

## ATTESTATION FOR EXEMPTION TO LICENSURE DUE TO RESIDENCY TRAINING

### RULES of the TENNESSEE BOARD OF MEDICAL EXAMINERS CHAPTER 0880-02.06 (4)

The Rules of the State of Tennessee Board of Medical Examiners require that in order to participate in a residency/fellowship training program, physicians must either be licensed to practice medicine or be exempted from licensure under the Rules. The GME Office undertakes to secure an exemption from licensure for all trainees enrolled in any ACGME-accredited graduate medical education program sponsored by UT College of Medicine or non-accredited programs administered by the GME Office. As part of that exemption process you are required to answer the attached "Competency Information" questions as promulgated by the Board. The competency questions in this form are identical to the Competency Information questions required of all applicants seeking an unrestricted medical license.

**NOTICE:** A license "exemption" is not a license to practice medicine, nor is it a 'training' license. Rather, it is permission by the Board, only for trainees enrolled in residency/fellowship programs, to undertake clinical training under the supervision and direction of UTHSC faculty members who are themselves licensed physicians. This training exemption does not authorize you to practice medicine outside of the formal clinical training program (such as: moonlighting, side-walk/pop-up or 'free' clinics unless supervised by UTHSC faculty, informally treat friends or family, etc.).

You must fully answer the attached Competency Information questions as well as provide any documents requested, including final documents or orders from the issuing states, courts, and/or agencies.

\_\_\_\_\_  
Incoming Resident's Printed Name

\_\_\_\_\_  
Incoming Resident's Signature

\_\_\_\_\_  
Date signed

*"I declare, under penalty of perjury (Tenn. Code Ann. § 39-16-702) that all of the answers, statements, or assertions I have provided on the Competency Information form, attached, are true and correct. Full and truthful answers are a requirement of the Professionalism Policy, GME Policy 125 as well as the Technical Standards, GMR Policy #411. If any of the above answers are later determined by the University to not be true and correct, the University may revoke my appointment as a Resident and/or take any other adverse academic or disciplinary action which it deems appropriate."*

GME Office March 2025

Name: \_\_\_\_\_

**TN Board of Medical Examiners**

**COMPETENCY INFORMATION**

**PLEASE ANSWER THE FOLLOWING QUESTIONS.** If any answers to the questions are in the **affirmative**, attach an explanation on a separate sheet. **IN SUPPORT OF YOUR EXPLANATION, THE FINAL DOCUMENTS OR ORDERS FROM THE ISSUING STATES, COURTS, AND/OR AGENCIES MUST BE SUBMITTED ALONG WITH THIS APPLICATION.**

For the purposes of these questions, the following phrases or words have the following meanings:

- 1 **"Ability to practice medicine"** is to be construed to include all of the following:
  - a. The cognitive capacity to make appropriate clinical diagnosis, exercise reasoned medical judgments, to learn, and keep abreast of medical developments;
  - b. The ability to communicate those judgments and medical information to patients and other healthcare providers, with or without the use of aids or devices, such as voice amplifiers; and
  - c. The physical capability to perform medical tasks such as physical examination and surgical procedures, with or without the use of aids or devices, such as corrective lenses or hearing aids.
- 2 **"Medical Condition"** includes physiological, mental or psychological conditions including, but not limited to: orthopedic, visual, speech and/or hearing impairments, emotional or mental illness, specific learning disabilities, drug addiction, and alcoholism.
- 3 **"Minor Traffic Offense"** generally means moving and non-moving violations punishable by fines only and does not include offenses such as driving under the influence or while intoxicated or reckless driving.
- 4 **"Chemical substances"** is to be construed to include alcohol, drugs, or medications, including those taken pursuant to a valid prescription for legitimate medical purposes and in accordance with the prescriber's direction, as well as those used illegally.
- 5 **"Currently"** does not mean on the day of or even in the weeks or months preceding the completion of this application. Rather it means recently enough so that the use of drugs or alcohol may have an ongoing impact on one's functioning as a licensee or within the past two (2) years.
- 6 **"Illegal use of controlled substances"** means the use of controlled substances obtained illegally (e.g., heroin, or cocaine) as well as the use of controlled substances that are not obtained pursuant to a valid prescription or not taken in accordance with the directions of a licensed health care practitioner.

**QUESTIONS: CIRCLE YOUR ANSWER**

<p>1. The Board recognizes that licensees may suffer from potentially impairing health conditions, just like their patients, including psychiatric illnesses, physical illnesses which may impact cognition, and substance use disorders. The Board expects its licensees to properly address their health concerns, in order to ensure patient safety. Licensees should seek appropriate medical care and should limit their medical practice, when appropriate. The Board encourages licensees to utilize the services of the Tennessee Medical Foundation, a confidential resource which provides advocacy for licensees who may suffer from potentially impairing illnesses. (<a href="http://www.e-tmf.org">www.e-tmf.org</a>)The failure of a licensee to adequately address any health condition which may impair their ability to practice medicine with reasonable skill and safety to patients, may result in the Board taking action against the license to practice medicine. I have read and understand this statement.</p>	YES	NO
<p>2. Do you currently have any condition that is causing impairment that affects your ability to practice medicine with reasonable skill and safety in a competent, ethical and professional manner? (You may answer no if you are being appropriately treated and are not impaired.)</p>	YES	NO

<p><b>3.</b> Do you currently use any medications or substances (legal, OTC, prescribed or illicit) which in any way impairs or limits your ability to practice medicine with reasonable skill and safety in a competent, ethical and professional manner?</p> <p>If so, please list:</p>	YES	NO
<p><b>4.</b> During the past two years, did you engage in any activity involving substances, either alcohol or controlled/illicit drugs, that impaired or limited your ability to practice medicine with reasonable skill and safety in a competent, ethical and professional manner? You may answer "NO" if you are being appropriately treated and are not impaired). It should be noted, however, that if such activity is not revealed, but manifests at some later time in your career, the Board, in its role as the protector of the health, safety and welfare of people in the State of Tennessee, will be able to pursue a disciplinary action on your license.</p>	YES	NO
<p><b>5.</b> Have you ever been diagnosed as having or have you ever been treated for a paraphilia or other type disease of a predatory nature such as, but not limited to pedophilia, exhibitionism, voyeurism, etc.</p>	YES	NO
<p><b>6.</b> Have you ever held or applied for a license or certificate in any state, country, or province, in any health care profession, that has been or was ever denied, reprimanded, suspended, restricted, revoked, otherwise disciplined, curtailed, or voluntarily surrendered under threat of investigation or disciplinary action?</p>	YES	NO
<p><b>7.</b> Have you ever had staff privileges at any hospital or health care facility that were ever revoked, suspended, curtailed, restricted, limited, otherwise disciplined, or voluntarily surrendered under threat of restriction or disciplinary action?</p>	YES	NO
<p><b>8.</b> Have you ever applied for or held a state or federal controlled substance certificate that was ever denied, revoked, suspended, restricted, voluntarily surrendered or otherwise disciplined or surrendered under threat of restriction or disciplinary action?</p>	YES	NO
<p><b>9.</b> Have you ever been convicted (including a nolo contendere plea or guilty plea) of a felony or misdemeanor (other than a minor traffic offense) whether or not a sentence was imposed or suspended?</p>	YES	NO
<p><b>10.</b> Have you ever been rejected or censured by a medical society?</p>	YES	NO
<p><b>11.</b> In relation to the performance of your professional services in any profession:  a. Have you ever had a final judgment rendered against you;  b. Have you ever entered into any settlement of any legal action; or  c. Are there any legal actions pending against you?  For this question, a final judgment means a decision rendered by a jury or court authority at trial; a settlement means an agreement without a trial where payment is awarded; a pending legal action means a claim that has not been decided, settled, or dismissed.</p>	YES	NO
<p><b>12.</b> Are you currently under investigation by a licensing board?</p>	YES	NO
<p><b>13.</b> My name has been placed on the registry of persons who have abused, neglected or misappropriated the property of vulnerable individuals (Tennessee abuse registry or an abuse registry in another state).</p>	YES	NO