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Appendix A METHODOLOGY

1. Introduction

This version of the Standards of Care (SOC-8) is based upon a more rigorous and methodological evidence-based approach than previous versions. This evidence is not only based on the published literature (direct as well as background evidence) but also on consensus-based expert opinion. Evidence-based guidelines include recommendations intended to optimize patient care and are informed by a systematic review of evidence and an assessment of the benefits and harms of alternative care options. Evidence-based research provides the basis for sound clinical practice guidelines and recommendations but must be balanced by the realities and feasibility of providing care in diverse settings. The process for development of the SOC-8 incorporated recommendations on clinical practice guideline development from the National Academies of Medicine and The World Health Organization that addressed transparency, the conflict-of-interest policy, committee composition and group process. (Institute of Medicine Committee on Standards for Developing Trustworthy Clinical Practice, 2011; World Health Organization, 2019a).

The SOC-8 revision committee was multidisciplinary and consisted of subject matter experts, health care professionals, researchers and stakeholders with diverse perspectives and geographic representation. All committee members completed conflict of interest declarations.*

A guideline methodologist assisted with the planning and development of questions, and an independent team undertook systematic reviews that were used to inform some of the statements for recommendations. Additional input to the guidelines was provided by an international advisory committee, legal experts, and feedback received during a public comment period. Recommendations in the SOC-8 are based on available evidence supporting interventions, a discussion of risks and harms, as well as feasibility and acceptability within different contexts and country settings. Consensus of the final recommendations was attained using a Delphi process that included all members of the Standards of Care Revision committee and required that recommendation statements were approved by 75% of members. Supportive and explanatory text of the evidence for the statements were written by chapter members. Drafts of the chapters were reviewed by the Chair and the Co-Chairs of the SOC Revision Committee to ensure the format was consistent, evidence was properly provided, and recommendations were consistent across chapters. An independent team checked the references used in the SOC-8 before the guidelines were fully edited by a single professional. A detailed overview of the SOC-8 Methodology is described below.

2. Difference between the methodology of the SOC-8 and previous editions

The main differences in the methodology of the SOC-8 when compared with other versions of the SOC are:

- The involvement of a larger group of professionals from around the globe;

- A transparent selection process to develop the guidelines steering committee as well as to select chapter leads and members;
- The inclusion of diverse stakeholders in the development of the SOC-8
- Management of conflicts of interest
- The use of a Delphi process to reach agreement on the recommendations among SOC-8 committee members
- The involvement of an independent body from a reputable university to help develop the methodology and undertake independent systematic literature reviews where possible
- Recommendations were graded as either “recommend” or “suggest” based upon the strength of the recommendations.
- The involvement of an independent group of clinical academics to review citations.
- The involvement of international organizations working with the transgender and gender diverse (TGD) community, members of WPATH and other professional organizations as well as the general public who provided feedback through a public comment period regarding the whole SOC-8.

3. Overview of SOC-8 development Process

The steps for updating the Standards of Care are summarized below:

1. Establishing Guideline Steering Committee including Chair, and Co-Chairs (July 19, 2017)
2. Determining chapters (scope of guidelines)
3. Selecting Chapter Members based upon expertise (March 2018)
4. Selecting the Evidence Review Team: John Hopkins University (May 2018)
5. Refining topics included in the SOC-8 and review questions for systematic reviews
6. Conducting systematic reviews (March 2019)
7. Drafting the recommendation statements
8. Voting on the recommendation statements using a Delphi process (September 2019–February 2022)
9. Grading of the recommendations statements
10. Writing the text supporting the statements
11. Independently validating the references used in the supportive text
12. Finalizing a draft SOC-8 (December 1, 2021)
13. Feedback on the statements by International Advisory Committee
14. Feedback on the entire draft of the SOC-8 during a public comment period (November 2021–January 2022)
15. Revision of Final Draft based on comments (January 2022– May 2022)
16. Approval of final Draft by Chair and Co-Chairs (June 10, 2022)
17. Approval by the WPATH Board of Directors
18. Publication of the SOC-8
19. Dissemination and translation of the SOC-8

3.1. Establishment of Guideline Steering Committee

The WPATH Guideline Steering Committee oversaw the guideline development process for all chapters of the Standards of Care. Except for the Chair (Eli Coleman) who was appointed by the WPATH board to maintain a continuity from previous SOC editions, members of the Guideline Steering Committee were selected by the WPATH Board from WPATH members applying for these positions. Job descriptions were developed for the positions of Co-Chairs, Chapter Leads, Chapter Members and Stakeholder. WPATH members were eligible to apply by completing an application form and submitting their CV. The Board of WPATH voted for the position of co-chair (one member of the board did not participate in view of conflict of interest). The chairs and co-chairs selected the chapter leads and members (as well as stakeholders) based on the application form and CVs.

The Guideline Steering Committee for Standards of Care 8th Version are:

- Eli Coleman, PhD (Chair) Professor, Director and Academic Chair, Institute for Sexual and Gender Health, Department of Family Medicine and Community Health, University of Minnesota Medical School (USA)
- Asa Radix, MD, PhD, MPH (Co-chair) Senior Director, Research and Education Callen-Lorde Community Health Center Clinical Associate Professor of Medicine New York University, USA
- Jon Arcelus, MD, PhD (Co-chair) Professor of Mental Health and Well-being Honorary Consultant in Transgender Health University of Nottingham, UK
- Karen A. Robinson, PhD (Lead, Evidence Review Team) Professor of Medicine, Epidemiology and Health Policy & Management Johns Hopkins University, USA

3.2. Determination of topics for chapters

The Guideline Steering Committee determined the chapters for inclusion in the Standards of Care by reviewing the literature and by reviewing the previous edition of the SOC. The chapters in the Standards of Care 8th Version:

1. Terminology
2. Global Applicability
3. Population estimates
4. Education*
5. Assessment of Adults
6. Adolescent
7. Children
8. Nonbinary
9. Eunuch
10. Intersex
11. Institutional environments
12. Hormone Therapy
13. Surgery and Postoperative Care
14. Voice and communication

15. Primary care
16. Reproductive Health
17. Sexual Health
18. Mental Health

* The Education Chapter was originally intended to cover both education and ethics. A decision was made to create a separate committee to write a chapter on ethics. In the course of writing the chapter, it was later determined topic of ethics was best placed external to the SOC8 and required further in-depth examination of ethical considerations relevant to transgender health.

3.3. Selection of chapter members

A call for applications to be part of the SOC-8 review committee (chapter lead or member) was sent to the WPATH membership. The Chairs of the Guideline Steering Committee appointed the members for each chapter, ensuring representation from a variety of disciplines and perspectives.

Chapter Leads and Members were required to be WPATH Full Members in good standing and content experts in transgender health, including in at least one chapter topic. Chapter Leads reported to the Guideline Steering Committee and were responsible for coordinating the participation of Chapter Members. Chapter members reported directly to the Chapter Lead.

Each chapter also included stakeholders as members who bring perspectives of transgender health advocacy or work in the community, or as a member of a family that included a transgender child, sibling, partner, parent, etc. Stakeholders were not required to be full members of WPATH.

The Chapter Members were expected to:

- Participate in the development refinement of review questions
- Read and provide comments on all materials from the Evidence Review Team
- Critically review draft documents, including the draft evidence report
- Review and assess evidence and draft recommendations
- Participate in the Delphi consensus process
- Develop the text to back up the recommendation statements
- Grade each statement to describe the strength of the recommendation
- Review and address the comments from the Chairs during the whole process
- Develop the content of the chapters
- Review comments from public comments and assist in the development of a revision of guidelines
- Provide input and participate in the dissemination of guidelines

Training and orientation for Chapter Leads and Members was provided, as needed. Training content included formulation and refinement of questions (i.e., use of PICO), reviewing the evidence, developing recommendation state-

ments, grading the evidence and the recommendations, and information about the guideline development program and process.

A total of 26 chapter-leads were appointed (some chapters required co-leads), 77 chapter members and 16 stakeholders. A total of 127 were selected. During the SOC process, 8 people left, due to personal or work-related issues. Therefore, there were 119 final authors of the SOC-8.

3.4. Selection of the evidence review team

The WPATH Board issued a request for applications to become the Evidence Review Team. For Standards of Care 8th Version the WPATH Board engaged the Evidence Review Team at Johns Hopkins University under the leadership of Karen Robinson.

- Karen A. Robinson, PhD (Lead, Evidence Review Team) Professor of Medicine, Epidemiology and Health Policy & Management Johns Hopkins University, USA

Dr Robinson also guided the steering committee in the development of the SOC-8 by providing advice and training in the development of PICO questions, statements, and the Delphi process as well as undertaking a very rigorous systematic literature review where direct evidence was available.

Conflict of interest

Members of the Guideline Steering Committee, Chapter Leads and Members, and members of the Evidence Review Team were asked to disclose any conflicts of interest. Also reported, in addition to potential financial and competing interests or conflicts, are personal or direct reporting relationships with a chair, co-chair or a WPATH Board Member or the holding of a position on the WPATH Board of Directors.

3.5. Refinement of topics and review of questions

The Evidence Review Team abstracted the recommendation statements from the prior version of the Standards of Care. With input from the Evidence Review Team, the Guideline Steering Committee and Chapter Leads determined:

- Recommendation statements that needed to be updated
- New areas requiring recommendation statements

3.6. Conduct the systematic reviews

Chapter Members developed questions to help develop recommendation statements. For the questions eligible for systematic review, the Evidence Review Team drafted review questions, specifying the Population, Interventions, Comparisons, and Outcomes (PICO elements). The Evidence Review Team undertook the systematic reviews. The Evidence Review Team presented evidence tables and other

results of the systematic reviews to the members of the relevant chapter for feedback.

Protocol

A separate detailed systematic review protocol was developed for each review question or topic, as appropriate. Each protocol was registered on PROSPERO.

Literature search

The Evidence Review Team developed a search strategy appropriate for each research question including MEDLINE®, Embase™, and the Cochrane Central Register of Controlled Trials (CENTRAL). The Evidence Review Team searched additional databases as deemed appropriate for the research question. The search strategy included MeSH and text terms and was not limited by language of publication or date.

The Evidence Review Team hand searched the reference lists of all included articles and recent, relevant systematic reviews. The Evidence Review Team searched ClinicalTrials.gov for any additional relevant studies.

Searches were updated during the peer review process.

The literature included in the systematic review was mostly based on quantitative studies conducted in Europe, the US or Australia. We acknowledge a bias towards perspectives from the global north that does not pay sufficient attention to the diversity of lived experiences and perspectives within transgender and gender diverse (TGD) communities across the world. This imbalance of visibility in the literature points to a research and practice gap that needs to be addressed by researchers and practitioners in the future in order to do justice to the support needs of all TGD people independent of gender identification.

Study selection

The Evidence Review Team, with input from the Chapter Workgroup Leads, defined the eligibility criteria for each research question *a priori*.

Two reviewers from the Evidence Review Team independently screened titles and abstracts and full-text articles for eligibility. To be excluded, both reviewers needed to agree that the study met at least one exclusion criteria. Reviewers resolved differences regarding eligibility through discussion.

Data extraction

The Evidence Review Team used standardized forms to abstract data on general study characteristics, participant characteristics, interventions, and outcome measures. One reviewer abstracted the data, and a second reviewer confirmed the abstracted data.

Assessment of risk of bias

Two reviewers from the Evidence Review Team independently assessed the risk of bias for each included study. For

randomized controlled trials, the Cochrane Risk of Bias Tool was used. For observational studies, the Risk of Bias in Non-Randomized Studies—of Interventions (ROBINS-I) tool was used. Where deemed appropriate, existing recent systematic reviews were considered and evaluated using ROBIS.

Data synthesis and analysis

The Evidence Review Team created evidence tables detailing the data abstracted from the included studies. The members of the Chapter Workgroups reviewed and provided comments on the evidence tables.

Grading of the evidence

The Evidence Review Team assigned evidence grades using the GRADE methodology. The strength of the evidence was obtained using predefined critical outcomes for each question and by assessing the limitations to individual study quality/risk of bias, consistency, directness, precision, and reporting bias.

3.7. Drafting of the Recommendation Statements

Chapter Leads and Members drafted recommendation statements. The statements were crafted to be feasible, actionable, and measurable.

Evidence-based recommendation statements were based on the results of the systematic, and background literature reviews plus consensus-based expert opinions.

The Chair and Co-Chairs and Chapter Leads reviewed and approved all recommendation statements for clarity and consistency in wording. During this review and throughout the process any overlap between chapters was also addressed.

Many chapters had to work closely together to ensure consistency of their recommendations. For example, as there are now separate chapters for childhood and adolescence, to ensure consistency between both chapters, some authors were part of both chapters. For a similar reason, when applicable, a workgroup collaborated with other Chapter Workgroups on topics shared between the chapters (i.e., Assessment of Children, Assessment of Adults, Hormone Therapy, Surgery and Postoperative Care and Reproductive Health).

3.8. Approval of the recommendations using the Delphi process

Formal consensus for all statements was obtained using the Delphi process (a structured solicitation of expert judgments in three rounds). For a recommendation to be approved, a minimum of 75% of the voters had to approve the statement. A minimum of 65% of the SOC-8 members had to take part in the Delphi process for each statement. People who did not approve the statement had to provide information as to the reasons for their disapproval, so the statement could be modified (or removed) according to this feedback. Once modified, the statement was put through the Delphi process again. If after 3 rounds the statement

was not approved, the statement was removed from the SOC. Every member of the SOC voted for each statement. There was a response rate between (74.79% and 94.96%) for the statements.

3.9. Grading criteria for statements

Once the statements passed the Delphi process, chapter members graded each statement using a process adapted from the Grading of Recommendations, Assessment, Development and Evaluations (GRADE) framework. This a transparent framework for developing and presenting summaries of evidence and provides a systematic approach for making clinical practice recommendations (Guyatt et al., 2011). The statements were graded based on factors such as:

- The balance of potential benefits and harms
- Confidence in that balance or quality of evidence
- Values and preferences of providers and patients
- Resource use and feasibility

The statements were classified as:

- Strong recommendations (“we recommend”) are for those interventions/therapy/strategies where:
 - the evidence is of high quality
 - estimates of the effect of an intervention/therapy/strategy (i.e., there is a high degree of certainty effects will be achieved in practice)
 - there are few downsides of therapy/intervention/strategy
 - there is a high degree of acceptance among providers and patients or those for whom the recommendation applies.
- Weak recommendations (“we suggest”) are for those interventions/therapy/strategies where:
 - there are weaknesses in the evidence base
 - there is a degree of doubt about the size of the effect that can be expected in practice
 - there is a need to balance the potential upsides and downsides of interventions/therapy/strategies
 - there are likely to be varying degrees of acceptance among providers and patients or those for whom the recommendation applies.

3.10. Writing of the text supporting the statements

Following the grading of the statements, the Chapter Workgroups wrote the text providing the rationale or reasoning for the recommendation. This included providing the available evidence, providing details about potential benefits and harms, describing uncertainties, and information about implementation of the recommendation, including expected barriers or challenges among others. References use APA-7 style, to support the information in the text. Links to resources are also provided, as appropriate. The text, including whether a recommendation has been described as strong or weak, was reviewed and approved by the Chair and Co-Chairs.

3.11. External validation of references used to support the statements

A group of independent clinical academics working in the field of transgender health reviewed the references used in every chapter in order to validate that the references were appropriately used to support the text. Any queries regarding the references were sent back to the chapters for review.

3.12. Finalizing a draft SOC-8

A final SOC-8 draft was made available for comments.

3.13. Distribute Standards of Care for review by international advisors

The statements of the recommendations of Standards of Care 8th were circulated among the broader Standards of Care Revision Committee and the WPATH International Advisory Group, which included the Asia Pacific Transgender Network (APTN), the Global Action for Transgender Equality (GATE), the International Lesbian, Gay, Bisexual, Transgender, Intersex Association (ILGA), and Transgender Europe (TGEU).

3.14. Public comment period

The revised draft version of the Standards of Care document was posted online for comment from the public, including WPATH members, on the WPATH website. A 6-week period was allocated for comments. A total of 1,279 people made comments on the draft with a total of 2,688 comments.

3.15. Revision of final draft based on comments

The Chapter Leads and Guideline Steering Committee considered the feedback and made any necessary revisions. All public comments were read and, where appropriate, integrated into the background text.

As part of this process, 3 new Delphi statements were developed and 2 were modified enough to require a new vote by the SOC-8 committee. This meant a new Delphi process was initiated in January 2022. The results of this

Delphi process were accepted by the chapters, and the new statements were added or modified accordingly. The new supportive text was added.

All the new versions of the chapters were reviewed again by the Chair and Co-Chairs and changes or modifications were suggested. Finally, once the Chairs and the Chapter Members were satisfied with the draft, the chapter was finalized.

All new references were double checked by an independent member.

3.16. Approval of final draft by Chair and Co-Chairs

Modifications were reviewed by the Chairs and were accepted by them.

3.17. Approval by the WPATH Board of Directors

The final document was presented to the WPATH Board of Directors for approval and it was approved on the 20th of June 2022.

3.18. Publication of the SOC-8 and dissemination of the Standards of Care

The Standards of Care was disseminated in a number of venues and in a number of formats including publication in the International Journal of Transgender Health (the official scientific journal of WPATH).

4. Plan to Update

A new edition of the SOC (SOC-9) will be developed in the future, when new evidence and/or significant changes in the field necessitating a new edition is substantial.

*The development of SOC-8 was a complex process at a time of COVID-19 and political uncertainties in many parts of the world. Members of the SOC-8 worked on the SOC-8 on top of their day-to-day job, and most of the meetings took place out of their working time and during their weekends via Zoom. There were very few face-to-face meetings, most of them linked to WPATH, USPATH or EPATH conferences. Committee members of the SOC-8 were not paid as part of this process.

Appendix B GLOSSARY

CISGENDER refers to people whose current gender identity corresponds to the sex they were assigned at birth.

DETRANSITION is a term sometimes used to describe an individual's retransition to the gender stereotypically associated with their sex assigned at birth.

EUNUCH refers to an individual assigned male at birth whose testicles have been surgically removed or rendered non-functional and who identifies as a eunuch. This differs from the standard medical definition by excluding those who do not identify as eunuch.

EUNUCH-IDENTIFIED: An individual who feels their true self is best expressed by the term eunuch. Eunuch-identified individuals generally desire to have their reproductive organs surgically removed or rendered non-functional.

GENDER: Depending on the context, gender may reference gender identity, gender expression, and/or social gender role, including understandings and expectations culturally tied to people who were assigned male or female at birth. Gender identities other than those of men and women (who can be either cisgender or transgender) include transgender, nonbinary, genderqueer, gender neutral, agender, gender fluid, and "third" gender, among others; many other genders are recognized around the world.

GENDER-AFFIRMATION refers to being recognized or affirmed in a person's gender identity. It is usually conceptualized as having social, psychological, medical, and legal dimensions. Gender affirmation is used as a term in lieu of transition (as in medical gender-affirmation) or can be used as an adjective (as in gender-affirming care).

GENDER-AFFIRMATION SURGERY (GAS) is used to describe surgery to change primary and/or secondary sex characteristics to affirm a person's gender identity.

GENDER BINARY refers to the idea there are two and only two genders, men and women; the expectation that everyone must be one or the other; and that all men are males, and all women are females.

GENDER DIVERSE is a term used to describe people with gender identities and/or expressions that are different from social and cultural expectations attributed to their sex assigned at birth. This may include, among many other culturally diverse identities, people who identify as nonbinary, gender expansive, gender nonconforming, and others who do not identify as cisgender.

GENDER DYSPHORIA describes a state of distress or discomfort that may be experienced because a person's gender identity differs from that which is physically and/or socially attributed to their sex assigned at birth. Gender Dysphoria is also a diagnostic term in the DSM-5 denoting an incongruence between the sex assigned at birth and experienced gender accompanied by distress. Not all transgender and gender diverse people experience gender dysphoria.

GENDER EXPANSIVE is an adjective often used to describe people who identify or express themselves in ways that broaden the socially and culturally defined behaviors or beliefs associated with a particular sex. Gender creative is also sometimes used. The term gender variant was used in the past and is disappearing from professional usage because of negative connotations now associated with it.

GENDER EXPRESSION refers to how a person enacts or expresses their gender in everyday life and within the context of their culture and society. Expression of gender through physical appearance may include dress, hairstyle, accessories, cosmetics, hormonal and surgical interventions as well as mannerisms, speech, behavioral patterns, and names. A person's gender expression may or may not conform to a person's gender identity.

GENDER IDENTITY refers to a person's deeply felt, internal, intrinsic sense of their own gender.

GENDER INCONGRUENCE is a diagnostic term used in the ICD-11 that describes a person's marked and persistent experience of an incompatibility between that person's gender identity and the gender expected of them based on their birth-assigned sex.

INTERSEX refers to people born with sex or reproductive characteristics that do not fit binary definitions of female or male.

MISGENDER/MISGENDERING refers to when language is used that does not correctly reflect the gender with which a person identifies. This may be a pronoun (he/him/his, she/her/hers, they/them/theirs) or a form of address (sir, Mr.).

NONBINARY refers to those with gender identities outside the gender binary. People with nonbinary gender identities may identify as partially a man and partially a woman, or identify as sometimes a man and sometimes a woman, or identify as a gender other than a man or a woman, or as not having a gender at all. Nonbinary people may use the pronouns they/them/theirs instead of he/him/his or she/her/hers. Some nonbinary people consider themselves to be transgender or trans; some do not because they consider transgender to be part of the gender binary. The shorthand NB or "enby" is sometimes used as a descriptor for nonbinary. Examples of nonbinary gender identities are genderqueer, gender diverse, genderfluid, demigender, bigender, and agender.

RETRANSITION refers to second or subsequent gender transition whether by social, medical, or legal means. A retransition may be from one binary or nonbinary gender to another binary or nonbinary gender. People may retransition more than once. Retransition may occur for many reasons, including evolving gender identities, health concerns, family/societal concerns, and financial issues.

SEX ASSIGNED AT BIRTH refers to a person's status as male, female, or intersex based on physical characteristics. Sex is usually assigned at birth based on appearance of the external genitalia. AFAB is an abbreviation for "assigned female at birth." AMAB is an abbreviation for "assigned male at birth."

SEXUAL ORIENTATION refers to a person's sexual identity, attractions, and behaviors in relation to people on the basis of their gender(s) and or sex characteristics and those of their partners. Sexual orientation and gender identity are distinct terms.

TRANSGENDER or trans are umbrella terms used to describe people whose gender identities and/or gender expressions are not what is typically expected for the sex to which they were assigned at birth. These words should always be used as adjectives (as in "trans people") and never as nouns (as in "transgenders") and never as verbs (as in "transgendered").

TRANSGENDER MEN or **TRANS MEN** or **MEN OF TRANS EXPERIENCE** are people who have gender identities as men and who were assigned female at birth. They may or may not have undergone any transition. FTM or Female-to-Male are older terms that are falling out of use. **TRANSGENDER WOMEN** or **TRANS WOMEN** or **WOMEN OF TRANS EXPERIENCE** are people who have gender identities as women and who were assigned male at birth. They may or may not have undergone any transition. MTF or Male-to-Female are older terms that are falling out of use.

TRANSITION refers to the process whereby people usually change from the gender expression associated with their assigned sex at birth to another gender expression that better matches their gender identity. People may transition socially by using methods such as changing their name, pronoun, clothing, hair styles, and/or the ways that they

move and speak. Transitioning may or may not involve hormones and/or surgeries to alter the physical body. Transition can be used to describe the process of changing one's gender expression from any gender to a different gender. People may transition more than once in their lifetimes. **TRANSPHOBIA** refers to negative attitudes, beliefs, and actions concerning transgender and gender diverse people as a group. Transphobia may be enacted in discriminatory policies and practices on a structural level or in very specific and personal ways. Transphobia can also be internalized, when transgender and gender diverse people accept and reflect such prejudice about themselves or other transgender and gender diverse people. While transphobia sometimes may be a result of unintentional ignorance rather than direct hostility, its effects are never benign. Some people use the term anti-transgender bias in place of transphobia.

Appendix C GENDER-AFFIRMING HORMONAL TREATMENTS

Table 1. Expected time course of physical changes in response to gender-affirming hormone therapy

Testosterone Based Regimen		
Effect	Onset	Maximum
Skin Oiliness/acne	1–6 months	1–2 years
Facial/body hair growth	6–12 months	>5 years
Scalp hair loss	6–12 months	>5 years
Increased muscle mass/strength	6–12 months	2–5 years
Fat redistribution	1–6 months	2–5 years
Cessation of menses	1–6 months	1–2 years
Clitoral enlargement	1–6 months	1–2 years
Vaginal atrophy	1–6 months	1–2 years
Deepening of voice	1–6 months	1–2 years
Estrogen and testosterone-lowering based regimens		
Effect	Onset	Maximum
Redistribution of body fat	3–6 months	2–5 years
Decrease in muscle mass and strength	3–6 months	1–2 years
Softening of skin/decreased oiliness	3–6 months	Unknown
Decreased sexual desire	1–3 months	Unknown
Decreased spontaneous erections	1–3 months	3–6 months
Decreased sperm production	Unknown	2 years
Breast growth	3–6 months	2–5 years
Decreased testicular volume	3–6 months	Variable
Decreased terminal hair growth	6–12 months	> 3 years
Increased scalp hair	Variable	Variable
Voice changes	None	

Adapted from Hembree et al., 2017.

Table 2. Risks associated with gender affirming hormone therapy (bolded items are clinically significant) (Updated from SOC-7)

RISK LEVEL	Estrogen-based regimens	Testosterone-based regimens
Likely increased risk	Venous Thromboembolism Infertility Hyperkalemia ^a Hypertriglyceridemia Weight Gain	Polycythemia Infertility Acne Androgenic Alopecia Hypertension Sleep Apnea Weight Gain Decreased HDL Cholesterol and increased LDL Cholesterol
Likely increased risk with presence of additional risk factors	Cardiovascular Disease Cerebrovascular Disease Meningioma ^c Polyuria/Dehydration ^a Cholelithiasis	Cardiovascular Disease Hypertriglyceridemia
Possible increased risk	Hypertension Erectile Dysfunction	
Possible increased risk with presence of additional risk factors	Type 2 Diabetes Low Bone Mass/ Osteoporosis Hyperprolactinemia	Type 2 Diabetes Cardiovascular Disease
No increased risk or inconclusive	Breast and Prostate Cancer	Low Bone Mass/ Osteoporosis Breast, Cervical, Ovarian, Uterine Cancer

^ccyproterone-based regimen

^aspironolactone-based regimen

Table 3. Gender-Affirming Hormone Regimens In Transgender And Gender Diverse Youth (Adapted from the Endocrine Society Guidelines; Hembree et al., 2017)

Induction of female puberty (estrogen-based regimen) with oral 17β-estradiol

Initiate at 5µg/kg/d and increase every 6 months by 5 µg/kg/d up to 20 µg/kg/d according to estradiol levels

Adult dose = 2-6 mg/day

In postpubertal TGD adolescents, the dose of 17β-estradiol can be increased more rapidly:

1 mg/d for 6 months followed by 2 mg/d and up according to estradiol levels

Induction of female puberty (estrogen-based regimen) with transdermal 17β-estradiol

Initial dose 6.25-12.5 µg/24h (cutting 24g patch to ¼ then ½)

Titrate up by every 6 months by 12.5 µg/24h according to estradiol levels

Adult dose = 50-200 µg/24 hours

For alternatives once at adult dose (Table 4)

Induction of male puberty (testosterone-based regimen) with testosterone esters

25 mg/m²/2 weeks (or alternatively half this dose weekly)

Increase by 25 mg/m²/2 weeks every 6 months until adult dose and target testosterone levels are achieved. See alternatives for testosterone (Table 4)

Table 4. Hormone regimens in transgender and gender diverse adults*

Estrogen-based regimen (Transfeminine)

Estrogen

Oral or sublingual

Estradiol 2.0-6.0 mg/day

Transdermal

Estradiol transdermal patch 0.025-0.2 mg/day

Estradiol gel various ‡ daily to skin

Parenteral

Estradiol valerate or cypionate 5-30 mg IM every 2 weeks
2-10 IM every week

Anti-Androgens

Spironolactone 100–300 mg/day

Cyproterone acetate 10 mg/day**

GnRH agonist 3.75–7.50 mg SQ/IM monthly

GnRH agonist depot formulation 11.25/22.5 mg SQ/IM 3/6 monthly

‡ Amount applied varies to formulation and strength

Testosterone-Based Regimen (Transmasculine)

Transgender males

Testosterone

Parenteral

Testosterone enanthate/ 50–100 IM/SQ weekly or

cypionate 100–200 IM every 2 weeks

Testosterone undecanoate 1000 mg IM every 12 weeks or

750 mg IM every 10 weeks

Transdermal testosterone

Testosterone gel 50-100 mg/day

Testosterone transdermal patch 2.5–7.5 mg/day

*Doses are titrated up or down until sex steroid hormone levels are in the therapeutic range. Hormone regimens do not reflect all formulations that are available in all pharmacies throughout the world. Hormone regimens may have to be adapted to what is available in local pharmacies.

**Kuijpers et al (2021).

Table 5. Hormone monitoring of transgender and gender diverse people receiving gender-affirming hormone therapy (Adapted from the Endocrine Society Guidelines)

Transgender male or trans masculine (including gender diverse/nonbinary) individuals

1. Evaluate patient approximately every 3 months (with dose changes) in the first year and 1 to 2 times per year thereafter to monitor for appropriate physical changes in response to testosterone.
2. Measure serum total testosterone every 3 months (with dose changes) until levels are at goal
 - a. For parenteral testosterone, the serum total testosterone should be measured midway between injections. The target level is 400-700ng/dL. Alternatively, measure peak and trough peaks to ensure levels remain in the range of reference men.
 - b. For parenteral testosterone undecanoate, testosterone should be measured just before injection. If the level is < 400ng/dL, adjust the dosing interval.
 - c. For transdermal testosterone, the testosterone level can be measured no sooner than after 1 week of daily application (at least 2 hours after application of product).
3. Measure hematocrit or hemoglobin concentrations at baseline and approximately 3 months (with dose changes) for the first year and then one to two times a year.

Transgender Female or trans feminine (including gender diverse/nonbinary) individuals

1. Evaluate patient approximately every 3 months (with dose changes) in the first year and one to two times per year thereafter to monitor for appropriate physical changes in response to estrogen.
 - a. Serum testosterone levels should be less than 50ng/dL.
 - b. Serum estradiol should be in the range of 100-200pg/mL.
 2. For individuals receiving spironolactone, serum electrolytes, in particular potassium, and kidney function, in particular creatinine, should be monitored.
 3. Follow primary care screening per primary care chapter recommendations
-

Appendix D SUMMARY CRITERIA FOR HORMONAL AND SURGICAL TREATMENTS FOR ADULTS AND ADOLESCENTS

The SOC-8 guidelines are intended to be flexible in order to meet the diverse health care needs of TGD people globally. While adaptable, they offer consensus-based standards derived from the best available scientific evidence for promoting optimal health care and guiding the treatment of people experiencing gender incongruence. As in all previous versions of the SOC, the criteria put forth in this document for gender affirming interventions are clinical guidelines; individual health care professionals and programs, in consultation with the TGD person, may modify them. Clinical departures from the SOC may occur due to a TGD person's unique anatomic, social, or psychological situation; an experienced health care professional's evolving method of handling a common situation; a research protocol; lack of resources in various parts of the world; or the need for specific harm-reduction strategies. These departures should be recognized as such, discussed with the TGD person, and documented. This documentation is also valuable for the accumulation of new data, which can be retrospectively examined to allow for health care—and the SOC—to evolve. This summary criteria needs to be read in conjunction with the relevant chapters (see Adult Assessment and Adolescent chapters).

SUMMARY CRITERIA FOR ADULTS

Related to the assessment process

- Health care professionals assessing transgender and gender diverse adults seeking gender-affirming treatment should liaise with professionals from different disciplines within the field of trans health for consultation and referral, if required*
- If written documentation or a letter is required to recommend gender affirming medical and surgical treatment (GAMST), only one letter of assessment from a health care professional who has competencies in the assessment of transgender and gender diverse people is needed.

Criteria for hormones

- a. Gender incongruence is marked and sustained;
- b. Meets diagnostic criteria for gender incongruence prior to gender-affirming hormone treatment in regions where a diagnosis is necessary to access health care;
- c. Demonstrates capacity to consent for the specific gender-affirming hormone treatment;
- d. Other possible causes of apparent gender incongruence have been identified and excluded;
- e. Mental health and physical conditions that could negatively impact the outcome of treatment have been assessed, with risks and benefits discussed;
- f. Understands the effect of gender-affirming hormone treatment on reproduction and they have explored reproductive options.

Criteria for surgery

- a. Gender incongruence is marked and sustained;
- b. Meets diagnostic criteria for gender incongruence prior to gender-affirming surgical intervention in regions where a diagnosis is necessary to access health care;
- c. Demonstrates capacity to consent for the specific gender-affirming surgical intervention;
- d. Understands the effect of gender-affirming surgical intervention on reproduction and they have explored reproductive options;
- e. Other possible causes of apparent gender incongruence have been identified and excluded;
- f. Mental health and physical conditions that could negatively impact the outcome of gender-affirming surgical intervention have been assessed, with risks and benefits have been discussed;
- g. Stable on their gender affirming hormonal treatment regime (which may include at least 6 months of hormone treatment or a longer period if required to achieve the desired surgical result, unless hormone therapy is either not desired or is medically contraindicated).*

*These were graded as suggested criteria

SUMMARY CRITERIA FOR ADOLESCENTS

Related to the assessment process

- A comprehensive biopsychosocial assessment including relevant mental health and medical professionals;
- Involvement of parent(s)/guardian(s) in the assessment process, unless their involvement is determined to be harmful to the adolescent or not feasible;
- If written documentation or a letter is required to recommend gender-affirming medical and surgical treatment (GAMST), only one letter of assessment from a member of the multidisciplinary team is needed. This letter needs to reflect the assessment and opinion from the team that involves both medical and mental health professionals (MHPs).

Puberty blocking agents

- a. Gender diversity/incongruence is marked and sustained over time;
- b. Meets the diagnostic criteria of gender incongruence in situations where a diagnosis is necessary to access health care;
- c. Demonstrates the emotional and cognitive maturity required to provide informed consent/assent for the treatment;
- d. Mental health concerns (if any) that may interfere with diagnostic clarity, capacity to consent, and gender-affirming medical treatments have been addressed; sufficiently so that gender-affirming medical treatment can be provided optimally.
- e. Informed of the reproductive effects, including the potential loss of fertility and the available options to preserve fertility;
- f. Reached Tanner stage 2.

Hormonal treatments

- a. Gender diversity/incongruence is marked and sustained over time;
- b. Meets the diagnostic criteria of gender incongruence in situations where a diagnosis is necessary to access health care;
- c. Demonstrates the emotional and cognitive maturity required to provide informed consent/assent for the treatment;
- d. Mental health concerns (if any) that may interfere with diagnostic clarity, capacity to consent, and gender-affirming medical treatments have been addressed; sufficiently so that gender-affirming medical treatment can be provided optimally.
- e. Informed of the reproductive effects, including the potential loss of fertility and the available options to preserve fertility;
- f. Reached Tanner stage 2.

Surgery

- a. Gender diversity/incongruence is marked and sustained over time;

- b. Meets the diagnostic criteria of gender incongruence in situations where a diagnosis is necessary to access health care;
- c. Demonstrates the emotional and cognitive maturity required to provide informed consent/assent for the treatment;
- d. Mental health concerns (if any) that may interfere with diagnostic clarity, capacity to consent, and gender-affirming medical treatments have been addressed; sufficiently so that gender-affirming medical treatment can be provided optimally.
- e. Informed of the reproductive effects, including the potential loss of fertility and the available options to preserve fertility;
- f. At least 12 months of gender-affirming hormone therapy or longer, if required, to achieve the desired surgical result for gender-affirming procedures, including breast augmentation, orchiectomy, vaginoplasty, hysterectomy, phalloplasty, metoidioplasty, and facial surgery as part of gender-affirming treatment unless hormone therapy is either not desired or is medically contraindicated.

S258  E. COLEMAN ET AL.**Appendix E GENDER-AFFIRMING SURGICAL PROCEDURES**

As the field's understanding of the many facets of gender incongruence expands, and as technology develops which

allows for additional treatments, it is imperative to understand this list is not intended to be exhaustive. This is particularly important given the often lengthy time periods between updates to the SOC, during which evolutions in understanding and treatment modalities may occur.

FACIAL SURGERY

Brow	<ul style="list-style-type: none"> • Brow reduction • Brow augmentation • Brow lift
Hair line advancement and/or hair transplant	
Facelift/mid-face lift (following alteration of the underlying skeletal structures)	
Facelift/mid-face lift (following alteration of the underlying skeletal structures)	<ul style="list-style-type: none"> • Platysmaplasty
Blepharoplasty	<ul style="list-style-type: none"> • Lipofilling
Rhinoplasty (+/- fillers)	
Cheek	<ul style="list-style-type: none"> • Implant • Lipofilling • Upper lip shortening • Lip augmentation (includes autologous and non-autologous) • Reduction of mandibular angle • Augmentation • Osteoplastic • Alloplastic (implant-based) • Vocal cord surgery (see voice chapter)
Lip	
Lower jaw	
Chin reshaping	
Chondrolaryngoplasty	
BREAST/CHEST SURGERY	
Mastectomy	<ul style="list-style-type: none"> • Mastectomy with nipple-areola preservation/reconstruction as determined medically necessary for the specific patient • Mastectomy without nipple-areola preservation/reconstruction as determined medically necessary for the specific patient
Liposuction	
Breast reconstruction (augmentation)	<ul style="list-style-type: none"> • Implant and/or tissue expander • Autologous (includes flap-based and lipofilling)
GENITAL SURGERY	
Phalloplasty (with/without scrotoplasty)	<ul style="list-style-type: none"> • With/without urethral lengthening • With/without prosthesis (penile and/or testicular) • With/without colectomy/colpocleisis
Metoidioplasty (with/without scrotoplasty)	<ul style="list-style-type: none"> • With/without urethral lengthening • With/without prosthesis (penile and/or testicular) • With/without colectomy/colpocleisis • May include retention of penis and/or testicle • May include procedures described as "flat front"
Vaginoplasty (inversion, peritoneal, intestinal)	
Vulvoplasty	
GONALECTOMY	
Orchiectomy	
Hysterectomy and/or salpingo-oophorectomy	
BODY CONTOURING	
Liposuction	
Lipofilling	
Implants	<ul style="list-style-type: none"> • Pectoral, hip, gluteal, calf
Monsplasty/mons reduction	
ADDITIONAL PROCEDURES	
Hair removal: Hair removal from the face, body, and genital areas for gender affirmation or as part of a preoperative preparation process. (see Statement 15.14 regarding hair removal)	<ul style="list-style-type: none"> • Electrolysis • Laser epilation
Tattoo (i.e., nipple-areola)	
Uterine transplantation	
Penile transplantation	

CHAPTER 2023-90

Committee Substitute for Senate Bill No. 254

An act relating to treatments for sex reassignment; amending s. 61.517, F.S.; granting courts of this state temporary emergency jurisdiction over a child present in this state if the child has been subjected to or is threatened with being subjected to sex-reassignment prescriptions or procedures; amending s. 61.534, F.S.; providing that, for purposes of warrants to take physical custody of a child in certain child custody enforcement proceedings, serious physical harm to the child includes, but is not limited to, being subjected to sex-reassignment prescriptions or procedures; creating s. 286.31, F.S.; defining the term “governmental entity”; prohibiting certain public entities from expending state funds for the provision of sex-reassignment prescriptions or procedures; amending s. 456.001, F.S.; defining the terms “sex” and “sex-reassignment prescriptions or procedures”; creating s. 456.52, F.S.; prohibiting sex-reassignment prescriptions and procedures for patients younger than 18 years of age; providing an exception; requiring the Board of Medicine and the Board of Osteopathic Medicine to adopt certain emergency rules within a specified timeframe; requiring the boards to consider specified factors in developing such rules; requiring that such prescriptions and procedures for patients older than 18 years of age be prescribed, administered, or performed only with the voluntary and informed consent of the patient; providing criteria for what constitutes voluntary and informed consent; providing that only a physician may prescribe, administer, or perform such prescriptions and procedures; defining the term “physician”; providing applicability; providing for disciplinary action; providing criminal penalties; requiring the Board of Medicine and the Board of Osteopathic Medicine to adopt certain emergency rules; providing that such emergency rules remain in effect until they are replaced by nonemergency rules; amending s. 456.074, F.S.; requiring the department to immediately suspend the license of a health care practitioner who is arrested for committing or attempting, soliciting, or conspiring to commit specified violations related to sex-reassignment prescriptions or procedures for a patient younger than 18 years of age; creating s. 766.318, F.S.; creating a cause of action to recover damages for personal injury or death resulting from the provision of sex-reassignment prescriptions or procedures to a minor; providing that certain limitations on punitive damages do not apply to such actions; specifying the timeframe within which such actions may be commenced; providing construction and applicability; providing severability; providing a directive to the Division of Law Revision; providing an effective date.

Be It Enacted by the Legislature of the State of Florida:

Section 1. Subsection (1) of section 61.517, Florida Statutes, is amended to read:

61.517 Temporary emergency jurisdiction.—

(1) A court of this state has temporary emergency jurisdiction if the child is present in this state and:

(a) The child has been abandoned; ~~or~~

(b) It is necessary in an emergency to protect the child because the child, or a sibling or parent of the child, is subjected to or threatened with mistreatment or abuse; or

(c) It is necessary in an emergency to protect the child because the child has been subjected to or is threatened with being subjected to sex-reassignment prescriptions or procedures, as defined in s. 456.001.

Section 2. Subsection (1) of section 61.534, Florida Statutes, is amended to read:

61.534 Warrant to take physical custody of child.—

(1) Upon the filing of a petition seeking enforcement of a child custody determination, the petitioner may file a verified application for the issuance of a warrant to take physical custody of the child if the child is likely to imminently suffer serious physical harm or removal from this state. Serious physical harm includes, but is not limited to, being subjected to sex-reassignment prescriptions or procedures as defined in s. 456.001.

Section 3. Section 286.31, Florida Statutes, is created to read:

286.31 Prohibited use of state funds.—

(1) As used in this section, the term “governmental entity” means the state or any political subdivision thereof, including the executive, legislative, and judicial branches of government; the independent establishments of the state, counties, municipalities, districts, authorities, boards, or commissions; and any agencies that are subject to chapter 286.

(2) A governmental entity, a public postsecondary educational institution as described in s. 1000.04, the state group health insurance program, a managing entity as defined in s. 394.9082, or a managed care plan providing services under part IV of chapter 409 may not expend state funds as described in s. 215.31 for sex-reassignment prescriptions or procedures as defined in s. 456.001.

Section 4. Subsections (8) and (9) are added to section 456.001, Florida Statutes, to read:

456.001 Definitions.—As used in this chapter, the term:

(8) “Sex” means the classification of a person as either male or female based on the organization of the human body of such person for a specific reproductive role, as indicated by the person’s sex chromosomes, naturally

occurring sex hormones, and internal and external genitalia present at birth.

(9)(a) “Sex-reassignment prescriptions or procedures” means:

1. The prescription or administration of puberty blockers for the purpose of attempting to stop or delay normal puberty in order to affirm a person’s perception of his or her sex if that perception is inconsistent with the person’s sex as defined in subsection (8).

2. The prescription or administration of hormones or hormone antagonists to affirm a person’s perception of his or her sex if that perception is inconsistent with the person’s sex as defined in subsection (8).

3. Any medical procedure, including a surgical procedure, to affirm a person’s perception of his or her sex if that perception is inconsistent with the person’s sex as defined in subsection (8).

(b) The term does not include:

1. Treatment provided by a physician who, in his or her good faith clinical judgment, performs procedures upon or provides therapies to a minor born with a medically verifiable genetic disorder of sexual development, including any of the following:

a. External biological sex characteristics that are unresolvably ambiguous.

b. A disorder of sexual development in which the physician has determined through genetic or biochemical testing that the patient does not have a normal sex chromosome structure, sex steroid hormone production, or sex steroid hormone action for a male or female, as applicable.

2. Prescriptions or procedures to treat an infection, an injury, a disease, or a disorder that has been caused or exacerbated by the performance of any sex-reassignment prescription or procedure, regardless of whether such prescription or procedure was performed in accordance with state or federal law.

3. Prescriptions or procedures provided to a patient for the treatment of a physical disorder, physical injury, or physical illness that would, as certified by a physician licensed under chapter 458 or chapter 459, place the individual in imminent danger of death or impairment of a major bodily function without the prescription or procedure.

Section 5. Section 456.52, Florida Statutes, is created to read:

456.52 Sex-reassignment prescriptions and procedures; prohibitions; informed consent.—

(1) Sex-reassignment prescriptions and procedures are prohibited for patients younger than 18 years of age, except that:

(a) The Board of Medicine and the Board of Osteopathic Medicine shall, within 60 days after the effective date of this act, adopt emergency rules pertaining to standards of practice under which a patient younger than 18 years of age may continue to be treated with a prescription consistent with those referenced under s. 456.001(9)(a)1. or 2. if such treatment for sex reassignment was commenced before, and is still active on, the effective date of this act. In developing rules under this paragraph, the boards shall consider requirements for physicians to obtain informed consent from such patient's parent or legal guardian, consistent with the parameters of informed consent under subsections (2) and (4), for such prescription treatment, and shall consider the provision of professional counseling services for such patient by a board-certified psychiatrist licensed under chapter 458 or chapter 459 or a psychologist licensed under chapter 490 in conjunction with such prescription treatment.

(b) A patient meeting the criteria of paragraph (a) may continue to be treated by a physician with such prescriptions according to rules adopted under paragraph (a) or nonemergency rules adopted under paragraph (6)(b).

(2) If sex-reassignment prescriptions or procedures are prescribed for or administered or performed on patients 18 years of age or older, consent must be voluntary, informed, and in writing on forms adopted in rule by the Board of Medicine and the Board of Osteopathic Medicine. Consent to sex-reassignment prescriptions or procedures is voluntary and informed only if the physician who is to prescribe or administer the pharmaceutical product or perform the procedure has, at a minimum, while physically present in the same room:

(a) Informed the patient of the nature and risks of the prescription or procedure in order for the patient to make a prudent decision;

(b) Provided the informed consent form, as adopted in rule by the Board of Medicine and the Board of Osteopathic Medicine, to the patient; and

(c) Received the patient's written acknowledgment, before the prescription or procedure is prescribed, administered, or performed, that the information required to be provided under this subsection has been provided.

(3) Sex-reassignment prescriptions or procedures may not be prescribed, administered, or performed except by a physician. For the purposes of this section, the term "physician" is defined as a physician licensed under chapter 458 or chapter 459 or a physician practicing medicine or osteopathic medicine in the employment of the Federal Government.

(4) Consent required under subsection (2) does not apply to renewals of prescriptions consistent with those referenced under s. 456.001(9)(a)1. and

2. if a physician and his or her patient have met the requirements for consent for the initial prescription or renewal. However, separate consent is required for any new prescription for a pharmaceutical product not previously prescribed to the patient.

(5)(a) Violation of this section constitutes grounds for disciplinary action under this chapter and chapter 458 or chapter 459, as applicable.

(b) Any health care practitioner who willfully or actively participates in a violation of subsection (1) commits a felony of the third degree, punishable as provided in s. 775.082, s. 775.083, or s. 775.084.

(c) Any health care practitioner who violates subsection (2), subsection (3), or subsection (4) commits a misdemeanor of the first degree, punishable as provided in s. 775.082 or s. 775.083.

(6)(a) The Board of Medicine and the Board of Osteopathic Medicine shall adopt emergency rules to implement this section.

(b) Any emergency rules adopted under this section are exempt from s. 120.54(4)(c) and shall remain in effect until replaced by rules adopted under the nonemergency rulemaking procedures of the Administrative Procedure Act.

Section 6. Present paragraphs (c) through (gg) of subsection (5) of section 456.074, Florida Statutes, are redesignated as paragraphs (d) through (hh), respectively, and a new paragraph (c) is added to that subsection, to read:

456.074 Certain health care practitioners; immediate suspension of license.—

(5) The department shall issue an emergency order suspending the license of any health care practitioner who is arrested for committing or attempting, soliciting, or conspiring to commit any act that would constitute a violation of any of the following criminal offenses in this state or similar offenses in another jurisdiction:

(c) Section 456.52(5)(b), relating to prescribing, administering, or performing sex-reassignment prescriptions or procedures for a patient younger than 18 years of age.

Section 7. Section 766.318, Florida Statutes, is created to read:

766.318 Civil liability for provision of sex-reassignment prescriptions or procedures to minors.—

(1) A cause of action exists to recover damages for personal injury or death resulting from the provision of sex-reassignment prescriptions or procedures, as defined in s. 456.001, to a person younger than 18 years of age which are prohibited by s. 456.52(1).

(2) The limitations on punitive damages in s. 768.73(1) do not apply to actions brought under this section.

(3) An action brought under this section:

(a) May be commenced within 20 years after the cessation or completion of the sex-reassignment prescription or procedure.

(b) Is in addition to any other remedy authorized by law.

(4) The cause of action created by this section does not apply to:

(a) Treatment with sex-reassignment prescriptions if such treatment is consistent with s. 456.001(9)(a)1. or 2. and was commenced on or before, and is still active on, the effective date of this act.

(b) Sex-reassignment prescriptions or procedures that were ceased or completed on or before the effective date of this act.

Section 8. If any provision of this act or its application to any person or circumstance is held invalid, the invalidity does not affect other provisions or applications of this act which can be given effect without the invalid provision or application, and to this end the provisions of this act are severable.

Section 9. The Division of Law Revision is directed to replace the phrase “the effective date of this act” wherever it occurs in this act with the date this act becomes a law.

Section 10. This act shall take effect upon becoming a law.

Approved by the Governor May 17, 2023.

Filed in Office Secretary of State May 17, 2023.

64B8-8.001 Disciplinary Guidelines.

(1) Purpose. Pursuant to Section 456.079, F.S., the Board provides within this rule disciplinary guidelines which shall be imposed upon applicants or licensees whom it regulates under Chapter 458, F.S., or telehealth providers registered under Section 456.47(4), F.S. The purpose of this rule is to notify applicants and licensees of the ranges of penalties which will routinely be imposed unless the Board finds it necessary to deviate from the guidelines for the stated reasons given within this rule. The ranges of penalties provided below are based upon a single count violation of each provision listed; multiple counts of the violated provisions or a combination of the violations may result in a higher penalty than that for a single, isolated violation. Each range includes the lowest and highest penalty and all penalties falling between, including appropriate continuing medical education (CME). For telehealth registrants, a suspension may be accompanied by a corrective action plan that addresses the conduct which resulted in the underlying disciplinary violations. The Board may require a corrective action plan to be completed prior to reinstatement of the suspended registration or the corrective action plan may follow a suspension for a definite term. The purposes of the imposition of discipline are to punish the applicants or licensees for violations and to deter them from future violations; to offer opportunities for rehabilitation, when appropriate; and to deter other applicants or licensees from violations.

(2) Violations and Range of Penalties. In imposing discipline upon applicants and licensees, in proceedings pursuant to Sections 120.57(1) and (2), F.S., the Board shall act in accordance with the following disciplinary guidelines and shall impose a penalty within the range corresponding to the violations set forth below. The verbal identification of offenses are descriptive only; the full language of each statutory provision cited must be consulted in order to determine the conduct included. In addition to the guideline penalties provided herein, if the violation is for fraud or making a false or fraudulent representation, the Board shall impose a fine of \$10,000 per count. In no event for the penalties set forth below shall the fine exceed \$10,000.00 per count.

RECOMMENDED RANGE OF PENALTY					
VIOLATION	FIRST OFFENSE	SECOND OFFENSE	THIRD OFFENSE	FOR TELEHEALTH REGISTRANTS	
				FIRST OFFENSE	SECOND OR SUBSEQUENT OFFENSE
(a) Attempting to obtain, obtaining or renewing a license or certificate by bribery, fraud or through an error of the Department or the Board. (Sections 458.331(1)(a); 456.072(1)(h), F.S.)					
1. Attempting to obtain an initial license by bribery or fraud.	1. Denial of application and a \$10,000.00 fine.			1. Denial of application.	
2. Attempting to renew a license by bribery or fraud.	2. Revocation of the license and payment of a \$5,000.00 fine to revocation and a \$10,000.00 fine. If the offense includes an	2. Revocation and a \$10,000.00 fine.		2. Revocation	2. Revocation

	element of fraud or making a false or fraudulent representation the fine shall be 10,000.00.				
3. Obtaining or renewing a license by bribery or fraud.	3. Revocation of the license and payment of a \$5,000.00 fine to revocation and a \$10,000.00 fine. If the offense includes an element of fraud or making a false or fraudulent representation the fine shall be 10,000.00.	3. Revocation and a \$10,000.00 fine.		3. Revocation	3. Revocation
4. Obtaining or renewing a license through error of the Department or the Board.	4. Revocation.	4. Revocation.		4. Revocation	4. Revocation
(b) Action taken against license by another jurisdiction. (Sections 458.331(1)(b); 456.072(1)(f); 456.47(4)(d), F.S.)	(b) From imposition of discipline comparable to the discipline which would have been imposed if the substantive violation had occurred in Florida to suspension or denial of the license until the license is unencumbered in the jurisdiction in which	(b) From imposition of discipline comparable to the discipline which would have been imposed if the substantive violation had occurred in Florida to revocation or denial of the license, and an administrative fine ranging from \$5,000.00 to \$10,000.00.		(b) From imposition of discipline comparable to the discipline which would have been imposed if the substantive violation had occurred in Florida to suspension or denial of the license until the license is unencumbered in the jurisdiction in which disciplinary action was originally taken.	(b) From imposition of discipline comparable to the discipline which would have been imposed if the substantive violation had occurred in Florida to revocation or denial of the license.

	disciplinary action was originally taken, and an administrative fine ranging from \$1,000.00 to \$5,000.00.				
1. Action taken against license by another jurisdiction relating to healthcare fraud in dollar amounts in excess of \$5,000.00.	1. Revocation or in the case of application for licensure, denial of licensure, and a fine of \$10,000.00.			1. Revocation or in the case of application for licensure, denial of licensure.	
2. Action taken against license by another jurisdiction relating to healthcare fraud in dollar amounts of \$5,000.00 or less.	2. A \$10,000.00 administrative fine and suspension of the license, followed by a period of probation to revocation.	2. Revocation or denial and a fine of \$10,000.00.		2. A suspension of license with a corrective action plan to revocation.	2. Revocation or denial.
(c) Guilty of crime directly relating to practice or ability to practice. (Sections 458.331(1)(c); 456.072(1)(c), F.S.)	(c) From probation to revocation or denial of the license, an administrative fine ranging from \$5,000.00 to \$10,000.00.	(c) From suspension to revocation or denial of the license, an administrative fine ranging from \$7,500.00 to \$10,000.00.		(c) From a reprimand to revocation or denial.	(c) From suspension to revocation or denial.
1. Involving a crime related to healthcare fraud in dollar amounts in excess of \$5,000.00.	1. Revocation or in the case of application for licensure, denial of licensure and a fine of \$10,000.00			1. Revocation or denial.	
2. Involving a crime related to healthcare fraud in dollar amounts of \$5,000.00 or less.	2. A \$10,000.00 administrative fine,	2. Revocation and a fine of \$10,000.00.		2. Suspension of license with a corrective action plan to revocation.	2. Revocation.

	compliance with any criminal probation, a reprimand and suspension of the license, followed by a period of probation to revocation.				
(d) False, deceptive, or misleading advertising. (Section 458.331(1)(d), F.S.)					
1. Negligent false, deceptive, or misleading advertising. (Section 458.331(1)(d), F.S.)	1. From a letter of concern to one (1) year suspension or denial, to be followed by a period of probation, and an administrative fine from \$1,000.00 to \$5,000.00.	1. From reprimand to up to one (1) year suspension or denial, to be followed by a period of probation, and an administrative fine from \$5,000.00 to \$10,000.00.		1. From a letter of concern to one (1) year suspension with a corrective action plan or denial.	1. From a reprimand to up to one (1) year suspension with a corrective action plan or denial.
2. Fraudulent false, deceptive or misleading advertising.	2. From reprimand to up to one (1) year suspension or denial, to be followed by a period of probation, and an administrative fine of \$10,000.00.	2. From suspension, to be followed by a period of probation, up to revocation, and a fine of \$10,000.00.		2. From reprimand to up to one (1) year suspension with a corrective action plan or denial.	2. From suspension with a corrective action plan to revocation.
(e) Failure to report another licensee in violation. (Sections 458.331(1)(e); 456.072(1)(i), F.S.)	(e) From a letter of concern to probation or denial, and an administrative	(e) From probation to suspension or denial, and an administrative fine from \$5,000.00 to \$10,000.00.		(e) From letter of concern to suspension with a corrective action plan or denial.	(e) From a suspension with a corrective action plan to revocation.

	fine from \$1,000.00 to \$5,000.00.				
(f) Aiding unlicensed practice. (Sections 458.331(1)(f); 456.072(1)(j), F.S.)	(f) From probation to revocation or denial and an administrative fine from \$5,000.00 to \$10,000.00.	(f) From suspension, to be followed by a period of probation, to revocation or denial and an administrative fine from \$7,500.00 to \$10,000.00.		(f) From suspension with corrective action plan to revocation or denial.	(f) From suspension to revocation or denial.
(g) Failure to perform legal obligation. (Sections 458.331(1)(g); 456.072(1)(k), F.S.)	(g) For any offense not specifically listed herein, based upon the severity of the offense and the potential for patient harm, from a letter of concern to revocation or denial, and an administrative fine from \$5,000.00 to \$10,000.00, unless otherwise provided by law.	(g) For any offense not specifically listed herein, based upon the severity of the offense and the potential for patient harm, from a reprimand to revocation or denial, and an administrative fine from \$7,500.00 to \$10,000.00, unless otherwise provided by law.		(g) For any offense not specifically listed herein, based upon the severity of the offense and the potential for patient harm, from a letter of concern to revocation or denial, unless otherwise provided by law.	(g) For any offense not specifically listed herein, based upon the severity of the offense and the potential for patient harm, from a reprimand to revocation or denial, unless otherwise provided by law.
1. Failing to register a laser device. (Section 456.072(1)(d), F.S.)	1. If the device is an approved device, from an administrative fine of \$1,000.00 to \$5,000.00; if the device is not approved, from an administrative fine from \$5,000.00 to a suspension or denial, and an	1. If the device is an approved device, from a reprimand to probation or restriction of practice, and an administrative fine of \$5,000.00 to \$10,000.00; if the device is not approved, from suspension to revocation and an administrative fine of \$10,000.00.		Not applicable to telehealth registrants.	Not applicable to telehealth registrants.

	administrative fine of \$10,000.00.				
2. Continuing medical education (CME) violations. (Sections 456.072(1)(e); 456.072(1)(s), F.S.)	2. Within twelve months of the date of the filing of the final order, the licensee must submit certified documentation of completion of all CME requirements for the period for which the citation was issued; prior to renewing the license for the next biennium, Respondent must document compliance with the CME requirements for the relevant period; AND:	2. Within twelve months of the date of the filing of the final order, the licensee must submit certified documentation of completion of all CME requirements for the period for which the citation was issued; prior to renewing the license for the next biennium, Respondent must document compliance with the CME requirements for the relevant period; AND:		Not applicable to telehealth registrants.	Not applicable to telehealth registrants.
a. Failure to document required HIV/AIDS and related infections of TB or domestic violence or medical errors CME, or substituted end-of-life care CME.	a. An administrative fine of \$500.00 to \$1,000.00.	a. A reprimand and an administrative fine of \$1,000.00 to \$5,000.00.		Not applicable to telehealth registrants.	Not applicable to telehealth registrants.
b. Failure to document required HIV/AIDS and related infections of TB and failure to document domestic violence and failure to document medical errors CME.	b. An administrative fine of \$1,000.00 to \$2,000.00.	b. A reprimand and an administrative fine of \$5,000.00 to \$10,000.00.		Not applicable to telehealth registrants.	Not applicable to telehealth registrants.
c. Failure to document some, but not all CME	c. An administrative	c. A reprimand and an administrative		Not applicable to telehealth	Not applicable to telehealth

hours.	fine of \$100.00 per hour not documented.	fine of \$500.00 per hour not documented.		registrants.	registrants.
d. Failure to document any CME hours.	d. A reprimand and an administrative fine from \$5,000.00 to \$10,000.00	d. Suspension until documentation of completion, a reprimand and an administrative fine of \$10,000.00.		Not applicable to telehealth registrants.	Not applicable to telehealth registrants.
3. Failing to comply with the requirements for profiling and credentialing. (Section 456.039, F.S.); (Sections 456.072(1)(w); 458.319, F.S.);					
a. Involving a violation of any provision of Chapter 456, F.S., for failing to comply with the requirements for profiling and credentialing, by failing to timely provide updated information, on a profile, credentialing, or initial or renewal licensure application, not appropriate for a notice of noncompliance.	a. If the licensee complies within six (6) months of the violation, then an administrative fine of up to \$2,000.00; if compliance after six (6) months, an administrative fine of up to \$5,000.00 and a reprimand.	a. If the licensee complies within six (6) months of the violation, then a reprimand and an administrative fine from \$5,000.00 to \$10,000.00; if compliance after six (6) months, from suspension to revocation and an administrative fine of \$10,000.00.		Not applicable to telehealth registrants.	Not applicable to telehealth registrants.
b. Involving violations of any provision of Chapter 456, F.S., for making misleading, untrue, deceptive or fraudulent representations on a profile, credentialing, or initial or renewal licensure application.				Not applicable to telehealth registrants.	Not applicable to telehealth registrants.

(I) Negligently making misleading or untrue representations on a profile, credentialing, or initial licensure or renewal application.	(I) From a \$1,000.00 fine and 3 hours CME on ethics to suspension, to be followed by a period of probation, and a reprimand, and a \$5,000.00 administrative fine.	(I) From suspension, to be followed by a period of probation, and a reprimand, and a \$10,000.00 fine to revocation or denial.		Not applicable to telehealth registrants.	Not applicable to telehealth registrants.
(II) Fraudulently making misleading, untrue, deceptive or fraudulent representations on a profile, credentialing, or initial licensure or renewal application.	(II) Referral to State Attorney for prosecution pursuant to Sections 456.067 and 456.066, F.S., and from suspension, to be followed by a period of probation, and a reprimand and a \$10,000.00 fine to revocation or denial and a \$10,000 fine.	(II) Referral to State Attorney for prosecution and revocation or denial and a \$10,000.00 fine.		Not applicable to telehealth registrants.	Not applicable to telehealth registrants.
4. Failing to report to the board within 30 days after the licensee has been convicted of a crime in any jurisdiction. Convictions prior to the enactment of this section not reported in writing to the board, on or before October 1, 1999. (Section 456.072(1)(x), F.S.)	4. From an Administrative fine of \$2,000.00 to a fine of \$5,000.00 and a reprimand or denial.	4. From suspension, to be followed by a period of probation to revocation and an administrative fine from \$5,000.00 to \$10,000.00.		4. From a letter of concern to a reprimand or denial.	4. From suspension to revocation.
5. Failing to comply with obligations	5. From a letter of	5. From a reprimand to two (2) years		5. From a letter of concern to two (2)	5. From a reprimand to

regarding ownership and control of medical records, patient records; report or copies of records to be furnished. (Section 456.057, F.S.)	concern to two (2) years suspension followed by probation or denial and an administrative fine from \$1,000.00 to \$5,000.00.	suspension followed by probation, and an administrative fine from \$5,000.00 to \$10,000.00.		years suspension with corrective action plan or denial.	two (2) years suspension with corrective action plan.
6. Failing to maintain confidentiality of communication between a patient and a psychiatrist. (Section 456.059, F.S.)	6. From a \$5,000.00 administrative fine and a reprimand to suspension, to be followed by a period of probation, and a \$10,000.00 administrative fine or denial.	6. From suspension, to be followed by a period of probation, to revocation.		6. From a reprimand to suspension with corrective action plan or denial.	6. From suspension to revocation.
7. Failing to report final disposition of professional liability claims and actions. (Section 456.049, F.S.)	7. If the licensee complies within six (6) months of the violation then an administrative fine of up to \$2,000.00; if compliance after six (6) months, an administrative fine of up to \$5,000.00 and a reprimand.	7. If the licensee complies within six (6) months of the violation, then a reprimand and an administrative fine from \$5,000.00 to \$10,000.00; if compliance after six (6) months, from suspension, to be followed by a period of probation, to revocation and an administrative fine of \$10,000.00.		7. If the licensee complies within six (6) months of the violation then a letter of concern; if compliance after six (6) months, a reprimand.	7. If the licensee complies within six (6) months of the violation then a reprimand; if compliance after six (6) months, from suspension to revocation.
8. Failing to disclose financial interest to patient. (Section 456.052, F.S.)	8. A refund of fees paid by or on behalf of the patient and from an administrative fine of \$1,000.00 and an administrative	8. A refund of fees paid by or on behalf of the patient and from restriction of practice, and an administrative fine of \$5,000.00 to a reprimand, and an administrative fine of \$10,000.00.		8. A refund of fees paid by or on behalf of the patient and a letter of concern to a reprimand.	8. A refund of fees paid by or on behalf of the patient and reprimand to a suspension.

	fine of \$5,000.00.				
9. Failing to comply with the requirements for qualified physicians or medical directors required by Section 381.986(3), F.S. (Section 456.072(1)(k), F.S.)	9. A letter of concern, and an administrative fine of \$1,000.00 to probation and an administrative fine of \$5,000.00.	9. A reprimand, and an administrative fine of \$5,000.00 to revocation and an administrative fine of \$10,000.00.		Not applicable to telehealth registrants.	Not applicable to telehealth registrants.
(h) Filing a false report or failing to file a report as required. (Sections 458.331(1)(h); 456.072(1)(l), F.S.)					
1. Negligently filing a false report or failing to file a report as required.	1. From a letter of concern or denial to one (1) year probation, and an administrative fine from \$1,000.00 to \$5,000.00.	1. From one (1) year probation to revocation or denial and an administrative fine from \$5,000.00 to \$10,000.00.		1. From a letter of concern to a reprimand or denial.	1. From a reprimand to revocation.
2. Fraudulently filing a false report or failing to file a report as required.	2. From one (1) year probation to revocation or denial and a \$10,000.00 fine.	2. From suspension, to be followed by a period of probation, to revocation and a \$10,000.00 fine.		2. From a reprimand to revocation or denial.	2. From suspension to revocation.
(i) Kickbacks or split fee arrangements. (Sections 458.331(1)(i); 456.054, F.S.)	(i) A refund of fees paid by or on behalf of the patient, and from six (6) months suspension, to be followed by a period of probation, to revocation or denial and an	(i) A refund of fees paid by or on behalf of the patient, and from a two (2) year suspension, to be followed by a period of probation, to revocation or denial and an administrative fine from \$7,500.00 to \$10,000.00.		(i) A refund of fees paid by or on behalf of the patient, and from six (6) months suspension with a corrective action plan, to revocation or denial.	(i) A refund of fees paid by or on behalf of the patient, and from a two (2) year suspension with a corrective action plan, to revocation.

	administrative fine from \$5,000.00 to \$10,000.00.				
(j) Sexual misconduct. (Sections 458.331(1)(j); 458.329; 456.072(1)(v), F.S.)	(j) From one (1) year suspension to be followed by a period of probation and a reprimand, and an administrative fine of \$5,000.00 to revocation or denial and an administrative fine of \$10,000.00.	(j) Revocation.		(j) From one (1) year suspension with a corrective action plan, and a reprimand, to revocation or denial.	(j) Revocation.
(k) Deceptive, untrue, or fraudulent representations in the practice of medicine. (Sections 458.331(1)(k); 456.072(1)(a), (m), F.S.)	(k) From probation to revocation or denial, and an administrative fine from \$5,000.00 to \$10,000.00. If the offense includes an element of fraud or making a false or fraudulent representation the fine shall be \$10,000.00.	(k) From suspension, to be followed by a period of probation, to revocation or denial, and an administrative fine from \$7,500.00 to \$10,000.00. If the offense includes an element of fraud or making a false or fraudulent representation the fine shall be \$10,000.00.		(k) From a reprimand to revocation or denial.	(k) From suspension with a corrective action plan, to revocation.
(l) Improper solicitation of patients. (Section 458.331(1)(l), F.S.)	(l) From one (1) year suspension, to be followed by a period of probation, to revocation or denial and an administrative fine from \$5,000.00 to \$10,000.00.	(l) From one (1) year suspension, to be followed by a period of probation, to revocation or denial and an administrative fine from \$7,500.00 to \$10,000.00.		(l) From one (1) year suspension with a corrective action plan, to revocation or denial.	(l) From suspension with a corrective action plan, to revocation.

<p>(m) Failure to keep appropriate written medical records. (Sections 458.331(1)(m), F.S.; 456.47(3), F.S.)</p>	<p>(m) From a reprimand to denial or two (2) years suspension followed by probation, and an administrative fine from \$1,000.00 to \$5,000.00.</p>	<p>(m) From probation to suspension followed by probation or denial, and an administrative fine from \$5,000.00 to \$10,000.00.</p>		<p>(m) From a reprimand to two (2) years suspension with a corrective action plan or denial.</p>	<p>(m) From six (6) month suspension with a corrective action plan to (2) years suspension with a corrective action plan.</p>
<p>(n) Exercising influence on patient for financial gain. (Sections 458.331(1)(n); 456.072(1)(n), F.S.)</p>	<p>(n) Payment of fees paid by or on behalf of the patient and from probation to two (2) years suspension, to be followed by a period of probation, or denial and an administrative fine from \$5,000.00 to \$10,000.00.</p>	<p>(n) Payment of fees paid by or on behalf of the patient and from suspension, to revocation or denial and an administrative fine of \$10,000.00.</p>		<p>(n) Payment of fees paid by or on behalf of the patient and from three (3) month suspension with a corrective action plan to two (2) years suspension with a corrective action plan or denial.</p>	<p>(n) Payment of fees paid by or on behalf of the patient and from two (2) year suspension to revocation or denial.</p>
<p>(o) Improper advertising of pharmacy. (Section 458.331(1)(o), F.S.)</p>	<p>(o) From a reprimand and \$250.00 fine or denial to one year probation, to be followed by a period of probation, and an administrative fine from \$250.00 to \$5,000.00.</p>	<p>(o) From probation, to suspension, to be followed by a period of probation, or denial and an administrative fine of \$5,000.00 to \$10,000.00.</p>		<p>(o) From a reprimand to suspension to with a corrective action plan or denial.</p>	<p>(o) From one (1) month suspension with a corrective action plan to six (6) month suspension to be followed by a corrective action plan.</p>
<p>(p) Performing professional services not authorized by patient. (Section 458.331(1)(p), F.S.)</p>	<p>(p) From a reprimand to two (2) years suspension, to be followed by a period of probation or</p>	<p>(p) From probation to revocation and an administrative fine of \$7,500.00 to \$10,000.00.</p>		<p>(p) From a reprimand or denial to two (2) years suspension with a corrective action plan or denial.</p>	<p>(p) From suspension with a corrective action plan to revocation or denial.</p>

	denial and an administrative fine from \$5,000.00 to \$10,000.00.				
(q) Inappropriate or excessive prescribing. (Section 458.331(1)(q), F.S.)	(q) From one (1) year probation to revocation or denial and an administrative fine from \$5,000.00 to 10,000.00.	(q) From suspension, to be followed by a period of probation, to revocation or denial and an administrative fine from \$7,500.00 to \$10,000.00.		(q) From a three (3) month suspension with a corrective action plan to revocation or denial.	(q) From one (1) year suspension with a corrective action plan, revocation or denial.
(r) Prescribing or dispensing of a scheduled drug by the physician to himself. (Section 458.331(1)(r), F.S.)	(r) From one (1) year probation to revocation or denial and an administrative fine from \$1,000.00 to \$5,000.00, and a mental and physical examination.	(r) From suspension, to be followed by a period of probation, to revocation or denial and an administrative fine from \$5,000.00 to \$10,000.00, and a mental and physical examination.		(r) From a 14 day suspension with a corrective action plan to revocation and a mental and physical examination.	(r) From a 3 month suspension with a corrective action plan, to revocation or denial, and a mental and physical examination.
(s) Inability to practice medicine with skill and safety. (Section 458.331(1)(s), F.S)	(s) From probation to indefinite suspension until licensee is able to demonstrate ability to practice with reasonable skill and safety followed by probation, or denial and an administrative fine from \$1,000.00 to \$5,000.00.	(s) From indefinite suspension, followed by probation, to suspension for a minimum of five (5) years or until licensee is able to demonstrate ability to practice with reasonable skill and safety followed by probation, and an administrative fine from \$5,000.00 to \$10,000.00.		(s) From indefinite suspension with corrective action plan and until licensee is able to demonstrate ability to practice with reasonable skill and safety to suspension for a minimum of one (1) year and until licensee is able to demonstrate ability to practice with reasonable skill and safety or denial.	(s) From indefinite suspension with a corrective action plan, to suspension for a minimum of five (5) years and until licensee is able to demonstrate ability to practice with reasonable skill and safety.
(t) Failure to practice medicine in accordance with appropriate level of	(t) From one (1) year probation to revocation or	(t) From two (2) years probation to revocation or denial and an		(t) From three (3) month suspension with corrective action plan to	(t) From six (6) month suspension with corrective action

care, skill and treatment recognized in general law related to the practice of medicine. (Sections 456.50(1)(g); 458.331(1)(t); 456.47(2)(a), F.S.)	denial and an administrative fine from \$2,500.00 to \$10,000.00.	administrative fine from \$5,000.00 to \$10,000.00.		revocation or denial	plan to revocation.
1. Gross Malpractice.	1. From one (1) year suspension followed by three (3) years probation to revocation or denial and an administrative fine from \$5,000.00 to \$10,000.00.	1. From suspension, to be followed by a period of probation or denial to revocation and an administrative fine of \$7,500.00 to \$10,000.00.		1. From one (1) year suspension with a corrective action plan, to revocation or denial.	1. From two (2) year suspension with a corrective action plan to revocation.
2. Repeated Malpractice as defined in Section 456.50, F.S.	2. Revocation or denial and an administrative fine from \$7,500.00 to \$10,000.00.			2. Revocation or denial.	
(u) Performing of experimental treatment without informed consent. (Section 458.331(1)(u), F.S.)	(u) From one (1) year suspension, to be followed by a period of probation; to revocation or denial and an administrative fine from \$1,000.00 to \$10,000.00.	(u) Revocation or denial.		(u) From one (1) year suspension with a corrective action plan to revocation or denial.	(u) Revocation or denial.
(v) Practicing beyond scope permitted. (Sections 458.331(1)(v); 456.072(1)(o), F.S.)	(v) From two (2) years suspension to revocation or denial and an administrative fine from \$5,000.00 to \$10,000.00.	(v) From three (3) year suspension to revocation or denial and an administrative fine from \$7,500.00 to \$10,000.00.		(v) From two (2) years suspension to revocation or denial.	(v) From three (3) year suspension to revocation or denial.
(w) Delegation of	(w) From one	(w) From		(w) From three (3)	(w) From six (6)

<p>professional responsibilities to unqualified person. (Sections 458.331(1)(w); 456.072(1)(p), F.S.)</p>	<p>(1) year probation, to denial or five (5) years suspension followed by probation, and an administrative fine from \$5,000.00 to \$10,000.00.</p>	<p>suspension, to be followed by a period of probation; to revocation or denial and an administrative fine from \$7,500.00 to \$10,000.00.</p>		<p>month suspension with corrective action plan to five (5) year suspension with corrective action plan or denial.</p>	<p>month suspension with a corrective action plan to revocation.</p>
<p>(x)1. Violation of a lawful order of the board or department previously entered in a disciplinary hearing, or failure to comply with a lawfully issued subpoena of the department. (Sections 458.331(1)(x); 456.072(1)(b), (q), F.S.)</p>	<p>(x)1. For any offense not specifically listed herein, based upon the severity of the offense and the potential for patient harm, from a reprimand, to revocation or denial and an administrative fine from \$5,000.00 to \$10,000.00.</p>	<p>(x)1. From probation to revocation or denial and an administrative fine from \$7,500.00 to \$10,000.00.</p>		<p>(x)1. For any offense not specifically listed herein, based upon the severity of the offense and the potential for patient harm, from a reprimand, to revocation or denial.</p>	<p>(x)1. From suspension to revocation, or denial.</p>
<p>2. Violation of an order of the Board. (Section 458.331(1)(x), F.S.)</p>	<p>2. Reprimand and an administrative fine from \$5,000.00 to \$10,000.00, to revocation or denial based upon the severity of the offense and the potential for patient harm.</p>	<p>2. From suspension, to be followed by a period of probation, and a \$10,000.00 fine to revocation, or denial.</p>		<p>2. From a reprimand to revocation or denial based upon the severity of the offense and the potential for patient harm.</p>	<p>2. From suspension with a corrective action plan, to revocation, or denial.</p>
<p>(y) Conspiring to restrict another from lawfully advertising services. (Section 458.331(1)(y),</p>	<p>(y) A reprimand or denial; and an administrative fine ranging from</p>	<p>(y) Probation or denial; and an administrative fine from \$5,000.00 to \$10,000.00.</p>		<p>(y) A reprimand or denial.</p>	<p>(y) Suspension with a corrective action plan, or denial.</p>

F.S.)	\$1,000.00 to \$5,000.00.				
(z) Aiding an unlawful abortion. (Section 458.331(1)(z), F.S.)	(z) From one (1) year suspension, to be followed by a period of probation, to revocation or denial and an administrative fine from \$5,000.00 to \$10,000.00.	(z) From eighteen (18) month suspension, to be followed by a period of probation; to revocation or denial and an administrative fine from \$7,500.00 to \$10,000.00.		(z) From one (1) year suspension with a corrective action plan, to revocation or denial.	(z) From eighteen (18) month suspension with a corrective action plan, to revocation or denial.
(aa) Presigning prescription forms. (Section 458.331(1)(aa), F.S.)	(aa) From a reprimand to two (2) years probation or denial, and an administrative fine from \$1,000.00 to \$5,000.00.	(aa) From suspension, to be followed by a period of probation, to revocation or denial and an administrative fine from \$5,000.00 to \$10,000.00.		(aa) From a reprimand to two (2) years suspension with a corrective action plan or denial.	(aa) From suspension with a corrective action plan to revocation or denial.
(bb) Prescribing a Schedule II substance for Office use. (Section 458.331(1)(bb), F.S.)	(bb) From a reprimand to probation with CME in pharmacology, and an administrative fine from \$1,000.00 to \$5,000.00.	(bb) From probation to suspension, to be followed by a period of probation, or denial, and an administrative fine from \$5,000.00 to \$10,000.00.		(bb) From a reprimand to 7 day suspension with a corrective action plan.	(bb) From 1 year suspension with a corrective action plan to revocation or denial.
(cc) Improper prescribing of Schedule II amphetamine or sympathomimetic amine drug. (Section 458.331(1)(cc), F.S.)	(cc) From probation, to denial or two (2) years suspension followed by probation or denial, and an administrative fine from \$5,000.00 to \$10,000.00.	(cc) From suspension, to be followed by a period of probation, to revocation or denial of the license and an administrative fine ranging from \$7,500.00 to \$10,000.00.		(cc) From a suspension with a corrective action plan to two (2) years suspension with a corrective action plan or denial.	(cc) From thirty (30) day suspension with a corrective action plan, to revocation or denial.
(dd) Failure to adequately supervise assisting personnel. (Section	(dd) From probation to denial or two (2) years	(dd) From one (1) year suspension, to be followed by a period of probation,		(dd) From a thirty (30) day suspension to two (2) years suspension with a	(dd) From one (1) year suspension with a corrective

458.331(1)(dd), F.S.)	suspension followed by probation, and an administrative fine from \$1,000.00 to \$5,000.00.	to revocation or denial and an administrative fine from \$5,000.00 to \$10,000.00.		corrective action plan or denial.	action plan, to revocation or denial.
(ee) Improper use of substances for muscle building or enhancement of athletic performance. (Section 458.331(1)(ee), F.S.)	(ee) From one (1) year suspension, to be followed by a period of probation, to revocation or denial and an administrative fine from \$1,000.00 to \$5,000.00.	(ee) From eighteen (18) month suspension, to be followed by a period of probation, to revocation or denial of the license and an administrative fine ranging from \$5,000.00 to \$10,000.00.		(ee) From one (1) year suspension with a corrective action plan to revocation or denial.	(ee) From eighteen (18) month suspension with a corrective action plan to revocation or denial.
(ff) Use of amygdalin (laetrile). (Section 458.331(1)(ff), F.S.)	(ff) From one (1) year suspension, to be followed by a period of probation, to revocation or denial and an administrative fine from \$5,000.00 to \$10,000.00.	(ff) From eighteen (18) month suspension, to be followed by a period of probation, to revocation or denial of the license and an administrative fine ranging from \$7,500.00 to \$10,000.00.		(ff) From one (1) year suspension with a corrective action plan to revocation or denial.	(ff) From eighteen (18) month suspension with a corrective action plan to revocation or denial.
(gg) Misrepresenting or concealing a material fact. (Section 458.331(1)(gg), F.S.)	(gg) From suspension, to be followed by a period of probation, to revocation of license or denial and an administrative fine from \$5,000.00 to \$10,000.00. If the offense includes an element of fraud or making a false	(gg) From a minimum of thirty (30) day suspension, to be followed by a period of probation, to revocation or denial and an administrative fine from \$7,500.00 to \$10,000.00. If the offense includes an element of fraud or making a false or fraudulent representation the fine shall be \$10,000.00.		(gg) From suspension with a corrective action plan or revocation to denial.	(gg) From a minimum of thirty (30) day suspension with a corrective action plan or revocation or denial.

	or fraudulent representation the fine shall be \$10,000.00.				
(hh) Improperly interfering with an investigation or a disciplinary proceeding. (Section 458.331(1)(hh), F.S.)	(hh) From a thirty (30) day suspension, to be followed by a period of probation, to denial or revocation of license and payment of a \$5,000.00 fine.	(hh) From a ninety (90) day suspension, to be followed by a period of probation, to revocation or denial and an administrative fine from \$5,000.00 to \$10,000.00.		(hh) From a thirty (30) day suspension with a corrective action plan, to revocation or denial.	(hh) From a ninety (90) day suspension with a corrective action plan to revocation or denial.
(ii) Failing to report any licensee in violation who practices in a hospital or an H.M.O.; or failing to report any person in violation of Chapter 456, F.S. (Sections 458.331(1)(ii); 456.072(1)(i), F.S.)	(ii) From a reprimand to probation, or denial and an administrative fine from \$1,000.00 to \$5,000.00.	(ii) From probation, to suspension, to be followed by a period of probation, or denial, and an administrative fine from \$5,000.00 to \$10,000.00.		(ii) From a reprimand to suspension with a corrective action plan, or denial.	(ii) Suspension with a corrective action plan or denial.
(jj) Providing written medical opinion without reasonable investigation. (Section 458.331(1)(jj), F.S.)	(jj) From a thirty (30) day suspension, to be followed by a period of probation to revocation or denial and payment of a \$1,000.00 to \$5,000.00 fine.	(jj) From a ninety (90) day suspension, to be followed by a period of probation, to revocation or denial of the license and an administrative fine ranging from \$5,000.00 to \$10,000.00.		(jj) From a thirty (30) day suspension with a corrective action plan to revocation or denial.	(jj) From a ninety (90) day suspension with a corrective action plan to revocation or denial.
(kk) Failure to report disciplinary action by another jurisdiction, and for telehealth registrants, including the notification of pending disciplinary action. (Sections 458.331(1)(kk),	(kk) From an Administrative fine of \$2,000.00 to a fine of \$5,000.00 and a reprimand, to revocation or denial and payment of a	(kk) From probation to suspension, to be followed by a period of probation, to revocation or denial, and an administrative fine from \$5,000.00 to \$10,000.00.		(kk) From a reprimand to revocation or denial.	(kk) From suspension with a corrective action plan, to revocation or denial.

456.47(4)(d), F.S.	\$5,000.00.				
(ll) Improper holding oneself out as a specialist. (Section 458.331(1)(ll), F.S.)	(ll) From letter of concern, to one (1) year suspension, to be followed by a period of probation, or denial and an administrative fine from \$500.00 to \$5,000.00.	(ll) From reprimand, to up to one (1) year suspension, to be followed by a period of probation, or denial, and an administrative fine from \$5,000.00 to \$10,000.00.		(ll) From a letter of concern, to one (1) year suspension with a corrective action plan, or denial.	(ll) From a reprimand, to up to one (1) year suspension with a corrective action plan, or denial.
(mm) Failing to provide patients with information about patient rights and how to file a patient complaint. (Sections 458.331(1)(mm); 456.072(1)(u), F.S.)	(mm) Corrective action for nonwillful violations. Letter of concern to reprimand and corrective action for willful violations and an administrative fine from \$100.00 to \$200.00.	(mm) Administrative fine of up to \$100.00 for nonwillful violations; and an administrative fine from \$250.00 to \$500.00 for willful violations.		(mm) From a letter of concern to seven (7) day suspension with corrective action plan.	(mm) From a reprimand to a ten (10) day suspension with corrective action plan.
(nn)1. Violating any provision of Chapters 458, 456, F.S., or any rules adopted pursuant thereto. (Section 458.331(1)(nn), F.S.)	(nn) From a reprimand, to revocation or denial and an administrative fine from \$2,500.00 to \$10,000.00.	(nn) From probation, to revocation or denial and an administrative fine from \$5,000.00 to \$10,000.00.		(nn) From a reprimand to revocation or denial.	(nn) From suspension with a corrective action plan to revocation or denial.
2. Failure to comply with any provision of Rule 64B8-8.019, F.A.C. (Section 458.331(1)(nn), F.S.)	2. From a \$1,000.00 fine, letter of concern, demonstration of compliance with the rule or denial to a \$5,000.00 fine, a reprimand,	2. From a \$7,500.00 fine, a reprimand, a term of probation, completion of a laws and rules course, demonstration of compliance with the rule or denial to a \$10,000.00 fine and revocation.		2. From a letter of concern and demonstration of compliance with the rule, to suspension with a corrective action plan or denial.	2. From a reprimand and demonstration of compliance with the rule to revocation or denial.

	completion of a laws and rules course, a term of probation, demonstration of compliance with the rule or denial.				
3. Performing a pelvic examination on a patient without the written consent of the patient or the patient's legal representative executed specific to, and expressly identifying, the pelvic examination. (Sections 458.331(1)(nn), 456.51, F.S.)	3. From a letter of concern to a reprimand and an administrative fine from \$1,000.00 to \$2,500.00, or Denial.	3. From a reprimand to probation, and an administrative fine from \$2,500.00 to \$5,000.00, or denial.	3. From probation to revocation and an administrative fine from \$5,000.00 to \$10,000.00, or denial.	3. From a letter of concern to suspension with a corrective action plan or denial.	3. From a minimum of six months suspension with a corrective action plan to revocation or denial.
(oo) Improper use of information about accident victims for commercial or any other solicitation of the people involved in such accidents. (Section 456.072(1)(x), F.S.)	(oo) From an administrative fine of \$1,000.00 to a fine of \$5,000.00, reprimand and probation.	(oo) From reprimand to up to one (1) year suspension or denial, and an administrative fine from \$5,000.00 to \$10,000.00.		(oo) From a reprimand to six (6) months suspension with a corrective action plan.	(oo) From a reprimand to up to one (1) year suspension or denial.
(pp) Theft or reproduction of an examination. (Section 456.018, F.S.)	(pp) Revocation or denial.			(pp) Revocation or denial.	
(qq) Violation of Patient Self Referral Act. (Section 456.053, F.S.)	(qq) From an Administrative fine of \$5,000.00 to an administrative fine of \$10,000.00.	(qq) From probation to suspension, to be followed by a period of probation, or denial, and an administrative fine from \$5,000.00 to \$10,000.00.		(qq) From a reprimand to a suspension with a corrective action plan or denial.	(qq) From a thirty (30) day suspension with a corrective action plan to revocation or denial.
(rr) Prescribing controlled substances in violation of Section 456.47(2)(c), F.S. (Section 456.47(2)(c), F.S.)	(rr) From a reprimand and a \$5,000.00 fine to revocation or denial.	(rr) From suspension and a \$10,000.00 fine to revocation or denial.		(rr) From a reprimand to revocation or denial.	(rr) From suspension with a corrective action plan to revocation or denial.

<p>(ss) Performing or attempting to perform health care services on the wrong patient, a wrong site procedure, a wrong procedure, or an unauthorized procedure or a procedure that is medically unnecessary or otherwise unrelated to the patient's diagnosis or medical condition. (Section 456.072(1)(bb), F.S.)</p>	<p>(ss) From a \$5,000.00 fine, a letter of concern, a minimum of five (5) hours of risk management education, and one (1) hour lecture on wrong-site surgery in the State of Florida to a \$10,000.00 fine, a letter of concern, a minimum of five (5) hours of risk management education, undergo a risk management assessment, a one (1) hour lecture on wrong-site surgery, and suspension to be followed by a term of probation or denial.</p>	<p>(ss) From a \$10,000.00 fine, a reprimand, undergo a risk management assessment, and probation or denial to a \$10,000.00 fine and revocation.</p>	<p>(ss) From a \$10,000.00 fine, a reprimand, undergo a competency evaluation, and suspension to be followed by a term of probation or denial, to a \$10,000.00 fine and revocation.</p>	<p>(ss) From a letter of concern to suspension with a corrective action plan or denial.</p>	<p>(ss) From a reprimand to revocation or denial.</p>
<p>(tt) Leaving a foreign body in a patient, such as a sponge, clamp, forceps, surgical needle, or other paraphernalia commonly used in surgical, examination, or other diagnostic procedures. (Section 456.072(1)(cc), F.S.)</p>	<p>(tt) From a \$5,000.00 to a \$10,000.00 fine, a letter of concern, a minimum of five (5) hours of risk management education, and a one hour lecture to the staff of a Florida</p>	<p>(tt) From a \$10,000.00 fine, a reprimand and probation, or denial to revocation.</p>		<p>(tt) From a letter of concern to suspension with a corrective action plan.</p>	<p>(tt) From a suspension with a corrective action plan to revocation or denial.</p>

	licensed healthcare facility on retained foreign body objects to suspension to be followed by a term of probation.				
(uu) For the practitioner(s) responsible for the adverse incident, failing to inform a patient, or an individual identified pursuant to Section 765.401(1), F.S., in person about adverse incidents that result in serious harm to the patient. (Section 456.0575, F.S.)	(uu) From a reprimand to probation, or denial and an administrative fine of \$1,000 to \$5,000.	(uu) From probation, to suspension or denial and an administrative fine of \$5,000 to \$10,000.		(uu) From a reprimand to suspension with a corrective action plan, or denial.	(uu) From suspension with a corrective action or denial.
(vv) Engaging in a pattern of practice when prescribing medicinal drugs or controlled substances which demonstrates a lack of reasonable skill or safety to patients. (Section 456.072(1)(gg), F.S.)	(vv) From one (1) year probation to revocation or denial and an administrative fine from \$5,000.00 to \$10,000.00.	(vv) From suspension, to be followed by a period of probation, to revocation or denial and an administrative fine from \$7,500.00 to \$10,000.00.		(vv) From one (1) month suspension with a corrective action plan, to revocation or denial.	(vv) From ninety (90) day suspension with a corrective action plan, to revocation or denial.
(ww) Being terminated from a treatment program for impaired practitioners, for failure to comply with the terms of the monitoring or treatment contract or for not successfully completing any drug-treatment or alcohol-treatment program. (Section 456.072(1)(hh), F.S.)	(ww) From suspension until licensee demonstrates compliance with all terms of the monitoring or treatment contract, and is able to demonstrate to the Board the ability to	(ww) From a minimum of six (6) months suspension and until licensee demonstrates compliance with all terms of the monitoring or treatment contract and is able to demonstrate to the Board the ability to practice with reasonable skill and		(ww) From suspension with a corrective action plan until licensee demonstrates compliance with all terms of the monitoring or treatment contract, and is able to demonstrate to the Board the ability to practice with reasonable skill and	(ww) From a minimum of six (6) months suspension with a corrective action plan and until licensee demonstrates compliance with all terms of the monitoring or treatment contract, and is able to

	practice with reasonable skill and safety to be followed by a term of probation; and a fine of \$1,000.00 to \$2,500.00, to revocation or denial.	safety to be followed by a term of probation; and a fine of \$2,500.00 to \$10,000.00, to revocation or denial.		safety, to revocation or denial.	demonstrate to the Board the ability to practice with reasonable skill and safety, to revocation or denial.
(xx) Being convicted of, or entering a plea of guilty or nolo contendere to any misdemeanor or felony, regardless of adjudication, under 18 USC s. 669, ss. 285-287, s. 371, s. 1001, s. 1035, s. 1341, s. 1343, s. 1347, s. 1349, or s. 1518, or 42 USC ss. 1320a-7b, relating to the Medicaid program. (Section 456.072(1)(ii), F.S.)	(xx) Revocation and a fine of \$10,000.00, or denial.			(xx) Revocation or denial.	
(yy) Failing to remit the sum owed to the state for overpayment from the Medicaid program pursuant to a final order, judgment, or settlement. (Section 456.072(1)(jj), F.S.)	(yy) From a letter of concern to probation, and a fine of \$500.00 to \$5,000.00.	(yy) From a reprimand to revocation, and a fine of \$2,500.00 to \$5,000.00.		(yy) From a letter of concern to suspension with a corrective action plan.	(yy) From a reprimand to revocation.
(zz) Being terminated from the state Medicaid program for cause, or any other state Medicaid program, or the federal Medicare program. (Section 456.072(1)(kk), F.S.)	(zz) From a letter of concern to suspension, and a fine of \$1,000.00 to \$5,000.00, or denial.	(zz) From a reprimand to revocation, and a fine of \$5,000.00 to \$10,000.00, or denial.		(zz) From a letter of concern to suspension with a corrective action plan, or denial.	(zz) From a reprimand to revocation or denial.
(aaa) Being convicted	(aaa)			(aaa) Revocation or	

of, or entering into a plea of guilty or nolo contendere to any misdemeanor or felony, regardless of adjudication, which relates to health care fraud. (Section 456.072(1)(II), F.S.)	Revocation and a fine of \$10,000, or denial.			denial.	
(bbb) A violation of Rule 64B8-9.0131, F.A.C.	(bbb) From probation for a term no less than two years and a fine of \$5,000.00 to \$10,000.00 to revocation.	(bbb) From suspension for a minimum of one year, to be followed by a term of probation and a \$10,000.00 fine to revocation.		(bbb) From seven (7) day suspension and a corrective action plan to revocation or denial.	(bbb) From suspension for one (1) year with a corrective action plan to revocation.
(ccc) A violation of Rule 64B8-9.0132, F.A.C.	(ccc) From probation for a term no less than one year and a fine of \$5,000.00 to \$10,000.00 to revocation.	(ccc) From suspension for a minimum of six months, to be followed by a term of probation and a \$10,000.00 fine to revocation.		Not applicable to telehealth registrants.	Not applicable to telehealth registrants.
(ddd) Registration of pain clinic by a designated physician through misrepresentation or fraud. (Section 458.331(1)(pp), F.S.)					
1. For registering a pain clinic through misrepresentation. (Section 458.331(1)(pp)1., F.S.)	1. From a letter of concern to probation, and a fine of \$10,000.00.	1. From a period of probation, to revocation, and a fine of \$10,000.00.		Not applicable to telehealth registrants.	Not applicable to telehealth registrants.
2. For registering a pain clinic through fraud. (Section 458.331(1)(pp)1., F.S.)	2. Revocation and a \$10,000.00 fine.			Not applicable to telehealth registrants.	Not applicable to telehealth registrants.
(eee) Procuring or attempting to procure, the registration of a pain management	(eee) Revocation and a \$10,000.00			Not applicable to telehealth registrants.	Not applicable to telehealth registrants.

<p>clinic for any other person by making or causing to be made, any false representation. (Section 458.331(1)(pp)2., F.S.)</p>	<p>fine.</p>				
<p>(fff) Failing to comply with any requirement of Chapter 499, F.S., the Florida Drug and Cosmetic Act; 21 U.S.C., ss. 301-392, the Federal Food, Drug, and Cosmetic Act; 21 U.S.C. ss. 821 et seq., the Drug Abuse Prevention Control Act; or Chapter 893, F.S., the Florida Comprehensive Drug Abuse Prevention and Control Act. (Section 458.331(1)(pp)3., F.S.)</p>	<p>(fff) From a letter of concern to probation, and a fine of \$1,000.00 to \$5,000.00.</p>	<p>(fff) From a reprimand to suspension, followed by a period of probation, and a fine of \$5,000.00 to \$10,000.00.</p>	<p>(fff) From a reprimand to revocation, and a fine of \$7,500.00 to \$10,000.00 fine.</p>	<p>Not applicable to telehealth registrants.</p>	<p>Not applicable to telehealth registrants.</p>
<p>(ggg) Being convicted of or found guilty of, regardless of adjudication to, a felony or any other crime involving moral turpitude, fraud, dishonesty, or deceit in any jurisdiction of the courts of this state, or any other state, or of the United States. (Section 458.331(1)(pp)4., F.S.)</p>	<p>(ggg) From probation to revocation, and an administrative fine ranging from \$1,000.00 to \$10,000.00. If the offense includes an element of fraud or making a false or fraudulent representation the fine shall be \$10,000.00.</p>	<p>(ggg) From suspension to revocation, and an administrative fine ranging from \$5,000.00 to \$10,000.00. If the offense includes an element of fraud or making a false or fraudulent representation the fine shall be \$10,000.00.</p>		<p>Not applicable to telehealth registrants.</p>	<p>Not applicable to telehealth registrants.</p>
<p>(hhh) Being convicted of, or disciplined by a regulatory agency of the Federal Government or a</p>	<p>(hhh) From imposition of discipline comparable to the discipline</p>	<p>(hhh) From imposition of discipline comparable to the discipline which</p>		<p>Not applicable to telehealth registrants.</p>	<p>Not applicable to telehealth registrants.</p>

regulatory agency of another state for any offense that would constitute a violation of Chapter 458, F.S. (Section 458.331(1)(pp)5., F.S.)	which would have been imposed if the substantive violation had occurred in Florida to suspension until the license is unencumbered in the jurisdiction in which disciplinary action was originally taken, and an administrative fine ranging from \$1,000.00 to \$5,000.00.	would have been imposed if the substantive violation had occurred in Florida to revocation, and an administrative fine ranging from \$5,000.00 to \$10,000.00.			
(iii) Being convicted of, or entering a plea of guilty or nolo contendere to, regardless of adjudication, a crime which relates to the practice of, or the ability to practice, a licensed health care profession. (Section 458.331(1)(pp)6., F.S.)	(iii) From probation to revocation, and an administrative fine ranging from \$5,000.00 to \$10,000.00.	(iii) From suspension to revocation, and an administrative fine ranging from \$7,500.00 to \$10,000.00.		Not applicable to telehealth registrants.	Not applicable to telehealth registrants.
(jjj) Being convicted of, or entering a plea of guilty or nolo contendere to, regardless of adjudication, a crime which relates to health care fraud. (Section 458.331(1)(pp)7., F.S.)	(jjj) A \$10,000.00 administrative fine and suspension of the license, followed by a period of probation to revocation.	(jjj) Revocation and a fine of \$10,000.00.		Not applicable to telehealth registrants.	Not applicable to telehealth registrants.
(kkk) Dispensing any medicinal drug based upon a communication	(kkk) From a reprimand to revocation,	(kkk) From probation to revocation, and an		Not applicable to telehealth registrants.	Not applicable to telehealth registrants.

that purports to be a prescription as defined in Section 465.003(14) or 893.02, F.S., if the dispensing practitioner knows or has reason to believe that the purported prescription is not based upon a valid practitioner-patient relationship. (Section 458.331(1)(pp)8., F.S.)	and an administrative fine ranging from \$5,000.00 to \$10,000.00.	administrative fine ranging from \$7,500.00 to \$10,000.00.			
(lll) Failing to timely notify the Board of the date of his or her termination from a pain management clinic as required by Section 458.3265(2), F.S. (Section 458.331(1)(pp)9., F.S.)	(lll) From a letter of concern to probation, and an administrative fine ranging from \$1,000.00 to \$5,000.00.	(lll) From a reprimand to suspension, followed by a period of probation, and an administrative fine ranging from \$5,000.00 to \$10,000.00.	(lll) From suspension, followed by a period of probation to revocation, an administrative fine of \$10,000.00.	Not applicable to telehealth registrants.	Not applicable to telehealth registrants.
(mmm) Failing to timely notify the Department of the theft of prescription blanks from a pain management clinic or a breach of a physician's electronic prescribing software or other methods for prescribing within 24 hours as required by Section 458.3265(3), F.S. (Section 458.331(1)(qq), F.S.)	(mmm) From a letter of concern to probation, and an administrative fine ranging from \$1,000.00 to \$5,000.00.	(mmm) From probation to suspension, followed by a period of probation, and an administrative fine ranging from \$5,000.00 to \$10,000.00.	(mmm) From suspension, followed by a period of probation to revocation, an administrative fine of \$10,000.00.	Not applicable to telehealth registrants.	Not applicable to telehealth registrants.
(nnn) Promoting or advertising through any communication media the use, sale, or dispensing of any controlled substance appearing on any schedule in Chapter 893, F.S. (Section	(nnn) From a letter of concern to one (1) year suspension, to be followed by a period of probation, and an administrative	(nnn) From reprimand to up to one (1) year suspension, to be followed by a period of probation, and an administrative fine from \$5,000.00 to \$10,000.00.		(nnn) From a letter of concern to one (1) year suspension with a corrective action plan.	(nnn) From reprimand to up to one (1) year suspension with a corrective action plan.

458.331(1)(rr), F.S.)	fine from \$1,000.00 to \$5,000.00.				
(ooo) Failure to comply with the controlled substance prescribing requirements of Section 456.44, F.S. (Section 456.072(1)(mm), F.S.)	(ooo) From a minimum of suspension of license for a period of six (6) months followed by a period of probation and an administrative fine in the amount of \$10,000.00 to revocation and an administrative fine in the amount of \$10,000.00.	(ooo) From a minimum of suspension of license for a period of one (1) year followed by a period of probation and an administrative fine in the amount of \$10,000.00 to revocation and an administrative fine in the amount of \$10,000.00.		(ooo) From a minimum of suspension for a period of six (6) months with a corrective action plan, to revocation.	(ooo) From a minimum of suspension for a period of one (1) year with a corrective action plan, to revocation.
(ppp) Providing false or deceptive expert witness testimony related to the practice of medicine. (Section 458.331(1)(oo), F.S.)	(ppp) From a reprimand to revocation and an administrative fine from \$5,000.00 to \$10,000.00.	(ppp) From suspension to revocation and an administrative fine from \$7,500.00 to \$10,000.00.		(ppp) From a reprimand to revocation.	(ppp) From suspension to revocation.
(qqq) Failure to comply with the requirements of Section 390.0111(3), F.S., regarding termination of pregnancies. (Section 456.072(1)(k), F.S.)	(qqq) From a letter of concern to a period of probation and an administrative fine in the amount of \$1,000.00 to \$2,500.00.	(qqq) From a reprimand to suspension followed by a period of probation and an administrative fine in the amount of \$2,500.00 to \$5,000.00.	(qqq) From a reprimand to revocation and an administrative fine in the amount of \$5,000.00 to \$10,000.00.	(qqq) From a letter of concern to a suspension with a corrective action plan.	(qqq) From a reprimand to revocation.
(rrr) Dispensing a controlled substance listed in Schedule II or Schedule III in violation of Section 465.0276, F.S. (Section	(rrr) From probation to revocation and an administrative fine of \$5,000.00 to	(rrr) From suspension to be followed by a term of probation to revocation and an administrative fine of \$7,500.00 to		(rrr) From a one month suspension with a corrective action plan, to revocation.	(rrr) From a six month suspension with a corrective action plan, to revocation.

458.331(1)(ss), F.S.)	\$10,000.00.	\$10,000.00.			
(sss) Willfully failing to comply with Section 627.64194 or 641.513, F.S., with such frequency as to indicate a general business practice. (Section 458.331(1)(tt), F.S.; Section 456.072(1)(oo), F.S.)	(sss) From a letter of concern to a reprimand and an administrative fine in the amount of \$1,000.00 to \$5,000.00.	(sss) From a reprimand to revocation and an administrative fine in the amount of \$5,000.00 to \$10,000.00.		(sss) From a letter of concern to a reprimand.	(sss) From a reprimand to revocation.
(ttt) Issuing a physician certification, as defined in Section 381.986, F.S., in a manner out of compliance with the requirements of that section and the rules adopted thereunder. (Section 458.331(1)(uu), F.S.)	From probation to revocation or denial of the license and an administrative fine ranging from \$1,000.00 to \$5,000.00.	From suspension to revocation or denial of the license and an administrative fine ranging from \$5,000.00 to \$10,000.00.		Not applicable to telehealth registrants.	Not applicable to telehealth registrants.
(uuu) Failing to consult the prescription drug monitoring system, as required by Section 893.055(8), F.S. (Section 458.331(1)(g), F.S.)	(uuu) From a letter of concern to a reprimand and an administrative fine of \$1,000.00 to \$2,500.00.	(uuu) From a reprimand to suspension and an administrative fine from \$2,500.00 to \$5,000.00.	(uuu) From suspension to revocation and an administrative fine of \$5,000.00 to \$10,000.00.	(uuu) From a letter of concern to a reprimand.	(uuu) From a reprimand to revocation.
(vvv) Failing to report adverse incidents occurring in planned out-of-hospital births as required by Section 456.0495, F.S. (Section 458.331(1)(g), F.S.)	(vvv) From a letter of concern to a reprimand and an administrative fine of \$1,000.00 to \$2,500.00.	(vvv) From a reprimand to suspension and an administrative fine of \$2,500.00 to \$5,000.00.	(vvv) From suspension to revocation and an administrative fine of \$5,000.00 to \$10,000.00.	(vvv) From a letter of concern to a reprimand.	(vvv) From a reprimand to revocation.
(www) Performing a liposuction procedure in which more than 1,000 cubic centimeters of supernatant fat is removed, a Level II office surgery, or a	(www) From twelve (12) months probation to twelve (12) months suspension followed by a	(www) From twelve (12) months suspension followed by a term of probation and permanent restriction from performing office	(www) From eighteen (18) months suspension followed by a term of probation and permanent restriction from performing office	Not applicable to telehealth registrants.	Not applicable to telehealth registrants.

Level III office surgery in an office that is not registered with the department pursuant to Section 458.328, F.S. (Section 458.331(1)(vv), F.S.)	term of probation and an administrative fine of \$5,000.00 per day.	surgery to revocation and an administrative fine of \$5,000.00 per day.	surgery to revocation and an administrative fine of \$5,000.00 per day.		
(xxx) Intentionally implanting a patient or causing a patient to be implanted with a human embryo without the recipient's consent to the use of that human embryo, or inseminating a patient or causing a patient to be inseminated with the human reproductive material, as defined in Section 784.086, F.S., of a donor without the recipient's consent to the use of human reproductive material from that donor. (Section 456.072(1)(qq), F.S.)	(xxx) From six (6) months probation to one (1) year suspension, and an administrative fine of \$5,000.00 to \$10,000.00, or denial.	(xxx) From one (1) year suspension to revocation and an administrative fine of \$7,500.00 to \$10,000.00, or denial.		(xxx) From six (6) months suspension with a corrective action plan to one (1) year suspension with a corrective action plan or denial.	(xxx) From one (1) year suspension with a corrective action plan to revocation or denial.
(yyy) Implanting a patient or causing a patient to be implanted with a human embryo created with the human reproductive material, as defined in Section 784.086, F.S., of the licensee, or inseminating a patient or causing a patient to be inseminated with the human reproductive material of the licensee. (Section 458.331(1)(ww), F.S.)	(yyy) Revocation and a \$10,000.00 fine or denial.			(yyy) Revocation or denial.	
(zzz) Failure to display hyperlink on telehealth registrant's website.	(aaaa) Not applicable to physicians			(aaaa) From a letter of concern to suspension with a	(aaaa) From a reprimand to revocation.

(Section 456.47(4)(c), F.S.	licensed under Chapter 458, F.S.			corrective action plan.	
(aaaa) Opening an office in Florida or providing in-person healthcare services to patients in Florida. (Section 456.47(4)(f), F.S.)	(bbbb) Not applicable to physicians licensed under Chapter 458, F.S.			(bbbb) From six (6) month suspension with a corrective action plan to revocation or denial.	(bbbb) From one (1) year suspension with a corrective action plan to revocation.
(bbbb) Providing information indicating that a person has a disability or supporting a person's need for an emotional support animal under Section 760.27, F.S., without personal knowledge of the person's disability or disability-related need for the specific emotional support animal. (Section 456.072(1)(pp), F.S.)	(cccc) From a letter of concern and a fine of \$100.00 to a reprimand and a fine of \$1,000.00.	(cccc) From a reprimand and a fine of \$2,500.00 to probation and a fine of \$5,000.00.		(cccc) From a letter of concern to a reprimand.	(cccc) From a reprimand suspension with a corrective action plan.
(cccc) Failing to comply with parental consent requirements of Section 1014.06, F.S. (Section 456.072(1)(rr), F.S.)	(cccc) From a letter of concern to six (6) months' probation and an administrative fine of \$1,000.00 to \$2,500.00.	(cccc) From a reprimand to one (1) year probation and an administrative fine of \$2,500.00 to \$5,000.00.	(cccc) From six (6) months' probation to revocation and an administrative fine of \$5,000.00 to \$10,000.00, or denial of licensure.	(cccc) From a reprimand to one (1) year suspension.	(cccc) From six (6) month suspension with a corrective action plan to revocation, or denial of registration.
(dddd) Being convicted or found guilty of, entering a plea, or committing or attempting, soliciting, or conspiring to commit an act that would constitute a violation of any of the offenses listed in Section 456.074(5), F.S. or similar offense in another jurisdiction.	(dddd) Revocation and administrative fine of \$1,000.00 to \$5,000.00, or denial of licensure.	(dddd) Revocation and administrative fine of \$5,000.00 to \$10,000.00, or denial of licensure.		(dddd) Revocation, or denial of registration.	(dddd) Revocation, or denial of registration.

(Section 456.072(1)(ss), F.S.)					
(eeee) Having been found liable in a civil proceeding for knowingly filing a false report or complaint with the department against another licensee. (Section 456.072(1)(g), F.S.)	(eeee) From a thirty (30) day suspension, to be followed by a period of probation to revocation or denial and payment of a \$1,000.00 to \$5,000.00 fine.	(eeee) From a ninety (90) day suspension, to be followed by a period of probation, to revocation or denial of the license and an administrative fine ranging from \$5,000.00 to \$10,000.00		(eeee) From a thirty (30) day suspension with a corrective action plan to revocation or denial.	(eeee) From a ninety (90) day suspension with a corrective action plan to revocation or denial.
(ffff) Failing to identify through written notice, which may include the wearing of a name tag, or orally to a patient the type of license under which the practitioner is practicing. (Section 456.072(1)(t), F.S.)	(ffff) From a letter of concern to one (1) year suspension to be followed by a period of probation, and an administrative fine from \$1,000.00 to \$5,000.00	(ffff) From reprimand to one (1) year suspension to be followed by a period of probation, and an administrative fine from \$5,000.00 to \$10,000.00.		(ffff) From reprimand to one (1) year suspension with a corrective action plan.	(ffff) From suspension with a corrective action plan to revocation.
(gggg) Testing positive for any drug, as defined in Section 112.0455, F.S., on any confirmed preemployment or employer-ordered drug screening when the practitioner does not have a lawful prescription and legitimate medical reason for using the drug. (Section 456.072(1)(aa), F.S.)	(gggg) From probation to indefinite suspension until license is able to demonstrate ability to practice with reasonable skill and safety followed by probation, or denial and an administrative fine from \$1,000.00 to \$5,000.00.	(gggg) From indefinite suspension, followed by probation, to suspension for a minimum of five (5) years or until licensee is able to demonstrate ability to practice with reasonable skill and safety followed by probation, and an administrative fine from \$5,000 to \$10,000.00		(gggg) From indefinite suspension with corrective action plan and until licensee is able to demonstrate ability to practice with reasonable skill and safety to suspension for a minimum of one (1) year and until licensee is able to demonstrate ability to practice with reasonable skill and safety or denial.	(gggg) From indefinite suspension with a corrective action plan, to suspension for a minimum of five (5) years and until licensee is able to demonstrate ability to practice with reasonable skill and safety.
(hhhh) With respect to making a personal injury protection claim	(hhhh) From one (1) year probation to	(hhhh) From suspension, to be followed by a period		(hhhh) From a reprimand to revocation or	(hhhh) From suspension to revocation.

as required by Section 627.736, F.S., intentionally submitting a claim, statement, or bill that has been "upcoded" as defined in Section 627.732, F.S. (Section 456.072(1)(ee), F.S.)	revocation or denial and a \$10,000.00 fine.	of probation, to revocation and a \$10,000.00 fine.		denial.	
(iii) With respect to making personal injury protection claim as required by Section 627.736, F.S., intentionally submitting a claim, statement, or bill for payment of services that were not rendered. (Section 456.072(1)(ff), F.S.)	(iii) From one (1) year probation to revocation or denial and a \$10,000.00 fine.	(iii) From suspension, to be followed by a period of probation, to revocation and a \$10,000.00 fine.		(iii) From a reprimand to revocation or denial.	(iii) From suspension to revocation.
(jjj) Violating Section 790.338(5), F.S. (Section 456.072(1)(nn), F.S.)	(jjj) From a letter of concern to probation and an administrative fine from \$1,000.00 to \$5,000.00.	(jjj) From probation to suspension and an administrative fine from \$5,000.00 to \$10,000.00.		(jjj) From a letter of concern to suspension with a corrective action plan or denial.	(jjj) From a suspension with a corrective action plan to revocation.

(3) Aggravating and Mitigating Circumstances. Based upon consideration of aggravating and mitigating factors present in an individual case, the Board may deviate from the penalties recommended above. The Board shall consider as aggravating or mitigating factors the following:

- (a) Exposure of patient or public to injury or potential injury, physical or otherwise: none, slight, severe, or death;
- (b) Legal status at the time of the offense: no restraints, or legal constraints;
- (c) The number of counts or separate offenses established;
- (d) The number of times the same offense or offenses have previously been committed by the licensee or applicant;
- (e) The disciplinary history of the applicant or licensee in any jurisdiction and the length of practice;
- (f) Pecuniary benefit or self-gain inuring to the applicant or licensee;
- (g) The involvement in any violation of Section 458.331, F.S., of the provision of controlled substances for trade, barter or sale, by a licensee. In such cases, the Board will deviate from the penalties recommended above and impose suspension or revocation of licensure.
- (h) Where a licensee has been charged with violating the standard of care pursuant to Section 458.331(1)(t), F.S., but the licensee, who is also the records owner pursuant to Section 456.057(1), F.S., fails to keep and/or produce the medical records.
- (i) Any other relevant mitigating factors.

(4) It is the intent of the Board to notify applicants and licensees whom it regulates under Chapter 458, F.S., and Section 456.47, F.S., of the seriousness with which the Board deals with sexual misconduct in or related to the practice of medicine. In particular, the Board has identified those situations in which the sexual misconduct is predatory in its character because of the particular

powerlessness or vulnerability of the patient, or because of the licensee's history or manipulation of the physician/patient relationship. Therefore, it is the policy of the Board, where any one of the following aggravating conditions are present in a sexual misconduct case, to consider revocation as an appropriate penalty:

(a) Where controlled substances have been prescribed, dispensed or administered inappropriately or excessively, or not in the course of the physician's professional practice, or not in the patient's best interests.

(b) Where the relationship between the licensee and the patient involved psychiatric or psychological diagnosis or treatment.

(c) Where the patient was under the influence of mind altering drugs or anesthesia at the time of any one incident of sexual misconduct.

(d) Where the licensee is under suspension or probation at the time of the incident.

(e) Where the licensee has any prior action taken against the authority to practice their profession by any authority, or a conviction in any jurisdiction, regardless of adjudication, relating to sexual misconduct, inappropriate relationships with patients, or sex-related crimes.

(f) Where the patient is physically or mentally handicapped at the time of the incident.

(g) Where the patient is a minor at the time of the incident.

(h) Where the patient is an alien, whether legal or illegal; or a recipient of federal or state health care benefits, or state family aid at the time of the incident.

(i) Where the patient has a history of child sexual abuse, domestic violence, or sexual dysfunction, which history is known to the licensee at the time of the sexual misconduct.

(5) Stipulations or Settlements. The provisions of this rule are not intended and shall not be construed to limit the ability of the Board to dispose informally of disciplinary actions by stipulation, agreed settlement, or consent order pursuant to Section 120.57(3), F.S.

(6) Letters of Guidance. The provisions of this rule cannot and shall not be construed to limit the authority of the probable cause panel of the Board to direct the Department to send a letter of guidance pursuant to Section 456.073, F.S., in any case for which it finds such action appropriate.

(7) When imposing a penalty or a condition of licensure that requires an impaired, or potentially impaired, licensee to demonstrate that he or she is able to practice with reasonable skill and safety, the licensee must undergo an evaluation conducted under the auspices of the Department of Health approved consultant that has been retained to provide the Board services pursuant to Section 456.076, F.S.

(8) Other Action. The provisions of this rule are not intended to and shall not be construed to limit the ability of the Board to pursue or recommend that the Department pursue collateral civil or criminal actions when appropriate.

Rulemaking Authority 456.079, 456.47(7), 458.309, 458.331(5) FS. Law Implemented 381.986(3)(a), 456.47, 456.50(2), 456.0575, 456.072, 456.079, 458.331(5) FS. History—New 12-5-79, Formerly 21M-20.01, Amended 1-11-87, 6-20-90, Formerly 21M-20.001, Amended 11-4-93, Formerly 61F6-20.001, Amended 6-24-96, 12-22-96, Formerly 59R-8.001, Amended 5-14-98, 12-28-99, 1-31-01, 7-10-01, 6-4-02, 9-10-02, 12-11-02, 8-20-03, 6-7-04, 8-17-04, 1-4-06, 8-13-06, 8-29-06, 11-22-06, 1-30-07, 2-18-09, 12-22-09, 7-27-10, 6-21-11, 12-27-11, 4-22-12, 5-28-12, 1-1-15, 11-9-16, 4-30-18, 8-15-18, 8-28-18, 12-12-19, 3-2-20, 11-16-20, 4-18-21, 11-21-21, 9-12-22.

64B15-19.002 Violations and Penalties.

In imposing discipline upon applicants and licensees, the board shall act in accordance with the following disciplinary guidelines and shall impose a penalty within the range corresponding to the violations set forth below. The statutory language is intended to provide a description of the violation and is not a complete statement of the violation; the complete statement may be found in the statutory provision cited directly under each violation description. In addition to any guideline penalties provided herein, if the violation is for fraud or making a false or fraudulent representation, the Board shall impose a fine of \$10,000.00 per count or offense. In no event shall a fine for any of the penalties set forth below exceed \$10,000.00 per count.

Violation	Minimum	Maximum
(1) Attempting to obtain, obtaining or renewing a license or certificate by bribery, fraud or through an error of the Department or board. (Sections 456.072(1)(h) and 459.015(1)(a), F.S.)		
(a) Attempting to obtain an initial license or certificate by bribery or fraud.	Denial of application and a \$10,000.00 fine.	
FOR TELEHEALTH REGISTRANTS:	Denial of application.	
(b) Attempting to renew a license by bribery or fraud.		
FIRST OFFENSE:	Revocation of the license and a \$5,000.00 fine; if fraud involved, revocation of license and a fine of \$10,000.00.	Revocation of the license and a \$10,000.00 fine.
SECOND OFFENSE:	Revocation of the license and a \$10,000.00 fine.	
FOR TELEHEALTH REGISTRANTS FIRST OFFENSE:	Revocation.	
FOR TELEHEALTH REGISTRANTS SECOND OFFENSE:	Revocation.	
(c) Obtaining or renewing a license by bribery or fraud.		
FIRST OFFENSE:	Revocation of the license and a \$5,000.00 fine; if fraud involved, revocation of license and a fine of \$10,000.00.	Revocation of the license and a \$10,000.00 fine.
SECOND OFFENSE:	Revocation of the license and a \$10,000.00 fine.	
FOR TELEHEALTH REGISTRANTS FIRST OFFENSE:	Revocation.	
FOR TELEHEALTH REGISTRANTS SECOND OFFENSE:	Revocation.	
(d) Obtaining or renewing a license through error of the Department or the Board.		
FIRST OFFENSE:	Revocation.	
SECOND OFFENSE:	Revocation.	
FOR TELEHEALTH REGISTRANTS FIRST OFFENSE:	Revocation.	

FOR TELEHEALTH REGISTRANTS SECOND OFFENSE:	Revocation.	
(2) Action taken against license by another jurisdiction. (Sections 456.47(4)(d), 456.47(4)(i), (2), 456.072(1)(f) and 459.015(1)(b), F.S.)		
FIRST OFFENSE:	Imposition of discipline comparable to discipline that would have been imposed in Florida if the substantive violation occurred in Florida to suspension until the license is unencumbered in the jurisdiction in which disciplinary action was originally taken, and an administrative fine ranging from \$1,000.00 to \$5,000.00, or denial of the license.	Revocation, and an administrative fine ranging from \$5,000.00 to \$10,000.00, or denial of the license.
SECOND OFFENSE:	Imposition of discipline comparable to discipline that would have been imposed in Florida if the substantive violation occurred in Florida to suspension or until the license is unencumbered in the jurisdiction in which disciplinary action was taken, and an administrative fine ranging from \$5,000.00 to \$10,000.00, or denial of the license.	Revocation and an administrative fine of \$10,000.00 or denial of license.
FOR TELEHEALTH REGISTRANTS FIRST OFFENSE:	Imposition of discipline comparable to the discipline which would have been imposed if the substantive violation had occurred in Florida to suspension until the license is unencumbered in the jurisdiction in which disciplinary action was originally taken, or denial of the license.	Revocation or denial of the license.
FOR TELEHEALTH REGISTRANTS SECOND OFFENSE:	Imposition of discipline comparable to the discipline which would have been imposed if the substantive violation had occurred in Florida to suspension, or denial of the license.	Revocation or denial of the license.
(3) Being convicted or found guilty of, or entering a plea of guilty or nolo contendere to, a crime relating to practice or ability to practice. (Sections 456.072(1)(c) and 459.015(1)(c), F.S.)		
FIRST OFFENSE:	Probation and \$2,000.00 fine.	Revocation and \$5,000.00 fine or denial of license.
SECOND OFFENSE:	Suspension to be followed by probation and \$5,000.00 fine.	Revocation and \$10,000.00 fine or denial of license.
FOR TELEHEALTH REGISTRANTS	Reprimand.	Revocation or denial of licensure.

FIRST OFFENSE:		
FOR TELEHEALTH REGISTRANTS SECOND OFFENSE:	Suspension with a corrective action plan.	Revocation or denial of licensure.
(4) False, deceptive, or misleading advertising. (Section 459.015(1)(d), F.S.)		
FIRST OFFENSE:	Letter of concern.	Reprimand and \$1,000.00 fine.
SECOND OFFENSE:	Probation and \$2,000.00 fine 3 month.	Probation and \$5,000.00 fine.
THIRD OFFENSE:	Suspension to be followed by probation and \$5,000.00 fine.	1 year suspension to be followed by probation and \$5,000.00 fine.
FOR TELEHEALTH REGISTRANTS FIRST OFFENSE:	Letter of concern.	Reprimand.
FOR TELEHEALTH REGISTRANTS SECOND OR SUBSEQUENT OFFENSE:	Suspension with a corrective action plan.	Revocation.
(5) Failure to report another licensee in violation. (Sections 456.072(1)(i) and 459.015(1)(e), F.S.)		
FIRST OFFENSE:	Letter of concern.	Reprimand and \$1,000.00 fine.
SECOND OFFENSE:	Reprimand and \$2,500.00 fine.	Probation and \$2,500.00 fine.
THIRD OFFENSE:	Probation and \$5,000.00 fine.	Suspension to be followed by probation and \$5,000.00 fine.
FOR TELEHEALTH REGISTRANTS FIRST OFFENSE:	Letter of concern.	Reprimand.
FOR TELEHEALTH REGISTRANTS SECOND OR SUBSEQUENT OFFENSE:	Reprimand.	Suspension with a corrective action plan.
(6) Aiding unlicensed practice. (Sections 456.072(1)(j) and 459.015(1)(f), F.S.)		
FIRST OFFENSE:	Probation and \$2,500.00 fine.	Denial or revocation and \$5,000.00 fine.
SECOND OFFENSE:	Suspension to be followed by probation and \$5,000.00 fine.	Denial or revocation and \$10,000.00 fine.
FOR TELEHEALTH REGISTRANTS FIRST OFFENSE:	Suspension with a corrective action plan.	Revocation or denial of license.
FOR TELEHEALTH REGISTRANTS SECOND OFFENSE:	Suspension.	Revocation or denial of license.
(7) Failure to perform legal duty or obligation. (Sections 456.072(1)(k) and 459.015(1)(g), F.S.)		
FIRST OFFENSE:	Reprimand and \$1,000.00 fine.	Revocation and \$5,000.00 fine or denial of license.
SECOND OFFENSE:	Probation and \$5,000.00 fine.	Denial or revocation and \$10,000.00 fine.
FOR TELEHEALTH REGISTRANTS	Reprimand.	Revocation or denial of license.

FIRST OFFENSE:		
FOR TELEHEALTH REGISTRANTS SECOND OFFENSE:	Suspension with a corrective action plan.	Revocation or denial of license.
(8) Failing to comply with the requirements for qualified physicians or medical directors required by Section 381.986(3), F.S. (Section 456.072(1)(k), F.S.)		
FIRST OFFENSE:	A letter of concern, and a fine of \$1,000.00.	Probation and a fine of \$5,000.00.
SECOND OFFENSE:	A reprimand and a fine of \$5,000.00.	Revocation and a fine of \$10,000.00.
FOR TELEHEALTH REGISTRANTS	Not applicable to telehealth registrants.	
(9) Giving false testimony regarding the practice of medicine. (Section 459.015(1)(h), F.S.)		
FIRST OFFENSE:	Reprimand and \$2,500.00 fine.	Suspension and \$10,000.00 fine.
SECOND OFFENSE:	Suspension to be followed by probation and \$5,000.00 fine.	Revocation and \$10,000 fine or denial of license.
FOR TELEHEALTH REGISTRANTS FIRST OFFENSE:	Reprimand.	Suspension with a corrective action plan.
FOR TELEHEALTH REGISTRANTS SECOND OFFENSE:	Suspension with a corrective action plan.	Revocation or denial of license.
(10) Filing a false report or failing to file a report as required. (Sections 456.072(1)(l) and 459.015(1)(i), F.S.)		
FIRST OFFENSE:	Reprimand and \$5,000.00 fine.	Suspension to be followed by probation and \$10,000.00 fine or denial.
SECOND OFFENSE:	Denial or suspension to be followed by probation and \$10,000.00 fine.	Denial or revocation and \$10,000.00 fine.
FOR TELEHEALTH REGISTRANTS FIRST OFFENSE:	Reprimand.	Suspension with a corrective action plan or denial.
FOR TELEHEALTH REGISTRANTS SECOND OFFENSE:	Suspension with a corrective action plan or denial.	Revocation or denial.
(11) Kickbacks and unauthorized fee arrangements. (Section 459.015(1)(j), F.S.)		
FIRST OFFENSE:	Probation and \$2,500.00 fine.	Denial or suspension to be followed by probation and \$5,000.00 fine.
SECOND OFFENSE:	Denial or suspension to be followed by probation and \$10,000.00 fine.	Denial or revocation and a \$10,000.00 fine.
FOR TELEHEALTH REGISTRANTS FIRST OFFENSE:	Denial or suspension with corrective action plan.	Denial or suspension.
FOR TELEHEALTH REGISTRANTS SECOND OFFENSE:	Denial or suspension.	Denial or revocation.
(12) Failure to provide financial disclosure form to a patient being referred		

to an entity in which the referring physician is an investor. (Section 456.053, F.S.)		
FIRST OFFENSE:	Reprimand.	Reprimand and \$2,500.00 fine.
SECOND OFFENSE:	Reprimand and \$5,000.00 fine.	Probation and \$5,000.00 fine.
THIRD OFFENSE:	Probation and \$7,500.00 fine.	Suspension to be followed by probation and \$10,000.00 fine.
FOR TELEHEALTH REGISTRANTS FIRST OFFENSE:	Reprimand.	Suspension with a corrective action plan.
FOR TELEHEALTH REGISTRANTS SECOND OR SUBSEQUENT OFFENSE:	Suspension with a corrective action plan.	Suspension.
(13) Improper refusal to provide health care. (Section 459.015(1)(k), F.S.)		
FIRST OFFENSE:	Reprimand and \$5,000.00 fine.	Probation and \$5,000.00 fine.
SECOND OFFENSE:	Suspension to be followed by probation and \$7,500.00 fine.	Revocation and \$10,000.00 fine.
FOR TELEHEALTH REGISTRANTS FIRST OFFENSE:	Reprimand.	Suspension with a corrective action plan.
FOR TELEHEALTH REGISTRANTS SECOND OFFENSE:	Suspension with a corrective action plan.	Revocation.
(14) Sexual misconduct within the patient physician relationship. (Sections 456.072(1)(v) and 459.015(1)(l), F.S.)		
FIRST OFFENSE:	Probation and \$10,000.00 fine.	Denial of licensure or revocation and \$10,000.00 fine.
SECOND OFFENSE:	Suspension to be followed by probation and \$10,000.00 fine.	Denial of licensure or revocation and \$10,000.00 fine.
FOR TELEHEALTH REGISTRANTS FIRST OFFENSE:	Suspension with a corrective action plan.	Denial of licensure or revocation.
FOR TELEHEALTH REGISTRANTS SECOND OFFENSE:	Suspension.	Denial of licensure or revocation.
(15) Misleading, deceptive, untrue, or fraudulent misrepresentations in or related to the practice of osteopathic medicine or employing a trick or scheme in or related to the practice of osteopathic medicine. (Sections 456.072(1)(a), (m) and 459.015(1)(m), F.S.)		
FIRST OFFENSE:	Probation and a \$1,000.00 fine; if fraud involved, revocation of license and a fine of \$10,000.	Denial of licensure or revocation and \$10,000.00 fine.
SECOND OFFENSE:	Denial of licensure or suspension to be followed by probation and \$10,000.00 fine.	Denial of licensure or revocation and \$10,000.00 fine.
FOR TELEHEALTH REGISTRANTS FIRST OFFENSE:	Reprimand.	Denial of licensure or revocation.

FOR TELEHEALTH REGISTRANTS SECOND OFFENSE:	Denial of licensure or suspension with a corrective action plan.	Denial of licensure or revocation.
(16) Improper solicitation of patients. (Section 459.015(1)(n), F.S.)		
FIRST OFFENSE:	Reprimand and \$5,000.00 fine.	Probation and \$5,000.00 fine.
SECOND OFFENSE:	Suspension to be followed by probation and \$7,500.00 fine.	Revocation and \$10,000.00 fine.
FOR TELEHEALTH REGISTRANTS FIRST OFFENSE:	Reprimand.	Suspension with a corrective action plan.
FOR TELEHEALTH REGISTRANTS SECOND OFFENSE:	Suspension with a corrective action plan.	Revocation.
(17) Failure to keep written medical records. (Sections 459.015(1)(o), 456.47(3), F.S.)		
FIRST OFFENSE:	Reprimand and \$5,000.00 fine.	Probation and \$5,000.00 fine.
SECOND OFFENSE:	Suspension to be followed by probation and \$7,500.00 fine.	Revocation and \$10,000.00 fine.
FOR TELEHEALTH REGISTRANTS FIRST OFFENSE:	Reprimand.	Suspension with a corrective action plan.
FOR TELEHEALTH REGISTRANTS SECOND OFFENSE:	Suspension with a corrective action plan.	Revocation.
(18) Fraudulent, alteration or destruction of patient records. (Section 459.015(1)(p), F.S.)		
FIRST OFFENSE:	Probation and \$5,000.00 fine; if fraud involved, probation and a \$10,000.00 fine.	Suspension to be followed by probation and \$7,500.00 fine; if fraud involved, suspension to be followed by probation and a \$10,000.00 fine.
SECOND OFFENSE:	Suspension to be followed by probation and \$7,500.00 fine; if fraud involved, probation and a \$10,000.00 fine.	Revocation and \$10,000.00 fine.
FOR TELEHEALTH REGISTRANTS FIRST OFFENSE:	Reprimand.	Suspension with a corrective action plan.
FOR TELEHEALTH REGISTRANTS SECOND OFFENSE:	Suspension with a corrective action plan.	Revocation.
(19) Exercising improper influence on patient. (Sections 456.072(1)(n) and 459.015(1)(q), F.S.)		
FIRST OFFENSE:	Probation and \$5,000.00 fine.	Suspension to be followed by probation and \$7,500.00 fine.
SECOND OFFENSE:	Suspension to be followed by probation and \$7,500.00 fine.	Revocation and \$10,000.00 fine.
FOR TELEHEALTH REGISTRANTS FIRST OFFENSE:	Reprimand.	Suspension with a corrective action plan.
FOR TELEHEALTH REGISTRANTS SECOND OFFENSE:	Suspension with a corrective action plan.	Revocation.
(20) Improper advertising of pharmacy.		

(Section 459.015(1)(r), F.S.)		
FIRST OFFENSE:	Letter of concern.	Reprimand and \$1,000.00 fine.
SECOND OFFENSE:	Probation and \$2,000.00 fine.	Probation and \$5,000.00 fine.
THIRD OFFENSE:	Probation and \$7,500.00 fine.	Suspension to be followed by probation and \$10,000.00 fine.
FOR TELEHEALTH REGISTRANTS FIRST OFFENSE:	Letter of concern.	Reprimand.
FOR TELEHEALTH REGISTRANTS SECOND AND SUBSEQUENT OFFENSE:	Suspension with a corrective action plan.	Suspension.
(21) Performing professional services not authorized by patient. (Section 459.015(1)(s), F.S.)		
FIRST OFFENSE:	Reprimand and \$5,000.00 fine.	Probation and \$5,000.00 fine.
SECOND OFFENSE:	Probation and \$7,500.00 fine.	Revocation and \$10,000.00 fine.
FOR TELEHEALTH REGISTRANTS FIRST OFFENSE:	Reprimand	Suspension with a corrective action plan.
FOR TELEHEALTH REGISTRANTS SECOND OFFENSE:	Suspension with a corrective action plan.	Revocation.
(22) Controlled substance violations. (Section 459.015(1)(t), F.S.)		
FIRST OFFENSE:	Probation and \$5,000.00 fine.	Revocation and \$7,500.00 fine or denial of licensure.
SECOND OFFENSE:	Suspension to be followed by probation and \$7,500.00 fine.	Revocation and \$10,000.00 fine or denial of licensure.
FOR TELEHEALTH REGISTRANTS FIRST OFFENSE:	Three (3) month suspension with a corrective action plan.	Revocation or denial of licensure.
FOR TELEHEALTH REGISTRANTS SECOND OFFENSE:	One (1) year suspension with a corrective action plan.	Revocation or denial of licensure.
(23) Prescribing or dispensing of a scheduled drug by the physician to himself. (Section 459.015(1)(u), F.S.)		
FIRST OFFENSE:	Probation and \$5,000.00 fine, and a mental and physical examination.	Suspension to be followed by probation and \$7,500.00 fine, and a mental and physical examination, and a mental and physical examination or denial of licensure.
SECOND OFFENSE:	Suspension to be followed by probation and \$7,500.00 fine, and a mental and physical examination.	Revocation and \$10,000.00 fine or denial of licensure.
FOR TELEHEALTH REGISTRANTS FIRST OFFENSE:	Fourteen (14) day suspension with a corrective action plan, and a mental and physical examination.	Suspension, and a mental and physical examination or denial of licensure.
FOR TELEHEALTH REGISTRANTS SECOND OFFENSE:	Three (3) month suspension with a corrective action plan, and a mental and physical examination.	Revocation or denial of licensure.
(24) Use of amygdalin (Laetrile).		

(Section 459.015(1)(v), F.S.)		
FIRST OFFENSE:	Reprimand and \$5,000.00 fine.	Probation and \$5,000.00 fine.
SECOND OFFENSE:	Suspension to be followed by probation and \$7,500.00 fine.	Revocation and \$10,000.00 fine.
FOR TELEHEALTH REGISTRANTS FIRST OFFENSE:	Reprimand.	Suspension with a corrective action plan.
FOR TELEHEALTH REGISTRANTS SECOND OFFENSE:	Suspension with a corrective action plan.	Revocation.
(25) Inability to practice medicine with reasonable skill and safety. (Sections 456.072(1)(z) and 459.015(1)(w), F.S.)		
FIRST OFFENSE:	Denial or probation and \$2,500.00 fine.	Denial or suspension until licensee is able to demonstrate to the Board ability to practice with reasonable skill and safety to be followed by probation and \$5,000.00 fine.
SECOND OFFENSE:	Denial or suspension until licensee is able to demonstrate to the Board ability to practice with reasonable skill and safety to be followed by probation and \$7,500.00 fine.	Denial or revocation and \$10,000.00 fine.
FOR TELEHEALTH REGISTRANTS FIRST OFFENSE:	Denial or suspension with corrective action plan.	Denial or suspension for a minimum of one (1) year and until licensee is able to demonstrate to the Board ability to practice with reasonable skill and safety and a corrective action plan.
FOR TELEHEALTH REGISTRANTS SECOND OFFENSE:	Denial or suspension until licensee is able to demonstrate to the Board ability to practice with reasonable skill and safety and a corrective action plan.	Denial or suspension for a minimum of five (5) years and until licensee is able to demonstrate to the Board ability to practice with reasonable skill and safety and a corrective action plan.
(26) Gross Malpractice. (Section 459.015(1)(x), F.S.)		
FIRST OFFENSE:	Denial or probation and \$7,500.00 fine.	Denial or revocation and \$10,000.00 fine.
SECOND OFFENSE:	Denial or suspension to be followed by probation and \$7,500.00 fine.	Denial or revocation and \$10,000.00 fine.
FOR TELEHEALTH REGISTRANTS FIRST OFFENSE:	Denial or suspension with corrective action plan.	Denial or revocation.
FOR TELEHEALTH REGISTRANTS SECOND OFFENSE:	Denial or suspension.	Denial or revocation.
(27) Repeated Malpractice as defined in Section 456.50, F.S. (Section 459.015(1)(x), F.S.)		
FIRST OFFENSE:	Revocation or denial of license and fine of \$5,000.00.	Revocation or denial of license and fine of \$10,000.00.

FOR TELEHEALTH REGISTRANTS FIRST OFFENSE:	Revocation or denial of license.	Revocation or denial of license.
(28) Failure to practice medicine in accordance with appropriate level of care, skill and treatment recognized in general law related to the practice of medicine. (Sections 456.47(2)(a), 456.50(1)(g) and 459.015(1)(x), F.S.)		
FIRST OFFENSE:	Letter of concern, up to one (1) year probation and \$5,000.00 fine.	Denial or revocation and \$10,000.00 fine.
SECOND OFFENSE:	Two (2) year probation and \$7,5000.00 fine.	Denial or revocation and \$10,000.00 fine.
FOR TELEHEALTH REGISTRANTS FIRST OFFENSE:	Letter of concern, up to one (1) year suspension with a corrective action plan.	Denial or revocation.
FOR TELEHEALTH REGISTRANTS SECOND OFFENSE:	Two (2) year suspension with a corrective action plan.	Denial or revocation.
(29) Improper performing of experimental treatment. (Section 459.015(1)(y), F.S.)		
FIRST OFFENSE:	Denial or reprimand and \$5,000.00 fine.	Denial or suspension to be followed by probation and \$5,000.00 fine.
SECOND OFFENSE:	Denial or suspension to be followed by probation and \$7,500.00 fine.	Denial or revocation and \$10,000.00 fine.
FOR TELEHEALTH REGISTRANTS FIRST OFFENSE:	Denial or reprimand.	Denial or suspension with a corrective action plan.
FOR TELEHEALTH REGISTRANTS SECOND OFFENSE:	Denial or suspension with a corrective action plan.	Denial or revocation.
(30) Practicing or offering to practice beyond one's scope or accepting and performing responsibilities which one knows, or has reason to know, one is not competent to perform. (Sections 456.072(1)(o) and 459.015(1)(z), F.S.)		
FIRST OFFENSE:	Denial or reprimand and \$5,000.00 fine.	Denial or suspension to be followed by probation and \$5,000.00 fine.
SECOND OFFENSE:	Denial or suspension to be followed by probation and \$7,500.00 fine.	Denial or revocation and \$10,000.00 fine.
FOR TELEHEALTH REGISTRANTS FIRST OFFENSE:	Denial or reprimand.	Denial or suspension with a corrective action plan.
FOR TELEHEALTH REGISTRANTS SECOND OFFENSE:	Denial or suspension with a corrective action plan.	Denial or revocation.
(31) Delegation of professional responsibilities to unqualified person. (Sections 456.072(1)(p) and 459.015(1)(aa), F.S.)		
FIRST OFFENSE:	Reprimand and \$2,500.00 fine.	Denial or suspension to be followed by probation and \$5,000.00 fine.
SECOND OFFENSE:	Denial or suspension to be followed by	Denial or revocation and \$10,000.00

	probation and \$7,500.00 fine.	fine.
FOR TELEHEALTH REGISTRANTS FIRST OFFENSE:	Reprimand.	Denial or suspension with a corrective action plan.
FOR TELEHEALTH REGISTRANTS SECOND OFFENSE:	Denial or suspension with a corrective action plan.	Denial or revocation.
(32) Violation of order, or failure to comply with subpoena. (Sections 456.072(1)(q), and 459.015(1)(bb), F.S.)		
FIRST OFFENSE:	Denial or reprimand and \$5,000.00 fine.	Denial or revocation and \$5,000.00 fine.
SECOND OFFENSE:	Denial or suspension to be followed by probation and \$7,500.00 fine.	Denial or revocation and \$10,000.00 fine.
FOR TELEHEALTH REGISTRANTS FIRST OFFENSE:	Denial or reprimand.	Denial or revocation.
FOR TELEHEALTH REGISTRANTS SECOND OFFENSE:	Denial or suspension with a corrective action plan.	Denial or revocation.
(33) Restricting another from lawfully advertising services. (Section 459.015(1)(cc), F.S.)		
FIRST OFFENSE:	Letter of concern.	Reprimand and \$1,000.00 fine.
SECOND OFFENSE:	Probation and \$2,000.00 fine.	Probation and \$5,000.00 fine.
THIRD OFFENSE:	3 month suspension to be followed by probation and a \$5,000.00 fine.	1 year suspension to be followed by probation and \$5,000.00 fine.
FOR TELEHEALTH REGISTRANTS FIRST OFFENSE:	Letter of concern.	Reprimand.
FOR TELEHEALTH REGISTRANTS SECOND OR SUBSEQUENT OFFENSE:	Suspension with a corrective action plan.	1 year suspension with corrective action plan.
(34) Procuring, aiding or abetting an unlawful abortion. (Section 459.015(1)(dd), F.S.)		
FIRST OFFENSE:	Probation and \$5,000.00 fine.	Denial or suspension to be followed by probation and \$7,500.00 fine.
SECOND OFFENSE:	Suspension to be followed by probation and \$7,500.00 fine.	Denial or revocation and \$10,000.00 fine.
FOR TELEHEALTH REGISTRANTS FIRST OFFENSE:	Suspension with a corrective action plan.	Denial or reprimand and suspension with corrective action plan.
FOR TELEHEALTH REGISTRANTS SECOND OFFENSE:	Suspension with a corrective action plan.	Denial or revocation.
(35) Presigning blank prescription forms. (Section 459.015(1)(ee), F.S.)		
FIRST OFFENSE:	Reprimand and \$5,000.00 fine.	Denial or suspension to be followed by probation and \$5,000.00 fine.
SECOND OFFENSE:	Probation and \$5,000.00 fine.	Denial or revocation and \$10,000.00 fine.
FOR TELEHEALTH REGISTRANTS FIRST OFFENSE:	Reprimand.	Denial or suspension with a corrective action plan.

FOR TELEHEALTH REGISTRANTS SECOND OFFENSE:	Suspension with a corrective action plan.	Denial or revocation.
(36) Prescribing a Schedule II substance for office use. (Section 459.015(1)(ff), F.S.)		
FIRST OFFENSE:	Reprimand and \$5,000.00 fine.	Denial or suspension to be followed by probation and \$5,000.00 fine.
SECOND OFFENSE:	Probation and \$5,000.00 fine.	Denial or revocation and \$10,000.00 fine.
FOR TELEHEALTH REGISTRANTS FIRST OFFENSE:	Reprimand.	Denial or suspension with a corrective action plan.
FOR TELEHEALTH REGISTRANTS SECOND OFFENSE:	Suspension with a corrective action plan.	Denial or revocation.
(37) Improper use of Schedule II amphetamine or sympathomimetic amine drug. (Section 459.015(1)(gg), F.S.)		
FIRST OFFENSE:	Reprimand and \$5,000.00 fine.	Denial or suspension to be followed by probation and \$5,000.00 fine.
SECOND OFFENSE:	Probation and \$5,000.00 fine.	Denial or revocation and \$10,000.00 fine.
FOR TELEHEALTH REGISTRANTS FIRST OFFENSE:	Reprimand.	Denial or suspension with a corrective action plan.
FOR TELEHEALTH REGISTRANTS SECOND OFFENSE:	Suspension with a corrective action plan.	Denial or revocation.
(38) Failure to adequately supervise assisting personnel. (Section 459.015(1)(hh), F.S.)		
FIRST OFFENSE:	Reprimand and \$5,000.00 fine.	Denial or suspension to be followed by probation and \$5,000.00 fine.
SECOND OFFENSE:	Probation and \$5,000.00 fine.	Denial or revocation and \$10,000.00 fine.
FOR TELEHEALTH REGISTRANTS FIRST OFFENSE:	Reprimand.	Denial or suspension with a corrective action plan.
FOR TELEHEALTH REGISTRANTS SECOND OFFENSE:	Suspension with a corrective action plan.	Denial or revocation.
(39) Improper use of substances for muscle building or enhancement of athletic performance. (Section 459.015(1)(ii), F.S.)		
FIRST OFFENSE:	Reprimand and \$5,000.00 fine.	Suspension to be followed by probation and \$5,000.00 fine.
SECOND OFFENSE:	Probation and \$5,000.00 fine.	Revocation and \$10,000.00 fine.
FOR TELEHEALTH REGISTRANTS FIRST OFFENSE:	Reprimand.	Suspension with a corrective action plan.
FOR TELEHEALTH REGISTRANTS SECOND OFFENSE:	Suspension with a corrective action plan.	Revocation.
(40) Misrepresenting, concealing a		

material fact during licensing, or disciplinary procedure. (Section 459.015(1)(jj), F.S.)		
FIRST OFFENSE:	Denial or probation and \$5,000.00 fine; if fraud involved, denial or probation and a \$10,000.00 fine.	Denial and a \$7,500.00 fine or revocation; if fraud involved, denial or revocation, and a \$10,000.00 fine.
SECOND OFFENSE:	Denial or suspension to be followed by probation and \$10,000.00 fine.	Denial of license and \$10,000 fine or revocation and \$10,000.00 fine.
FOR TELEHEALTH REGISTRANTS FIRST OFFENSE:	Denial or suspension with a corrective action plan.	Denial or revocation.
FOR TELEHEALTH REGISTRANTS SECOND OFFENSE:	Denial or six (6) month suspension with a corrective action plan.	Denial or revocation.
(41) Improperly interfering with an investigation or disciplinary proceeding. (Sections 456.072(1)(r) and 459.015(1)(kk), F.S.)		
FIRST OFFENSE:	Probation and \$10,000.00 fine.	Revocation and \$10,000.00 fine.
SECOND OFFENSE:	Suspension to be followed by probation and \$10,000.00 fine.	Revocation and \$10,000.00 fine.
FOR TELEHEALTH REGISTRANTS FIRST OFFENSE:	Suspension with a corrective action plan.	Revocation.
FOR TELEHEALTH REGISTRANTS SECOND OFFENSE:	Suspension.	Revocation.
(42) Failing to report any licensee who has violated the disciplinary act who provides services at the same office. (Section 459.015(1)(ll), F.S.)		
FIRST OFFENSE:	Letter of concern.	Reprimand and \$1,000.00 fine.
SECOND OFFENSE:	Probation and \$2,000.00 fine.	Probation and \$5,000.00 fine.
THIRD OFFENSE:	Probation and \$7,500.00 fine.	Suspension to be followed by probation and \$10,000.00 fine.
FOR TELEHEALTH REGISTRANTS FIRST OFFENSE:	Letter of concern.	Reprimand.
FOR TELEHEALTH REGISTRANTS SECOND OR SUBSEQUENT OFFENSE:	Suspension with a corrective action plan.	Reprimand and suspension with a corrective action plan.
(43) Giving corroborating written medical expert opinion without reasonable investigation. (Section 459.015(1)(mm), F.S.)		
FIRST OFFENSE:	Reprimand and \$5,000.00 fine.	Suspension to be followed by probation and \$5,000.00 fine.
SECOND OFFENSE:	Probation and \$5,000.00 fine.	Revocation and \$10,000.00 fine.
FOR TELEHEALTH REGISTRANTS FIRST OFFENSE:	Reprimand.	Suspension with a corrective action plan.
FOR TELEHEALTH REGISTRANTS SECOND OFFENSE:	Suspension with a corrective action plan.	Revocation.
(44) Failure to comply with guidelines for		

use of obesity drugs. (Section 459.0135, F.S. and Rule 64B15-14.004, F.A.C.)		
FIRST OFFENSE:	Reprimand and \$5,000.00 fine.	Suspension to be followed by probation and \$5,000.00 fine.
SECOND OFFENSE:	Probation and \$5,000.00 fine.	Revocation and \$10,000.00 fine.
FOR TELEHEALTH REGISTRANTS FIRST OFFENSE:	Reprimand.	Suspension with a corrective action plan.
FOR TELEHEALTH REGISTRANTS SECOND OFFENSE:	Suspension with a corrective action plan.	Revocation.
(45) Falsely advertising or holding oneself out as a board-certified specialist. (Section 459.015(1)(nn), F.S.)		
FIRST OFFENSE:	Reprimand and \$5,000.00 fine.	Probation and \$5,000.00 fine.
SECOND OFFENSE:	Suspension to be followed by probation and \$7,500.00 fine.	Revocation and \$10,000.00 fine.
FOR TELEHEALTH REGISTRANTS FIRST OFFENSE:	Reprimand.	Suspension with a corrective action plan.
FOR TELEHEALTH REGISTRANTS SECOND OFFENSE:	Suspension with a corrective action plan.	Revocation.
(46) Failing to provide patients with information about their patient rights and how to file a complaint. (Sections 456.072(1)(u) and 459.015(1)(oo), F.S.)		
FIRST OFFENSE:	Letter of concern.	Reprimand and \$1,000.00 fine.
SECOND OFFENSE:	Probation and \$2,000.00 fine.	Probation and \$5,000.00 fine.
THIRD OFFENSE:	Probation and \$7,500.00 fine.	Suspension to be followed by probation and \$10,000.00 fine.
FOR TELEHEALTH REGISTRANTS FIRST OFFENSE:	Letter of concern.	Reprimand.
FOR TELEHEALTH REGISTRANTS SECOND OR SUBSEQUENT OFFENSE:	Reprimand.	Ten (10) day suspension with corrective action plan.
(47) Violating any provision of Chapter 456 or 459, F.S., or any rule adopted by the board or department. (Sections 456.072(1)(b), 456.072(1)(dd), and 459.015(1)(pp), F.S.)		
FIRST OFFENSE:	Denial or letter of concern and \$1,000.00 fine, demonstration of compliance with the rule, and completion of a laws and rules course.	Denial or revocation and \$5,000.00 fine.
SECOND OFFENSE:	Denial or reprimand, completion of laws and rules course, demonstration of compliance with the rule, probation and \$7,500.00 fine.	Denial or revocation and \$10,000.00 fine.
FOR TELEHEALTH REGISTRANTS FIRST OFFENSE:	Denial or letter of concern and demonstration of compliance with the	Denial or revocation.

	rule.	
FOR TELEHEALTH REGISTRANTS SECOND OFFENSE:	Denial or suspension with a corrective action plan, a reprimand, and demonstration of compliance with the rule.	Denial or revocation.
(48) Using a Class III or a Class IV laser device without having complied with the rules adopted pursuant to Section 501.122(2), F.S. (Section 456.072(1)(d), F.S.)		
FIRST OFFENSE:	Reprimand and \$1,000.00 fine.	Probation and \$5,000.00 fine.
SECOND OFFENSE:	Suspension to be followed by probation and \$7,500.00 fine.	Revocation and \$10,000.00 fine.
FOR TELEHEALTH REGISTRANTS FIRST OFFENSE:	Reprimand.	Suspension with a corrective action plan.
FOR TELEHEALTH REGISTRANTS SECOND OFFENSE:	Suspension with a corrective action plan.	Revocation.
(49) Failing to comply with the educational course requirements for human immunodeficiency virus and acquired immune deficiency syndrome. (Section 456.072(1)(e), F.S.)		
FIRST OFFENSE:	Reprimand and \$2,500.00 fine.	Probation and \$5,000.00 fine.
SECOND OFFENSE:	Suspension to be followed by probation and \$7,500.00 fine.	Revocation and \$10,000.00 fine.
FOR TELEHEALTH REGISTRANTS	Not applicable to telehealth registrants.	
(50) Having been found liable in a civil proceeding for knowingly filing a false report or complaint with the department against another licensee. (Section 456.072(1)(g), F.S.)		
FIRST OFFENSE:	Reprimand and \$5,000.00 fine.	Probation and \$10,000.00 fine.
SECOND OFFENSE:	Suspension to be followed by probation and \$7,500.00 fine.	Revocation and \$10,000.00 fine.
FOR TELEHEALTH REGISTRANTS FIRST OFFENSE:	Reprimand.	Suspension with a corrective action plan.
FOR TELEHEALTH REGISTRANTS SECOND OFFENSE:	Suspension with a corrective action plan.	Revocation.
(51) Failing to comply with the educational course requirements for domestic violence. (Section 456.072(1)(s), F.S.)		
FIRST OFFENSE:	Reprimand and \$2,500.00 fine.	Probation and \$5,000.00 fine.
SECOND OFFENSE:	Suspension to be followed by probation and \$7,500.00 fine.	Revocation and \$10,000.00 fine.
FOR TELEHEALTH REGISTRANTS	Not applicable to telehealth registrants.	
(52) Failing to comply with the requirements for profiling and credentialing.		

(Section 456.072(1)(w), F.S.)		
FIRST OFFENSE:	Letter of concern and \$2,500.00 fine.	Suspension to be followed by probation and \$5,000.00 fine.
SECOND OFFENSE:	Probation and \$5,000.00 fine.	Revocation and \$10,000.00 fine.
FOR TELEHEALTH REGISTRANTS	Not applicable to telehealth registrants.	
(53) Failing to report to the board in writing within 30 days after the licensee has been convicted or found guilty of, or entered a plea of nolo contendere to a crime in any jurisdiction. (Section 456.072(1)(x), F.S.)		
FIRST OFFENSE:	Reprimand, and an administrative fine of \$2,000.00.	Reprimand and an administrative fine of \$5,000.00 or denial of licensure.
SECOND OFFENSE:	Suspension to be followed by a period of probation and an administrative fine of \$5,000.00.	Revocation and an administrative fine of \$10,000.00 or denial of license.
FOR TELEHEALTH REGISTRANTS FIRST OFFENSE:	Reprimand.	Reprimand or denial of licensure.
FOR TELEHEALTH REGISTRANTS SECOND OFFENSE:	Suspension with a corrective action plan.	Revocation or denial of license.
(54) Using information about people involved in motor vehicle accidents which has been derived from accident reports made by law enforcement officers or persons involved in accidents pursuant to Section 316.066, F.S., or using information published in a newspaper or other news publication or through a radio or television broadcast that has used information gained from such reports, for the purposes of commercial or any other solicitation whatsoever of the people involved in such accidents. (Section 456.072(1)(y), F.S.)		
FIRST OFFENSE:	Letter of concern.	Reprimand and \$1,000.00 fine.
SECOND OFFENSE:	Probation and \$2,000.00 fine.	Probation and \$5,000.00 fine.
THIRD OFFENSE:	Probation and \$7,500.00 fine.	Suspension to be followed by probation and \$10,000.00 fine.
FOR TELEHEALTH REGISTRANTS FIRST OFFENSE:	Letter of concern.	Reprimand.
FOR TELEHEALTH REGISTRANTS SECOND OR SUBSEQUENT OFFENSE:	Suspension with a corrective action plan.	Suspension.
(55) Testing positive for any drug on any confirmed preemployment or employer-ordered drug screening. (Section 456.072(1)(aa), F.S.)		
FIRST OFFENSE:	Probation and \$5,000.00 fine.	Suspension to be followed by probation and \$7,500.00 fine.

SECOND OFFENSE:	Suspension to be followed by probation and \$7,500.00 fine.	Revocation and \$10,000.00 fine.
FOR TELEHEALTH REGISTRANTS FIRST OFFENSE:	Suspension with a corrective action plan.	Suspension.
FOR TELEHEALTH REGISTRANTS SECOND OFFENSE:	Suspension.	Revocation.
(56) Performing or attempting to perform health care services on the wrong patient, a wrong procedure, an unauthorized, unnecessary or unrelated procedure. (Section 456.072(1)(bb), F.S.)		
FIRST OFFENSE:	Denial or probation and \$5,000.00 fine.	Denial or revocation and \$10,000.00 fine.
SECOND OFFENSE:	Denial or suspension and \$10,000.00 fine.	Denial or revocation and \$10,000.00 fine.
FOR TELEHEALTH REGISTRANTS FIRST OFFENSE:	Denial or suspension with a corrective action plan.	Denial or revocation.
FOR TELEHEALTH REGISTRANTS SECOND OFFENSE:	Denial or suspension.	Denial or revocation.
(57) Leaving a foreign body in a patient such as a sponge, clamp, forceps, surgical needle or other paraphernalia. (Section 456.072(1)(cc), F.S.)		
FIRST OFFENSE:	Denial or probation and \$5,000.00 fine.	Denial or revocation and \$10,000.00 fine.
SECOND OFFENSE:	Denial or suspension and \$10,000.00 fine.	Denial or revocation and \$10,000.00 fine.
FOR TELEHEALTH REGISTRANTS FIRST OFFENSE:	Denial or suspension with a corrective action plan.	Denial or revocation.
FOR TELEHEALTH REGISTRANTS SECOND OFFENSE:	Denial or suspension.	Denial or revocation.
(58) Being terminated for cause, from a treatment program for impaired practitioners, as described in Section 456.076, F.S., for failure to comply, without good cause, with the terms of the monitoring or treatment contract entered into by the licensee, or for not successfully completing any drug-treatment or alcohol-treatment program. (Section 456.072(1)(hh), F.S.)		
FIRST OFFENSE:	Suspension until licensee is able to demonstrate to the Board ability to practice with reasonable skill and safety to be followed by probation and \$2,500.00 fine.	Revocation and \$5,000.00 fine or denial of licensure.
SECOND OFFENSE:	Suspension until licensee is able to demonstrate to the Board ability to practice with reasonable skill and safety	Revocation and \$10,000.00 fine or denial of licensure.

	to be followed by probation and \$7,500.00 fine.	
FOR TELEHEALTH REGISTRANTS FIRST OFFENSE:	Suspension until licensee is able to demonstrate to the Board ability to practice with reasonable skill and safety to be followed by a corrective action plan.	Revocation or denial of licensure.
FOR TELEHEALTH REGISTRANTS SECOND OFFENSE:	Reprimand and suspension until licensee is able to demonstrate to the Board ability to practice with reasonable skill and safety to be followed by a corrective action plan.	Revocation or denial of licensure.
(59) Engaging in a pattern of practice when prescribing medicinal drugs or controlled substances which demonstrates a lack of reasonable skill or safety to patients, a violation of any provision of Chapter 456, or Sections 893.055 and 893.0551, F.S., a violation of the applicable practice act, or a violation of any rules adopted under this chapter or the applicable practice act of the prescribing practitioner. (Section 456.072(1)(gg), F.S.)		
FIRST OFFENSE:	One year Probation and \$5,000.00 fine.	Revocation and \$10,000.00 fine or denial of licensure.
SECOND OFFENSE:	Suspension to be followed by probation and \$5,000.00 fine.	Revocation and \$10,000.00 fine or denial of licensure.
FOR TELEHEALTH REGISTRANTS FIRST OFFENSE:	One (1) month suspension with a corrective action plan.	Revocation or denial of licensure.
FOR TELEHEALTH REGISTRANTS SECOND OFFENSE:	Ninety (90) day suspension with a corrective action plan.	Revocation or denial of licensure.
(60) Being convicted of, or entering a plea of guilty or nolo contendere to, any misdemeanor or felony, regardless of adjudication, under 18 USC s. 669, ss. 285-287, s. 371, s. 1001, s. 1035, s. 1341, s.1343, s. 1347, s. 1349, or s. 1518, or 42 USC ss. 1320a-7b, relating to the Medicaid program. (Section 456.072(1)(ii), F.S.)		
FIRST OFFENSE:	Revocation and a fine of \$10,000.00 or denial of application for licensure.	
FOR TELEHEALTH REGISTRANTS FIRST OFFENSE:	Revocation or denial of application for licensure.	
(61) Failing to remit the sum owed to the state for overpayment from the Medicaid program pursuant to a final order, judgment, or settlement.		

(Section 456.072(1)(jj), F.S.)		
FIRST OFFENSE:	Letter of concern and a fine of \$500.00.	Probation, and a fine of \$1,000.00.
SECOND OFFENSE:	Reprimand and a fine of \$500.00.	Revocation and a fine of \$1,000.00.
FOR TELEHEALTH REGISTRANTS FIRST OFFENSE:	Letter of concern.	Suspension with a corrective action plan.
FOR TELEHEALTH REGISTRANTS SECOND OFFENSE:	Reprimand	Revocation.
(62) Being terminated from the State Medicaid program or any other state Medicaid program, or the federal Medicare program. (Section 456.072(1)(kk), F.S.)		
FIRST OFFENSE:	Letter of concern and a fine of \$500.00.	Denial or suspension and a fine of \$1,000.00.
SECOND OFFENSE:	Reprimand and a fine of \$500.00.	Denial or revocation and a fine of \$1,000.00.
FOR TELEHEALTH REGISTRANTS FIRST OFFENSE:	Letter of concern.	Denial or suspension.
FOR TELEHEALTH REGISTRANTS SECOND OFFENSE:	Reprimand.	Denial or revocation.
(63) Being convicted of, or entering into a plea of guilty or nolo contendere to, any misdemeanor or felony, regardless of adjudication, which relates to health care fraud. (Section 456.072(1)(ll), F.S.)		
FIRST OFFENSE:	Revocation and fine of \$10,000.00 or denial of application for licensure.	
FOR TELEHEALTH REGISTRANTS FIRST OFFENSE:	Revocation or denial of application.	
(64) A violation of Rule 64B15-14.0051, F.A.C.		
FIRST OFFENSE:	Probation for a term no less than two (2) years and a \$5,000.00 fine.	Revocation.
SECOND OFFENSE:	Suspension for a minimum of one (1) year to be followed by a term of probation and a \$10,000.00 fine.	Revocation.
FOR TELEHEALTH REGISTRANTS FIRST OFFENSE:	Seven (7) day suspension with a corrective action plan.	Denial or revocation.
FOR TELEHEALTH REGISTRANTS SECOND OFFENSE:	Suspension for a minimum of one year.	Denial or revocation.
(65) A violation of Rule 64B15-14.0052, F.A.C.		
FIRST OFFENSE:	Probation for a term no less than one (1) year and a \$5,000.00 fine.	Revocation.
SECOND OFFENSE:	Suspension for a minimum of six months to be followed by a term of probation and a \$10,000.00 fine.	Revocation.

FOR TELEHEALTH REGISTRANTS FIRST OFFENSE:	Not applicable to telehealth registrants.	
FOR TELEHEALTH REGISTRANTS SECOND OFFENSE:	Not applicable to telehealth registrants.	
(66) Registration of pain clinic by a designated physician through misrepresentation or fraud. (Section 459.015(1)(rr)1., F.S.)		
(a) For registering a pain clinic through misrepresentation.		
FIRST OFFENSE:	Letter of concern and a \$10,000.00 fine.	Probation and a \$10,000.00 fine.
SECOND OFFENSE:	Probation and a \$10,000.00 fine.	Revocation and a \$10,000.00 fine.
FOR TELEHEALTH REGISTRANTS	Not applicable to telehealth registrants.	
(b) For registering a pain clinic through fraud.		
FIRST OFFENSE:	Revocation and a \$10,000.00 fine.	
FOR TELEHEALTH REGISTRANTS	Not applicable to telehealth registrants.	
(67) Procuring or attempting to procure, the registration of a pain management clinic for any other person by making or causing to be made, any false representation. (Section 459.015(1)(rr)2., F.S.)		
FIRST OFFENSE:	Revocation and a \$10,000.00 fine.	
FOR TELEHEALTH REGISTRANTS	Not applicable to telehealth registrants.	
(68) Failing to comply with any requirement of Chapter 499, F.S., the Florida Drug and Cosmetic Act; 21 U.S.C., ss. 301-392, the Federal Food, Drug, and Cosmetic Act; 21 U.S.C. ss. 821 et seq., the Drug Abuse Prevention Control Act; or Chapter 893, F.S., the Florida Comprehensive Drug Abuse Prevention and Control Act. (Section 459.015(1)(rr)3., F.S.)		
FIRST OFFENSE:	Letter of concern and a \$1,000.00 fine.	Probation and a \$5,000.00 fine.
SECOND OFFENSE:	Reprimand and a \$5,000.00 fine.	Suspension, followed by a period of probation, and a \$10,000.00 fine.
THIRD OFFENSE:	Reprimand and a \$7,500.00 fine.	Revocation and a \$10,000.00 fine.
FOR TELEHEALTH REGISTRANTS	Not applicable to telehealth registrants.	
(69) Being convicted of or found guilty of, regardless of adjudication to, a felony or any other crime involving moral turpitude, fraud, dishonesty, or deceit in any jurisdiction of the courts of this state, or any other state, or of the United States. (Section 459.015(1)(rr)4., F.S.)		
FIRST OFFENSE:	Probation and a \$1,000.00 fine; if fraud involved, probation and a \$10,000.00	Revocation and a \$10,000.00 fine or denial of licensure.

	fine.	
SECOND OFFENSE:	Suspension and a \$5,000.00 fine; if fraud involved, suspension followed by a period of probation and a \$10,000.00 fine.	Revocation and a \$10,000.00 fine or denial of licensure.
FOR TELEHEALTH REGISTRANTS	Not applicable to teleheath registrants.	
(70) Being convicted of, or disciplined by a regulatory agency of the Federal Government or a regulatory agency of another state for any offense that would constitute a violation of Chapter 459, F.S. (Section 459.015(1)(rr)5., F.S.)		
FIRST OFFENSE:	From imposition of discipline comparable to the discipline which would have been imposed if the substantive violation had occurred in Florida and a \$1,000.00 fine.	Suspension until the license is unencumbered in the jurisdiction in which disciplinary action was originally taken, and a \$5,000.00 fine or denial of licensure.
SECOND OFFENSE:	From imposition of discipline comparable to the discipline which would have been imposed if the substantive violation had occurred in Florida and a \$5,000.00 fine.	Revocation and a \$10,000.00 fine or denial of licensure.
FOR TELEHEALTH REGISTRANTS	Not applicable to teleheath registrants.	
(71) Being convicted of, or entering a plea of guilty or nolo contendere to, regardless of adjudication, a crime which relates to the practice of, or the ability to practice, a licensed health care profession. (Section 459.015(1)(rr)6., F.S.)		
FIRST OFFENSE:	Probation and a \$5,000.00 fine.	Revocation and a \$10,000.00 fine or denial of licensure.
SECOND OFFENSE:	Suspension and a \$5,000.00 fine.	Revocation and a \$10,000.00 fine or denial of licensure.
FOR TELEHEALTH REGISTRANTS	Not applicable to teleheath registrants.	
(72) Being convicted of, or entering a plea of guilty or nolo contendere to, regardless of adjudication, a crime which relates to health care fraud. (Section 459.015(1)(rr)7., F.S.)		
(a) Being convicted of, or entering a plea of guilty or nolo contendere to, regardless of adjudication, a crime relating to healthcare fraud in dollar amounts in excess of \$5,000.00.		
FIRST OFFENSE:	Revocation and a \$10,000.00 fine or denial of licensure.	
FOR TELEHEALTH REGISTRANTS	Not applicable to teleheath registrants.	
(b) Being convicted of, or entering a plea of guilty or nolo contendere to, regardless		

of adjudication, a crime relating to healthcare fraud in dollar amounts of \$5,000.00 or less.		
FIRST OFFENSE:	Suspension, followed by a period of probation, and a \$10,000.00 fine.	Revocation or denial of licensure, and a fine of \$10,000.00.
SECOND OFFENSE:	Revocation and a \$10,000.00 fine.	
FOR TELEHEALTH REGISTRANTS	Not applicable to teleheath registrants.	
(73) Dispensing any medicinal drug based upon a communication that purports to be a prescription as defined in Section 465.003(14) or 893.02, F.S., if the dispensing practitioner knows or has reason to believe that the purported prescription is not based upon a valid practitioner-patient relationship. (Section 459.015(1)(rr)8., F.S.)		
FIRST OFFENSE:	Reprimand and a \$5,000.00 fine.	Revocation and a \$10,000.00 fine or denial of licensure.
SECOND OFFENSE:	Probation and a \$5,000.00 fine.	Revocation and a \$10,000.00 fine or denial of licensure.
FOR TELEHEALTH REGISTRANTS	Not applicable to teleheath registrants.	
(74) Failing to timely notify the Board of the date of his or her termination from a pain management clinic as required by section 459.0137(2)(e), F.S. (Section 459.015(1)(rr)9., F.S.)		
FIRST OFFENSE:	Letter of concern and a \$1,000.00 fine.	Probation and a \$5,000.00 fine.
SECOND OFFENSE:	Reprimand and a \$5,000.00 fine.	Suspension, followed by a period of probation, and a \$10,000.00 fine.
THIRD OFFENSE:	Suspension, followed by a period of probation, and a \$7,500.00 fine.	Revocation and a \$10,000.00 fine.
FOR TELEHEALTH REGISTRANTS	Not applicable to teleheath registrants.	
(75) Failing to timely notify the Department of the theft of prescription blanks from a pain management clinic or a breach of an osteopathic physician's electronic prescribing software or other methods for prescribing within 24 hours as required by Section 459.0137(3), F.S. (Section 459.015(1)(ss), F.S.)		
FIRST OFFENSE:	Letter of concern and a \$1,000.00 fine.	Probation and a \$5,000.00 fine or denial of licensure.
SECOND OFFENSE:	Probation and a \$5,000.00 fine.	Suspension, followed by a period of probation, and a \$10,000.00 fine or denial of licensure.
THIRD OFFENSE:	Suspension, followed by a period of probation, and a \$7,500.00 fine.	Revocation and a \$10,000.00 fine or denial of licensure.
FOR TELEHEALTH REGISTRANTS FIRST OFFENSE:	Not applicable to teleheath registrants.	