an LPC, under the supervision of a Guam licensed IMFT, LPC, LMHC, MFT, LCSW, clinical psychologist or psychiatrist, from performing assigned duties.

(2) Nothing herein prohibits qualified members of other professional groups, such as clinical psychologists, school psychologists, counseling psychologists, social workers or ordained clergy from doing work of a counseling nature consistent with the training and code of ethics for their respective professions; provided, that they do not hold themselves out to the public as a Professional Counselor.

(d) Scope of Practice. Licensed Professional Counselors use psychotherapeutic techniques to prevent, assess, evaluate, diagnose, develop treatment goals, plans and objectives, treat and evaluate outcomes for mental, emotional or behavioral disorders and associated distresses that interfere with mental health.

**10 GCA HEALTH AND SAFETY
CH. 12 MEDICAL PRACTICES**

(e) Client Confidentiality. Client Confidentiality is defined and regulated as set forth in the Health Insurance Portability and Accountability Act (HIPAA), the ethical rules of the American Counseling Association (ACA), Guam law, and revisions thereof. Breach of client confidentiality, except as provided for by HIPAA, the ACA, or Guam law shall be considered unprofessional conduct and may be grounds for revocation or suspension of the license.

(f) Continuing Education Requirements. A licensee shall complete a total of forty contact hours or four Continuing Education Units directly related to the practice of Professional Counseling within each two year licensure period to qualify for renewal of licensure.

(g) Grandfather Provision. All licensees who hold a current, valid license as an Individual, Marriage, and Family Therapist issued by the Guam Board of Allied Health Examiners at the time this Act becomes law shall be deemed to hold a current, valid license as a Licensed Professional Counselor.

SOURCE: Added by P.L. 24-329:6 (Aug. 14, 1998). Repealed by P.L. 33-154:7 (May 17, 2016). Reenacted with P.L. 32-054 (July 5, 2013) as amended, pursuant to P.L. 33-154:1, and codified as § 121301 by the Compiler. Subsection (b)(4) added by P.L. 33-154:4.

2016 NOTE: This section was originally entitled “*Definitions*,” as added by P.L. 24-329:6 (Aug. 14, 1998). Subsection/subitem designations were altered/added to adhere to the Compiler’s general codification and alpha-numeric schemes pursuant to 1 GCA § 1606. Internal references were altered as part of the codification process.

§ 121302. Licensed Mental Health Counselor.

(a) Definitions. In this Article:

(1) *Accredited educational institution shall* mean any educational institution which grants a doctoral or master’s degree and is accredited by a regional accrediting body in the United States or by another accrediting or recognized approval agency recognized by the Board including state, national or foreign approving agencies.

(2) *Clinical supervision shall* mean the supervision of no more than six persons at the same time who are

**10 GCA HEALTH AND SAFETY
CH. 12 MEDICAL PRACTICES**

acquiring and completing clinical experience in accordance with Guam law. Clinical supervision is that aspect of instructional supervision which draws upon data from direct firsthand observation of actual teaching, or other professional events, and involves face-to-face and other associated interactions between the observer(s) and the person(s) observed in the course of analyzing the observed professional behaviors and activities and seeking to define and/or develop next steps toward improved performance. This includes, but is *not* limited to the following: case consultation, the assessment and diagnosis of presenting problems, development and implementation of treatment plans and the evaluation of the course of treatment.

(3) *Consultant shall* mean a credentialed professional who provides expert service, advice, or makes recommendations for a fee or pro bono, by phone, internet, in person, or by other means to an individual licensed in Guam as a Licensed Mental Health Counselor for the purposes of maximizing therapeutic benefit for a client.

(4) *Licensed Mental Health Counselor shall* mean a person licensed in Guam to practice Mental Health Counseling as defined in these rules and regulations.

(5) *National Clinical Mental Health Counselor Examination (NCMHCE) shall* mean the examination of that name compiled by the National Board for Certified Counselors (NBCC).

(6) *National Counselor Examination for Licensure and Certification (NCE) shall* mean the examination of that name compiled by the National Board for Certified Counselors (NBCC).

(7) *Mental Health Counseling shall* mean the provision of services to individuals, couples, families, and groups. This includes the application of theories, principles, and methods of counseling and psychotherapy to define goals and develop plans of action aimed toward the prevention, treatment, and resolution of mental and emotional dysfunction and intra- or interpersonal difficulties. The

**10 GCA HEALTH AND SAFETY
CH. 12 MEDICAL PRACTICES**

practice of mental health counseling includes, but is *not* limited to, the assessment, diagnosis, and non-medical treatment of mental and emotional disorders, the application of psycho-educational techniques and measures aimed at the prevention of such disorders, and consultation to individuals, couples, families, groups, organizations, and communities.

(8) *Counseling shall* mean a specialized, formal interaction between a Licensed Mental Health Counselor or other Mental Health Professional and a client in which a therapeutic relationship is established to help resolve symptoms of mental disorders, psychosocial stress, family problems or other difficulties, which is designed to enhance problem solving skills and coping abilities as identified in a treatment plan.

(9) *Individual Counseling shall* mean planned interventions to assist a client to enlarge competencies, and increase problem solving skills and coping abilities according to identified treatment goals.

(10) *Couples therapy shall* mean therapeutic interventions with married or unmarried couples to resolve problems and conflicts in their relationship.

(11) *Family therapy shall* mean systematic interventions for the purpose of enabling family members to understand the behavior of individuals in relation to the ongoing operations of the family group.

(12) *Group Counseling shall* mean the gathering together of unrelated individuals at the direction of a group facilitator or counselor for a therapeutic purpose.

(b) Qualifications for Licensure.

(1) The provisions of this Act *shall* take effect two years after enactment. At that time, the Board *shall* issue a license as a Licensed Mental Health Counselor to an applicant who:

(A) has a doctorate or master's degree from an accredited educational institution with a program in

**10 GCA HEALTH AND SAFETY
CH. 12 MEDICAL PRACTICES**

psychology, counseling, marriage and family therapy, clinical social work or other psycho-therapeutic discipline. The applicant must be able to show documentation of:

(i) a minimum of ninety quarter hours or sixty semester hours of graduate studies (as recommended by the Counsel for Accreditation of Counseling and Related Educational Programs [CACREP]) that:

(ii) includes course content in the following areas:

(aa) Foundations;

(bb) Counseling, Prevention, and Intervention;

(cc) Diversity and Advocacy;

(dd) Assessment;

(ee) Research and Evaluation; and

(ff) Diagnosis;

(iii) includes a practicum, consisting of a minimum of one hundred hours; and

(iv) includes an internship, consisting of a minimum of six hundred hours;

(B) has completed a minimum of three thousand hours of documented post-graduate clinical experience and one hundred hours of supervision by a licensed Individual, Marriage and Family Therapist (IMFT), Certified Professional Counselor (CPC), Licensed Clinical Social Worker (LCSW), Licensed Mental Health Counselor (LMHC), Licensed Professional Counselor (LPC), Marriage and Family Therapist (MFT), Clinical Psychologist, Psychiatrist or other license deemed by the Board to be substantially equivalent to these professions, who is licensed and authorized to provide such supervision in the United

**10 GCA HEALTH AND SAFETY
CH. 12 MEDICAL PRACTICES**

States, its territories or a foreign country determined to be acceptable on a case by case basis by the Board. The three thousand hours of post-graduate clinical experience may include, but is not limited to; face-to-face treatment of clients, keeping clinical notes, supervision, treatment team meetings, consultation, education, treatment planning, observation and other activities generally recognized to be part of clinical practice. A minimum of one thousand five hundred hours of the three thousand hours of post-graduate clinical experience must be in face-to-face treatment of individuals or groups;

(C) has successfully passed the National Counselor Examination for Licensure and Certification (NCE) and the National Clinical Mental Health Counselor Exam (NCMHCE) which have been conducted in a manner approved by the National Board for Certified Counselors (NBCC); and

(D) has documented completion of training by a professional association or educational institution and approved by the Board that consists of at least six hours of professional ethics, three hours of culturally competent counseling practices with Micronesian communities in Guam and one hour of mandated reporting.

(2) For an individual who has *not* engaged in post-graduate experience or cannot document a minimum of three thousand hours of post-graduate clinical experience under the supervision of a licensed IMFT, CPC, LCSW, LMHC, LPC, MFT, Clinical Psychologist, Psychiatrist or other license deemed by the Board to be substantially equivalent to these professions, who is licensed and authorized to provide such supervision in the United States, its territories or a foreign country determined to be acceptable on a case by case basis by the Board; such individual may practice under an internship program approved by the Board prior to engagement in that program in order to gain that supervision in Guam. The three

**10 GCA HEALTH AND SAFETY
CH. 12 MEDICAL PRACTICES**

thousand hour internship program may include, but is *not* limited to: face-to-face treatment of clients, keeping clinical notes, supervision, treatment team meetings, consultation, education, treatment planning, observation and other activities generally recognized to be part of clinical practice. A minimum of one thousand five hundred hours of the three thousand hours must be in face-to-face treatment of individuals and groups, and a minimum of one hundred hours must be supervision. To provide such supervision in Guam, a person must be a licensed Individual Marriage and Family Therapist, Licensed Professional Counselor, Marriage and Family Therapist or Licensed Clinical Social Worker licensed in Guam who has held a license for a minimum of five years with experience in clinical work which requires diagnosis and treatment planning; or a Clinical Psychologist or Psychiatrist licensed in Guam who has held a license for a minimum of three years with experience in clinical work which requires diagnosis and treatment planning.

(3) Individuals who hold a current, valid license in a state of the United States, its territories or a foreign country approved by the Board on a case-by-case basis as a Licensed Clinical Counselor of Mental Health, Licensed Clinical Mental Health Counselor, Licensed Mental Health Counselor, Licensed Mental Health Practitioner, Licensed Professional Counselor of Mental Health, or other license deemed by the Board to be substantially equivalent to the Guam license for a Licensed Mental Health Counselor, and who has passed the National Clinical Mental Health Counselor Exam (NCMHCE) in a manner approved by the National Board for Certified Counselors (NBCC) shall be eligible for the Guam license for a Licensed Mental Health Counselor.

(4) (A) The Board shall issue a "Mental Health Counselor Intern License" and number to an applicant who has satisfied all of the applicable requisite provisions of qualifications for licensure pursuant to Subsection (1)(A) of this Section, and who is acquiring the three thousand (3,000) hours of post-graduate

**10 GCA HEALTH AND SAFETY
CH. 12 MEDICAL PRACTICES**

clinical experience required for licensure, as provided pursuant to Subsection (1)(B) of this Section.

(B) The Board shall provide the application form to be completed by an applicant for a Mental Health Intern License.

(c) Exceptions to Licensure.

(1) No person may practice Mental Health Counseling in Guam who is *not* licensed as a Licensed Mental Health Counselor by the Board, *unless* such practice is approved by the Board or other Guam licensing Board. However, this Article *does not* prohibit:

(A) an employee of the Federal government from performing official duties on federal property;

(B) an LCSW, PC, LPC, CPC, LMHC, MFT, Psychologist or Psychiatrist, currently licensed in another jurisdiction of the United States from consulting with or advising a Licensed Mental Health Counselor in Guam. However, the consultant, if *not* licensed in Guam *may not* provide services to a client directly;

(C) an active student in good standing, as a requirement of a university program for completion of a degree or a person who is engaged in the completion of the requirement of three thousand hours of post-graduate clinical experience to become licensed as an LMHC, under the supervision of a Guam licensed IMFT, LPC, LMHC, MFT, LCSW, clinical psychologist or psychiatrist from performing assigned duties.

(2) Nothing herein prohibits qualified members of other professional groups, such as clinical psychologists, school psychologists, counseling psychologists, social workers or ordained clergy from doing work of a counseling nature consistent with their training and code of ethics for their respective professions; *provided*, that they *do not* hold themselves out to the public as a Mental Health Counselor.

**10 GCA HEALTH AND SAFETY
CH. 12 MEDICAL PRACTICES**

(d) Scope of Practice. Licensed Mental Health Counselors are qualified to provide services to individuals, couples, families, and groups. They apply theories, principles, and methods of counseling and psychotherapy to define goals and develop plans of action aimed toward the prevention, treatment, and resolution of mental and emotional dysfunction and intra- or interpersonal difficulties. The practice of mental health counseling includes, but is *not* limited to, the assessment, diagnosis, and non-medical treatment of mental and emotional disorders, the application of psychoeducational techniques and measures aimed at the prevention of such disorders, and consultation to individuals, couples, families, groups, organizations, and communities.

(e) Client Confidentiality. Client Confidentiality is defined and regulated as set forth in the Health Insurance Portability and Accountability Act (HIPAA), the ethical rules of the American Counseling Association (ACA), Guam law, and revisions thereof. Breach of client confidentiality except as provided for by HIPAA, the ACA, or Guam law *shall* be considered unprofessional conduct and may be grounds for revocation or suspension of the license.

(f) Continuing Education Requirements. A licensee *shall* complete a total of forty contact hours or four Continuing Education Units directly related to the practice of Mental Health Counseling within each two year licensure period to qualify for renewal of licensure.

(g) Grandfather Provision. All licensees who hold a current, valid license as an Individual, Marriage and Family Therapist issued by the Guam Board of Allied Health Examiners or as a Licensed Professional Counselor issued by a Guam Board, within eighteen (18) months of the time this Article is enacted into law, or by August 31, 2017, whichever is later, *shall* be eligible to apply for a license as a Licensed Mental Health Counselor. They may be granted a license as a Licensed Mental Health Counselor if:

(1) they can pass the NCMHCE developed by the NBCC (they shall be deemed eligible by the Board to take the test); or

**10 GCA HEALTH AND SAFETY
CH. 12 MEDICAL PRACTICES**

(2) they can document one thousand (1,000) hours of post Masters clinical work which requires diagnosis and treatment planning; or

(3) they have held a license as an Individual, Marriage and Family Therapist in Guam, a Licensed Professional Counselor in Guam, or any combination of the two (2) for a minimum of six (6) years.

SOURCE: Added by P.L. 24-329:6 (Aug. 14, 1998). Repealed by P.L. 33-154:7 (May 17, 2016). Reenacted with P.L. 32-054 (July 5, 2013) as amended, pursuant to P.L. 33-154:1, and codified as § 121302 by the Compiler. Subsection (b)(4) added by P.L. 33-154:5 and subsection (g) amended by P.L. 33-154:8.

2016 NOTE: This section was originally entitled "*Qualifications for Licensure*," as added by P.L. 24-329:6 (Aug. 14, 1998). Subsection/subitem designations were altered/added to adhere to the Compiler's general codification and alpha-numeric schemes pursuant to 1 GCA § 1606. Internal references were altered as part of the codification process.

§ 121303. Marriage and Family Therapist.

(a) Definitions. In this Article:

(1) Accredited educational institution shall mean any educational institution which grants a doctoral or master's degree and is accredited by a regional accrediting body in the United States or by another accrediting or recognized approval agency recognized by the Board including state, national or foreign approving agencies.

(2) Clinical supervision shall mean the supervision of no more than six (6) persons at the same time who are acquiring and completing clinical experience in accordance with Guam law. Clinical supervision is that aspect of instructional supervision which draws upon data from direct firsthand observation of actual teaching, or other professional events, and involves face-to-face and other associated interactions between the observer(s) and the person(s) observed in the course of analyzing the observed professional behaviors and activities and seeking to define and/or develop next steps toward improved performance. This includes, but is not limited to the following: case

**10 GCA HEALTH AND SAFETY
CH. 12 MEDICAL PRACTICES**

consultation, the assessment and diagnosis of presenting problems, development and implementation of treatment plans, and the evaluation of the course of treatment.

(3) Consultant shall mean a credentialed professional who provides expert service, advice, or makes recommendations for a fee or pro bono, by phone, internet, in person, or by other means to an individual licensed on Guam as a Marriage and Family Therapist for the purposes of maximizing therapeutic benefit for a client.

(4) Family shall mean all forms of households that consist of members with emotional bonds and mutual obligations that define themselves as families. "Family" as used here includes, but is not limited to, nuclear families, once married couples with children, a single parent with children, non-married couples with children, blended families, remarried couples, and couples without children.

(5) Marriage and Family Therapy shall mean the application of psychotherapeutic techniques in the delivery of services to individuals, couples, families, or groups in order to diagnose and treat mental, emotional, and nervous disorders, whether these are behavioral, cognitive, or affective, within the context of the individual's relationships. Marriage and Family Therapy includes, but is not limited to:

(A) assessment and diagnosis of presenting problems through inquiry, observation, evaluation, and integration of diagnostic information;

(B) designing and developing treatment plans by incorporating and integrating recognized psychotherapeutic theories, in establishing treatment goals and interventions collaboratively with clients; and

(C) implementing and evaluating the course of treatment by incorporating psychotherapeutic theories to assist individuals, couples, families and groups.

**10 GCA HEALTH AND SAFETY
CH. 12 MEDICAL PRACTICES**

(6) Marriage and Family Therapist (herein referred to as MFT) shall mean a person licensed on Guam to practice Marriage and Family Therapy as defined in these rules and regulations.

(7) Psychotherapy shall mean a specialized, formal interaction between an MFT or other Mental Health Professional, and a client (an individual, couple, family, or group) in which a therapeutic relationship is established to help resolve symptoms of a mental disorder, psychosocial stressor, family problem, or other difficulty, which is designed to enhance problem solving skills and coping abilities. Therapy can be used interchangeably with counseling and psychotherapy.

(8) Family therapy shall mean systematic interventions for the purpose of enabling family members to understand the behavior of individuals in relation to the ongoing operations of the family group. This approach enables family members to generate a wider range of options for coping with problems, and to learn problem solving skills.

(9) Individual therapy shall mean planned interventions to help a client enlarge competencies and increase problem solving skills and coping abilities.

(10) Group therapy shall mean the gathering together of unrelated individuals at the direction of a group facilitator or therapist for a therapeutic purpose.

(11) Couples therapy shall mean therapeutic interventions with married or unmarried couples to resolve problems and conflicts in their relationship.

(b) Qualifications for Licensure.

(1) The provisions of this Act shall take effect two years after enactment. At that time, the Board shall issue a license as a Marriage and Family Therapist to an applicant who:

(A) has a doctorate or master's degree from an accredited educational institution with a program in

**10 GCA HEALTH AND SAFETY
CH. 12 MEDICAL PRACTICES**

psychology, counseling, marriage and family therapy, or other psycho-therapeutic discipline. The applicant must be able to show documentation of:

(i) a minimum of ninety quarter hours or sixty semester hours of graduate studies (as suggested by the Counsel for Accreditation of Counseling and Related Educational Programs [CACREP]) that:

(ii) includes course content in the following areas:

(aa) Professional Identity;

(bb) Social and Cultural Diversity;

(cc) Human Growth and Development;

(dd) Career Development;

(ee) Helping Relationships;

(ff) Group Work;

(gg) Assessment;

(hh) Research and Program Development;

(ii) Professional Ethics;

(jj) Foundations of Marital, Couple, and Family Counseling/Therapy;

(kk) Contextual dimensions of Marital, Couple, and Family Counseling/Therapy; and

(ll) Knowledge and skill requirements for Marital, Couple, and Family Counselor/Therapist; and

(iii) includes a practicum, consisting of a minimum of one hundred hours; and

(iv) includes an internship, consisting of a minimum of six hundred hours with a minimum of two hundred forty clock hours in direct services

**10 GCA HEALTH AND SAFETY
CH. 12 MEDICAL PRACTICES**

with individuals, couples and families, with the majority of the direct service clock hours occurring with couples and family units;

(B) has completed a minimum of three thousand hours of documented post-graduate clinical experience and one hundred hours of supervision by a licensed Individual, Marriage and Family Therapist (IMFT), Certified Professional Counselor (CPC), Licensed Clinical Social Worker (LCSW), Licensed Mental Health Counselor (LMHC), Licensed Professional Counselor (LPC), Marriage and Family Therapist (MFT), Clinical Psychologist, Psychiatrist or other license deemed by the Board to be substantially equivalent to these professions, who is licensed and authorized to provide such supervision in the United States, its territories or a foreign country determined to be acceptable on a case by case basis by the Board. The three thousand hours of post-graduate clinical experience may include, but is not limited to: face-to-face treatment of clients, keeping clinical notes, supervision, treatment team meetings, consultation, education, treatment planning, observation, and other activities generally recognized to be part of clinical practice. A minimum of one thousand five hundred of the three thousand hours of post-graduate clinical experience must be in the face-to-face treatment of individuals, couples, groups, or families;

(C) has successfully passed the Marital and Family Therapy Examination created by the Association of Marital and Family Therapy Regulatory Boards (AMFTRB), or has passed another examination created by a recognized national or international entity deemed by the Board to be substantially equivalent to the Marital and Family Therapy Examination created by the Association of Marital and Family Therapy Regulatory Boards (AMFTRB); and

(D) has documented completion of training by a professional association or educational institution and

**10 GCA HEALTH AND SAFETY
CH. 12 MEDICAL PRACTICES**

approved by the Board that consists of at least six hours of professional ethics, three hours of culturally competent counseling practices with Micronesian communities on Guam and one hour of mandated reporting.

(2) For an individual who has not engaged in post-graduate experience or cannot document a minimum of three thousand hours of post-graduate clinical experience under the supervision of a licensed IMFT, CPC, LCSW, LMHC, LPC, MFT, Clinical Psychologist, Psychiatrist, or other license deemed by the Board to be substantially equivalent to these professions, who is licensed and authorized to provide such supervision in the United States, its territories or a foreign country determined to be acceptable on a case by case basis by the Board; such individual may practice under an internship program approved by the Board prior to engagement in that program in order to gain that supervision on Guam. The three thousand hour internship program may include, but is not limited to: face-to-face treatment of clients, keeping clinical notes, supervision, treatment team meetings, consultation, education, treatment planning, observations, and other activities generally recognized to be part of clinical practice. A minimum of one thousand five hundred of the three thousand hours must be in the face-to-face treatment of individuals, couples, groups, or families, and a minimum of one hundred hours must be supervision. To provide such supervision on Guam a person must be a licensed Individual Marriage and Family Therapist, Licensed Professional Counselor, Marriage and Family Therapist or Licensed Clinical Social Worker licensed on Guam who has held a license for a minimum of five years with experience working with couples and families; or a Clinical Psychologist or Psychiatrist licensed on Guam who has held a license for a minimum of three years with experience working with couples and families.

(3) Individuals who hold a current valid license issued by a state of the United States, its territories, or foreign country approved by the Board on a case by case

**10 GCA HEALTH AND SAFETY
CH. 12 MEDICAL PRACTICES**

basis as a Marriage and Family Therapist, or other license deemed by the Board to be substantially equivalent to the Guam license for Marriage and Family Therapy, who have passed the Marital and Family Therapy Examination created by the Association of Marital and Family Therapy Regulatory Boards (AMFTRB), or has passed another examination created by a recognized national or international entity deemed by the Board to be substantially equivalent to the Marital and Family Therapy Examination created by the Association of Marital and Family Therapy Regulatory Boards (AMFTRB), shall be eligible for the Guam license for Marriage and Family Therapy.

(4) (A) The Board shall issue a “Marriage and Family Therapist Intern License” and number to an applicant who has satisfied all of the applicable requisite provisions of qualifications for licensure pursuant to Subsection (1)(A) of this Section, and who is acquiring the three thousand (3,000) hours of post-graduate clinical experience required for licensure, as provided pursuant to Subsection (1)(B) of this Section.

(B) The Board shall provide the application form to be completed by an applicant for a Mental Health Intern License.

(c) Exceptions to Licensure.

(1) No person may practice Marriage and Family Therapy in Guam who is not licensed as a Marriage and Family Therapist by the Board, unless such practice is approved by the Board or other Guam licensing Board. However, this Article does not prohibit:

(A) an employee of the Federal government from performing official duties on federal property;

(B) an LCSW, PC, LPC, CPC, LMHC, MFT, Psychologist, or Psychiatrist currently licensed in another jurisdiction of the United States from consulting with or advising a licensed Marriage and Family Therapist on Guam. However, the consultant, if

**10 GCA HEALTH AND SAFETY
CH. 12 MEDICAL PRACTICES**

not licensed on Guam may not provide services to a client directly; or

(C) an active student in good standing, as a requirement of a university program for completion of a degree or a person who is engaged in the completion of the requirement of three thousand hours of post-graduate clinical experience to become licensed as an MFT, under the supervision of a Guam licensed IMFT, LPC, LMHC, MFT, LCSW, clinical psychologist or psychiatrist from performing assigned duties.

(2) Nothing herein prohibits qualified members of other professional groups, such as clinical psychologists, counseling psychologists, school psychologists, social workers, or ordained clergy from doing work of a counseling nature consistent with their training and code of ethics for their respective professions; provided, that they do not hold themselves out to the public by any of the following titles:

(A) family therapist;

(B) marriage therapist;

(C) psychotherapist (other than Clinical Psychologist); or

(D) any combination thereof.

(d) Scope of Practice. Marriage and Family Therapists use psychotherapeutic techniques to prevent, assess, evaluate, diagnose, develop treatment goals, plans and objectives, treat and evaluate outcomes for mental, emotional or behavioral disorders and associated distresses that interfere with mental health.

(e) Client Confidentiality. Client Confidentiality is defined and regulated by the standards set forth in the Health Insurance Portability and Accountability Act (HIPAA), the ethical rules of the American Counseling Association (ACA), Guam law, and revisions thereof. Breach of client confidentiality, except as provided for by HIPAA the ACA, or Guam law, shall be

**10 GCA HEALTH AND SAFETY
CH. 12 MEDICAL PRACTICES**

considered unprofessional conduct and may be grounds for revocation or suspension of the license.

(f) Continuing Education Requirements. A licensee shall complete a total of forty contact hours or four Continuing Education Units directly related to the practice of Marriage and Family Therapy within each two year licensure period to qualify for renewal of licensure.

(g) Grandfather Provision. All licensees who hold a current, valid license as an Individual, Marriage and Family Therapist issued by the Guam Board of Allied Health Examiners or as a Licensed Professional Counselor issued by a Guam Board, within eighteen (18) months of the time this Article is enacted into law, or by August 31, 2017, whichever is later, *shall* be eligible to apply for a license as a Licensed Mental Health Counselor. They may be granted a license as a Licensed Mental Health Counselor if:

(1) they can pass the NCMHCE developed by the NBCC (they shall be deemed eligible by the Board to take the test); or

(2) they can document one thousand (1,000) hours of post Masters clinical work which requires diagnosis and treatment planning; or

(3) they have held a license as an Individual, Marriage and Family Therapist in Guam, a Licensed Professional Counselor in Guam, or any combination of the two (2) for a minimum of six (6) years.

SOURCE: Added by P.L. 24-329:6 (Aug. 14, 1998). Repealed by P.L. 33-154:7 (May 17, 2016). Reenacted with P.L. 32-054 (July 5, 2013) as amended, pursuant to P.L. 33-154:10, and codified as § 121303 by the Compiler. Subsection (b)(4) added by P.L. 33-154:6 and subsection (g) amended by P.L. 33-154:9.

2016 NOTE: This section was originally entitled "*Exceptions to Licensure*," as added by P.L. 24-329:6 (Aug. 14, 1998). Repealed by 33-154:7 (May 17, 2016). Subsection/subitem designations were altered/added to adhere to the Compiler's general codification and alphanumeric schemes pursuant to 1 GCA § 1606. Internal references were altered as part of the codification process.

§ 121304. Scope of Practice.

**10 GCA HEALTH AND SAFETY
CH. 12 MEDICAL PRACTICES**

[Repealed.]

SOURCE: Added by P.L. 24-329:6 (Aug. 14, 1998). Repealed by P.L. 33-154:7 (May 17, 2016).

§ 121305. Privileged Communication.

[Repealed.]

SOURCE: Added by P.L. 24-329:6 (Aug. 14, 1998). Repealed by P.L. 33-154:7 (May 17, 2016).

**ARTICLE 14
OCCUPATIONAL THERAPY**

SOURCE: This Article was added by P.L. 24-329:7 (Aug. 14, 1998).

- § 121401. Definitions.
- § 121402. Qualifications for Licensure; Occupational Therapist.
- § 121403. Qualifications for Licensure.
- § 121404. International Graduates; Requirements.
- § 121405. Licensure Examination.
- § 121406. Qualifications for Examination.
- § 121407. Waiver of Requirements.
- § 121408. Persons and Practices Not Affected.
- § 121409. Scope of Practice; Occupational Therapist.
- § 121410. Scope of Practice; Occupational Therapy Assistant.

§ 121401. Definitions.

For purposes of this Article, the following words and phrases have been defined to mean:

(a) Fieldwork means a supervised clinical experience of a minimum of six (6) months for occupational therapists, and a minimum of three (3) months for Occupational Therapy Assistants, as arranged by the educational institution granting the degree.

(b) Occupational therapy means the evaluation and treatment provided to people whose lives have been

**10 GCA HEALTH AND SAFETY
CH. 12 MEDICAL PRACTICES**

disrupted by physical injury, illness, developmental problems, the aging process, or psychosocial or cognitive difficulties.

(1) Treatment entails the assessment, evaluation and treatment to assist each individual to achieve or return to an independent and productive life through techniques which prevent disability, assisting the individual in recovery from illness or accident and by promoting the development of functions which may have been impaired or delayed.

(2) The treatment provided may include, but shall not be limited to, the adaptation of the environment and the selection, design and fabrication of assistive and orthotic devices, and other technology to facilitate development and promote the acquisition of functional skills through purposeful activity.

(c) Occupational therapist means a person licensed to practice occupational therapy on Guam.

(d) Occupational therapy assistant means a person licensed to assist in the practice of occupational therapy who works under the indirect supervision of an occupational therapist, or as otherwise determined by the supervising occupational therapist.

(e) Occupational therapy technician/aide means a person who can assist in treatment oriented activities, under the direct supervision and presence of an occupational therapist or occupational therapy assistant, and whose activities require a general understanding of occupational therapy services acquired on-the-job.

(f) NBCOT means the National Board for Certification in Occupational Therapy.

2017 NOTE: Subitem designations added pursuant to the authority of 1 GCA § 1606.

10 GCA HEALTH AND SAFETY
CH. 12 MEDICAL PRACTICES

§ 121402. Qualifications for Licensure; Occupational Therapist.

(a) Educational Requirements. Applicants shall present satisfactory evidence to the Board of having successfully completed academic and fieldwork experience requirements in an occupational therapy educational program recognized by the Board. The occupational therapy educational program shall be accredited by the Accreditation Council for Occupational Therapy Education of the American Occupational Therapy Association or the current governing board. The applicant must also:

(1) possess at least a bachelor's degree or certificate in occupational therapy from the U.S. or from a foreign program recognized by the NBCOT; and

(2) submit transcripts from an approved school of occupational therapy in the U.S., or from a foreign program recognized by the NBCOT, unless already submitted to a government of Guam health agency.

(b) Fieldwork Experience. Applicants shall submit to the Board evidence of having successfully completed a period of supervised fieldwork experience arranged by the recognized educational institution or by the nationally recognized professional association where the applicant has met the academic requirements. Occupational therapists must have a minimum of six (6) months or nine hundred forty (940) hours of supervised fieldwork experience.

§ 121403. Qualifications for Licensure.

(a) Occupational Therapy Assistant.

(1) The occupational therapy assistant educational program shall be approved by the Accreditation Council for Occupational Therapy Education of the American Occupational Therapy Association. The applicant must:

(A) possess an associate's degree or certificate in occupational therapy assistant from the U.S. or from a foreign program recognized by the NBCOT;

**10 GCA HEALTH AND SAFETY
CH. 12 MEDICAL PRACTICES**

(B) submit transcripts from an approved school for occupational therapy assistants in the U.S. or from a foreign program recognized by the NBCOT, unless already submitted to a government of Guam agency.

(2) Fieldwork Experience. Applicants shall submit to the Board evidence of having successfully completed a period of supervised fieldwork experience arranged by the recognized educational institution, or by the nationally recognized professional association where the applicant has met the academic requirements. Occupational therapy assistants must have a minimum of twelve (12) weeks, or one hundred and forty (140) hours of supervised fieldwork experience.

(b) Occupational Therapy Technicians. Occupational therapy technicians are not required to be licensed by the Board.

§ 121404. International Graduates; Requirements.

Occupational therapists and occupational therapy assistants trained outside of the United States must satisfy the examination requirements of this Article. The Board shall require these applicants to furnish proof of good moral character and completion of education and supervised fieldwork requirements, substantially equal to those as contained in this Article prior to examination.

§ 121405. Licensure Examination.

An applicant for licensure as an occupational therapist or as an occupational therapy assistant must pass the written NBCOT examination, as provided for in this Article. Applicants who have fulfilled the education requirements as outlined above, but are pending completion of the examination, may initiate the application process for licensure.

§ 121406. Qualifications for Examination.

Only persons satisfying the requirements of this Article may apply for examination in such a manner as the Board shall prescribe. The Board recognizes the NBCOT as the examining authority for occupational therapists and occupational therapy

**10 GCA HEALTH AND SAFETY
CH. 12 MEDICAL PRACTICES**

assistants. A person who fails an examination may apply for reexamination, subject to the policies and procedures of NBCOT.

§ 121407. Waiver of Requirements.

(a) Licensure by Endorsement. The Board may waive the examination, education or experience requirements, and grant a license to any applicant who shall present proof of having practiced in another state, the District of Columbia, Puerto Rico or Territory of the United States which has standards for regulations that are substantially equivalent to the requirements specified in the Article. The Board shall use discretion in considering applicants from unregulated states.

(b) The Board may grant a license to any person who passed the certification examination administered by the NBCOT prior to the effective date of Act; whose principal residence is Guam; and who presents satisfactory evidence to the Board of having practiced in Guam for at least one (1) year prior to the enactment of these rules and regulations. Proof of actual practice shall be presented to the Board in such manner as it may prescribe. To obtain the benefit of this waiver, an applicant must file an application no later than ninety (90) days from the effective date of this Act.

§ 121408. Persons and Practices Not Affected.

Nothing in this Article shall be construed as preventing or restricting the practice, services or activities of:

(a) any person licensed on Guam by any other law from engaging in the profession or occupation for which the person is licensed;

(b) any person employed as an occupational therapist or occupational therapist assistant by the Federal government or its agency, if such person provides occupational therapy solely under the direction or control of the organization in which the person is employed;

(c) any person pursuing a supervised course of study leading to a degree or certificate in occupational therapy at an accredited educational program, if the person is

**10 GCA HEALTH AND SAFETY
CH. 12 MEDICAL PRACTICES**

designated by a title which clearly indicates the person's status as a student or trainee;

(d) any person fulfilling the supervised fieldwork experience requirements of Subsections (2)(b) and 3(2) of this Article, if the experience constitutes a part of the experience necessary to meet the requirements of the NBCOT;

(e) any person performing occupational therapy services on Guam, if these services are performed for no more than ninety (90) days in a calendar year in association with an occupational therapist licensed under these rules and regulations:

(1) the person is licensed or otherwise regulated under the law of another state which has substantially equivalent requirements for practice as specified under this Article; or

(2) the person has passed the certification examination administered by the NBCOT; or a Certified Occupational Therapy Assistant ("COTA"), established by the NBCOT; or

(f) any person functioning as an occupational therapy technician/aide.

§ 121409. Scope of Practice; Occupational Therapist.

(a) An occupational therapist may enter a case for the purposes of providing direct or indirect service, consulting, evaluating an individual as to the need for services, and other occupational therapy services for any individual who has an injury, illness, cognitive impairment, psychosocial dysfunction, mental illness, developmental or learning disability, physical disability, or other disorder or condition. It includes assessment by skilled observation or evaluation through the administration and interpretation of standardized or nonstandardized tests and measurements. Occupational therapy services include, but are not limited to, the following:

**10 GCA HEALTH AND SAFETY
CH. 12 MEDICAL PRACTICES**

(1) the assessment and provision of treatment in consultation with the individual, family or other appropriate persons;

(2) interventions directed toward developing, improving, sustaining or restoring daily living skills, including self-care skills and activities that involve interactions with others and the environment, work readiness or work performance, play skills or leisure capacities, or enhancing educational performance skills;

(3) developing, improving, sustaining or restoring sensorimotor, oral-motor, perceptual or neuromuscular functioning, emotional, motivational, cognitive or psychosocial components of performance; and

(4) education of the individual, family or other appropriate persons in carrying out appropriate interventions.

(b) Services may encompass assessment of need and the design, development, adaptation, application or training in the use of assistive technology devices; the design, fabrication or application of rehabilitative technology, such as selected orthotic devices; training in the use of orthotic or prosthetic devices; the application of physical agent modalities as an adjunct to or in preparation for purposeful activity; the application of ergonomic principles; the adaptation of environments and processes to enhance functional performance; or the promotion of health and wellness.

(c) Such evaluation shall be the occupational therapist's assessment of a patient's problem, and the therapist shall make an occupational therapy assessment and evaluation and treat accordingly. The therapist shall consult with an authorized health care practitioner if a patient's problem is outside the scope of occupational therapy. If, at any time, a patient requires further services of an authorized health care provider, a referral shall be made.

§ 121410. Scope of Practice; Occupational Therapy Assistant.

**10 GCA HEALTH AND SAFETY
CH. 12 MEDICAL PRACTICES**

The occupational therapy assistant works under the supervision of the occupational therapist. The amount, degree and pattern of supervision a practitioner requires varies depending on the employment setting, method of service provision, the practitioner's competence and the demands of service. The occupational therapist is responsible for the evaluation of the client or patient. The treatment plan may be developed by the occupational therapist in collaboration with the occupational therapy assistant. Once the evaluation and treatment plans are established, the occupational therapy assistant may implement and modify various therapeutic interventions, as permitted by the Board under the supervision of the occupational therapist.

**ARTICLE 15
PHYSICAL THERAPY**

SOURCE: This Article was added by P.L. 24-329:8 (Aug. 14, 1998).

- § 121501. Definitions.
- § 121502. Qualifications for Licensure.
- § 121503. Exceptions to Licensure.
- § 121504. Scope of Practice.
- § 121505. Supportive Personnel; Delineation of Responsibilities.
- § 121506. Foreign Graduates; Requirements.

§ 121501. Definitions.

For purposes of this Article, the following words and phrases have been defined to mean:

(a) Licensed physical therapist means a person who is currently and validly licensed to practice physical therapy on Guam.

(b) Physical therapy assistant means an individual who assists in the treatment of patients under the direct and indirect supervision of a licensed physical therapist.

**10 GCA HEALTH AND SAFETY
CH. 12 MEDICAL PRACTICES**

Assistance rendered must be commensurate with the assistant's education and training.

(c) Physical therapy technician means an individual who has received on-the-job training from a licensed physical therapist, and who assists in the treatment of patients under the direct supervision of a licensed physical therapist.

(d) Physical therapy means the utilization of scientific principles for the evaluation and treatment of any disability, injury or disease by the use of physical, chemical or mechanical means, including, but not limited to, heat, cold, air, light, sound, electricity, water, massage, therapeutic exercise and rehabilitative procedures, with or without assistive devices, for the purpose of preventing, correcting or alleviating dysfunction resulting from such disability, injury or disease; the performance of tests and measurements of neuromuscular function as an aid to the diagnosis or treatment of human condition; performance of treatments on the basis of test findings; supervision of selective forms of treatment by trained supportive personnel; and provisions of consultative services for health, education and community agencies; provided, however, that physical therapy shall not include the use of Roentgen Rays and radium for diagnostic and therapeutic purposes, the use of electricity for surgical purposes, including cauterization. Physical therapy and physical therapy services are not generic terms; they are the use of any intervention, including physical agent modalities/electrotherapy, that is provided by, or under the direction of, a licensed, physical therapist.

(e) Consultation means the communication regarding a patient's evaluation and proposed treatment plan with an authorized health care practitioner.

(f) Authorized health care practitioner includes licensed physicians, osteopathic physicians, chiropractors, podiatrists and dentists; provided, however, that nothing herein shall be construed as altering the scope of practice of

**10 GCA HEALTH AND SAFETY
CH. 12 MEDICAL PRACTICES**

such practitioners as defined in their respective licensure regulations.

§ 121502. Qualifications for Licensure.

(a) Licensed Physical Therapist. Applicants for a license to practice physical therapy on Guam must complete and file an application with the Board. Applicants must have all of the following qualifications:

(1) a bachelor's degree in physical therapy or certificate in physical therapy from an accredited school of physical therapy in the United States;

(2) transcripts from an approved school of physical therapy, evidencing the successful completion of a four (4) year degree program, a two (2) year certificate or advanced program which must include supervised clinical experience; and

(3) the applicant must have passed an examination given by the Professional Examination Service in the U.S. or one (1) of its territories and have been granted a license.

(b) Physical Therapy Assistant. To be eligible for licensure as a physical therapy assistant, the applicant must possess all of the following qualifications:

(1) a minimum of an associate degree from an approved school for physical therapy assistant in the United States; and

(2) transcripts from an approved school for physical therapy assistants, evidencing the successful completion of a two (2) year degree program, which must include supervised clinical experience.

§ 121503. Exceptions to Licensure.

No person may practice physical therapy on Guam who is not licensed as a physical therapist by the Board. These rules and regulations shall not be construed:

(a) to prohibit persons employed as physical therapists by a Federal agency from practicing their discipline;

**10 GCA HEALTH AND SAFETY
CH. 12 MEDICAL PRACTICES**

(b) to restrict the activities or services of a student or physical therapy intern pursuing a course of study leading to a degree or certificate in physical therapy, provided that these activities and services constitute a part of his supervised course of study;

(c) to restrict the practice of a physical therapist who is obtaining the required professional experience, and whose required professional experience application has been approved by the Board. Such professional experience is to be defined by the Board as deemed necessary;

(d) to prohibit auxiliary services provided by physical therapy technicians in carrying out duties necessary for the support of physical therapy, including those duties which involve minor physical therapy services when performed under the direct supervision of licensed, physical therapists, so long as such activities do not go beyond the scope of practice defined by these rules;

(e) to prohibit the practice of physical therapy by licensed physical therapists of other states or countries while appearing as clinicians at bona fide educational seminars sponsored by physical therapy, medical or other healing art professional associations, so long as such activities do not go beyond the scope of practice defined by these rules and regulations.

2017 NOTE: Subsection designations altered pursuant to the authority of 1 GCA § 1606.

§ 121504. Scope of Practice.

(a) Physical Therapists.

(1) A person licensed under this Article as a physical therapist may evaluate and treat human ailments by physical therapy. The evaluation shall be the physical therapist's assessment of a patient's problem and shall include a physical therapy diagnosis. If a patient's problem is outside the scope of physical therapy, the therapist shall consult with a person licensed to practice medicine. If a patient, at any time, requires further medical evaluation or diagnostic

**10 GCA HEALTH AND SAFETY
CH. 12 MEDICAL PRACTICES**

testing, that patient shall be referred to an authorized health care practitioner.

(2) Direct referral of a patient by an authorized health care practitioner may be by telephone, letter or in person; provided, however, if the instructions are oral, the physical therapist may administer treatment accordingly, but must make a record describing the nature of the treatment, the date administered, the name of the person receiving the treatment and the name of the referring authorized health care practitioner.

(b) Physical Therapy Assistant.

(1) A physical therapy assistant is not an independent practitioner and works under the indirect supervision of the physical therapist.

(2) A physical therapy assistant will follow the treatment program set by the physical therapist, and may progress the exercise program in conjunction with the treatment goals.

(c) Physical Therapy Technician. The physical therapy technician will carry out tasks as delegated by the physical therapist; all patient care will be under the direct supervision of the physical therapist.

§ 121505. Supportive Personnel; Delineation of Responsibilities.

(a) A physical therapist is professionally and legally responsible for patient care given by supportive personnel under the physical therapist's supervision. If a physical therapist fails to adequately supervise patient care given by supportive personnel, the Board may take disciplinary action against the licensee.

(b) Supervision of supportive personnel requires that the physical therapist perform the following activities:

(1) provide initial evaluation of the patient;

(2) develop a treatment plan and program, including treatment goals;

**10 GCA HEALTH AND SAFETY
CH. 12 MEDICAL PRACTICES**

- (3) assess the competence of supportive personnel to perform assigned tasks;
- (4) select and delegate appropriate portions of the treatment plan and program;
- (5) direct and supervise supportive personnel in delegated functions;
- (6) re-evaluate the patient and adjust the treatment plan as acceptable physical therapy practice requires, consistent with the delegated health care task;
- (7) document sufficient in-service training and periodic evaluation of performance to assure safe performance of the tasks assigned to supportive personnel; and
- (8) provide discharge planning.

2017 NOTE: Subsection/subitem designations added/alterd pursuant to the authority of 1 GCA § 1606.

§ 121506. Foreign Graduates; Requirements.

(a) The following is required of applicants for physical therapists who are foreign graduates:

- (1) be of good moral character;
- (2) be a United States citizen or legal alien;
- (3) submit to the Board the following documents, which must be in English or accompanied by an English translation:
 - (A) official application and affidavits;
 - (B) evidence of a diploma from an educational program for physical therapy approved by the Board;
 - (C) a letter from the applicant's most recent employer verifying the applicant's position and dates of employment;
- (4) demonstrate that the applicant's credentials are equivalent to those required of a U.S. educated physical therapist applicant (The foreign education must contain

**10 GCA HEALTH AND SAFETY
CH. 12 MEDICAL PRACTICES**

evidence of course work in humanities and social sciences, as well as courses in biology and other physical sciences, equivalent to a United States degree in physical therapy. The applicant must submit notarized copies of all academic records to either the International Education Research Foundation or the International Consultants of Delaware, for evaluation; addresses for each shall be listed with the Board office. A copy of the evaluation must be sent directly to the Board.);

(5) if the Board determines that the educational background is not equivalent to a U.S. accredited physical therapy program, or the applicant's program is found deficient in physical therapy credits, the applicant must successfully complete a physical therapy program which conforms with the standards of the official accrediting agency determined by the U.S. Office of Education, or at the discretion of the Board, complete specified courses in physical therapy;

(6) complete a minimum of twenty (20) continuous weeks of internship under direction and immediate supervision of a physical therapist, in an institution which is approved by the Board, and furnish documentary evidence of compliance to the Board; and

(7) may appear before the Board for an oral interview.

(b) If the Board finds the internship to have been successfully completed and the educational equivalency requirements met, the applicant must take a licensure examination given by a state or territory within the United States.

(c) Physical therapist assistants must comply with all requirements of this Article, have passed an examination given by the Professional Examination Service in the United States or one (1) of its territories, and have been granted a current license.

**10 GCA HEALTH AND SAFETY
CH. 12 MEDICAL PRACTICES**

**ARTICLE 16
PHYSICIAN ASSISTANT**

SOURCE: This Article was added by P.L. 24-329:9 (Aug. 14, 1998).

- § 121601. Definitions.
- § 121602. Qualifications for Licensure.
- § 121603. Scope of Practice.
- § 121604. Registration of Physician Assistant's Supervision.
- § 121605. Renewal of License.
- § 121606. Identification.
- § 121607. Supervision Required.
- § 121608. Prescribing.
- § 121609. Exceptions to Licensure Requirement.

§ 121601. Definitions.

For purposes of this Article, the following words and phrases have been defined to mean:

(a) Licensed physician means a physician licensed by the Board of Medical Examiners to practice medicine on Guam.

(b) Physician assistant means a Board-licensed person, qualified by academic and practical training, who provides patient services under the indirect supervision of a licensed physician. A physician assistant is not an independent practitioner.

(c) Supervising physician means a licensed physician who is registered by the Board to supervise a physician assistant.

(d) Supervision means providing guidance of the services performed by the physician assistant. A supervising physician may be physically on the premises where the physician assistant is practicing, or be available on Island by telecommunication.

§ 121602. Qualifications for Licensure.

(a) Licensed physician assistants must be graduates of programs approved by the Physician Assistant Examining

**10 GCA HEALTH AND SAFETY
CH. 12 MEDICAL PRACTICES**

Committee (“PAEC”) from an institution accredited by the Committee on Allied Health Education and Accreditation (“CAHEA”).

(b) Licensed physician assistants must have passed a proficiency examination developed by the National Commission on Certification of Physician Assistants, or its successor.

§ 121603. Scope of Practice.

(a) A physician assistant may provide any medical services when such services are within his skills, form a usual component of the physician's scope of practice under the supervision of a supervising physician.

(b) Physician assistants with privileges or employed by a hospital or skilled nursing facility may, if permissible under the by-laws and rules and regulations of such facility, write medical orders, including medications, tests and treatments, for in-patients under the care of the supervising physician. In every case, such medical orders must be countersigned by the supervising physician or confirmed by telephone within twenty-four (24) hours.

§ 121604. Registration of Physician Assistant's Supervision.

Prior to practicing on Guam, the licensed physician assistant shall present for approval of the Board of Allied Health Examiners and Board of Medical Examiners a completed application for supervision by a Guam-licensed physician. The practice of the physician assistant must fall within the practice of the supervising physician with whom the physician assistant is registered. In the event of any changes of supervising physician, the names of the supervising physicians must be provided to the above boards. The Board must be notified at least ten (10) days prior to the effective date of change. Practicing without a supervising physician shall be grounds for disciplinary action, including revocation of license.

§ 121605. Renewal of License.

Each licensed physician assistant must present evidence of current certification through the National Commission on Certification of Physician Assistants, or its successor, every two

**10 GCA HEALTH AND SAFETY
CH. 12 MEDICAL PRACTICES**

(2) years for renewal of license.

§ 121606. Identification.

(a) While working, the physician assistant shall wear or display appropriate identification, clearly indicating that he or she is a physician assistant.

(b) The physician assistant's license must be displayed in the office, and any satellite operation in which the physician assistant may function.

(c) A physician assistant may not advertise him or herself in any manner that would mislead the patients of the supervising physician or the public.

§ 121607. Supervision Required.

(a) Tasks performed by the physician assistant must be under the supervision of a registered supervising physician.

(b) All medical records must be reviewed and co-signed by the approved supervising physician within seven (7) days.

(c) Upon being duly licensed by the Board, the licensee shall have his or her name, address and other pertinent information enrolled by the Board on a roster of licensed physician assistants.

(d) Not more than two (2) currently licensed physician assistants may be supervised by a licensed physician at any one time.

(e) If no registered supervising physician is available to supervise the physician assistant, the physician assistant must not perform patient care activities.

(f) Nothing in these rules shall be construed to prohibit the employment of physician assistants by a medical care facility where such physician assistant's function under the supervision of a Guam-licensed physician.

§ 121608. Exceptions to Licensure Requirement.

No person may practice as a physician assistant on Guam who is not licensed by the Board. This Article, however, shall not

**10 GCA HEALTH AND SAFETY
CH. 12 MEDICAL PRACTICES**

be construed to prohibit a student in a physician assistant program performing duties or functions assigned by his instructors, or who is working under the direct supervision of a licensed physician.

§ 121609. Prescriptive Authority.

A physician assistant may administer, prescribe and dispense any licensed drug in accordance with 12 GCA § 12827, and in accordance to any other rules and regulation established by the Board.

**ARTICLE 17
PODIATRIC MEDICINE**

SOURCE: This Article was added by P.L. 24-329:10 (Aug. 14, 1998).

- § 121701. Definition.
- § 121702. Qualifications for Licensure.
- § 121703. Approved Schools.
- § 121704. Approved Hospitals for Podiatric Residencies.
- § 121705. Licensure Renewal; Continuing Education Requirements.
- § 121706. Approved Continuing Education Programs.
- § 121707. Scope of Practice.

§ 121701. Definition.

For purposes of this Article, the following words and phrases have been defined to mean:

- (a) Podiatric Medicine means the diagnosis, medical, surgical, mechanical, manipulative and electrical treatment of the human foot and ankle, including the tendons that insert into the foot, and the non-surgical treatment of the muscles and tendons of the leg governing the functions of the foot.

§ 121702. Qualifications for Licensure.

**10 GCA HEALTH AND SAFETY
CH. 12 MEDICAL PRACTICES**

(a) Any person who desires to practice podiatric medicine on Guam must apply to the Board for licensure and provide each of the following:

(1) three (3) letters from doctors of podiatric medicine verifying that the applicant is competent;

(2) verification sent directly from the college of podiatric medicine to the Board of having satisfactorily graduated from an approved college of podiatric medicine; and

(3) verification sent directly to the Board from a residency program of having satisfactorily completed a hospital-approved podiatric residency program.

(b) If an applicant has practiced podiatric medicine in any U.S. jurisdiction, the applicant shall furnish each of the following:

(1) a notarized copy of the applicant's license to practice podiatric medicine in that jurisdiction; and

(2) an affidavit from the board of podiatric medical examiners of any such jurisdiction verifying the number of years that the applicant has been engaged in the legal and reputable practice of podiatric medicine in that jurisdiction.

§ 121703. Approved Schools.

Colleges of podiatric medicine accredited by the Council on Podiatric Education of the American Podiatry Association shall be approved by the Board for providing resident professional instruction in podiatric medicine.

§ 121704. Approved Hospitals for Podiatric Residencies.

The hospitals approved by the Board for residencies shall be those that meet the minimum requirements set by the Council on Podiatric Medical Education of the American Podiatric Medical Association.

§ 121705. Licensure Renewal; Continuing Education Requirements.

**10 GCA HEALTH AND SAFETY
CH. 12 MEDICAL PRACTICES**

(a) Each licensee who is a doctor of podiatric medicine is required to complete fifty (50) hours of approved continuing education during each two (2) year renewal period. Each doctor of podiatric medicine renewing a license may be required to submit proof satisfactory to the Board of compliance with the provisions of this requirement.

(b) Each doctor of podiatric medicine, in order to renew a license, shall report progress towards compliance with continuing education requirements by signing and returning the declaration contained in the license renewal application.

(c) Any licensed doctor of podiatric medicine who cannot complete a minimum of fifty (50) hours of approved continuing education during a two (2) year period shall be ineligible for renewal of his or her license, unless such licensee applies for and obtains a waiver from the Board, as shall be determined by the Board.

(d) As part of the continuing education required of each licensee, each licensee, at the time of license renewal, shall certify that he or she possesses a current and valid certificate in basic cardiopulmonary resuscitation ("CPR").

(e) The Board requires that each licensee retain records of all continuing education programs attended which indicate the title of the course or program, the sponsoring organization, or individual and the accrediting organization, if any, for a minimum of four (4) years.

§ 121706. Approved Continuing Education Programs.

The following are approved by the Board as continuing education programs:

(a) programs which are approved by the American Podiatric Medical Association and its affiliated organizations;

(b) programs that qualify for Category I Credit of the American Medical Association and the American Osteopathic Association and their affiliated organizations;

**10 GCA HEALTH AND SAFETY
CH. 12 MEDICAL PRACTICES**

(c) programs offered by approved colleges or schools of podiatric medicine, medicine and osteopathic medicine;

(d) podiatric residency program or clinical fellowship in a hospital approved for podiatric residencies (Completion of a residency program or clinical fellowship shall be credit for fifty (50) hours of approved continuing education.); and

(e) programs offered by other individuals, organizations and institutions approved by the Board on a case-by-case basis.

§ 121707. Scope of Practice.

(a) A license to practice podiatric medicine on Guam authorizes the holder to practice podiatric medicine as defined in these Rules.

(b) No doctor of podiatric medicine shall do any amputation of the foot in total. Surgical debridement with plastic repairs or reconstruction of diseased, traumatized or devitalized, nonviable or necrotic tissue shall be the standard of treatment for these diseased processes.

(c) Doctors of podiatric medicine practicing within the framework of this policy statement are subject to all laws governing gross negligence, incompetence and repeated negligent acts.

**ARTICLE 18
SPEECH LANGUAGE PATHOLOGY**

SOURCE: This Article was added by P.L. 24-329:11 (Aug. 14, 1998), and amended by P.L. 34-048 (Oct. 13, 2017).

- § 121801. Definitions.
- § 121802. Qualifications for Licensure.
- § 121803. Exceptions to Licensure Requirements.
- § 121804. Scope of Practice.
- § 121805. Licensure Renewal.

**10 GCA HEALTH AND SAFETY
CH. 12 MEDICAL PRACTICES**

§ 121801. Definitions.

For purposes of this Article, the following words and phrases have been defined to mean:

(a) American Speech, Language, Hearing Association (ASHA) means the recognized national association which sets ethical and practice standards for the field of Speech-Language Pathology.

(b) Speech-language Pathology-Assistant (Bachelor's level), (SLPA-B), means any individual who meets the minimum qualifications which the Board may establish for speech-language assistants, whose qualifications shall be less than those established by this Article for licensure as a speech-language pathologist, and who is licensed and works under the direct, then indirect supervision (as defined by ASHA Guidelines for Supervision) of a licensed speech-language pathologist.

(c) Licensed Speech-language Pathology-Assistant (Master's level), (SLPA-M), means any individual who meets the minimum qualifications which the Board may establish for speech-language assistants, whose qualifications shall be less than those established by this Article for licensure as a speech-language pathologist, and who is licensed and works under the indirect supervision of a licensed speech-language pathologist.

(d) Speech-language Pathologist (SLP) means any individual who is duly licensed by the Board to practice in the field of speech-language pathology.

(e) Speech-language Pathology means the application of principles, methods and procedures for the measurement, testing, evaluation, prediction, counseling, instruction, habilitation or rehabilitation related to the development and disorders of speech, voice, fluency, language, augmentative alternative communication, neurological disorders, or swallowing disorders, for the purpose of evaluating, identifying, treating, preventing, ameliorating, or modifying such disorders and conditions in children or adults.

**10 GCA HEALTH AND SAFETY
CH. 12 MEDICAL PRACTICES**

(f) Supervision.

(1) Direct (initial) supervision shall mean supervision whereby a licensed Speech-language Pathologist diagnoses the condition to be treated, disseminates the therapy information to the SLPA-B, and remains on the premises while the procedures are being performed by an SLPA-B. The supervising SLP will also follow the ASHA guidelines for training. The SLPA-B must demonstrate proficiency in order to allow for indirect supervision.

(2) Indirect supervision shall mean supervision whereby a licensed SLP authorizes the procedures that are being carried out, but need not be present on the premises when the authorized procedures are being performed by a SLPA-M. The licensee must be available on island by telecommunications.

(3) The supervising licensed speech-language pathologist of a SLPA-B or SLPA-M *shall not* supervise more than five (5) individuals at one (1) time. The licensed SLP sponsor will assume all responsibilities and will meet all sponsorship requirements for such individuals as set forth by the Board.

SOURCE: Added by P.L. 24-329:11 (Aug. 14, 1998), and amended by P.L. 34-048:2 (Oct. 13, 2017).

§ 121802. Qualifications for Licensure.

(a) Speech-Language Pathologist.

(1) To be eligible for licensure by the Board as a speech-language pathologist, an applicant must possess a current Certificate of Clinical Competence (CCC) in Speech-Language Pathology issued by ASHA as evidence of professional training and experience.

(2) Applicants shall arrange for an official statement from ASHA to be sent directly to the GBAHE reporting present ASHA certification.

**10 GCA HEALTH AND SAFETY
CH. 12 MEDICAL PRACTICES**

- (b) (1) A Speech-language Pathology-Assistant (SLPA-B)
- (A) shall possess at least a Bachelor's degree in speech and language or communication disorders, and
 - (B) *shall* work under the direct or indirect supervision of a licensed Speech-Language Pathologist.
- (2) The SLPA-B and supervisor will complete and submit the Supervisor Form provided by the Board upon application, or renewal, and no later than three (3) working days upon any supervisory changes within a license renewal year; provided, that for new hires, the Supervisor Form may be submitted within three (3) working days and shall be submitted before performing any speech therapy services.
- (3) If any changes occur within the renewal year that affects both supervisor requirement (primary and secondary), the Supervisor Form must be revised and submitted before the SLPA-B can practice.
- (c) (1) A Speech-Language Assistant (SLPA-M)
- (A) shall possess at least a Master's degree in speech-language pathology or
 - (B) communication disorders, and
 - (C) may work under the indirect supervision of a licensed Speech-Language Pathologist,
- respective to the individual's understanding and assessed performance of speech-language disorders.
- (2) The SLPA-M and supervisor will complete and submit the Supervisor Form provided by the Board upon application, or renewal, and no later than three (3) working days upon any supervisory changes within a license renewal year; provided, that for new hires, the Supervisor Form may be submitted within three (3) working days upon application and shall be submitted before performing any speech therapy services.
- (3) If any changes occur within the renewal year that

**10 GCA HEALTH AND SAFETY
CH. 12 MEDICAL PRACTICES**

affects both supervisor requirement (primary and secondary), the Supervisor Form must be revised and submitted before the SLPA-M can practice.

SOURCE: Added by P.L. 24-329:11 (Aug. 14, 1998), and amended by P.L. 34-048:3 (Oct. 13, 2017). Subsection (b)(2) amended by P.L. 35-080:2 (Mar. 20, 2020). Subsection (c)(2) amended by P.L. 35-080:3 (Mar. 20, 2020)

2017 NOTE: Subitem designations added pursuant to authority granted by 1 GCA § 1606.

§ 121803. Exceptions to Licensure Requirements.

These rules and regulations shall not be construed as preventing or restricting:

(a) any person licensed on Guam under any other law, from engaging in the profession or occupation for which he or she is licensed;

(b) the activities and services of persons pursuing a course of study leading to a degree in Speech-Language Pathology at a college or university, if such activities and services constitute a part of an approved supervised course of study, and such person is designated as a speech-language intern or trainee; or

(c) the activities and services of persons presently working on their Clinical Fellowship Year (“CFY”), and such person is registered as a “CFY-Speech-Language Pathologist” by ASHA, working under a licensed SLP on Guam.

SOURCE: Added by P.L. 24-329:11 (Aug. 14, 1998), and amended by P.L. 34-048:4 (Oct. 13, 2017).

§ 121804. Scope of Practice.

(a) Speech-Language Pathologist. The scope of practice for speech-language pathology includes:

(1) screening, identifying, assessing and interpreting, diagnosing, rehabilitating and preventing disorders of speech (e.g. articulation, fluency, voice,) and language;

(2) screening, identifying, assessing and interpreting,

**10 GCA HEALTH AND SAFETY
CH. 12 MEDICAL PRACTICES**

diagnosing, rehabilitating and preventing disorders of dysphagia (swallowing), and related disorders;

(3) screening, identifying, assessing and interpreting, diagnosing, and rehabilitating cognitive and communication disorders (e.g. individuals who have been diagnosed with mental deficiency, traumatic brain injury, aphasia, stroke or other neurological disorders);

(4) assessing, selecting and developing augmentative and alternative communication systems, and providing training in their use;

(5) providing aural rehabilitation and related counseling services to hearing impaired individuals and their families;

(6) enhancing speech-language proficiency and communication effectiveness (e.g. accent reduction); and

(7) screening of hearing and other factors for the purpose of speech-language evaluation or the initial identification of individuals with other communication disorders.

(b) A licensed Speech-Language Pathologist is professionally and legally responsible for patient/client care given by SLPA-B and SLPA-M under the Speech-Language Pathologist's supervision.

(1) If a Speech-Language Pathologist fails to adequately supervise the patient/client care by supportive personnel, as strictly provided and authorized pursuant to this Article, the Board may take disciplinary action against the licensee.

(2) Supervision of supportive personnel requires that the Licensed Speech-Language Pathologist perform the following activities:

(A) assess the competence of supportive personnel to perform assigned tasks; and

(B) document sufficient in-service training and periodic evaluation of performance to assure safe

**10 GCA HEALTH AND SAFETY
CH. 12 MEDICAL PRACTICES**

performance of the tasks assigned to supportive personnel.

(c) A Speech-Language Pathology Assistant (Bachelor's level) (SLPA-B) must

(1) work under the direct or indirect supervision of the supervising licensed SLP, and

(2) may only implement the therapeutic plan designed by the supervising licensed SLP in conjunction with treatment goals, and

(3) be responsible for all documentation of treatment which is co-signed by the supervising speech-language pathologist.

(d) (1) A Speech-Language Pathology Assistant (Master level) (SLPA-M) (without the CCC)

(A) must work under the indirect supervision of the supervising licensed SLP, and

(B) *shall* confer with and have all reports co-signed by the supervising licensed SLP.

(2) The Master level speech-language assistant shall perform all of the following duties:

(A) diagnostic testing,

(B) interpreting evaluation results,

(C) documenting all evaluation results,

(D) developing written goals and objectives based upon evaluation results, teacher/parent reports,

(E) attending all informal/formal student meetings,

(F) maintaining a therapeutic and consultative case load,

(G) performing and documenting all therapeutic intervention,

(H) designing or selecting appropriate therapy

**10 GCA HEALTH AND SAFETY
CH. 12 MEDICAL PRACTICES**

materials or augmentative or alternative
communication systems or devices.

SOURCE: Added by P.L. 24-329:11 (Aug. 14, 1998), and amended by P.L. 34-048:5 (Oct. 13, 2017).

2017 NOTE: Subitem designations added pursuant to authority granted by 1 GCA § 1606.

§ 121805. Licensure Renewal.

The licensed Speech-Language Pathologist, SLPA-B, and SLPA-M will follow license renewal requirements as provided pursuant to § 12824 of Article 8, Chapter 12, Part 1, Title 10, Guam Code Annotated. In addition:

(a) registration with the Board is required for both SLPA-B and SLPA-M within the renewal period every two (2) years. This includes filling out the Board form naming two (2) licensed Speech-Language Pathology Supervisors; and

(b) submission of proof of continuing education hours during the renewal period every two (2) years (§ 12809, Article 8, Part 1 of this Chapter 12):

(1) for an SLPA-B, fifteen (15) approved continuing education hours directly related to speech-language pathology, as approved by the Board; and

(2) for an SLPA-M, twenty (20) approved continuing education hours, fifteen (15) direct hours and five (5) indirect hours related to speech-language pathology, as approved by the Board.

SOURCE: Added by P.L. 34-048 (Oct. 13, 2017).

2017 NOTE: Subsection/subitem designations altered pursuant to the authority of 1 GCA §1606.

**ARTICLE 19
VETERINARY MEDICINE**

SOURCE: This Article was added by P.L. 24-329:12 (Aug. 14, 1998).

**10 GCA HEALTH AND SAFETY
CH. 12 MEDICAL PRACTICES**

- § 121901. Definitions.
- § 121902. Requirements for Licensure.
- § 121903. Exceptions to Licensure Requirements.
- § 121904. Professional Conduct; Additional Provisions.
- § 121905. Spay/Neuter Clinic.
- § 121906. Trained Persons Performing Animal Euthanasia.

§ 121901. Definitions.

For purposes of this Article, the following words and phrases have been defined to mean:

(a) Animal means any animal other than man which includes, but is not limited to, fowl, birds, fish, and reptiles, wild or domestic, living or dead.

(b) Practice of veterinary medicine means to diagnose, treat, correct, change, relieve or prevent animal disease, deformity, defect, injury, or other physical or mental condition, including the prescription or administration of any drug, medicine, biologic, apparatus, application, anesthetic, or therapeutic or diagnostic substance or technique, or the use of any manual or mechanical procedure for artificial insemination, testing for pregnancy or for correcting sterility or infertility, or to render advice or recommendation with regard to any of the above.

(c) Veterinary medicine includes veterinary surgery, obstetrics, dentistry and all other branches or specialties of veterinary medicine.

(d) Veterinary hospital or veterinary clinic means a facility for the veterinary care of animals, wherein all activities are directly supervised by a licensed veterinarian.

(e) Animal control means animal health and animal population control programs that include some or all of the following services: sterilization, worming, vaccinations, general health examinations, pet licensing, and emergency or critical care services needed in conjunction with other services.

SOURCE: Added by P.L. 24-329:12 (Aug. 14, 1998). Public Law 28-186:2 (Jan. 29, 2007) added a new subsection (d), which was already

**10 GCA HEALTH AND SAFETY
CH. 12 MEDICAL PRACTICES**

occupied. Therefore, the new subsection was renumbered to (e) by the Compiler of Laws.

§ 121902. Requirements for Licensure.

Any person desiring a license to practice veterinary medicine on Guam must be licensed in another state of the United States.

§ 121903. Exceptions to Licensure Requirements.

These rules shall not be construed to prohibit:

(a) a person who is a regular student in a veterinary school from performing duties or actions assigned by his instructors, or from working under the direct supervision of a licensed veterinarian during a school vacation period;

(b) a person practicing veterinary medicine upon his own animals, being assisted in such practice by his employees when they are normally employed in the conduct of such person's business, or being assisted in such practice by some other person gratuitously; or

(c) A person advising or performing acts which the Board or Guam law recognizes as accepted animal control or livestock management practices, provided that animal control shall be subject to the following conditions:

(1) such services must be rendered under the direction and sponsorship of a charitable organization or government agency that assumes full responsibility for the treatment or services;

(2) veterinary services must be performed by, or under the supervision of, a person currently licensed to practice veterinary medicine in any state, province, territory, commonwealth or possession of the United States, Canada, the United Kingdom, Australia, New Zealand, Japan or the Philippines, and such other jurisdictions as the Board may from time-to-time designate. Copies of the visiting practitioners' licenses must be submitted to the Board prior to a project of animal control and shall be available on the premises for inspection. These license copies shall serve as

**10 GCA HEALTH AND SAFETY
CH. 12 MEDICAL PRACTICES**

licenses to work on an animal control project for no longer than eight (8) days per project. Controlled substances shall be administered pursuant to the Uniform Controlled Substances Act of Guam, Chapter 67, Title 9 GCA;

(3) no person shall receive any fee or remuneration of any kind, other than payment of or reimbursement for travel, lodging, meals and expenses reasonably incurred by participating service providers. The sponsoring organization may charge and receive a fee or donation for services rendered, which fee shall be reasonably calculated to recover actual or anticipated project costs, including reimbursement of expenses incurred by service providers. Services shall be provided free of charge to persons receiving public assistance who are the lawful owners of animals which receive services;

(4) animal control projects shall not be conducted by a charitable or government organization more than two (2) times per calendar year; and

(5) within thirty (30) days after each project, the project sponsor shall provide the Board with a written report identifying the number and nature of procedures performed, and the names, addresses, and telephone numbers of all veterinarians participating in the program.

SOURCE: Added by P.L. 24-239:12 (Aug. 14, 1998). Subsection (c) repealed and reenacted by P.L. 28-186:3 (Jan. 29, 2007).

2015 NOTE: Subsection designations in subsection (c) were altered from Roman numerals to Arabic numerals to adhere to the Compiler's alphanumeric scheme pursuant to 1 GCA § 1606.

§ 121904. Professional Conduct; Additional Provisions.

The following acts are deemed unprofessional conduct and are subject to disciplinary action as delineated in Article I, General Regulations, of these rules and regulations:

(a) cruelty to animals, as defined by Guam law, or as determined by the Board; and

**10 GCA HEALTH AND SAFETY
CH. 12 MEDICAL PRACTICES**

(b) failure to maintain their professional premises in a sanitary condition.

§ 121905. Spay/Neuter Clinic.

A spay/neuter clinic is a facility established only to spay and neuter animals. Surgeries are performed by, and directly supervised by, a licensed veterinarian. Services are limited to these specific surgical procedures and are performed only by a licensed veterinarian.

§ 121906. Trained Persons Performing Animal Euthanasia.

Notwithstanding any other provision of this Chapter 12, agents or employees of a government operated or government contracted animal shelter may lawfully possess and administer, under the supervision of a Guam licensed veterinarian, sodium pentobarbital or Xylazine for the purpose of euthanasia of animals; provided, that the agents or employees of the licensed government operated or government contracted animal shelter have successfully completed an animal euthanasia technician certification course approved by the Board of Allied Health Examiners. This training shall be conducted by a veterinarian currently registered on Guam, and shall include the following areas: knowledge of federal and Guam laws regarding the proper storage, inventory and handling of controlled substances, the potential hazards of such controlled substances, the use and administration of such controlled substances, humane animal euthanasia procedures, and other subjects as shall be required by the Guam Board of Allied Health Examiners. Upon certification by the veterinarian that a person has successfully completed the course, the Guam Board of Allied Health Examiners may issue an animal euthanasia technician license to said person, subject to annual renewal. The Board may revoke or suspend the license at any time for good cause.”

SOURCE: Added by P.L. 28-034:5 (Apr. 22, 2005).

**ARTICLE 20
RESPIRATORY THERAPY**

**10 GCA HEALTH AND SAFETY
CH. 12 MEDICAL PRACTICES**

SOURCE: Article 20 was added by P.L. 24-230:13 (Aug. 14, 1998).

- § 122001. Definitions.
- § 122002. Qualifications for Licensure.
- § 122003. Exceptions to Licensure.
- § 122004. Scope of Practice.
- § 122005. Supportive Personnel; Delineation of Responsibilities.

§ 122001. Definitions.

For purposes of this Article, the following words and phrases are defined to mean:

(a) 'Licensed Registered Respiratory Therapist' ("RRT") means a person who is currently a "Registered Respiratory Therapist" credentialed by the National Board for Respiratory Care ("NBRC"), or the equivalent thereof, and who is currently and validly licensed to practice respiratory therapy on Guam.

(b) 'Licensed Certified Respiratory Therapist' means a person who is currently a "Certified Respiratory Therapist" ("CRT") (formerly 'Certified Respiratory Therapy Technician ("CRRT")') credentialed by the National Board for Respiratory Care ("NBRC"), or the equivalent thereof as accepted by the NBRC, and who assists in the treatment of patients under the indirect supervision of a licensed Registered Respiratory Therapist.

(c) "Respiratory therapy" means the management of pulmonary diseases with medicines and machines.

(d) 'Consultation' means the communication regarding the patient's evaluation and proposed treatment plan with an authorized health care practitioner.

(e) "Authorized health care practitioner" includes licensed physicians, osteopathic physicians, chiropractors, podiatrists and dentists; provided, however, that nothing herein shall be construed as altering the scope of practice of such practitioners as defined in their respective licensure regulations.

**10 GCA HEALTH AND SAFETY
CH. 12 MEDICAL PRACTICES**

SOURCE: Added by P.L. 24-329:13 (Aug. 14, 1998), amended by P.L. 25-190:2 (Jan. 22, 2001).

§ 122002. Qualifications for Licensure.

Applicants for a license to practice respiratory therapy on Guam must complete and file an application with the Board. Applicants must have all of the following qualifications:

(a) Licensed Registered Respiratory Therapist:

(1) transcripts from an approved school of respiratory therapy, evidencing the successful completion of a two (2) year program, resulting in a minimum of an Associate's Degree in Respiratory Therapy;

(2) current certification as a RRT by the National Board for Respiratory Care; or

(3) have obtained RRT status from the National Board for Respiratory Care prior to January 1, 2004.

(b) Licensed Certified Respiratory Therapist or Certified Respiratory Therapy Technician:

(1) transcripts from an approved school of respiratory therapy, evidencing the successful completion of a one (1) year program; and

(2) current certification as a Certified Respiratory Therapist by the National Board for Respiratory Care; or

(3) have obtained certification as a Certified Respiratory Therapy Technician by the National Board of Respiratory Care before July 1, 1999.

SOURCE: Added by P.L. 24-329:13 (Aug. 14, 1998), amended by P.L. 25-190:3 (Jan. 22, 2001).

2015 NOTE: Subsection designations in this provision were altered from numbers to lowercase letters to adhere to the Compiler's alphanumeric scheme pursuant to 1 GCA § 1606.

§ 122003. Exceptions to Licensure.

(a) No person may practice respiratory therapy on Guam

**10 GCA HEALTH AND SAFETY
CH. 12 MEDICAL PRACTICES**

who is not licensed as a respiratory therapist by the Board. These rules and regulations shall not be construed:

(1) to prohibit persons employed as respiratory therapists by a Federal agency from practicing their discipline;

(2) to restrict the activities or services of a student or respiratory therapy intern pursuing a course of study leading to a degree or certificate in respiratory therapy; provided, that these activities and services constitute a part of his supervised course of study;

(3) to restrict the practice of a respiratory therapist who is obtaining the required professional experience and whose required professional experience application has been approved by the Board. Such professional experience is to be defined by the Board as deemed necessary;

(4) to prohibit auxiliary services provided by respiratory therapy technicians in carrying out duties necessary for the support of respiratory therapy, including those duties which involve minor respiratory therapy services when performed under the direct supervision of licensed respiratory therapists, so long as such activities do not go beyond the scope of practice defined by this Chapter;

(5) to prohibit the practice of respiratory therapy by licensed respiratory therapists of other states or countries while appearing as clinicians at bona fide educational seminars sponsored by respiratory therapy, medical or other healing art professional associations, so long as such activities do not go beyond the scope of practice defined by this Chapter.

SOURCE: Added by P.L. 24-329:13 (Aug. 14, 1998).

§ 122004. Scope of Practice.

(a) Registered Respiratory Therapists. The practice of respiratory care includes, but is not limited to, the services set forth in the law. The licensed Registered Respiratory Therapist provides these services for the assessment, treatment, management, evaluation and care of patients with deficiencies,

**10 GCA HEALTH AND SAFETY
CH. 12 MEDICAL PRACTICES**

abnormalities and diseases of the cardiopulmonary system with guidance from a qualified medical director, and pursuant to a referral from a physician who has medical responsibility for the patient.

(1) A person licensed under this Chapter as a Respiratory Therapist may evaluate and treat human ailments by respiratory therapy according to a physician's consultation. The evaluation shall be the Therapist's assessment of a patient's problem and shall include a respiratory therapy diagnosis. If a patient's problem is outside the scope of therapist, the therapist shall consult with a person licensed to practice medicine. If a patient, at any time, requires further medical evaluation or diagnostic testing, that patient shall be referred to an authorized health care practitioner.

(2) Direct referral of a patient by an authorized health care practitioner may be by telephone, letter or in person; provided, however, if the instructions are oral, the therapist may administer treatment accordingly, but must make a record describing the nature of the treatment, the date administered, the name of the person receiving the treatment and the name of the referring authorized health care practitioner.

(3) The practice of respiratory care by a licensed Registered Respiratory Therapist includes, but is not limited to, the following services:

(A) providing and monitoring therapeutic administration of medical gases, aerosolized humidification and pharmacological agents related to respiratory care procedures, but not including administration of anesthesia;

(B) carrying out therapeutic application and monitoring of mechanical ventilator support;

(C) providing cardiopulmonary resuscitation and maintenance of natural airways and insertion, and maintenance of artificial airways;

**10 GCA HEALTH AND SAFETY
CH. 12 MEDICAL PRACTICES**

(D) assessing and monitoring signs, symptoms and general behavior relating to, respiratory care treatment or evaluation for treatment and diagnostic testing, including determination of whether the signs, symptoms, reactions, behavior or general response exhibit abnormal characteristics;

(E) obtaining physiological specimens and interpreting physiological data including:

- (i) analyzing arterial and venous blood gases;
- (ii) assessing respiratory secretions;
- (iii) measuring ventilatory volumes, pressures, and flows;
- (iv) testing pulmonary function;
- (v) testing and studying the cardiopulmonary system;
- (vi) diagnostic testing of breathing patterns related to sleeping disorders;
- (vii) assisting hemodynamic monitoring and support of the cardiopulmonary system;
- (viii) assessing and making suggestions for modifications in the treatment regimen based on abnormalities, protocols or changes in patient response to respiratory care treatment;
- (ix) providing cardiopulmonary rehabilitation, including respiratory care-related educational components, postural drainage, chest physiotherapy, breathing exercises, aerosolized administration of medications, and equipment use and maintenance;
- (x) instructing patients and their families in techniques for the prevention, alleviation and rehabilitation of deficiencies, abnormalities and diseases of the cardiopulmonary system;

**10 GCA HEALTH AND SAFETY
CH. 12 MEDICAL PRACTICES**

(xi) assisting with management of the cardiopulmonary system and medical equipment during off-Guam transports;

(xii) transcribing and implementing physician orders for respiratory care services;

(F) services within the training and experience of the practitioner; and

(G) services within the parameters of the laws, rules and standards of the facilities in which the respiratory care practitioner practices.

(4) Respiratory care services provided by a licensed Registered Respiratory Therapist, whether delivered in a health care facility or the patient's residence, must not be provided, except upon referral from a physician.

(b) Licensed Certified Respiratory Therapists.

(1) A licensed Certified Respiratory Therapist is not an independent practitioner, and works under the indirect supervision of the licensed Registered Respiratory Therapist.

(2) A licensed Certified Respiratory Therapist will follow the treatment program set by the licensed Registered Respiratory Therapist.

(3) The practice of respiratory care by a licensed Certified Respiratory Therapist includes, but is not limited to, the following services:

(A) providing and monitoring therapeutic administration of medical gases, aerosolized humidification, and pharmacological agents related to respiratory care procedures, but not including administration of anesthesia;

(B) carrying out therapeutic application and monitoring of mechanical ventilator support;

**10 GCA HEALTH AND SAFETY
CH. 12 MEDICAL PRACTICES**

(C) providing cardiopulmonary resuscitation and maintenance of natural airways, and insertion and maintenance of artificial airways;

(D) assessing and monitoring signs, symptoms and general behavior relating to, respiratory care treatment or evaluation for treatment and diagnostic testing, including determination of whether the signs, symptoms, reactions, behavior or general response exhibit abnormal characteristics;

(E) obtaining physiological specimens and interpreting physiological data including:

- (i) analyzing arterial and venous blood gases;
- (ii) assessing respiratory secretions;
- (iii) measuring ventilatory volumes, pressures, and flows;
- (iv) testing pulmonary function;
- (v) assessing and making suggestions for modifications in the treatment regimen based on abnormalities, protocols or changes in patient response to respiratory care treatment;
- (vi) providing cardiopulmonary rehabilitation, including respiratory care-related educational components, postural drainage, chest physiotherapy, breathing exercises, aerosolized administration of medications, and equipment use and maintenance;
- (vii) instructing patients and their families in techniques for the prevention, alleviation and rehabilitation of deficiencies, abnormalities and diseases of the cardiopulmonary system; and
- (viii) transcribing and implementing physician orders for respiratory care services;

(F) services within the training and experience of the practitioner; and

**10 GCA HEALTH AND SAFETY
CH. 12 MEDICAL PRACTICES**

(G) services within the parameters of the laws, rules and standards of the facilities in which the respiratory care practitioner practices.

(4) Respiratory care services provided by a licensed Registered Respiratory Therapist, whether delivered in a health care facility or the patient's residence, must not be provided, except upon referral from a physician.

SOURCE: Added by P.L. 24-329:13 (Aug. 14, 1998), amended by P.L. 25-190:4 (Jan. 22, 2001).

2015 NOTE: Subsection designations in subsections (a)(3) and (b)(3) were altered from lowercase letters to uppercase letters to adhere to the Compiler's alpha-numeric scheme pursuant to 1 GCA § 1606.

§ 122005. Supportive Personnel; Delineation of Responsibilities.

(a) A licensed Registered Respiratory Therapist is professionally and legally responsible for patient care given by supportive personnel under the Registered Respiratory Therapist's supervision. If a licensed Registered Respiratory Therapist fails to adequately supervise patient care given by supportive personnel, the Board may take disciplinary action against the licensee.

(b) Supervision of supportive personnel requires that the licensed Registered Respiratory Therapist perform or supervise the following activities:

- (1) provide initial evaluation of the patient;
- (2) develop a treatment plan and program, including treatment goals;
- (3) assess the competence of supportive personnel to perform assigned tasks;
- (4) select and delegate appropriate portions of the treatment plan and program;
- (5) direct and supervise supportive personnel in delegated functions;

**10 GCA HEALTH AND SAFETY
CH. 12 MEDICAL PRACTICES**

(6) reevaluate the patient and adjust the treatment plan as acceptable respiratory therapy practice requires, consistent with the delegated health care task;

(7) document sufficient in-service training and periodic evaluation of performance to assure safe performance of the tasks assigned to supportive personnel; and

(8) provide discharge planning.

SOURCE: Added by P.L. 24-329:13 (Aug. 14, 1998), amended by P.L. 25-190:5 (Jan. 22, 2001).

2017 NOTE: Subsection/subitem designations added/altered pursuant to the authority of 1 GCA § 1606.

**ARTICLE 21
DIETITIAN AND NUTRITIONIST**

NOTE: Article 21 was added by P.L. 24-329:14 (Aug. 14, 1998), entitled, "Nutritionist/Clinical Dietitian"; repealed and added by P.L. 25-192:3 (Jan. 25, 2001), entitled "Dietitian and Nutritionist."

- § 122101. Definitions.
- § 122102. Qualification for Licensure; Dietitian or Nutritionist.
- § 122103. Waiver of Examination Requirements; Licensure by Endorsement.
- § 122104. Scope of Practice; Licensed Dietitians and Licensed Nutritionists.
- § 122105. Persons and Practices Not Affected.
- § 122106. Prohibited Acts.

§ 122101. Definitions.

For purposes of this Article, the following words and phrases have been defined to mean:

(a) Dietitian shall mean a person certified as a Registered Dietitian by the Commission on Dietetic Registration.

(b) Nutritionist shall mean a person who either:

**10 GCA HEALTH AND SAFETY
CH. 12 MEDICAL PRACTICES**

(1) has qualified as a diplomate of the American Board of Nutrition or as a Certified Nutrition Specialist with the Certification Board for Nutrition Specialists; or

(2) has received a master's or doctoral degree from an accredited college or university with a major in human nutrition, public health nutrition, clinical nutrition, nutrition education, community nutrition, or food and nutrition, and has completed a documented work experience in human nutrition or human nutrition research of at least nine hundred (900) hours.

(c) American Dietetic Association (ADA) is a national professional organization for nutrition and dietetics practitioners which accredits educational and pre-professional training programs in dietetics.

(d) The Commission on Dietetic Registration (“CDR”) is a member of the National Commission for Certifying Agencies (“NCCA”) and is the credentialing agency of the American Dietetic Association.

(e) Certification Board for Nutrition Specialists (“CBNS”) is the credentialing body which certifies advanced degree nutritionists as Certified Nutrition Specialists.

(f) Licensed Dietitian (“LD”) shall mean a person licensed by the Board to engage in dietetics or nutrition practice under this Article.

(g) Licensed Nutritionist (“LN”) shall mean a person licensed by the Board to engage in dietetics or nutrition practice under this Article.

(h) Medical nutrition care means the component of nutrition care that deals with:

(1) interpreting and recommending nutrient needs relative to medically prescribed diets, including, but not limited to, tube feedings, specialized intravenous solutions and specialized oral feedings;

**10 GCA HEALTH AND SAFETY
CH. 12 MEDICAL PRACTICES**

(2) food and prescription drug interactions; and

(3) developing and managing food service operations whose chief function is nutrition care and provision of medically prescribed diets.

(i) Medically prescribed diet means a diet prescribed when specific food or nutrient levels need to be monitored, altered, or both, as a component of a treatment program for an individual whose health status is impaired or at risk due to disease, injury, or surgery, and may only be performed as initiated by or in consultation with a licensed physician.

(j) Nutrition assessment means the evaluation of the nutrition needs of individuals or groups using appropriate data to determine nutrient needs or status and make appropriate nutrition recommendations.

(k) Nutrition counseling means advising and assisting individuals or groups on appropriate nutrition intake by integrating information from the nutrition assessment.

(l) Nutrition services for individuals and groups shall include, but is not limited to, all of the following:

(1) providing nutrition assessments relative to preventive maintenance or restorative care;

(2) providing nutrition education and nutrition counseling as components of preventive maintenance or restorative care; and

(3) developing and managing systems whose chief function is nutrition care. Nutrition services for individuals and groups does not include medical nutrition care as defined in this Act.

(m) Restorative means the component of nutrition care that deals with oral dietary needs for individuals and groups. Activities shall relate to the metabolism of food and the requirements for nutrients, including dietary supplements for growth, development, maintenance or attainment of optimal health.

**10 GCA HEALTH AND SAFETY
CH. 12 MEDICAL PRACTICES**

SOURCE: Added by P.L. 24-329:14 (Aug. 14, 1998); repealed and reenacted by P.L. 25-192:3 (Jan. 25, 2001).

§ 122102. Qualification for Licensure; Dietitian or Nutritionist.

(a) Licensed Dietitian. The applicant for licensure as a dietitian shall:

(1) Provide evidence of current registration as a Registered Dietitian (“RD”) by the Commission on Dietetic Registration (CDR); or

(2) (A) Have received a baccalaureate or postgraduate degree from a college or university, accredited by a regional accrediting body recognized by the Council on Post-Secondary Accreditation, with a major in dietetics, human nutrition, nutrition education, community nutrition, public health nutrition, foods and nutrition, or an equivalent major course of study, as approved by the Board. Applicants who have obtained their education outside of the United States and its territories must have their academic degree validated by the Board as equivalent to a baccalaureate or masters degree conferred by a regionally accredited college or university in the United States;

(B) Have satisfactorily completed a program of supervised clinical experience approved by the CDR; and

(C) Have passed the registration examination for dietitians administered by the CDR.

(b) Licensed Nutritionist. The applicant for licensure as a nutritionist shall:

(1) meet the requirements of Subsections (a)(1) or (2) of this Section; or

(2) has qualified as a diplomate of the American Board of Nutrition, or as a Certified Nutrition Specialist with the Certification Board for Nutrition Specialists, or has received a master's or doctoral degree from an accredited college or university with a major in human nutrition, public health

**10 GCA HEALTH AND SAFETY
CH. 12 MEDICAL PRACTICES**

nutrition, clinical nutrition, nutrition education, community nutrition or food and nutrition, and has completed a documented work experience in human nutrition or human nutrition research of at least 900 hours.

(c) Waiver of fees. All fees for application and license in part (b) of this Section will be waived for all applicants who are currently licensed under part (a) of this Section.

SOURCE: Added by P.L. 24-329:14 (Aug. 14, 1998); repealed and reenacted by P.L. 25-192:3 (Jan. 25, 2001).

2015 NOTES: This section was originally entitled “Qualification for Licensure; Clinical Dietitian or Nutritionist” by P.L. 24-329:14. Repealed by P.L. 25-192:3.

Subsection designations in subsections (a)(2) were altered from Roman numerals to uppercase letters to adhere to the Compiler’s alpha-numeric scheme pursuant to 1 GCA § 1606.

§ 122103. Waiver of Examination Requirements; Licensure by Endorsement.

The Board may grant a license to any person who is currently registered as a Registered Dietitian by the CDR, or who is currently recognized as a diplomate of the American Board of Nutrition or as a Certified Nutrition Specialist with the Certification Board for Nutrition Specialists.

SOURCE: Added by P.L. 25-192:3 (Jan. 25, 2001).

2015 NOTE: This section was originally entitled, “International Graduates; Requirements” by P.L. 24-329:14 (Aug. 14, 1998); repealed by P.L. 25-192:3 (Jan. 25, 2001).

§ 122104. Scope of Practice; Licensed Dietitians and Licensed Nutritionists.

(a) Nutrition assessment, as defined in this Article, and including individual and community food practices and nutritional status using anthropometric, biochemical, clinical, dietary and demographic data, for clinical research and program planning purposes;

(b) Developing, establishing, and evaluating nutrition services for individuals and groups as defined in this Article;

**10 GCA HEALTH AND SAFETY
CH. 12 MEDICAL PRACTICES**

(c) Nutrition counseling and education, as a part of preventive or restorative health care throughout the life cycle;

(d) Determining, applying and evaluating standards for food and nutrition services;

(e) Applying scientific research to the role of food in the maintenance of health and the treatment of disease; and

(f) Medical nutrition care and medically prescribed diets, as defined by this Article, can be provided by a licensed dietitian; however, a licensed nutritionist can only provide medical nutrition care and medically prescribed diets in consultation with a licensed physician or a licensed dietitian.

SOURCE: Added by P.L. 25-192:3 (Jan. 25, 2001).

2015 NOTE: This section was originally entitled, "Licensure Examination" by P.L. 24-329:14 (Aug. 14, 1998); repealed by P.L. 25-192:3 (Jan. 25, 2001).

§ 122105. Persons and Practices Not Affected.

Nothing in this Article shall be construed as preventing or restricting the practice, services or activities of:

(a) any person licensed or certified on Guam by any other law from engaging in the profession or occupation for which the person is licensed or certified, or any person under the supervision of the licensee or certified individual when rendering services within the scope of the profession or occupation of the licensee or certificant; and any person with a bachelor's degree in home economics or health education from furnishing nutrition information incidental to the practice of that person's profession;

(b) any dietitian or nutritionist serving in the Armed Forces or the Public Health Service of the United States, or employed by the Veterans Administration when performing duties associated with that service or employment;

(c) any person pursuing a supervised course of study leading to a degree or certificate in dietetics or nutrition at an accredited education program, if the person is designated by a title which clearly indicates the person's status as a student or trainee;

**10 GCA HEALTH AND SAFETY
CH. 12 MEDICAL PRACTICES**

(d) any person when acting under the direction and supervision of a person licensed under this Article, in the execution of a plan of treatment authorized by the licensed person;

(e) an educator who is employed by a nonprofit organization approved by the Board; a Federal, territorial, or other political subdivision; an elementary or secondary school; or an accredited institution of higher education, insofar as the activities and services of the educator are part of such employment;

(f) any person who markets or distributes food, food materials, or dietary supplements, or any person who engages in the explanation of the use and benefits of those products, or the preparation of those products, as long as that person does not represent oneself as a licensed dietitian or licensed nutritionist, and provides to the client a disclaimer, in writing, stating such; or

(g) any person who provides general or gratuitous nutrition information, as long as the provider does not represent oneself as a licensed dietitian, or licensed nutritionist, and provides to the client a disclaimer stating such.

SOURCE: Added by P.L. 24-329:14 (Aug. 14, 1998) as 10 GCA § 122107; repealed and added to this section by P.L. 25-192:3 (Jan. 25, 2001).

2015 NOTE: This section was originally entitled, “Qualification for Examination” by P.L. 24-329:14; repealed by P.L. 25-192:3.

§ 122106. Prohibited Acts.

(a) Unauthorized Practice. Except as otherwise provided under this Article, a person may not practice, attempt to practice, or offer to practice dietetics or nutritional services on Guam, unless licensed by the Board.

(b) Misrepresentation of Title. Except as otherwise provided under this Article, a person may not represent or imply to the public by use of the title “licensed dietitian” or “licensed nutritionist,” by other title, by description of services, methods or

**10 GCA HEALTH AND SAFETY
CH. 12 MEDICAL PRACTICES**

procedures that the person is authorized to practice dietetics or nutritional services on Guam.

(c) Misuse of Words and Terms. Unless authorized to engage in dietetics or nutrition practice under this Article, a person may not use the words “dietitian,” “registered dietician” or “licensed dietitian,” “nutritionist,” “nutrition specialist” or “licensed nutritionist,” alone or in combination, or the terms “LD,” “RD” or “D,” “LN,” “NS” or “N,” or any facsimile or combination in any words, letters, abbreviations or insignia.

SOURCE: Added by P.L. 25-192:3 (Jan. 25, 2001).

2015 NOTE: This section was originally entitled, “Waiver of Requirements” by P.L. 24-329:14; repealed by P.L. 25-192:3.

**ARTICLE 22
NURSING HOME ADMINISTRATOR**

SOURCE: The Article was added by P.L. 24-329:15 (Aug. 14, 1998).

- § 122201. Nursing Home Administrator.
- § 122202. Authority.
- § 122203. Qualification.
- § 122204. Application for Licensure.
- § 122205. Licensure by Examination.
- § 122206. Licensure by Endorsement/Reciprocity.
- § 122207. Courses of Instruction and Training.
- § 122208. Present Administrators.
- § 122209. Renewal of License.

§ 122201. Nursing Home Administrator.

A nursing home shall be administered by a licensed Nursing Home Administrator.

§ 122202. Authority.

The Board shall issue a license to practice as a nursing home administrator to any applicant who meets the qualification for licensure upon submission of an application and payment of the required fee.

**10 GCA HEALTH AND SAFETY
CH. 12 MEDICAL PRACTICES**

§ 122203. Qualification for Licensure.

An applicant for a nursing home administrator license shall apply to the Board of Licensure on forms provided by the Board. The applicant shall submit:

- (a) proof of age;
- (b) proof of physical and emotional capability to administer the nursing home;
- (c) a notarized copy of a diploma, or evidence satisfactory to the Board of having successfully completed an accredited course of study or training as a nursing home or health administrator, approved by the Board (The program shall consist of both theory and practical experience.); and
- (d) have a personal interview with the Board, as requested.

§ 122204. Application for License.

Any person who desires to practice as a Nursing Home Administrator on Guam, and meets the qualifications contained in § 122203 of this Chapter, shall complete and submit his application on the form provided by the Board and file all required documents. The Board may request for a personal interview with the applicant.

§ 122205. Licensure by Examination.

Having successfully passed an examination administered by the Board designed to test competency in the following areas:

- (a) working knowledge of the needs to be served by nursing homes;
- (b) laws governing the operation of nursing homes, including prosecution of the interests of patients; and
- (c) elements of good nursing home administrator.

Payment for the required fee.

2015 NOTE: Subsection designations were altered from numerals to lowercase letters to adhere to the Compiler's alpha-numeric scheme pursuant to 1 GCA § 1606.

10 GCA HEALTH AND SAFETY
CH. 12 MEDICAL PRACTICES

§ 122206. Licensure by Endorsement/Reciprocity.

The Board may issue a nursing home administrator's license to any person who holds a current license as a nursing home administrator from another U.S. jurisdiction; provided, that the standards for licensure are equivalent to those prevailing on Guam, and the applicant meets the qualification and payment of the required fee.

§ 122207. Courses of Instruction and Training.

The Board shall make provisions for courses and training on Guam for interested applicants to meet the requirements of this Chapter.

§ 122208. Present Administrators.

Persons who, on the effective date of this Chapter, have been actively engaged as a Nursing Home Administrator for at least two (2) years next preceding such effective date, but do not meet the requirements in force pursuant to this Article, shall be issued a temporary license without evidence of satisfactory completion of a course of instructions, training and without examination, but any such licenses shall expire no later than June 30, 2001.

§ 122209. Renewal of License.

The Nursing Home Administrator 's license shall be valid for two (2) years, nontransferable, and shall be renewed biennially thereafter on or before September 30th on forms provided by the Board and payment of the fee.
