

**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, November 13, 2025, and filed with the agency secretary on Thursday, November 13, 2025.

**AGENCY NAME:** ALABAMA BOARD OF MEDICAL EXAMINERS

**INTENDED ACTION:** Amend

**RULE NO.:** 540-X-8-.01

(If amended rule, give specific paragraph, subparagraphs, etc., being amended)

**RULE TITLE:** Definitions

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

**Adopted without changes.** None.

NOTICE OF INTENDED ACTION PUBLISHED IN VOLUME XLIII, ISSUE NO. 12, AAM, DATED TUESDAY, SEPTEMBER 30, 2025.

**STATUTORY RULEMAKING AUTHORITY:** Code of Ala. 1975, §§34-24-53, 34-21-81

(Date Filed)  
(For LRS Use Only)  
**REC'D & FILED**  
NOV 14, 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.)

The following definitions will apply to these rules:

(1) BOARD OF MEDICAL EXAMINERS. The State Board Of Medical Examiners established pursuant to Code of Ala. 1975, §34-24-53.

(2) BOARD OF NURSING. The Board of Nursing established under Code of Ala. 1975, §34-21-2.

(3) ADVANCED PRACTICE NURSE. A registered nurse who has gained additional knowledge and skills through successful completion of an organized program of nursing education that prepares nurse for advanced practice roles and has been approved by the Board of Nursing to engage in the practice of advanced practice nursing. Two categories of advanced practice nurses are subject to the requirements of collaborative practice:

(a) Certified registered nurse practitioners (CRNP)

(b) Certified nurse midwives (CNM)

(4) ADVANCED PRACTICE NURSING - COLLABORATIVE PRACTICE. The delivery of health care services by registered nurses who have gained additional knowledge and skills through successful completion of an organized program of nursing education that prepares nurses for advanced practice roles as certified registered nurse practitioners or certified nurse midwives:

(a) Practice as a certified registered nurse practitioner (CRNP) is the performance of nursing skills by a registered nurse who has demonstrated by certification advanced knowledge and skills in the delivery of nursing services within a health care system that provides for consultation, collaborative management or referral as indicated by the health status of the client.

(b) Practice as a certified nurse midwife (CNM) is the performance of nursing skills by a registered nurse who has demonstrated by certification advanced knowledge and skills relative to the management of women's health care focusing on pregnancy, childbirth, the post-partum period, care of the newborn, family planning and gynecological needs of women, within a health care system that provides for consultation, collaborative management or referral as indicated by the health status of the client.

(5) COLLABORATION. A formal relationship between one or more certified registered nurse practitioners or certified nurse midwives and a physician or physicians under which these nurses

may engage in advanced practice nursing as evidenced by written protocols approved according to the requirements of Code of Ala. 1975, §§34-21-80, et. seq. or exempted according to requirements of this statute. The term collaboration does not require direct, on-site supervision of the activities of a certified registered nurse practitioner or a certified nurse midwife by the collaborating physician. The term does require such medical oversight and direction as required by the rules and regulations of the Board of Nursing and the State Board of Medical Examiners.

(6) PHYSICIAN OR COLLABORATING PHYSICIAN. A doctor of medicine or a doctor of osteopathy licensed to practice medicine in Alabama who agrees in writing to practice in collaboration with one or more certified registered nurse practitioners or certified nurse midwives according to the rules and regulations adopted by the Board of Nursing and the State Board of Medical Examiners.

(7) JOINT COMMITTEE OF THE BOARD OF NURSING AND THE STATE BOARD OF MEDICAL EXAMINERS FOR ADVANCED PRACTICE NURSES. The Joint Committee of the Board of Nursing and the State Board of Medical Examiners for Advanced Practice Nurses is a committee composed of the following, pursuant to Code of Ala. 1975, §34-21-80 et seq.

(a) Two physicians licensed to practice medicine in this state;

(b) One licensed physician engaged in collaborative practice with a certified registered nurse practitioner or a certified nurse midwife in this state;

(c) Two certified registered nurse practitioners engaged in an active collaborative practice with a physician in this state; and

(e) One certified nurse midwife engaged in an active collaborative practice with a physician in this state.

(8) LEGEND DRUG. Any drug, medicine, chemical or poison bearing on the label the words, "Caution, federal law prohibits dispensing without prescription" or similar words indicating that such drug, medicine, chemical, or poison may be sold or dispensed only upon the prescription of a licensed practitioner, except that the term legend drug will not include any drug, substance, or compound which is listed Schedules I through V of the Alabama Uniform Controlled Substances Act.

(9) PRESCRIBE OR PRESCRIBING. The act of issuing a prescription for a legend drug.

(10) PRESCRIPTION. An order for a legend drug which is issued and signed by a practitioner authorized by law to prescribe and administer such drugs and is intended to be filled, compounded, or dispensed by a pharmacist.

(11) PROTOCOL. A document approved according to Code of Ala. 1975, §34-21-81, establishing the permissible functions and activities to be performed by certified registered nurse practitioners and certified nurse midwives and signed by collaborating physicians and any nurse practitioners or nurse midwives practicing with those physicians.

(12) MEDICAL OVERSIGHT. Concurrent and on-going collaboration between a physician and a CRNP or CNM and documentation of time together in a practice site; may include but is not limited to direct consultation and patient care, discussion of disease processes and medical care, review of patient records, protocols and outcome indicators, and other activities to promote positive patient outcomes.

(13) QUALITY ASSURANCE. Documented evaluation of the clinical practice of the certified registered nurse practitioner or certified nurse midwife against defined quality outcome measures, using a selected, meaningful sample of patient records which will identify areas needing improvement, set performance goals, and assess progress towards meeting established goals, with a summary of findings, conclusions, and, if indicated, recommendations for change. The physician's signature on the patient record does not constitute quality improvement monitoring.

(14) PRINCIPAL PRACTICE SITE. The main location at which the collaborating physician is engaged in the practice of medicine.

(15) REMOTE PRACTICE SITE. An approved site for collaborative practice without a collaborative or covering physician on-site. The collaborating physician's principal practice site, acute care hospitals, skilled nursing facilities, licensed, special-care assisted living facilities and licensed assisted living facilities are not remote practice sites for the purpose of these rules.

(16) READILY AVAILABLE. Response by the collaborating or covering physician by telephone or telecommunication for consultation, referral or direct medical intervention for a patient as indicated by the needs of a patient and based on usual and customary standards of medical practice.

(17) DIRECT MEDICAL INTERVENTION. Physical presence of a physician to attend the patient as defined in the collaborative practice protocol.

(18) COVERING PHYSICIAN. A doctor of medicine or a doctor of osteopathy licensed to practice medicine in Alabama who agrees in writing to be readily available to collaborate with and provide medical oversight to one or more certified registered nurse practitioners or certified nurse midwives and, if indicated, to provide direct medical intervention to patients during the absence of the Collaborating Physician. The covering physician shall be either a member of the same medical practice, practice group, or multidisciplinary medical team, or of the same or similar practice specialty as the collaborating physician and shall abide by the rules and regulations adopted by the Board of Nursing and the Board of Medical Examiners.

**Author:** Alabama Board of Medical Examiners

**Statutory Authority:** Code of Ala. 1975, §§34-24-53, 34-21-81.

**History:** Filed November 9, 1982 as Rule No. 540-X-2-.17.

**Readopted:** Filed February 8, 1983. Rules reorganized --rule number changed to 540-X-8-.01 (see conversion table at end of code): Filed June 14, 1984 (without publication in AAM).

**Repealed:** Filed June 20, 1996; effective July 26, 1996. **New Rule:** Filed June 20, 1996; effective July 26, 1996. **Amended:** Filed August 25, 2003; effective September 29, 2003. **Amended:** Filed October 6, 2006; effective November 10, 2006. **Amended:** Filed July 2, 2015; effective August 6, 2015. **Amended:** Published April 30, 2021; effective June 14, 2021. **Amended:** Published November 26, 2025; effective January 10, 2026.