



Naturopathic Doctor Primary Care Provider (ND-PCP)

“A primary care physician (PCP) is a generalist physician who provides definitive care to the undifferentiated patient at the point of first contact and takes continuing responsibility for providing the patient's care. Such a physician must be specifically trained to provide primary care services. Primary care services include health promotion, disease prevention, health maintenance, counseling, patient education, diagnosis and treatment of acute and chronic illnesses.”¹

Naturopathic Doctors are trained as primary care providers and are licensed to act in the capacity of either a PCP or a non-PCP depending on provider preference. An ND in Oregon can diagnose and treat disease, perform physical exams and all preventive services, order diagnostic labs and imaging, prescribe all pharmaceuticals needed in a primary care practice, coordinate hospital care, refer to specialists, and perform minor surgery.

The Oregon Association of Naturopathic Physicians has adopted the following criteria to define a Naturopathic Doctor's responsibility in serving as a primary care physician for patients. In addition to meeting the AAFP definition above, the ND-PCP shall:

1. Have a system in place to monitor which patients designate them as their PCP and proactively manage all preventive services and health promotion as well as chronic disease care;
2. Prescribe any medication judiciously to achieve patient-centered care using minimal intervention and employing commonly accepted best practices to avoid diversion of substances with the potential for abuse;
3. Maintain malpractice liability insurance at current health insurer-recommended limits for occurrence and all claims;
4. Allow for patient access 24 hours per day, 7 days per week in the form of a call service, nurse triage line, covering provider, or similar system to provide advice for continuing care, urgent and emergent triage;
5. Maintain a referral network for non-emergent medical, dental, and behavioral health care needs and coordinate timely referrals dependent on acuity;
6. Have a hospitalization plan that includes:
 - a. Identification of one or more non-emergency department hospital contacts established for direct patient admittance within the local service area of the doctor's place of practice -- when possible.
 - b. A plan for triage and coordination of care 24/7 (see 4 above)
 - c. A plan for continuity of patient care after hospitalization/emergency department visit, including medication reconciliation.

¹ American Academy of Family Physicians. Policy on Primary Care