

**CERTIFICATION OF ADMINISTRATIVE RULES
FILED WITH THE LEGISLATIVE SERVICES AGENCY
OTHNI LATHRAM, DIRECTOR**

(Pursuant to Code of Alabama 1975, §41-22-6, as amended).

I certify that the attached is/are correct copy/copies of rule/s as promulgated and adopted on Thursday, August 21, 2025, and filed with the agency secretary on Thursday, September 11, 2025.

AGENCY NAME: Alabama Board of Medical Examiners

INTENDED ACTION: Amend

RULE NO.: 540-X-27-.04
(If amended rule, give specific paragraph, subparagraphs, etc., being amended) **(1) (d)**

RULE TITLE: Application For A Bridge Year Graduate Physician Permit

ACTION TAKEN: State whether the rule was adopted with or without changes from the proposal due to written or oral comments:

Adopted without changes. n/a

NOTICE OF INTENDED ACTION PUBLISHED IN VOLUME XLIII, ISSUE NO. 9, AAM,
DATED MONDAY, JUNE 30, 2025.

STATUTORY RULEMAKING AUTHORITY: 34-24-53.1, 34-24-75.2

(Date Filed)
(For LRS Use Only)

REC'D & FILED
SEP 12, 2025
LEGISLATIVE SVC AGENCY

William M. Perkins

William M Perkins

Certifying Officer or his or her
Deputy

(NOTE: In accordance with §41-22-6(b), as amended, a proposed rule is required to be certified within 90 days after completion of the notice.)

**Application For A Bridge Year Graduate
Physician Permit.**

(1) To apply for a permit to practice as a bridge year graduate physician, an individual must complete the following:

(a) Submit an application on form(s) approved by the Board;
and

(b) Pay to the Board in advance the required application fee of \$200.00. This fee is nonrefundable once payment is received by the Board.

(c) For the purposes of determining an applicant's suitability to obtain a permit to practice as a bridge year graduate physician, each applicant shall submit to a criminal history background check.

1. Each applicant shall submit to the Board a complete set of fingerprints, either inked cards or electronically, properly executed by a law enforcement agency or an individual properly trained in fingerprinting techniques.

2. The Board shall submit the fingerprints provided to the State Bureau of Investigation (SBI). The fingerprints shall be forwarded by the SBI to the Federal Bureau of Investigation (FBI) for a national criminal history record check.

3. The applicant shall pay directly to the Board, or its designee, a criminal background check fee of sixty-five dollars (\$65.00).

4. The Board shall keep information received pursuant to this subsection confidential, except that such information received and relied upon in denying the issuance of a permit to practice as a bridge year graduate physician in this state may be disclosed as may be necessary to support the denial.

(d) An applicant for a bridge year graduate physician permit shall disclose whether:

1. Applicant has ever been arrested for, cited for, charged with, or convicted of any crime, offense, or violation of any law, felony, or misdemeanor, including, but not limited to, offenses related to professional healthcare practice, state or federal controlled substances laws, or driving under the influence (DUI).

NOTE: This question excludes minor traffic violations such as speeding and parking tickets but includes felony and misdemeanor criminal matters that have been dismissed, expunged, sealed, subject to a diversion or deferred prosecution program, or otherwise set aside.

2. Applicant has ever been arrested for, cited for, charged with, or convicted of any sex offender laws or required to register as a sex offender for any reason.

3. A judgment has ever been rendered against the applicant or action settled relating to an action for injury, damages, or wrongful death for breach of the standard of care in the performance of the applicant's professional service ("malpractice").

4. As of the date of the application, applicant is the subject of an investigation or proposed action by any law enforcement agency.

5. Applicant has ever had any Drug Enforcement Administration registration and/or state-controlled substances registration denied, voluntarily surrendered while under investigation, or subject to any discipline, including, but not limited to revocation, suspension, probation, restriction, conditions, reprimand, or fine.

6. Applicant's medical education, training, or medical practice been interrupted or suspended, or applicant ceased to engage in direct patient care, for a period longer than 60 days for any reason other than a vacation or for the birth or adoption of a child.

7. Applicant was ever placed on academic or disciplinary probation by, or been required to remediate any portion of, a medical school or postgraduate program.

8. Applicant had limitations or special requirements imposed because of questions of academic, clinical, or disciplinary problems, or any other reason during his or her medical education or postgraduate training, such as repeating a class or classes or taking time off from school to study for an examination.

9. Applicant has ever been disciplined for unprofessional conduct/behavior reasons by a medical school or postgraduate program.

10. Applicant has ever been denied prescription privileges for non-controlled or legend drugs by any state or federal authority.

11. Applicant has ever been denied a permit to practice as a bridge year graduate physician, or the equivalent, in any state or jurisdiction, or has had an application for a permit to practice as a bridge year graduate physician, or the equivalent of, withdrawn under threat of denial.

12. Applicant's certification or permit to practice as a bridge year graduate physician, or the equivalent, in any state or jurisdiction has ever been subject to any discipline, including but not limited to revocation, suspension, probation, restrictions, conditions, reprimand, or fine.

13. Applicant's privileges at any hospital or health care facility have ever been revoked, suspended, curtailed, limited, or placed under conditions restricting applicant's practice, if applicable.

14. As of the date of the application, applicant is the subject of an investigation or proposed action by any federal agency, any licensing board/agency, or any hospital or health care facility.

15. Applicant is currently suffering from any condition that impairs their judgment or that would otherwise adversely affect their ability to practice medicine in a competent, ethical, and professional manner.

16. Applicant, within the past five years, has raised the issue of any physical or psychiatric health disorder as a defense, mitigation, or explanation for applicant's actions during any administrative or judicial proceeding or investigation; any inquiry or other proceeding; or any proposed termination by an educational institution; employer; government agency; professional organization; or licensing authority.

17. The Board recognizes that licensees encounter potentially impairing health conditions just as their patients and other health care providers do, including psychiatric or physical illnesses which may impact cognition, as well as substance use disorders. The Board expects its licensees to address their health concerns, both mental and physical, in a timely manner to ensure patient safety. Licensees should seek appropriate medical

care and should limit their medical practice when appropriate and as needed. The Board encourages licensees to utilize the services of the Alabama Professionals Health Program, a physician advocacy organization dedicated to improving the health and wellness of medical professionals in a confidential manner. The failure to adequately address a health condition, where the licensee is unable to practice medicine with reasonable skill and safety to patients, can result in the Board taking action against the license to practice medicine.

I have read and understand the statements above.
[Applicant Attestation]

(e) The application form for a bridge year graduate physician permit will request the following of the bridge year graduate physician:

1. Name, home address, email address, place and date of birth, social security number, gender, telephone number(s), education and training experience, specialty, if applicable, examination history, a color photograph taken within sixty days prior to the date of the application, medical school certification, and any additional information the Board deems relevant to the application process.

(f) The application form for a bridge year graduate physician permit and/or a corresponding form for a supervising physician will request the following of the supervising physician:

1. Name, Alabama medical license number, medical specialty, board certification, residency completion date, name of program and completion date of any fellowship, or other supervised training program, principal practice site, telephone number, name and address of the bridge year graduate physician's practice location(s), the number of hours the bridge year graduate physician will practice per week, job description and approved formulary of the bridge year graduate physician, covering physician agreements, if applicable, a certification of the understanding of the responsibilities of a supervising physician, and any additional information the Board deems relevant to the application process.

Author: Alabama Board of Medical Examiners

Statutory Authority: Code of Ala. 1975, §34-24-75.2 and Act No. 23-233.

History: **New Rule:** Published May 31, 2024; effective July 15, 2024. **Amended:** Published September 30, 2025; effective November 14, 2025.