



# NOTICE OF TEXT

[Authority G.S. 150B-21.2(c)]

## OAH USE ONLY

VOLUME: 40

ISSUE: 11

CHECK APPROPRIATE BOX:

☒  
☐  
☐

Notice with a scheduled hearing

Notice without a scheduled hearing

Republication of text. Complete the following cite for the volume and issue of previous publication, as well as blocks 1 - 4 and 7 - 14. If a hearing is scheduled, complete block 5.

Previous publication of text was published in Volume: Issue:

1. Rule-Making Agency: [Medical Board](#)

2. Link to agency website pursuant to G.S. 150B-19.1(c): <https://www.ncmedboard.org/about-the-board/latest-board-activity/rule-change-tracker>

3. Proposed Action -- Check the appropriate box(es) and list rule citation(s) beside proposed action:

☒ ADOPTION: [21 NCAC 32B .1403](#)

☐ AMENDMENT:

☐ REPEAL:

☐ READOPTION with substantive changes:

☐ READOPTION without substantive changes:

☐ REPEAL through READOPTION:

4. Proposed effective date: [04/01/2026](#)

5. Is a public hearing planned? [Yes](#)

If yes:

Date

Time

Location

[01/29/2026](#)

[11:00 AM](#)

The public hearing will be held remotely via teleconference. Telephone Number: [919-518-9840](#); Conference ID: [805 166 714#](#)

6. If no public hearing is scheduled, provide instructions on how to demand a public hearing:

**7. Explain Reason For Proposed Rule(s):**

To allow current North Carolina resident training license (“RTL”) holder in good standing to convert their RTL to a full license.

**8. Procedure for Subjecting a Proposed Rule to Legislative Review:** If an objection is not resolved prior to the adoption of the rule, a person may also submit written objections to the Rules Review Commission. If the Rules Review Commission receives written and signed objections in accordance with G.S. 150B-21.3(b2) from 10 or more persons clearly requesting review by the legislature and the Rules Review Commission approves the rule, the rule will become effective as provided in G.S. 150B-21.3(b1). The Commission will receive written objections until 5:00 p.m. on the day following the day the Commission approves the rule. The Commission will receive those objections by mail, delivery service, hand delivery, or email. If you have any further questions concerning the submission of objections to the Commission, please call a Commission staff attorney at 984-236-1850.

**Rule(s) is automatically subject to legislative review. Cite statutory reference:**

**9. The person to whom written comments may be submitted on the proposed rule(s):**

Name: Leigh Anne Satterwhite  
Address: 3127 Smoketree Court  
Raleigh, NC 27604  
Phone (optional): 919-326-1109  
Fax (optional):  
EMail (optional) rules@ncmedboard.org

**10. Comment Period Ends: 01/30/2026****11. Fiscal impact. Does any rule or combination of rules in this notice create an economic impact? Check all that apply.**

No fiscal note required

**12. Rule-making Coordinator:**

Name: Leigh Anne Satterwhite  
919-326-1109 Ext. 395  
leigh.satterwhite@ncmedboard.org

**Agency contact, if any:**

Name: Marcus Jimison  
Phone: 919-326-1109  
Email: marcus.jimison@ncmedboard.org

**13. The Agency formally proposed the text of this rule(s) on**

Date: 03/21/2025

21 NCAC 32B .1403 is proposed for adoption as follows:

## SECTION .1300 – GENERAL

### 21 NCAC 32B .1403 CONVERSION APPLICATION FOR PHYSICIAN LICENSE

- (a) A resident training licensee who meets the qualifications listed in this Rule may apply to convert their resident training license to a full, unrestricted physician license.
- (b) An applicant seeking to convert shall:
- (1) complete the Board's online application for conversion and attest under oath or affirmation that the information on the application is true and complete, and authorizing the release to the Board of all information pertaining to the application;
  - (2) submit documentation of a legal name change, if applicable;
  - (3) supply a certified copy of the applicant's birth certificate if the applicant was born in the United States (U.S.) or a certified copy of a valid and unexpired U.S. passport. If the applicant does not possess proof of their U.S. citizenship, the applicant must provide information about the applicant's immigration status. Applicants who are not present in the U.S. and who do not plan to practice physically in the U.S. shall submit a statement to that effect;
  - (4) submit proof that the applicant has completed graduate medical education as required by G.S. 90-9.1 or 90-9.2, as follows:
    - (A) A graduate of a medical school approved by LCME, CACMS, or COCA shall have completed at least one year of graduate medical education approved by ACGME, CFPC, RCPSC, or AOA;
    - (B) A graduate of a medical school not approved by LCME shall have completed two years of graduate medical education approved by ACGME, CFPC, RCPSC, or AOA; or
    - (C) An applicant may satisfy the graduate medical education requirements of Parts (A) or (B) of this subparagraph by showing proof of current certification by a specialty board recognized by the ABMS, CCFP, FRCP, FRCS, or AOA;
  - (5) if the applicant applied for a resident training license on the basis of COMLEX or USMLE examination, he or she shall provide proof that the applicant has taken and passed within three attempts:
    - (A) the COMLEX Level 3; or
    - (B) the USMLE Step 3.
  - (6) create an AMA Physician Profile and, if the applicant is an osteopathic physician, also create an AOA Physician Profile;
  - (7) submit a letter from the graduate medical education program director recommending the applicant for full licensure. The letter should indicate the applicant's status in the graduate medical education program and attest that the applicant is currently in good standing with the program or was in good standing at the time of application. The letter should also include information about the applicant's dates of participation in the program; any information pertaining to leaves of absence taken by the applicant; any investigations involving the applicant; any adverse actions taken against the applicant including probations, limitations or special requirements, or disciplinary actions; and any negative reports of the applicant due to behavior.
  - (8) pay a non-refundable fee pursuant to G.S. 90-13.1(a).
  - (9) upon request, supply any additional information the Board deems necessary to evaluate the applicant's qualifications.
- (c) A resident training licensee applying to convert to a full license must satisfy all of the following from the time of submitting an application for a resident's training license:
- (1) no professional liability insurance claim(s) or payment(s);
  - (2) no regulatory board complaints, investigations, or actions, including the applicant's withdrawal of a license application;
  - (3) no adverse actions by a health care institution as described in G.S. 90-14.13(a);
  - (4) no adverse actions taken by a federal agency, the U.S. military, or medical societies;

If the applicant fails to satisfy all of the above, they may submit an application for a physician license under 21 NCAC 32B .1303.

- (d) The Board must receive all of the following directly from the primary originating source before it begins processing an application:

- (1) Proof of graduation medical education from the graduate medical education program director;
- (2) Transcripts of examinations scores from the examining authority;
- (3) Proof of board certification from the certifying body, if applicable;
- (4) Physician profile from the AMA, and if applicable, the AOA;
- (5) National Practitioner Data Bank report from the U.S. Department of Health and Human Services;  
and
- (6) Practitioner profile from the Federation of State Medical Boards.

*History Note: Authority G.S. 90-5.1(a)(3); 90-8.1; 90-9.1; 90-9.2; 90-13.1.*  
*Eff. \_\_\_\_\_*