#### State/Territory \*KEY

**License Title** Specific title of license issued by the state/territory.

Note, if a state/territory issues a required time-limited license for purposes of gaining supervised experience after graduating that has different educational requirements, information for this type of license and the next-level license is provided. Curriculum should be compared to all relevant titles/levels in order to determine if a program "meets" educational requirements.

**Specialized Accreditation Required?** "No" means the Board does not require the program to hold a specialized accreditation for licensure.

"Yes" means the Board does require the program to hold a specialized accreditation for licensure.

"N/A" means the state or territory does not offer a license.

**Specialized Accreditation Accepted as Meeting Educational Requirements?** "Yes" means there is language in statute or rule that a program that holds specialized accreditation meets some or all education requirements.

"No" means Board does not indicate that specialized accreditation meets all educational requirements.

"N/A" means state/territory does not offer a license.

**Curriculum Comparison Needed?** "Yes" means a comparison of the program to specific state standards/coursework/supervised experience listed is needed to determine if the program meets educational requirements for licensure.

"No" means a program does not need to compare their program to specific state/territory educational requirements. In most instances, the Board/Agency is relying on specialized accreditation or approval, license applicants holding certification, or license applicants meeting examination requirements.

"N/A" means the state or territory does not offer a license.

Note, each licensing board will still evaluate each individual graduate's application at the time they apply.

**Specific Coursework** Specific information from statute, rule, application, or website is copied that includes state/territory requirement of certain courses or other educational requirements to be completed as part of the program. Licensing board/agency will review the graduate's transcript to determine if educational requirements were completed.

"N/A" means the state or territory does not offer a license.

Note, if references to other sections of statutes/regulations are listed, The Bookmark includes all relevant information required for curriculum comparison here. In other words, programs do not need to complete further research into statutes/regulations to

determine comparison requirements.

**Supervised Experience (In-Program)** Information is provided about any required practicum, internship, or supervised clinical experiences required to be completed as part of the program.

"N/A" means the state/territory does not issue a license.

**Member of Compact or Reciprocity Agreement?** "Yes" means the state/territory has adopted one or more relevant licensure compacts or interstate reciprocity agreements. The state/territory is a member of the compact or reciprocity agreement.

"Pending" means the compact or interstate reciprocity agreement is not yet enacted (does not have enough states/territories as members yet), but the state/territory is a member.

"No" means the state/territory is not a member of a relevant licensure compact or interstate reciprocity agreement.

"None found" means no relevant national licensure compact or interstate reciprocity agreement exists for this profession or occupation.

**Board/Agency Name** Licensing board or agency name

**Board/Agency Website** 

**Statute/Regulation/Rule Citation** Citation to the relevant section(s) of state statutes, regulations or rules.

Must Out-of-State Program Graduate Hold License to Qualify? "Yes" means the state/territory requires a license applicant who graduated from a program based in another state/territory to hold that state/territory license to meet educational requirements for initial, first-time license.

"No" means the state/territory does not require a license applicant who graduated from a program based in another state/territory to hold that state/territory license to meet educational requirements for initial, first-time license.

"N/A" means the state/territory does not issue a license.

**Must License Applicant Hold Private Certification?** "Yes" means the state/territory requires a license applicant to hold a certification issued by a private (non-governmental) organization to meet educational requirements for initial, first-time license.

"No" means the state/territory does not require a license applicant to hold a certification issued by a private (non-governmental) organization to meet educational requirements for initial, first-time license.

"N/A" means the state/territory does not issue a license.

**Additional Training (Not Required In-Program)** Training, continuing education or other requirements for initial licensure are listed here. These DO NOT need to be completed as part of the program to meet educational requirements for licensure.

**Experience (After Graduating/Outside of Program)** Experience required for initial licensure. This could be supervised work experience after graduating, experience

accrued outside of the program, or specific prior work experience. This DOES NOT (and in most cases, cannot) need to be completed as part of the program to meet educational requirements for licensure.

**Exam(s)** Required Any exams required for the type of license.

"None found" means that the state/territory does not specify an exam for that particular license.

"N/A" means the state/territory does not offer a license.

**Notes** --Educational requirements are provided for the recent graduate of a program of a regionally accredited college or university in the U.S. who is, or will be, applying for their first license or certification (typically by exam).

- --Some states have additional levels of license/certification or additional scope of practice available if specific coursework, training, or work experience is completed. The Bookmark only captures the first level of license/certification (unless otherwise indicated).
- --Some license types have multiple pathways to qualify. The Bookmark includes information through the lens of a program offered at a regionally accredited college or university, and does not include all of the possible ways that an individual may qualify for the license.
- --Terminology is inconsistent across states/territories for most license types. Certification, license, credential, endorsement and certificate are all used to describe the legally required permission by a state/territory to practice a particular profession or occupation. The Bookmark uses license and certification to refer to all of these. The exact title is provided for each state/territory.

#### **Last Reviewed Date**

Feedback Form (Send us your questions, comments or information about your experience with licensure) https://forms.gle/zLB3dsG9j6gmx1pU6

**State/Territory** Alabama

**License Title** None found.

**Specialized Accreditation Required?** N/A

Specialized Accreditation Accepted as Meeting Educational Requirements? N/A

**Curriculum Comparison Needed?** N/A

Specific Coursework N/A

**Supervised Experience (In-Program)** N/A

Member of Compact or Reciprocity Agreement? N/A

**Board/Agency Name** N/A

**Board/Agency Website N/A** 

Statute/Regulation/Rule Citation N/A

Must Out-of-State Program Graduate Hold License to Qualify? N/A

Must License Applicant Hold Private Certification? N/A

Additional Training (Not Required In-Program) N/A

**Experience (After Graduating/Outside of Program)** N/A

Exam(s) Required N/A

Notes N/A

Last Reviewed Date 5/4/2024

Feedback Form (Send us your questions, comments or information about your

**experience with licensure)** https://forms.gle/zLB3dsG9j6qmx1pU6

**State/Territory** Alaska

**License Title** None found.

**Specialized Accreditation Required?** N/A

Specialized Accreditation Accepted as Meeting Educational Requirements? N/A

**Curriculum Comparison Needed?** N/A

Specific Coursework N/A

**Supervised Experience (In-Program)** N/A

Member of Compact or Reciprocity Agreement? N/A

**Board/Agency Name** N/A

**Board/Agency Website N/A** 

Statute/Regulation/Rule Citation N/A

Must Out-of-State Program Graduate Hold License to Qualify? N/A

**Must License Applicant Hold Private Certification?** N/A

Additional Training (Not Required In-Program) N/A

**Experience (After Graduating/Outside of Program)** N/A

Exam(s) Required N/A

Notes N/A

Last Reviewed Date 5/4/2024

Feedback Form (Send us your questions, comments or information about your

**State/Territory** American Samoa

**License Title** None found.

**Specialized Accreditation Required?** N/A

Specialized Accreditation Accepted as Meeting Educational Requirements? N/A

**Curriculum Comparison Needed?** N/A

Specific Coursework N/A

**Supervised Experience (In-Program)** N/A

Member of Compact or Reciprocity Agreement? N/A

**Board/Agency Name** N/A

Board/Agency Website N/A

Statute/Regulation/Rule Citation N/A

Must Out-of-State Program Graduate Hold License to Qualify? N/A

Must License Applicant Hold Private Certification? N/A

Additional Training (Not Required In-Program) N/A

**Experience (After Graduating/Outside of Program)** N/A

Exam(s) Required N/A

Notes N/A

Last Reviewed Date 5/7/2024

Feedback Form (Send us your questions, comments or information about your experience with licensure) https://forms.gle/zLB3dsG9j6qmx1pU6

State/Territory Arizona

**License Title** None found.

**Specialized Accreditation Required?** N/A

Specialized Accreditation Accepted as Meeting Educational Requirements? N/A

**Curriculum Comparison Needed?** N/A

Specific Coursework N/A

**Supervised Experience (In-Program)** N/A

Member of Compact or Reciprocity Agreement? N/A

**Board/Agency Name** N/A

**Board/Agency Website N/A** 

Statute/Regulation/Rule Citation N/A

Must Out-of-State Program Graduate Hold License to Qualify? N/A

**Must License Applicant Hold Private Certification?** N/A

Additional Training (Not Required In-Program) N/A

**Experience (After Graduating/Outside of Program)** N/A

Exam(s) Required N/A

Notes N/A

Last Reviewed Date 5/4/2024

Feedback Form (Send us your questions, comments or information about your experience with licensure) https://forms.gle/zLB3dsG9j6qmx1pU6

**State/Territory** Arkansas

**License Title** None found.

**Specialized Accreditation Required?** N/A

Specialized Accreditation Accepted as Meeting Educational Requirements? N/A

**Curriculum Comparison Needed?** N/A

Specific Coursework N/A

**Supervised Experience (In-Program)** N/A

Member of Compact or Reciprocity Agreement? N/A

**Board/Agency Name** N/A

**Board/Agency Website N/A** 

Statute/Regulation/Rule Citation N/A

Must Out-of-State Program Graduate Hold License to Qualify? N/A

Must License Applicant Hold Private Certification? N/A

Additional Training (Not Required In-Program) N/A

**Experience (After Graduating/Outside of Program)** N/A

Exam(s) Required N/A

Notes N/A

Last Reviewed Date 5/4/2024

Feedback Form (Send us your questions, comments or information about your

experience with licensure) https://forms.gle/zLB3dsG9j6qmx1pU6

**State/Territory** California

**License Title** None found.

**Specialized Accreditation Required?** N/A

Specialized Accreditation Accepted as Meeting Educational Requirements? N/A

**Curriculum Comparison Needed?** N/A

Specific Coursework N/A

**Supervised Experience (In-Program)** N/A

Member of Compact or Reciprocity Agreement? N/A

**Board/Agency Name** N/A

**Board/Agency Website N/A** 

Statute/Regulation/Rule Citation N/A

Must Out-of-State Program Graduate Hold License to Qualify? N/A

**Must License Applicant Hold Private Certification?** N/A

Additional Training (Not Required In-Program) N/A

**Experience (After Graduating/Outside of Program)** N/A

Exam(s) Required N/A

Notes N/A

Last Reviewed Date 5/5/2024

Feedback Form (Send us your questions, comments or information about your

**State/Territory** Colorado

License Title None found.

**Specialized Accreditation Required?** N/A

Specialized Accreditation Accepted as Meeting Educational Requirements? N/A

**Curriculum Comparison Needed?** N/A

Specific Coursework N/A

**Supervised Experience (In-Program)** N/A

Member of Compact or Reciprocity Agreement? N/A

**Board/Agency Name** N/A

**Board/Agency Website N/A** 

Statute/Regulation/Rule Citation N/A

Must Out-of-State Program Graduate Hold License to Qualify? N/A

Must License Applicant Hold Private Certification? N/A

Additional Training (Not Required In-Program) N/A

**Experience (After Graduating/Outside of Program)** N/A

Exam(s) Required N/A

Notes N/A

Last Reviewed Date 5/5/2024

Feedback Form (Send us your questions, comments or information about your

**experience with licensure)** https://forms.gle/zLB3dsG9j6qmx1pU6

**State/Territory** Connecticut

**License Title** None found.

**Specialized Accreditation Required?** N/A

Specialized Accreditation Accepted as Meeting Educational Requirements? N/A

**Curriculum Comparison Needed?** N/A

Specific Coursework N/A

**Supervised Experience (In-Program)** N/A

Member of Compact or Reciprocity Agreement? N/A

**Board/Agency Name** N/A

**Board/Agency Website N/A** 

Statute/Regulation/Rule Citation N/A

Must Out-of-State Program Graduate Hold License to Qualify? N/A

**Must License Applicant Hold Private Certification?** N/A

Additional Training (Not Required In-Program) N/A

**Experience (After Graduating/Outside of Program)** N/A

Exam(s) Required N/A

Notes N/A

Last Reviewed Date 5/4/2024

Feedback Form (Send us your questions, comments or information about your

**State/Territory** Delaware

**License Title** None found.

**Specialized Accreditation Required?** N/A

Specialized Accreditation Accepted as Meeting Educational Requirements? N/A

**Curriculum Comparison Needed?** N/A

Specific Coursework N/A

**Supervised Experience (In-Program)** N/A

Member of Compact or Reciprocity Agreement? N/A

**Board/Agency Name** N/A

Board/Agency Website N/A

**Statute/Regulation/Rule Citation** N/A

Must Out-of-State Program Graduate Hold License to Qualify? N/A

Must License Applicant Hold Private Certification? N/A

Additional Training (Not Required In-Program) N/A

**Experience (After Graduating/Outside of Program)** N/A

Exam(s) Required N/A

Notes N/A

Last Reviewed Date 5/5/2024

Feedback Form (Send us your questions, comments or information about your

**experience with licensure)** https://forms.gle/zLB3dsG9j6qmx1pU6

**State/Territory** District of Columbia

**License Title** None found.

**Specialized Accreditation Required?** N/A

Specialized Accreditation Accepted as Meeting Educational Requirements? N/A

**Curriculum Comparison Needed?** N/A

Specific Coursework N/A

**Supervised Experience (In-Program)** N/A

Member of Compact or Reciprocity Agreement? N/A

**Board/Agency Name** N/A

**Board/Agency Website N/A** 

Statute/Regulation/Rule Citation N/A

Must Out-of-State Program Graduate Hold License to Qualify? N/A

**Must License Applicant Hold Private Certification?** N/A

Additional Training (Not Required In-Program) N/A

**Experience (After Graduating/Outside of Program)** N/A

Exam(s) Required N/A

Notes N/A

Last Reviewed Date 5/5/2024

Feedback Form (Send us your questions, comments or information about your

State/Territory Federated States of Micronesia

**License Title** None found.

**Specialized Accreditation Required?** N/A

Specialized Accreditation Accepted as Meeting Educational Requirements? N/A

**Curriculum Comparison Needed?** N/A

Specific Coursework N/A

**Supervised Experience (In-Program)** N/A

Member of Compact or Reciprocity Agreement? N/A

**Board/Agency Name** N/A

**Board/Agency Website N/A** 

**Statute/Regulation/Rule Citation** N/A

Must Out-of-State Program Graduate Hold License to Qualify? N/A

Must License Applicant Hold Private Certification? N/A

Additional Training (Not Required In-Program) N/A

**Experience (After Graduating/Outside of Program)** N/A

Exam(s) Required N/A

Notes N/A

Last Reviewed Date 5/8/2024

Feedback Form (Send us your questions, comments or information about your

experience with licensure) https://forms.gle/zLB3dsG9j6qmx1pU6

State/Territory Florida

**License Title** None found.

**Specialized Accreditation Required?** N/A

Specialized Accreditation Accepted as Meeting Educational Requirements? N/A

**Curriculum Comparison Needed?** N/A

Specific Coursework N/A

**Supervised Experience (In-Program)** N/A

Member of Compact or Reciprocity Agreement? N/A

**Board/Agency Name** N/A

**Board/Agency Website N/A** 

Statute/Regulation/Rule Citation N/A

Must Out-of-State Program Graduate Hold License to Qualify? N/A

**Must License Applicant Hold Private Certification?** N/A

Additional Training (Not Required In-Program) N/A

**Experience (After Graduating/Outside of Program)** N/A

Exam(s) Required N/A

Notes N/A

Last Reviewed Date 5/5/2024

Feedback Form (Send us your questions, comments or information about your

**State/Territory** Georgia

**License Title** None found.

**Specialized Accreditation Required?** N/A

Specialized Accreditation Accepted as Meeting Educational Requirements? N/A

**Curriculum Comparison Needed?** N/A

Specific Coursework N/A

**Supervised Experience (In-Program)** N/A

Member of Compact or Reciprocity Agreement? N/A

**Board/Agency Name** N/A

**Board/Agency Website N/A** 

**Statute/Regulation/Rule Citation** N/A

Must Out-of-State Program Graduate Hold License to Qualify? N/A

Must License Applicant Hold Private Certification? N/A

Additional Training (Not Required In-Program) N/A

**Experience (After Graduating/Outside of Program)** N/A

Exam(s) Required N/A

Notes N/A

Last Reviewed Date 5/5/2024

Feedback Form (Send us your questions, comments or information about your

experience with licensure) https://forms.gle/zLB3dsG9j6qmx1pU6

**State/Territory** Guam

License Title N/A

**Specialized Accreditation Required?** N/A

Specialized Accreditation Accepted as Meeting Educational Requirements? N/A

**Curriculum Comparison Needed?** N/A

Specific Coursework N/A

**Supervised Experience (In-Program)** N/A

Member of Compact or Reciprocity Agreement? N/A

**Board/Agency Name** N/A

**Board/Agency Website N/A** 

Statute/Regulation/Rule Citation N/A

Must Out-of-State Program Graduate Hold License to Qualify? N/A

**Must License Applicant Hold Private Certification?** N/A

Additional Training (Not Required In-Program) N/A

**Experience (After Graduating/Outside of Program)** N/A

Exam(s) Required N/A

Notes N/A

Last Reviewed Date 5/13/2024

Feedback Form (Send us your questions, comments or information about your

State/Territory Hawaii

**License Title** None found.

**Specialized Accreditation Required?** N/A

Specialized Accreditation Accepted as Meeting Educational Requirements? N/A

**Curriculum Comparison Needed?** N/A

Specific Coursework N/A

**Supervised Experience (In-Program)** N/A

Member of Compact or Reciprocity Agreement? N/A

**Board/Agency Name** N/A

**Board/Agency Website N/A** 

**Statute/Regulation/Rule Citation** N/A

Must Out-of-State Program Graduate Hold License to Qualify? N/A

Must License Applicant Hold Private Certification? N/A

Additional Training (Not Required In-Program) N/A

**Experience (After Graduating/Outside of Program)** N/A

Exam(s) Required N/A

Notes N/A

Last Reviewed Date 5/5/2024

Feedback Form (Send us your questions, comments or information about your experience with licensure) https://forms.gle/zLB3dsG9j6qmx1pU6

State/Territory Idaho

**License Title** None found.

**Specialized Accreditation Required?** N/A

Specialized Accreditation Accepted as Meeting Educational Requirements? N/A

**Curriculum Comparison Needed?** N/A

Specific Coursework N/A

**Supervised Experience (In-Program)** N/A

Member of Compact or Reciprocity Agreement? N/A

**Board/Agency Name** N/A

**Board/Agency Website N/A** 

Statute/Regulation/Rule Citation N/A

Must Out-of-State Program Graduate Hold License to Qualify? N/A

**Must License Applicant Hold Private Certification?** N/A

Additional Training (Not Required In-Program) N/A

**Experience (After Graduating/Outside of Program)** N/A

Exam(s) Required N/A

Notes N/A

Last Reviewed Date 5/5/2024

Feedback Form (Send us your questions, comments or information about your experience with licensure) https://forms.gle/zLB3dsG9j6qmx1pU6

**State/Territory** Illinois

**License Title** None found.

**Specialized Accreditation Required?** N/A

Specialized Accreditation Accepted as Meeting Educational Requirements? N/A

**Curriculum Comparison Needed?** N/A

Specific Coursework N/A

**Supervised Experience (In-Program)** N/A

Member of Compact or Reciprocity Agreement? N/A

**Board/Agency Name** N/A

**Board/Agency Website N/A** 

Statute/Regulation/Rule Citation N/A

Must Out-of-State Program Graduate Hold License to Qualify? N/A

**Must License Applicant Hold Private Certification?** N/A

Additional Training (Not Required In-Program) N/A

**Experience (After Graduating/Outside of Program)** N/A

Exam(s) Required N/A

Notes N/A

Last Reviewed Date 5/14/2024

Feedback Form (Send us your questions, comments or information about your

**experience with licensure)** https://forms.gle/zLB3dsG9j6qmx1pU6

**State/Territory** Indiana

**License Title** None found.

**Specialized Accreditation Required?** N/A

Specialized Accreditation Accepted as Meeting Educational Requirements? N/A

**Curriculum Comparison Needed?** N/A

Specific Coursework N/A

**Supervised Experience (In-Program)** N/A

Member of Compact or Reciprocity Agreement? N/A

**Board/Agency Name** N/A

**Board/Agency Website N/A** 

Statute/Regulation/Rule Citation N/A

Must Out-of-State Program Graduate Hold License to Qualify? N/A

**Must License Applicant Hold Private Certification?** N/A

Additional Training (Not Required In-Program) N/A

**Experience (After Graduating/Outside of Program)** N/A

Exam(s) Required N/A

Notes N/A

Last Reviewed Date 5/5/2024

Feedback Form (Send us your questions, comments or information about your

**State/Territory** Iowa

**License Title** None found.

**Specialized Accreditation Required?** N/A

Specialized Accreditation Accepted as Meeting Educational Requirements? N/A

**Curriculum Comparison Needed?** N/A

Specific Coursework N/A

**Supervised Experience (In-Program)** N/A

Member of Compact or Reciprocity Agreement? N/A

**Board/Agency Name** N/A

**Board/Agency Website N/A** 

Statute/Regulation/Rule Citation N/A

Must Out-of-State Program Graduate Hold License to Qualify? N/A

**Must License Applicant Hold Private Certification?** N/A

Additional Training (Not Required In-Program) N/A

**Experience (After Graduating/Outside of Program)** N/A

Exam(s) Required N/A

Notes N/A

Last Reviewed Date 5/5/2024

Feedback Form (Send us your questions, comments or information about your

**experience with licensure)** https://forms.gle/zLB3dsG9j6qmx1pU6

**State/Territory** Kansas

**License Title** None found.

**Specialized Accreditation Required?** N/A

Specialized Accreditation Accepted as Meeting Educational Requirements? N/A

**Curriculum Comparison Needed?** N/A

Specific Coursework N/A

**Supervised Experience (In-Program)** N/A

Member of Compact or Reciprocity Agreement? N/A

**Board/Agency Name** N/A

**Board/Agency Website N/A** 

Statute/Regulation/Rule Citation N/A

Must Out-of-State Program Graduate Hold License to Qualify? N/A

**Must License Applicant Hold Private Certification?** N/A

Additional Training (Not Required In-Program) N/A

**Experience (After Graduating/Outside of Program)** N/A

Exam(s) Required N/A

Notes N/A

Last Reviewed Date 5/5/2024

Feedback Form (Send us your questions, comments or information about your

**State/Territory** Kentucky

License Title None found.

**Specialized Accreditation Required?** N/A

Specialized Accreditation Accepted as Meeting Educational Requirements? N/A

**Curriculum Comparison Needed?** N/A

Specific Coursework N/A

**Supervised Experience (In-Program)** N/A

Member of Compact or Reciprocity Agreement? N/A

**Board/Agency Name** N/A

Board/Agency Website N/A

**Statute/Regulation/Rule Citation** N/A

Must Out-of-State Program Graduate Hold License to Qualify? N/A

Must License Applicant Hold Private Certification? N/A

Additional Training (Not Required In-Program) N/A

**Experience (After Graduating/Outside of Program)** N/A

Exam(s) Required N/A

Notes N/A

Last Reviewed Date 5/5/2024

Feedback Form (Send us your questions, comments or information about your

**experience with licensure)** https://forms.gle/zLB3dsG9j6qmx1pU6

**State/Territory** Louisiana

**License Title** None found.

**Specialized Accreditation Required?** N/A

Specialized Accreditation Accepted as Meeting Educational Requirements? N/A

**Curriculum Comparison Needed?** N/A

Specific Coursework N/A

**Supervised Experience (In-Program)** N/A

Member of Compact or Reciprocity Agreement? N/A

**Board/Agency Name** N/A

**Board/Agency Website N/A** 

Statute/Regulation/Rule Citation N/A

Must Out-of-State Program Graduate Hold License to Qualify? N/A

**Must License Applicant Hold Private Certification?** N/A

Additional Training (Not Required In-Program) N/A

**Experience (After Graduating/Outside of Program)** N/A

Exam(s) Required N/A

Notes N/A

Last Reviewed Date 5/5/2024

Feedback Form (Send us your questions, comments or information about your

**State/Territory** Maine

**License Title** None found.

**Specialized Accreditation Required?** N/A

Specialized Accreditation Accepted as Meeting Educational Requirements? N/A

**Curriculum Comparison Needed?** N/A

Specific Coursework N/A

**Supervised Experience (In-Program)** N/A

Member of Compact or Reciprocity Agreement?  $N\!/\!A$ 

**Board/Agency Name** N/A

**Board/Agency Website N/A** 

**Statute/Regulation/Rule Citation** N/A

Must Out-of-State Program Graduate Hold License to Qualify? N/A

Must License Applicant Hold Private Certification? N/A

Additional Training (Not Required In-Program) N/A

**Experience (After Graduating/Outside of Program)** N/A

Exam(s) Required N/A

Notes N/A

Last Reviewed Date 5/5/2024

Feedback Form (Send us your questions, comments or information about your

**experience with licensure)** https://forms.gle/zLB3dsG9j6qmx1pU6

**State/Territory** Maryland

**License Title** None found.

**Specialized Accreditation Required?** N/A

Specialized Accreditation Accepted as Meeting Educational Requirements? N/A

**Curriculum Comparison Needed?** N/A

Specific Coursework N/A

**Supervised Experience (In-Program)** N/A

Member of Compact or Reciprocity Agreement? N/A

**Board/Agency Name** N/A

**Board/Agency Website N/A** 

Statute/Regulation/Rule Citation N/A

Must Out-of-State Program Graduate Hold License to Qualify? N/A

**Must License Applicant Hold Private Certification?** N/A

Additional Training (Not Required In-Program) N/A

**Experience (After Graduating/Outside of Program)** N/A

Exam(s) Required N/A

Notes N/A

Last Reviewed Date 5/5/2024

Feedback Form (Send us your questions, comments or information about your

**State/Territory** Massachusetts

**License Title** None found.

**Specialized Accreditation Required?** N/A

Specialized Accreditation Accepted as Meeting Educational Requirements? N/A

**Curriculum Comparison Needed?** N/A

Specific Coursework N/A

**Supervised Experience (In-Program)** N/A

Member of Compact or Reciprocity Agreement? N/A

**Board/Agency Name** N/A

Board/Agency Website N/A

Statute/Regulation/Rule Citation N/A

Must Out-of-State Program Graduate Hold License to Qualify? N/A

Must License Applicant Hold Private Certification? N/A

Additional Training (Not Required In-Program) N/A

**Experience (After Graduating/Outside of Program)** N/A

Exam(s) Required N/A

Notes N/A

Last Reviewed Date 5/5/2024

Feedback Form (Send us your questions, comments or information about your

experience with licensure) https://forms.gle/zLB3dsG9j6qmx1pU6

**State/Territory** Michigan

**License Title** None found.

**Specialized Accreditation Required?** N/A

Specialized Accreditation Accepted as Meeting Educational Requirements? N/A

**Curriculum Comparison Needed?** N/A

Specific Coursework N/A

**Supervised Experience (In-Program)** N/A

Member of Compact or Reciprocity Agreement? N/A

**Board/Agency Name** N/A

**Board/Agency Website N/A** 

Statute/Regulation/Rule Citation N/A

Must Out-of-State Program Graduate Hold License to Qualify? N/A

**Must License Applicant Hold Private Certification?** N/A

Additional Training (Not Required In-Program) N/A

**Experience (After Graduating/Outside of Program)** N/A

Exam(s) Required N/A

Notes N/A

Last Reviewed Date 5/5/2024

Feedback Form (Send us your questions, comments or information about your

**State/Territory** Minnesota

License Title None found.

**Specialized Accreditation Required?** N/A

Specialized Accreditation Accepted as Meeting Educational Requirements? N/A

**Curriculum Comparison Needed?** N/A

Specific Coursework N/A

**Supervised Experience (In-Program)** N/A

Member of Compact or Reciprocity Agreement? N/A

**Board/Agency Name** N/A

**Board/Agency Website N/A** 

**Statute/Regulation/Rule Citation** N/A

Must Out-of-State Program Graduate Hold License to Qualify? N/A

Must License Applicant Hold Private Certification? N/A

Additional Training (Not Required In-Program) N/A

**Experience (After Graduating/Outside of Program)** N/A

Exam(s) Required N/A

Notes N/A

Last Reviewed Date 5/5/2024

Feedback Form (Send us your questions, comments or information about your

experience with licensure) https://forms.gle/zLB3dsG9j6qmx1pU6

State/Territory Mississippi

**License Title** None found.

**Specialized Accreditation Required?** N/A

Specialized Accreditation Accepted as Meeting Educational Requirements? N/A

**Curriculum Comparison Needed?** N/A

Specific Coursework N/A

**Supervised Experience (In-Program)** N/A

Member of Compact or Reciprocity Agreement? N/A

**Board/Agency Name** N/A

**Board/Agency Website N/A** 

Statute/Regulation/Rule Citation N/A

Must Out-of-State Program Graduate Hold License to Qualify? N/A

**Must License Applicant Hold Private Certification?** N/A

Additional Training (Not Required In-Program) N/A

**Experience (After Graduating/Outside of Program)** N/A

Exam(s) Required N/A

Notes N/A

Last Reviewed Date 5/5/2024

Feedback Form (Send us your questions, comments or information about your

State/Territory Missouri

**License Title** None found.

**Specialized Accreditation Required?** N/A

Specialized Accreditation Accepted as Meeting Educational Requirements? N/A

**Curriculum Comparison Needed?** N/A

Specific Coursework N/A

**Supervised Experience (In-Program)** N/A

Member of Compact or Reciprocity Agreement? N/A

**Board/Agency Name** N/A

**Board/Agency Website N/A** 

Statute/Regulation/Rule Citation N/A

Must Out-of-State Program Graduate Hold License to Qualify? N/A

Must License Applicant Hold Private Certification? N/A

Additional Training (Not Required In-Program) N/A

**Experience (After Graduating/Outside of Program)** N/A

Exam(s) Required N/A

Notes N/A

Last Reviewed Date 5/5/2024

Feedback Form (Send us your questions, comments or information about your

experience with licensure) https://forms.gle/zLB3dsG9j6qmx1pU6

**State/Territory** Montana

**License Title** None found.

**Specialized Accreditation Required?** N/A

Specialized Accreditation Accepted as Meeting Educational Requirements? N/A

**Curriculum Comparison Needed?** N/A

Specific Coursework N/A

**Supervised Experience (In-Program)** N/A

Member of Compact or Reciprocity Agreement? N/A

**Board/Agency Name** N/A

**Board/Agency Website N/A** 

Statute/Regulation/Rule Citation N/A

Must Out-of-State Program Graduate Hold License to Qualify? N/A

**Must License Applicant Hold Private Certification?** N/A

Additional Training (Not Required In-Program) N/A

**Experience (After Graduating/Outside of Program)** N/A

Exam(s) Required N/A

Notes N/A

Last Reviewed Date 5/5/2024

Feedback Form (Send us your questions, comments or information about your

**State/Territory** Nebraska

**License Title** None found.

**Specialized Accreditation Required?** N/A

Specialized Accreditation Accepted as Meeting Educational Requirements? N/A

**Curriculum Comparison Needed?** N/A

Specific Coursework N/A

**Supervised Experience (In-Program)** N/A

Member of Compact or Reciprocity Agreement? N/A

**Board/Agency Name** N/A

**Board/Agency Website N/A** 

**Statute/Regulation/Rule Citation** N/A

Must Out-of-State Program Graduate Hold License to Qualify? N/A

Must License Applicant Hold Private Certification? N/A

Additional Training (Not Required In-Program) N/A

**Experience (After Graduating/Outside of Program)** N/A

Exam(s) Required N/A

Notes N/A

Last Reviewed Date 5/5/2024

Feedback Form (Send us your questions, comments or information about your experience with licensure) https://forms.gle/zLB3dsG9j6qmx1pU6

State/Territory Nevada

**License Title** None found.

**Specialized Accreditation Required?** N/A

Specialized Accreditation Accepted as Meeting Educational Requirements? N/A

**Curriculum Comparison Needed?** N/A

Specific Coursework N/A

**Supervised Experience (In-Program)** N/A

Member of Compact or Reciprocity Agreement? N/A

**Board/Agency Name** N/A

**Board/Agency Website N/A** 

Statute/Regulation/Rule Citation N/A

Must Out-of-State Program Graduate Hold License to Qualify? N/A

**Must License Applicant Hold Private Certification?** N/A

Additional Training (Not Required In-Program) N/A

**Experience (After Graduating/Outside of Program)** N/A

Exam(s) Required N/A

Notes N/A

Last Reviewed Date 5/5/2024

Feedback Form (Send us your questions, comments or information about your experience with licensure) https://forms.gle/zLB3dsG9j6qmx1pU6

**State/Territory** New Hampshire

**License Title** None found.

**Specialized Accreditation Required?** N/A

Specialized Accreditation Accepted as Meeting Educational Requirements? N/A

**Curriculum Comparison Needed?** N/A

Specific Coursework N/A

**Supervised Experience (In-Program)** N/A

Member of Compact or Reciprocity Agreement? N/A

**Board/Agency Name** N/A

**Board/Agency Website N/A** 

**Statute/Regulation/Rule Citation** N/A

Must Out-of-State Program Graduate Hold License to Qualify? N/A

Must License Applicant Hold Private Certification? N/A

Additional Training (Not Required In-Program) N/A

**Experience (After Graduating/Outside of Program)** N/A

Exam(s) Required N/A

Notes N/A

Last Reviewed Date 5/6/2024

Feedback Form (Send us your questions, comments or information about your

**experience with licensure)** https://forms.gle/zLB3dsG9j6qmx1pU6

**State/Territory** New Jersey

**License Title** None found.

**Specialized Accreditation Required?** N/A

Specialized Accreditation Accepted as Meeting Educational Requirements? N/A

**Curriculum Comparison Needed?** N/A

Specific Coursework N/A

**Supervised Experience (In-Program)** N/A

Member of Compact or Reciprocity Agreement? N/A

**Board/Agency Name** N/A

**Board/Agency Website N/A** 

Statute/Regulation/Rule Citation N/A

Must Out-of-State Program Graduate Hold License to Qualify? N/A

**Must License Applicant Hold Private Certification?** N/A

Additional Training (Not Required In-Program) N/A

**Experience (After Graduating/Outside of Program)** N/A

Exam(s) Required N/A

Notes N/A

Last Reviewed Date 5/6/2024

Feedback Form (Send us your questions, comments or information about your

**State/Territory** New Mexico

License Title None found.

**Specialized Accreditation Required?** N/A

Specialized Accreditation Accepted as Meeting Educational Requirements? N/A

**Curriculum Comparison Needed?** N/A

Specific Coursework N/A

**Supervised Experience (In-Program)** N/A

Member of Compact or Reciprocity Agreement? N/A

**Board/Agency Name** N/A

Board/Agency Website N/A

Statute/Regulation/Rule Citation N/A

Must Out-of-State Program Graduate Hold License to Qualify? N/A

Must License Applicant Hold Private Certification? N/A

Additional Training (Not Required In-Program) N/A

**Experience (After Graduating/Outside of Program)** N/A

Exam(s) Required N/A

Notes N/A

Last Reviewed Date 5/6/2024

Feedback Form (Send us your questions, comments or information about your

experience with licensure) https://forms.gle/zLB3dsG9j6qmx1pU6

**State/Territory** New York

**License Title** None found.

**Specialized Accreditation Required?** N/A

Specialized Accreditation Accepted as Meeting Educational Requirements? N/A

**Curriculum Comparison Needed?** N/A

Specific Coursework N/A

**Supervised Experience (In-Program)** N/A

Member of Compact or Reciprocity Agreement? N/A

**Board/Agency Name** N/A

**Board/Agency Website N/A** 

Statute/Regulation/Rule Citation N/A

Must Out-of-State Program Graduate Hold License to Qualify? N/A

**Must License Applicant Hold Private Certification?** N/A

Additional Training (Not Required In-Program) N/A

**Experience (After Graduating/Outside of Program)** N/A

Exam(s) Required N/A

Notes N/A

Last Reviewed Date 5/6/2024

Feedback Form (Send us your questions, comments or information about your

**State/Territory** North Carolina

**License Title** None found.

**Specialized Accreditation Required?** N/A

Specialized Accreditation Accepted as Meeting Educational Requirements? N/A

**Curriculum Comparison Needed?** N/A

Specific Coursework N/A

**Supervised Experience (In-Program)** N/A

Member of Compact or Reciprocity Agreement? N/A

**Board/Agency Name** N/A

**Board/Agency Website N/A** 

Statute/Regulation/Rule Citation N/A

Must Out-of-State Program Graduate Hold License to Qualify? N/A

Must License Applicant Hold Private Certification? N/A

Additional Training (Not Required In-Program) N/A

**Experience (After Graduating/Outside of Program)** N/A

Exam(s) Required N/A

Notes N/A

Last Reviewed Date 5/6/2024

Feedback Form (Send us your questions, comments or information about your

**experience with licensure)** https://forms.gle/zLB3dsG9j6qmx1pU6

**State/Territory** North Dakota

**License Title** None found.

**Specialized Accreditation Required?** N/A

Specialized Accreditation Accepted as Meeting Educational Requirements? N/A

**Curriculum Comparison Needed?** N/A

Specific Coursework N/A

**Supervised Experience (In-Program)** N/A

Member of Compact or Reciprocity Agreement? N/A

**Board/Agency Name** N/A

**Board/Agency Website N/A** 

Statute/Regulation/Rule Citation N/A

Must Out-of-State Program Graduate Hold License to Qualify? N/A

**Must License Applicant Hold Private Certification?** N/A

Additional Training (Not Required In-Program) N/A

**Experience (After Graduating/Outside of Program)** N/A

Exam(s) Required N/A

Notes N/A

Last Reviewed Date 5/6/2024

Feedback Form (Send us your questions, comments or information about your

**State/Territory** Northern Mariana Islands

License Title N/A

**Specialized Accreditation Required?** N/A

Specialized Accreditation Accepted as Meeting Educational Requirements? N/A

**Curriculum Comparison Needed?** N/A

Specific Coursework N/A

**Supervised Experience (In-Program)** N/A

Member of Compact or Reciprocity Agreement? N/A

**Board/Agency Name** N/A

Board/Agency Website N/A

Statute/Regulation/Rule Citation N/A

Must Out-of-State Program Graduate Hold License to Qualify? N/A

Must License Applicant Hold Private Certification? N/A

Additional Training (Not Required In-Program) N/A

**Experience (After Graduating/Outside of Program)** N/A

Exam(s) Required N/A

Notes N/A

Last Reviewed Date 5/7/2024

Feedback Form (Send us your questions, comments or information about your

**experience with licensure)** https://forms.gle/zLB3dsG9j6qmx1pU6

State/Territory Ohio

**License Title** None found.

**Specialized Accreditation Required?** N/A

Specialized Accreditation Accepted as Meeting Educational Requirements? N/A

**Curriculum Comparison Needed?** N/A

Specific Coursework N/A

**Supervised Experience (In-Program)** N/A

Member of Compact or Reciprocity Agreement? N/A

**Board/Agency Name** N/A

**Board/Agency Website N/A** 

Statute/Regulation/Rule Citation N/A

Must Out-of-State Program Graduate Hold License to Qualify? N/A

**Must License Applicant Hold Private Certification?** N/A

Additional Training (Not Required In-Program) N/A

**Experience (After Graduating/Outside of Program)** N/A

Exam(s) Required N/A

Notes N/A

Last Reviewed Date 5/6/2024

Feedback Form (Send us your questions, comments or information about your

**State/Territory** Oklahoma

**License Title** None found.

**Specialized Accreditation Required?** N/A

Specialized Accreditation Accepted as Meeting Educational Requirements? N/A

**Curriculum Comparison Needed?** N/A

Specific Coursework N/A

**Supervised Experience (In-Program)** N/A

Member of Compact or Reciprocity Agreement? N/A

**Board/Agency Name** N/A

**Board/Agency Website N/A** 

**Statute/Regulation/Rule Citation** N/A

Must Out-of-State Program Graduate Hold License to Qualify? N/A

Must License Applicant Hold Private Certification? N/A

Additional Training (Not Required In-Program) N/A

**Experience (After Graduating/Outside of Program)** N/A

Exam(s) Required N/A

Notes N/A

Last Reviewed Date 5/6/2024

Feedback Form (Send us your questions, comments or information about your

**experience with licensure)** https://forms.gle/zLB3dsG9j6qmx1pU6

**State/Territory** Oregon

**License Title** None found.

**Specialized Accreditation Required?** N/A

Specialized Accreditation Accepted as Meeting Educational Requirements? N/A

**Curriculum Comparison Needed?** N/A

Specific Coursework N/A

**Supervised Experience (In-Program)** N/A

Member of Compact or Reciprocity Agreement? N/A

**Board/Agency Name** N/A

**Board/Agency Website N/A** 

Statute/Regulation/Rule Citation N/A

Must Out-of-State Program Graduate Hold License to Qualify? N/A

**Must License Applicant Hold Private Certification?** N/A

Additional Training (Not Required In-Program) N/A

**Experience (After Graduating/Outside of Program)** N/A

Exam(s) Required N/A

Notes N/A

Last Reviewed Date 5/6/2024

Feedback Form (Send us your questions, comments or information about your

**State/Territory** Pennsylvania

**License Title** None found.

**Specialized Accreditation Required?** N/A

Specialized Accreditation Accepted as Meeting Educational Requirements? N/A

**Curriculum Comparison Needed?** N/A

Specific Coursework N/A

**Supervised Experience (In-Program)** N/A

Member of Compact or Reciprocity Agreement? N/A

**Board/Agency Name** N/A

**Board/Agency Website N/A** 

**Statute/Regulation/Rule Citation** N/A

Must Out-of-State Program Graduate Hold License to Qualify? N/A

Must License Applicant Hold Private Certification? N/A

Additional Training (Not Required In-Program) N/A

**Experience (After Graduating/Outside of Program)** N/A

Exam(s) Required N/A

Notes N/A

Last Reviewed Date 5/6/2024

Feedback Form (Send us your questions, comments or information about your

experience with licensure) https://forms.gle/zLB3dsG9j6qmx1pU6

**State/Territory** Puerto Rico

License Title N/A

**Specialized Accreditation Required?** N/A

Specialized Accreditation Accepted as Meeting Educational Requirements? N/A

**Curriculum Comparison Needed?** N/A

Specific Coursework N/A

**Supervised Experience (In-Program)** N/A

Member of Compact or Reciprocity Agreement? N/A

**Board/Agency Name** N/A

**Board/Agency Website N/A** 

Statute/Regulation/Rule Citation N/A

Must Out-of-State Program Graduate Hold License to Qualify? N/A

**Must License Applicant Hold Private Certification?** N/A

Additional Training (Not Required In-Program) N/A

**Experience (After Graduating/Outside of Program)** N/A

Exam(s) Required N/A

Notes N/A

Last Reviewed Date 5/7/2024

Feedback Form (Send us your questions, comments or information about your

State/Territory Republic of Palau

License Title N/A

**Specialized Accreditation Required?** N/A

Specialized Accreditation Accepted as Meeting Educational Requirements? N/A

**Curriculum Comparison Needed?** N/A

Specific Coursework N/A

**Supervised Experience (In-Program)** N/A

Member of Compact or Reciprocity Agreement?  $N\!/\!A$ 

**Board/Agency Name** N/A

**Board/Agency Website N/A** 

Statute/Regulation/Rule Citation N/A

Must Out-of-State Program Graduate Hold License to Qualify? N/A

**Must License Applicant Hold Private Certification?** N/A

Additional Training (Not Required In-Program) N/A

**Experience (After Graduating/Outside of Program)** N/A

Exam(s) Required N/A

Notes N/A

Last Reviewed Date 5/13/2024

Feedback Form (Send us your questions, comments or information about your

experience with licensure) https://forms.gle/zLB3dsG9j6qmx1pU6

**State/Territory** Republic of the Marshall Islands

License Title N/A

**Specialized Accreditation Required?** N/A

Specialized Accreditation Accepted as Meeting Educational Requirements? N/A

**Curriculum Comparison Needed?** N/A

Specific Coursework N/A

**Supervised Experience (In-Program)** N/A

Member of Compact or Reciprocity Agreement? N/A

**Board/Agency Name** N/A

**Board/Agency Website N/A** 

Statute/Regulation/Rule Citation N/A

Must Out-of-State Program Graduate Hold License to Qualify? N/A

**Must License Applicant Hold Private Certification?** N/A

Additional Training (Not Required In-Program) N/A

**Experience (After Graduating/Outside of Program)** N/A

Exam(s) Required N/A

Notes N/A

Last Reviewed Date 5/13/2024

Feedback Form (Send us your questions, comments or information about your

**State/Territory** Rhode Island

**License Title** None found.

**Specialized Accreditation Required?** N/A

Specialized Accreditation Accepted as Meeting Educational Requirements? N/A

**Curriculum Comparison Needed?** N/A

Specific Coursework N/A

**Supervised Experience (In-Program)** N/A

Member of Compact or Reciprocity Agreement? N/A

**Board/Agency Name** N/A

**Board/Agency Website N/A** 

Statute/Regulation/Rule Citation N/A

Must Out-of-State Program Graduate Hold License to Qualify? N/A

Must License Applicant Hold Private Certification? N/A

Additional Training (Not Required In-Program) N/A

**Experience (After Graduating/Outside of Program)** N/A

Exam(s) Required N/A

Notes N/A

Last Reviewed Date 5/6/2024

Feedback Form (Send us your questions, comments or information about your

experience with licensure) https://forms.gle/zLB3dsG9j6qmx1pU6

**State/Territory** South Carolina

**License Title** None found.

**Specialized Accreditation Required?** N/A

Specialized Accreditation Accepted as Meeting Educational Requirements? N/A

**Curriculum Comparison Needed?** N/A

Specific Coursework N/A

**Supervised Experience (In-Program)** N/A

Member of Compact or Reciprocity Agreement? N/A

**Board/Agency Name** N/A

**Board/Agency Website N/A** 

Statute/Regulation/Rule Citation N/A

Must Out-of-State Program Graduate Hold License to Qualify? N/A

**Must License Applicant Hold Private Certification?** N/A

Additional Training (Not Required In-Program) N/A

**Experience (After Graduating/Outside of Program)** N/A

Exam(s) Required N/A

Notes N/A

Last Reviewed Date 5/6/2024

Feedback Form (Send us your questions, comments or information about your

**State/Territory** South Dakota

**License Title** None found.

**Specialized Accreditation Required?** N/A

Specialized Accreditation Accepted as Meeting Educational Requirements? N/A

**Curriculum Comparison Needed?** N/A

Specific Coursework N/A

**Supervised Experience (In-Program)** N/A

Member of Compact or Reciprocity Agreement? N/A

**Board/Agency Name** N/A

**Board/Agency Website N/A** 

Statute/Regulation/Rule Citation N/A

Must Out-of-State Program Graduate Hold License to Qualify? N/A

Must License Applicant Hold Private Certification? N/A

Additional Training (Not Required In-Program) N/A

**Experience (After Graduating/Outside of Program)** N/A

Exam(s) Required N/A

Notes N/A

Last Reviewed Date 5/6/2024

Feedback Form (Send us your questions, comments or information about your

experience with licensure) https://forms.gle/zLB3dsG9j6qmx1pU6

**State/Territory** Tennessee

**License Title** None found.

**Specialized Accreditation Required?** N/A

Specialized Accreditation Accepted as Meeting Educational Requirements? N/A

**Curriculum Comparison Needed?** N/A

Specific Coursework N/A

**Supervised Experience (In-Program)** N/A

Member of Compact or Reciprocity Agreement? N/A

**Board/Agency Name** N/A

**Board/Agency Website N/A** 

Statute/Regulation/Rule Citation N/A

Must Out-of-State Program Graduate Hold License to Qualify? N/A

**Must License Applicant Hold Private Certification?** N/A

Additional Training (Not Required In-Program) N/A

**Experience (After Graduating/Outside of Program)** N/A

Exam(s) Required N/A

Notes N/A

Last Reviewed Date 5/6/2024

Feedback Form (Send us your questions, comments or information about your

**State/Territory** Texas

**License Title** None found.

**Specialized Accreditation Required?** N/A

Specialized Accreditation Accepted as Meeting Educational Requirements? N/A

**Curriculum Comparison Needed?** N/A

Specific Coursework N/A

**Supervised Experience (In-Program)** N/A

Member of Compact or Reciprocity Agreement? N/A

**Board/Agency Name** N/A

**Board/Agency Website N/A** 

Statute/Regulation/Rule Citation N/A

Must Out-of-State Program Graduate Hold License to Qualify? N/A

Must License Applicant Hold Private Certification? N/A

Additional Training (Not Required In-Program) N/A

**Experience (After Graduating/Outside of Program)** N/A

Exam(s) Required N/A

Notes N/A

Last Reviewed Date 5/6/2024

Feedback Form (Send us your questions, comments or information about your

experience with licensure) https://forms.gle/zLB3dsG9j6qmx1pU6

State/Territory U.S. Virgin Islands

License Title N/A

**Specialized Accreditation Required?** N/A

Specialized Accreditation Accepted as Meeting Educational Requirements? N/A

**Curriculum Comparison Needed?** N/A

Specific Coursework N/A

**Supervised Experience (In-Program)** N/A

Member of Compact or Reciprocity Agreement? N/A

**Board/Agency Name** N/A

**Board/Agency Website N/A** 

Statute/Regulation/Rule Citation N/A

Must Out-of-State Program Graduate Hold License to Qualify? N/A

**Must License Applicant Hold Private Certification?** N/A

Additional Training (Not Required In-Program) N/A

**Experience (After Graduating/Outside of Program)** N/A

Exam(s) Required N/A

Notes N/A

Last Reviewed Date 5/7/2024

Feedback Form (Send us your questions, comments or information about your

**State/Territory** Utah

**License Title** None found.

**Specialized Accreditation Required?** N/A

Specialized Accreditation Accepted as Meeting Educational Requirements? N/A

**Curriculum Comparison Needed?** N/A

Specific Coursework N/A

**Supervised Experience (In-Program)** N/A

Member of Compact or Reciprocity Agreement? N/A

**Board/Agency Name** N/A

**Board/Agency Website N/A** 

Statute/Regulation/Rule Citation N/A

Must Out-of-State Program Graduate Hold License to Qualify? N/A

**Must License Applicant Hold Private Certification?** N/A

Additional Training (Not Required In-Program) N/A

**Experience (After Graduating/Outside of Program)** N/A

Exam(s) Required N/A

Notes N/A

Last Reviewed Date 5/6/2024

Feedback Form (Send us your questions, comments or information about your experience with licensure) https://forms.gle/zLB3dsG9j6qmx1pU6

**State/Territory** Vermont

**License Title** None found.

**Specialized Accreditation Required?** N/A

Specialized Accreditation Accepted as Meeting Educational Requirements? N/A

**Curriculum Comparison Needed?** N/A

Specific Coursework N/A

**Supervised Experience (In-Program)** N/A

Member of Compact or Reciprocity Agreement? N/A

**Board/Agency Name** N/A

**Board/Agency Website N/A** 

Statute/Regulation/Rule Citation N/A

Must Out-of-State Program Graduate Hold License to Qualify? N/A

**Must License Applicant Hold Private Certification?** N/A

Additional Training (Not Required In-Program) N/A

**Experience (After Graduating/Outside of Program)** N/A

Exam(s) Required N/A

Notes N/A

Last Reviewed Date 5/6/2024

Feedback Form (Send us your questions, comments or information about your experience with licensure) https://forms.gle/zLB3dsG9j6qmx1pU6

**State/Territory** Virginia

**License Title** None found.

**Specialized Accreditation Required?** N/A

Specialized Accreditation Accepted as Meeting Educational Requirements? N/A

**Curriculum Comparison Needed?** N/A

Specific Coursework N/A

**Supervised Experience (In-Program)** N/A

Member of Compact or Reciprocity Agreement? N/A

**Board/Agency Name** N/A

**Board/Agency Website N/A** 

**Statute/Regulation/Rule Citation** N/A

Must Out-of-State Program Graduate Hold License to Qualify? N/A

Must License Applicant Hold Private Certification? N/A

Additional Training (Not Required In-Program) N/A

Experience (After Graduating/Outside of Program) N/A

Exam(s) Required N/A

Notes N/A

Last Reviewed Date 5/6/2024

Feedback Form (Send us your questions, comments or information about your experience with licensure) https://forms.gle/zLB3dsG9j6qmx1pU6

### **State/Territory** Washington

License Title Medical assistant-certified

# Specialized Accreditation Required? No.

246-827-0200. Medical assistant-certified--Training and examination.

An applicant for a medical assistant-certified credential must meet [one of] the following requirements:

- (1) Successful completion of one of the following medical assistant training programs:
- (a) Postsecondary school or college program accredited by the Accrediting Bureau of Health Education Schools (ABHES) or the Commission of Accreditation of Allied Health Education Programs (CAAHEP);
- (b) Postsecondary school or college accredited by a regional or national accrediting organization recognized by the U.S. Department of Education, which includes a minimum of 720 clock hours of training in medical assisting skills, including a clinical externship of no less than 160 hours;
- (c) A registered apprenticeship program administered by a department of the state of Washington unless the secretary determines that the apprenticeship program training or experience is not substantially equivalent to the standards of this state. The apprenticeship program shall ensure a participant who successfully completes the program is eligible to take one or more examinations [required for certification by the State];
- (d) The secretary may approve an applicant who submits documentation that they completed postsecondary education with a minimum of 720 clock hours of training in medical assisting skills. The documentation must include proof of training in all of the duties identified in RCW 18.360.050(1) [set forth below] and a clinical externship of no less than 160 hours; or
- (e) The secretary may approve an applicant who submits documentation that they completed a career and technical education program approved by the office of the superintendent of public instruction with a minimum of 720 clock hours of training in medical assisting skills. The documentation must include proof of training in all of the duties identified in RCW 18.360.050(1) [set forth below] and a clinical externship of no less than 160 hours.

WAC 246-827-0200.

Specialized Accreditation Accepted as Meeting Educational Requirements?  $N_{0}.$  Curriculum Comparison Needed?  $Ye_{S}.$ 

**Specific Coursework** For graduates of CAAHEP or ABHES accredited programs, must meet external requirements (i.e. specialized accreditation, certification, or exam).

For all others, must meet one of the following requirements:

- (b) Postsecondary school or college accredited by a regional or national accrediting organization recognized by the U.S. Department of Education, which includes a minimum of 720 clock hours of training in medical assisting skills, including a clinical externship of no less than 160 hours;
- (c) A registered apprenticeship program administered by a department of the state of Washington unless the secretary determines that the apprenticeship program training or experience is not substantially equivalent to the standards of this state. The apprenticeship program shall ensure a participant who successfully completes the program is eligible to take one or more examinations [required for certification by the

# State];

- (d) The secretary may approve an applicant who submits documentation that they completed postsecondary education with a minimum of 720 clock hours of training in medical assisting skills. The documentation must include proof of training in all of the duties identified in RCW 18.360.050(1) [set forth below] and a clinical externship of no less than 160 hours; or
- (e) The secretary may approve an applicant who submits documentation that they completed a career and technical education program approved by the office of the superintendent of public instruction with a minimum of 720 clock hours of training in medical assisting skills. The documentation must include proof of training in all of the duties identified in RCW 18.360.050(1) [set forth below] and a clinical externship of no less than 160 hours.

WAC 246-827-0200.

### RCW 18.360.050 (1) Authorized duties, states:

- (1) A medical assistant-certified may perform the following duties delegated by, and under the supervision of, a health care practitioner:
- (a) Fundamental procedures:
- (i) Wrapping items for autoclaving;
- (ii) Procedures for sterilizing equipment and instruments;
- (iii) Disposing of biohazardous materials; and
- (iv) Practicing standard precautions.
- (b) Clinical procedures:
- (i) Performing aseptic procedures in a setting other than a hospital licensed under chapter 70.41 RCW;
- (ii) Preparing of and assisting in sterile procedures in a setting other than a hospital under chapter 70.41 RCW;
- (iii) Taking vital signs;
- (iv) Preparing patients for examination;
- (v) Capillary blood withdrawal, venipuncture, and intradermal, subcutaneous, and intramuscular injections; and
- (vi) Observing and reporting patients' signs or symptoms.
- (c) Specimen collection:
- (i) Capillary puncture and venipuncture;
- (ii) Obtaining specimens for microbiological testing; and
- (iii) Instructing patients in proper technique to collect urine and fecal specimens.
- (d) Diagnostic testing:
- (i) Electrocardiography;
- (ii) Respiratory testing; and
- (iii)(A) Tests waived under the federal clinical laboratory improvement amendments program on July 1, 2013. The department shall periodically update the tests authorized under this subsection (1)(d) based on changes made by the federal clinical laboratory improvement amendments program; and
- (B) Moderate complexity tests if the medical assistant-certified meets standards for personnel qualifications and responsibilities in compliance with federal regulation for nonwaived testing.
- (e) Patient care:
- (i) Telephone and in-person screening limited to intake and gathering of information

without requiring the exercise of judgment based on clinical knowledge;

- (ii) Obtaining vital signs;
- (iii) Obtaining and recording patient history;
- (iv) Preparing and maintaining examination and treatment areas;
- (v) Preparing patients for, and assisting with, routine and specialty examinations, procedures, treatments, and minor office surgeries;
- (vi) Maintaining medication and immunization records; and
- (vii) Screening and following up on test results as directed by a health care practitioner.
- (f)(i) Administering medications. A medical assistant-certified may only administer medications if the drugs are:
- (A) Administered only by unit or single dosage, or by a dosage calculated and verified by a health care practitioner. For purposes of this section, a combination or multidose vaccine shall be considered a unit dose;
- (B) Limited to legend drugs, vaccines, and Schedule III-V controlled substances as authorized by a health care practitioner under the scope of his or her license and consistent with rules adopted by the [Washington Secretary of the Department of Health]...; and
- (C) Administered pursuant to a written order from a health care practitioner.
- (ii) A medical assistant-certified may not administer experimental drugs or chemotherapy agents...
- (iii) A medical assistant-certified may administer intramuscular injections for the purposes of treating known or suspected syphilis infection without immediate supervision if a health care practitioner is providing supervision through interactive audio or video telemedicine technology...
- (g) Intravenous injections. A medical assistant-certified may establish intravenous lines for diagnostic or therapeutic purposes, without administering medications, under the supervision of a health care practitioner, and administer intravenous injections for diagnostic or therapeutic agents under the direct visual supervision of a health care practitioner...
- (h) Urethral catheterization when appropriately trained.

Wash. Rev. Code Ann. § 18.360.050 (West)

**Supervised Experience (In-Program)** For graduates of CAAHEP or ABHES accredited programs, must meet external requirements (i.e. specialized accreditation, certification, or exam).

For all others, must meet one of the following requirements:

- (b) Postsecondary school or college accredited by a regional or national accrediting organization recognized by the U.S. Department of Education, which includes a minimum of 720 clock hours of training in medical assisting skills, including a clinical externship of no less than 160 hours;
- (c) A registered apprenticeship program administered by a department of the state of Washington unless the secretary determines that the apprenticeship program training or experience is not substantially equivalent to the standards of this state. The apprenticeship program shall ensure a participant who successfully completes the program is eligible to take one or more examinations [required for certification by the State];
- (d) The secretary may approve an applicant who submits documentation that they completed postsecondary education with a minimum of 720 clock hours of training in

- medical assisting skills. The documentation must include proof of training in all of the duties identified in RCW 18.360.050(1) [set forth below] and a clinical externship of no less than 160 hours; or
- (e) The secretary may approve an applicant who submits documentation that they completed a career and technical education program approved by the office of the superintendent of public instruction with a minimum of 720 clock hours of training in medical assisting skills. The documentation must include proof of training in all of the duties identified in RCW 18.360.050(1) and a clinical externship of no less than 160 hours.

WAC 246-827-0200.

# RCW 18.360.050 (1) Authorized duties, states:

- "(1) A medical assistant-certified may perform the following duties delegated by, and under the supervision of, a health care practitioner:
- (a) Fundamental procedures:
- (i) Wrapping items for autoclaving;
- (ii) Procedures for sterilizing equipment and instruments;
- (iii) Disposing of biohazardous materials; and
- (iv) Practicing standard precautions.
- (b) Clinical procedures:
- (i) Performing aseptic procedures in a setting other than a hospital licensed under chapter 70.41 RCW;
- (ii) Preparing of and assisting in sterile procedures in a setting other than a hospital under chapter 70.41 RCW;
- (iii) Taking vital signs;
- (iv) Preparing patients for examination;
- (v) Capillary blood withdrawal, venipuncture, and intradermal, subcutaneous, and intramuscular injections; and
- (vi) Observing and reporting patients' signs or symptoms.
- (c) Specimen collection:
- (i) Capillary puncture and venipuncture;
- (ii) Obtaining specimens for microbiological testing; and
- (iii) Instructing patients in proper technique to collect urine and fecal specimens.
- (d) Diagnostic testing:
- (i) Electrocardiography;
- (ii) Respiratory testing; and
- (iii)(A) Tests waived under the federal clinical laboratory improvement amendments program on July 1, 2013. The department shall periodically update the tests authorized under this subsection (1)(d) based on changes made by the federal clinical laboratory improvement amendments program; and
- (B) Moderate complexity tests if the medical assistant-certified meets standards for personnel qualifications and responsibilities in compliance with federal regulation for nonwaived testing.
- (e) Patient care:
- (i) Telephone and in-person screening limited to intake and gathering of information without requiring the exercise of judgment based on clinical knowledge;
- (ii) Obtaining vital signs;
- (iii) Obtaining and recording patient history;

- (iv) Preparing and maintaining examination and treatment areas;
- (v) Preparing patients for, and assisting with, routine and specialty examinations, procedures, treatments, and minor office surgeries;
- (vi) Maintaining medication and immunization records; and
- (vii) Screening and following up on test results as directed by a health care practitioner.
- (f)(i) Administering medications. A medical assistant-certified may only administer medications if the drugs are:
- (A) Administered only by unit or single dosage, or by a dosage calculated and verified by a health care practitioner. For purposes of this section, a combination or multidose vaccine shall be considered a unit dose;
- (B) Limited to legend drugs, vaccines, and Schedule III-V controlled substances as authorized by a health care practitioner under the scope of his or her license and consistent with rules adopted by the [Washington Secretary of the Department of Health]...; and
- (C) Administered pursuant to a written order from a health care practitioner.
- (ii) A medical assistant-certified may not administer experimental drugs or chemotherapy agents...
- (iii) A medical assistant-certified may administer intramuscular injections for the purposes of treating known or suspected syphilis infection without immediate supervision if a health care practitioner is providing supervision through interactive audio or video telemedicine technology...
- (g) Intravenous injections. A medical assistant-certified may establish intravenous lines for diagnostic or therapeutic purposes, without administering medications, under the supervision of a health care practitioner, and administer intravenous injections for diagnostic or therapeutic agents under the direct visual supervision of a health care practitioner...
- (h) Urethral catheterization when appropriately trained."

Wash. Rev. Code Ann. § 18.360.050 (West)

Member of Compact or Reciprocity Agreement? None found

**Board/Agency Name** Washington State Department of Health

**Board/Agency Website** https://doh.wa.gov/licenses-permits-and-certificates/professions-new-renew-or-update/medical-assistant

Statute/Regulation/Rule Citation Wash. Rev. Code Ann. § 18.360.020 (West)

Wash. Rev. Code Ann. § 18.122.030

Wash. Admin. Code 246-827-0010

Wash. Admin. Code 246-827-0120

Wash. Admin. Code 246-827-0140

Wash. Admin. Code 246-827-0200

Must Out-of-State Program Graduate Hold License to Qualify? No.

Must License Applicant Hold Private Certification? No.

Additional Training (Not Required In-Program) The medical assistant shall have knowledge and understanding of the laws and rules regulating medical assistants, including chapter 18.130 RCW, Uniform Disciplinary Act. WAC 246-827-0120 Experience (After Graduating/Outside of Program) None found for graduates of CAAHEP or ABHES accredited programs, who must meet external requirements (i.e. specialized accreditation, certification, or exam).

For all others, must meet one of the following requirements:

- (b) Postsecondary school or college accredited by a regional or national accrediting organization recognized by the U.S. Department of Education, which includes a minimum of 720 clock hours of training in medical assisting skills, including a clinical externship of no less than 160 hours;
- (c) A registered apprenticeship program administered by a department of the state of Washington unless the secretary determines that the apprenticeship program training or experience is not substantially equivalent to the standards of this state. The apprenticeship program shall ensure a participant who successfully completes the program is eligible to take one or more examinations [required for certification by the State];
- (d) The secretary may approve an applicant who submits documentation that they completed postsecondary education with a minimum of 720 clock hours of training in medical assisting skills. The documentation must include proof of training in all of the duties identified in RCW 18.360.050(1) [set forth below] and a clinical externship of no less than 160 hours; or
- (e) The secretary may approve an applicant who submits documentation that they completed a career and technical education program approved by the office of the superintendent of public instruction with a minimum of 720 clock hours of training in medical assisting skills. The documentation must include proof of training in all of the duties identified in RCW 18.360.050(1) [set forth below] and a clinical externship of no less than 160 hours.

WAC 246-827-0200.

## RCW 18.360.050 (1) Authorized duties, states:

- "(1) A medical assistant-certified may perform the following duties delegated by, and under the supervision of, a health care practitioner:
- (a) Fundamental procedures:
- (i) Wrapping items for autoclaving;
- (ii) Procedures for sterilizing equipment and instruments;
- (iii) Disposing of biohazardous materials; and
- (iv) Practicing standard precautions.
- (b) Clinical procedures:
- (i) Performing aseptic procedures in a setting other than a hospital licensed under chapter 70.41 RCW;
- (ii) Preparing of and assisting in sterile procedures in a setting other than a hospital under chapter 70.41 RCW;
- (iii) Taking vital signs;
- (iv) Preparing patients for examination;
- (v) Capillary blood withdrawal, venipuncture, and intradermal, subcutaneous, and intramuscular injections; and
- (vi) Observing and reporting patients' signs or symptoms.
- (c) Specimen collection:
- (i) Capillary puncture and venipuncture;
- (ii) Obtaining specimens for microbiological testing; and
- (iii) Instructing patients in proper technique to collect urine and fecal specimens.
- (d) Diagnostic testing:
- (i) Electrocardiography;
- (ii) Respiratory testing; and

- (iii)(A) Tests waived under the federal clinical laboratory improvement amendments program on July 1, 2013. The department shall periodically update the tests authorized under this subsection (1)(d) based on changes made by the federal clinical laboratory improvement amendments program; and
- (B) Moderate complexity tests if the medical assistant-certified meets standards for personnel qualifications and responsibilities in compliance with federal regulation for nonwaived testing.
- (e) Patient care:
- (i) Telephone and in-person screening limited to intake and gathering of information without requiring the exercise of judgment based on clinical knowledge;
- (ii) Obtaining vital signs;
- (iii) Obtaining and recording patient history;
- (iv) Preparing and maintaining examination and treatment areas;
- (v) Preparing patients for, and assisting with, routine and specialty examinations, procedures, treatments, and minor office surgeries;
- (vi) Maintaining medication and immunization records; and
- (vii) Screening and following up on test results as directed by a health care practitioner.
- (f)(i) Administering medications. A medical assistant-certified may only administer medications if the drugs are:
- (A) Administered only by unit or single dosage, or by a dosage calculated and verified by a health care practitioner. For purposes of this section, a combination or multidose vaccine shall be considered a unit dose;
- (B) Limited to legend drugs, vaccines, and Schedule III-V controlled substances as authorized by a health care practitioner under the scope of his or her license and consistent with rules adopted by the [Washington Secretary of the Department of Health]...; and
- (C) Administered pursuant to a written order from a health care practitioner.
- (ii) A medical assistant-certified may not administer experimental drugs or chemotherapy agents...
- (iii) A medical assistant-certified may administer intramuscular injections for the purposes of treating known or suspected syphilis infection without immediate supervision if a health care practitioner is providing supervision through interactive audio or video telemedicine technology in accordance with RCW 18.360.010(11)(c)(ii).
- (g) Intravenous injections. A medical assistant-certified may establish intravenous lines for diagnostic or therapeutic purposes, without administering medications, under the supervision of a health care practitioner, and administer intravenous injections for diagnostic or therapeutic agents under the direct visual supervision of a health care practitioner...
- (h) Urethral catheterization when appropriately trained."

Wash. Rev. Code Ann. § 18.360.050 (West)

**Exam(s) Required** Yes, Certified Medical Assistant Exam through the American Association of Medical Assistants (AAMA); Registered Medical Assistant Exam through American Medical Technologists (AMT); Clinical Medical Assistant Exam through the National Health Career Association (NHA); National Certified Medical Assistant Exam through the National Center for Competency Testing (NCCT), or Clinical Medical Assistant Certification Examination through the American Medical Certification Association (AMCA).

WAC 246-827-0200; see also https://doh.wa.gov/licenses-permits-and-certificates/professions-new-renew-or-update/medical-assistant/license-requirements

- \* Exams must be passed within five years prior to submission of an initial application for the medical assistant-certified credential.
- \*\* An applicant who meets all credentialing requirements except passage one of the exams listed above qualifies for the medical assistant interim certification. A person holding an interim certification possesses the full scope of practice of the medical assistant-certified. The interim certification expires upon passage of one of the examinations listed above or after one year, whichever occurs first, and cannot be renewed.

WAC 246-827-0220(2)

**Notes** A person employed by a health care practitioner or facility is not practicing as a medical assistant as defined [by Washington regulations] if the person only performs the following tasks as part of a telemedicine visit:

- (a) Maintaining medication and immunization records;
- (b) Obtaining and recording patient history;
- (c) Reception;
- (d) Scheduling;
- (e) Screening limited to intake and gathering of information; or
- (f) Similar administrative tasks.

WAC 246-827-0140

Last Reviewed Date 5/6/2024

Feedback Form (Send us your questions, comments or information about your experience with licensure) https://forms.gle/zLB3dsG9j6gmx1pU6

**State/Territory** Washington

License Title Medical assistant-registered

**Specialized Accreditation Required?** No.

Specialized Accreditation Accepted as Meeting Educational Requirements?  $N_{0}.$  Curriculum Comparison Needed?  $Ye_{S}.$ 

**Specific Coursework** 246-827-0300. Medical assistant-registered--Application. An applicant registering for a medical assistant-registered credential shall submit the following:...

- (2)(a) Proof of completion of high school education or its equivalent; or
- (b) Proof of enrollment in a health career training or career and technical education program. The training program must comply with all applicable federal and state regulations related to minors in the workforce.
- (3) An endorsement signed by a health care practitioner... WAC 246-827-0300.

246-827-0310. Medical assistant-registered-Endorsement.

(1) A medical assistant-registered shall have a current attestation that is filed with the department and signed by a health care practitioner endorsing him or her to perform specific tasks authorized in RCW 18.360.050(4) [set forth below]. WAC 246-827-0310.

### 18.360.050(4) (Authorized duties) states:

- (4) A medical assistant-registered may perform the following duties delegated by, and under the supervision of, a health care practitioner:
- (a) Fundamental procedures:
- (i) Wrapping items for autoclaving;
- (ii) Procedures for sterilizing equipment and instruments;
- (iii) Disposing of biohazardous materials; and
- (iv) Practicing standard precautions.
- (b) Clinical procedures:
- (i) Preparing for sterile procedures;
- (ii) Taking vital signs;
- (iii) Preparing patients for examination; and
- (iv) Observing and reporting patients' signs or symptoms.
- (c) Specimen collection:
- (i) Obtaining specimens for microbiological testing; and
- (ii) Instructing patients in proper technique to collect urine and fecal specimens.
- (d) Patient care:
- (i) Telephone and in-person screening limited to intake and gathering of information without requiring the exercise of judgment based on clinical knowledge;
- (ii) Obtaining vital signs;
- (iii) Obtaining and recording patient history;
- (iv) Preparing and maintaining examination and treatment areas;
- (v) Preparing patients for, and assisting with, routine and specialty examinations, procedures, treatments, and minor office surgeries, including those with minimal sedation...

- (vi) Maintaining medication and immunization records; and
- (vii) Screening and following up on test results as directed by a health care practitioner.
- (e) Diagnostic testing and electrocardiography.
- (f)(i) Tests waived under the federal clinical laboratory improvement amendments program on July 1, 2013. The department shall periodically update the tests authorized under subsection (1)(d) of this section based on changes made by the federal clinical laboratory improvement amendments program.
- (ii) Moderate complexity tests if the medical assistant-registered meets standards for personnel qualifications and responsibilities in compliance with federal regulation for nonwaived testing.
- (g) Administering eye drops, topical ointments, and vaccines, including combination or multidose vaccines.
- (h) Urethral catheterization when appropriately trained.
- (i) Administering medications:
- (i) A medical assistant-registered may only administer medications if the drugs are:
- (A) Administered only by unit or single dosage, or by a dosage calculated and verified by a health care practitioner. For purposes of this section, a combination or multidose vaccine shall be considered a unit dose;
- (B) Limited to legend drugs, vaccines, and Schedule III through V controlled substances as authorized by a health care practitioner under the scope of his or her license and consistent with rules adopted by the [Washington Secretary of the Department of Health]; and
- (C) Administered pursuant to a written order from a health care practitioner.
- (ii) A medical assistant-registered may only administer medication for intramuscular injections. A medical assistant-registered may not administer experimental drugs or chemotherapy agents...
- (j)(i) Intramuscular injections. A medical assistant-registered may administer intramuscular injections for diagnostic or therapeutic agents under the immediate supervision of a health care practitioner if the medical assistant-registered meets minimum standards established by the secretary in rule.
- (ii) A medical assistant-registered may administer intramuscular injections for the purposes of treating known or suspected syphilis infection without immediate supervision if a health care practitioner is providing supervision through interactive audio or video telemedicine technology...

Wash. Rev. Code Ann. § 18.360.050 (West)

Supervised Experience (In-Program) None found.

Member of Compact or Reciprocity Agreement? None found

**Board/Agency Name** Washington State Department of Health

**Board/Agency Website** https://doh.wa.gov/licenses-permits-and-certificates/professions-new-renew-or-update/medical-assistant

Statute/Regulation/Rule Citation Wash. Rev. Code Ann. § 18.360.020 (West)

Wash. Rev. Code Ann. § 18.122.030

Wash. Admin. Code 246-827-0010

Wash. Admin. Code 246-827-0120

Wash. Admin. Code 246-827-0140

Wash. Admin. Code 246-827-0140 Wash. Admin. Code 246-827-0300

Wash. Admin. Code 246-827-0310

Must Out-of-State Program Graduate Hold License to Qualify? No.

Must License Applicant Hold Private Certification? No.

Additional Training (Not Required In-Program) The medical assistant shall have knowledge and understanding of the laws and rules regulating medical assistants, including chapter 18.130 RCW, Uniform Disciplinary Act. WAC 246-827-0120 Experience (After Graduating/Outside of Program) None found.

Exam(s) Required None found.

**Notes** A person employed by a health care practitioner or facility is not practicing as a medical assistant as defined [by Washington regulations] if the person only performs the following tasks as part of a telemedicine visit:

- (a) Maintaining medication and immunization records;
- (b) Obtaining and recording patient history;
- (c) Reception;
- (d) Scheduling;
- (e) Screening limited to intake and gathering of information; or
- (f) Similar administrative tasks.

WAC 246-827-0140

246-827-0310. Medical assistant-registered-Endorsement.

- ...(2) The medical assistant-registered shall only perform the tasks listed in his or her current attestation of endorsement filed with the department.
- (3) An endorsement is valid as long as the medical assistant-registered is continuously employed by the same health care practitioner, clinic or group practice.
- (4) A medical assistant-registered shall submit a new attestation of endorsement to the department within thirty days if the tasks listed on the current attestation change. WAC 246-827-0310.

246-827-0320. Medical assistant-registered-Credential termination.

The medical assistant-registered credential terminates when the medical assistant-registered separates employment with the endorsing health care practitioner, clinic or group practice. The medical assistant-registered shall notify the department within thirty days of separation of employment. A person shall submit a new initial medical assistant-registered application as described in WAC 246-827-0300 upon new or additional employment.

WAC 246-827-0320

Last Reviewed Date 5/7/2024

Feedback Form (Send us your questions, comments or information about your experience with licensure) https://forms.gle/zLB3dsG9j6gmx1pU6

**State/Territory** West Virginia

**License Title** None found.

**Specialized Accreditation Required?** N/A

Specialized Accreditation Accepted as Meeting Educational Requirements? N/A

**Curriculum Comparison Needed?** N/A

Specific Coursework N/A

**Supervised Experience (In-Program)** N/A

Member of Compact or Reciprocity Agreement? N/A

**Board/Agency Name** N/A

**Board/Agency Website N/A** 

**Statute/Regulation/Rule Citation** N/A

Must Out-of-State Program Graduate Hold License to Qualify? N/A

Must License Applicant Hold Private Certification? N/A

Additional Training (Not Required In-Program) N/A

Experience (After Graduating/Outside of Program) N/A

Exam(s) Required N/A

Notes N/A

Last Reviewed Date 5/7/2024

Feedback Form (Send us your questions, comments or information about your experience with licensure) https://forms.gle/zLB3dsG9j6gmx1pU6

**State/Territory** Wisconsin

**License Title** None found.

**Specialized Accreditation Required?** N/A

Specialized Accreditation Accepted as Meeting Educational Requirements? N/A

**Curriculum Comparison Needed?** N/A

Specific Coursework N/A

**Supervised Experience (In-Program)** N/A

Member of Compact or Reciprocity Agreement? N/A

**Board/Agency Name** N/A

**Board/Agency Website N/A** 

Statute/Regulation/Rule Citation N/A

Must Out-of-State Program Graduate Hold License to Qualify? N/A

**Must License Applicant Hold Private Certification?** N/A

Additional Training (Not Required In-Program) N/A

**Experience (After Graduating/Outside of Program)** N/A

Exam(s) Required N/A

Notes N/A

Last Reviewed Date 5/7/2024

Feedback Form (Send us your questions, comments or information about your experience with licensure) https://forms.gle/zLB3dsG9j6qmx1pU6

**State/Territory** Wyoming

License Title None found.

**Specialized Accreditation Required?** N/A

Specialized Accreditation Accepted as Meeting Educational Requirements? N/A

**Curriculum Comparison Needed?** N/A

Specific Coursework N/A

**Supervised Experience (In-Program)** N/A

Member of Compact or Reciprocity Agreement? N/A

**Board/Agency Name** N/A

**Board/Agency Website N/A** 

**Statute/Regulation/Rule Citation** N/A

Must Out-of-State Program Graduate Hold License to Qualify? N/A

Must License Applicant Hold Private Certification? N/A

Additional Training (Not Required In-Program) N/A

Experience (After Graduating/Outside of Program) N/A

Exam(s) Required N/A

Notes N/A

Last Reviewed Date 5/7/2024

Feedback Form (Send us your questions, comments or information about your experience with licensure) https://forms.gle/zLB3dsG9j6gmx1pU6

IMPORTANT: Information is current as of the date listed. State/Territory boards can change educational and other requirements for licensure from time-to-time through formal legislative or rule-making processes, different board interpretation, or by updating application forms or other publications. The information provided does not, and is not intended to, constitute legal advice; instead, all information, content, and materials provided are for informational purposes only. Risks to the university/college and students, including federal disclosure requirements, should be considered and evaluated with legal counsel prior to communicating licensure information to prospective students and students.

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