RE: Jamie Anne Doughty  
   Master Case No.: M2013-1285  
   Document: Agreed Order

Regarding your request for information about the above-named practitioner; attached is a true and correct copy of the document on file with the State of Washington, Department of Health, Adjudicative Clerk Office. These records are considered Certified by the Department of Health.

Certain information may have been withheld pursuant to Washington state laws. While those laws require that most records be disclosed on request, they also state that certain information should not be disclosed.

The following information has been withheld: NONE

If you have any questions or need additional information regarding the information that was withheld, please contact:

   Customer Service Center  
   P.O. Box 47865  
   Olympia, WA 98504-7865  
   Phone: (360) 236-4700  
   Fax: (360) 586-2171

You may appeal the decision to withhold any information by writing to the Privacy Officer, Department of Health, P.O. Box 47890, Olympia, WA 98504-7890.
STATE OF WASHINGTON
DEPARTMENT OF HEALTH
BOARD OF NATUROPATHY

In the Matter of

JAMIE ANNE DOUGHTY
Credential No. NATU.NT.60258519

Respondent

No. M2013-1285
STIPULATED FINDINGS OF FACT,
CONCLUSIONS OF LAW AND
AGREED ORDER

The Board of Naturopathy (Board), through Alexander H. Lee, Department of
Health Staff Attorney, and Respondent, represented by counsel, Douglas Hiatt, stipulate
and agree to the following:

1. PROCEDURAL STIPULATIONS

1.1 On October 3, 2014, the Board issued a Statement of Charges against
Respondent.

1.2 Respondent understands that the Board is prepared to proceed to a hearing
on the allegations in the Statement of Charges.

1.3 Respondent understands that if the allegations are proven at a hearing, the
Board has the authority to impose sanctions pursuant to RCW 18.130.160.

1.4 Respondent has the right to defend against the allegations in the Statement
of Charges by presenting evidence at a hearing.

1.5 Respondent waives the opportunity for a hearing on the Statement of
Charges provided that the Board accepts this Stipulated Findings of Fact, Conclusions of
Law and Agreed Order (Agreed Order).

1.6 The parties agree to resolve this matter by means of this Agreed Order.

1.7 Respondent understands that this Agreed Order is not binding unless and
until it is signed by the Board and served by the Adjudicative Clerk Office.

1.8 If the Board accepts this Agreed Order, it will be reported to the National
Practitioner Databank (45 CFR Part 60) and elsewhere as required by law. It is a public
document and will be placed on the Department of Health’s website and otherwise
disseminated as required by the Public Records Act (Chap. 42.56 RCW) and the Uniform
Disciplinary Act. RCW 18.130.110.
1.9 If the Board rejects this Agreed Order, Respondent waives any objection to the participation at hearing of any Board members who heard the Agreed Order presentation.

2. FINDINGS OF FACT

Respondent and the Board stipulate to the following facts:

2.1 On December 1, 2011, the state of Washington issued Respondent a credential to practice as a naturopathic physician. Respondent’s credential is currently active.

2.2 On or about February 26, 2013, a KOMO news report indicated that medical marijuana was authorized without appropriate examination at South Sound Medicine (SSM), located in Lacey, Washington. Former employees of SSM also disclosed that SSM was a medical marijuana authorization mill. On or about March 21, 2013, Respondent was identified as the treating physician at SSM.

2.3 On or about July 3, 2013, a complaint was received by a medical doctor who alleged that Respondent treated one of his patients below the standard of care by authorizing medical marijuana inappropriately. The complaint alleged that Respondent failed to communicate with the complainant, did not adequately consider the patient’s medical history, and that Respondent’s medical marijuana recommendation was adverse to the patient’s health.

2.4 From on or about April 2012 to April 2013, Respondent evaluated one thousand two hundred seventy-nine (1,279) patients and each of these patients were given authorizations for medical marijuana. The Board of Naturopathy reviewed patient charting for sixteen (16) patients. Upon review of these patient records, Respondent provided substandard naturopathic care for all of these patients as follows:

2.5 Patient A

(1) Patient A was not treated in a manner consistent with the required standard of care for a naturopathic physician in the state of Washington:

a. No differential diagnosis. While this patient’s complaints were mild, the doctor lists headache as part of the assessment but does not rule out other possible causes;

b. Boilerplate plan incorrectly describes headaches as migraines;
c. Patient did not sign a records release request, there are no records in the chart and no indication that records were ever requested; and
d. This visit took just five (5) minutes, far too short to evaluate and treat a patient on a first office call to the standard of care.

(2) Patient authorization does not meet the requirements of 69.51A RCW:
  a. Patient’s report does not meet the definition of intractable nor is it terminal;
  b. Respondent is not providing care relating to the diagnosis and ongoing treatment or monitoring of the patient’s terminal or debilitating medical condition;
  c. Respondent has not completed an appropriate physical examination;
  d. Respondent has not informed the patient of other options for treating the terminal or debilitating medical condition that were unsuccessful; and
  e. Respondent has not documented other measures attempted to treat the terminal or debilitating medical condition.

2.6 Patient B

(1) Patient B was not treated in a manner consistent with the required standard of care for a naturopathic physician in the state of Washington:
  a. No differential diagnosis. This patient’s history and condition may qualify for medical marijuana, but given more than two (2) years since the last actual evaluation by his family doctor, patient’s current complaints may be a result of progression of injury related issues. Actual physical exam and/or diagnostic testing such as x-ray was warranted to rule out other, fixable problems.
(2) Patient authorization does not meet the requirements of 69.51A RCW:
   a. Patient is not using medication to control pain prior other than occasional NSAID;
   b. Respondent is not providing care relating to the diagnosis and ongoing treatment or monitoring of the patient's terminal or debilitating medical condition;
   c. Respondent has not completed an appropriate physical examination;
   d. Respondent has not informed the patient of other options for treating the terminal or debilitating medical condition that were unsuccessful; and
   e. Respondent has not documented other measures attempted to treat the terminal or debilitating medical condition.

2.7 **Patient C**

(1) Patient C was not treated in a manner consistent with the required standard of care for a naturopathic physician in the state of Washington:
   a. No differential diagnosis. This patient's history and condition may qualify for medical marijuana but, given more than four (4) years since the last actual evaluation by his chiropractor, patient's current complaints may be a result of progression of injury related issues. Actual physical exam and/or diagnostic testing such as x-ray were warranted to rule out other, fixable problems.

(2) Patient authorization does not meet the requirements of 69.51A RCW:
   a. Patient is not using medication to control pain and there is no indication if it helped when used in the past;
   b. Respondent is not providing care relating to the diagnosis and ongoing treatment or monitoring of the patient's terminal or debilitating medical condition;
   c. Respondent has not completed an appropriate physical examination;
d. Respondent has not informed the patient of other options for treating the terminal or debilitating medical condition that were unsuccessful; and

e. Respondent has not documented other measures attempted to treat the terminal or debilitating medical condition.

2.8 Patient D

(1) Patient D was not treated in a manner consistent with the required standard of care for a naturopathic physician in the state of Washington:

a. No differential diagnosis. This patient's history and condition may qualify for medical marijuana but, given more than a year has passed since the last actual evaluation by her family doctor, patient's current complaints may be a result of progression of injury related issues. Actual physical exam and/or diagnostic testing such as x-ray were warranted to rule out other, fixable problems.

(2) Patient authorization does not meet the requirements of 69.51A RCW:

a. Patient is not using medication to control pain and there is no indication if it helped when used in the past;

b. Respondent is not providing care relating to the diagnosis and ongoing treatment or monitoring of the patient's terminal or debilitating medical condition;

c. Respondent has not completed an appropriate physical examination;

d. Respondent has not informed the patient of other options for treating the terminal or debilitating medical condition that were unsuccessful; and

e. Respondent has not documented other measures attempted to treat the terminal or debilitating medical condition.
2.9 **Patient E**

(1) Patient E was not treated in a manner consistent with the required standard of care for a naturopathic physician in the state of Washington:

a. No differential diagnosis accomplished. The patient reports serious discomfort but no effort was made to determine the cause which may be resolvable or the result of a problem such as Barrett’s esophagus that may be controlled now but a serious health risk later;

b. There is no indication that the patient is receiving follow-up care or being monitored;

c. There is no consideration that cannabis may exacerbate the patient’s anxiety or other health problems; and

d. If pain is the result of repetitive dietary “aggravation” that behavior should be modified or discontinued. There is no mention of correcting the offending behavior.

(2) Patient authorization does not meet the requirements of 69.51A RCW:

a. Respondent does not have a newly initiated or existing documented relationship with the patient, as a primary care physician or specialist, relating to the diagnosis and ongoing treatment or monitoring of the patient’s terminal or debilitating medical condition;

b. Respondent has not completed an appropriate physical examination;

c. Respondent has not documented the terminal or debilitating medical condition of the patient in the patient’s record and that the patient may benefit from treatment of this condition or its symptoms with medical cannabis;

d. Respondent has not adequately informed the patient of other options for treating the terminal or debilitating medical condition that were unsuccessful;

e. Respondent has not documented other adequate measures attempted to treat the terminal or debilitating medical condition; and
f. Patient’s report does not meet the definition of intractable nor is it terminal.

2.10 **Patient F**

(1) Patient F was not treated in a manner consistent with the required standard of care for a naturopathic physician in the state of Washington:

a. No differential diagnosis accomplished. The assessment does not rule out other possible causes. Pain could have been a result of tumor or other morbidity that may be curable now but not curable later. Imaging by primary care is noted but there are no records and no indication if it was recent enough to still be valid. Recent diagnostic x-ray or other study was needed to rule out other etiology but not evidenced in the chart;

b. Patient did not sign a records release request, there are no records in the chart and no indication that records were ever requested;

c. There is no indication that the patient is receiving follow-up care or being monitored; and

d. If pain is the result of repetitive “aggravation” injury that continues but is not essential, that behavior should be modified or discontinued. Continuing repetitive injury can lead to greater and sometimes irreversible disability in the future such as permanent spinal injury. There is no mention of correcting the offending behavior.

(2) Patient authorization does not meet the requirements of 69.51A RCW:

a. Respondent does not have a newly initiated or existing documented relationship with the patient, as a primary care physician or specialist, relating to the diagnosis and ongoing treatment or monitoring of the patient’s terminal or debilitating medical condition;

b. Respondent has not completed an appropriate physical examination;

c. Respondent has not documented the terminal or debilitating medical condition of the patient in the patient’s record and that the
patient may benefit from treatment of this condition or its symptoms with medical cannabis;

d. Respondent has not adequately informed the patient of other options for treating the terminal or debilitating medical condition that were unsuccessful;

e. Respondent has not documented other adequate measures attempted to treat the terminal or debilitating medical condition that were unsuccessful; and

f. Patient's report does not meet the definition of intractable nor is it terminal.

2.11 **Patient G**

(1) Patient G was not treated in a manner consistent with the required standard of care for a naturopathic physician in the state of Washington:

a. No differential diagnosis accomplished. The assessment does not rule out other possible causes. Pain could have been a result of tumor or other morbidity that may be curable now but not curable later. Diagnostic x-ray or other study was needed to rule out other etiology but not done. If such tests were done they were not in the chart;

b. There is no indication that the patient is receiving follow-up care or being monitored;

c. There is no consideration that cannabis may exacerbate the patient's anxiety or other health problems; and

d. If pain is the result of repetitive "aggravation" injury that continues but is not essential, that behavior should be modified or discontinued. Continuing repetitive injury can lead to greater and sometimes irreversible disability in the future such as permanent spinal injury. There is no mention of identifying or correcting a potentially offending behavior.
(2) Patient authorization does not meet the requirements of 69.51A RCW:
   a. Respondent does not have a newly initiated or existing documented relationship with the patient, as a primary care physician or specialist, relating to the diagnosis and ongoing treatment or monitoring of the patient's terminal or debilitating medical condition;
   b. Respondent has not completed an appropriate physical examination; and
   c. Respondent has not adequately informed the patient of other options for treating the terminal or debilitating medical condition that were unsuccessful.

2.12 **Patient H**

(1) Patient H was not treated in a manner consistent with the required standard of care for a naturopathic physician in the state of Washington:
   a. No differential diagnosis accomplished. The assessment does not rule out other possible causes. Pain could have been a result of tumor or other morbidity that may be curable now but not curable later. Diagnostic x-ray or other study was needed to rule out other etiology but not done;
   b. Patient did not sign a records release request, there are no records in the chart and no indication that records were ever requested;
   c. There is no indication that the patient is receiving follow-up care or being monitored;
   d. There is no consideration that cannabis may exacerbate the patient's anxiety or other health problems; and
   e. If pain is the result of repetitive "aggravation" injury that continues but is not essential, that behavior should be modified or discontinued. Continuing repetitive injury can lead to greater and sometimes irreversible disability in the future such as permanent spinal injury. There is no mention of correcting the offending behavior.
(2) Patient authorization does not meet the requirements of 69.51A RCW:
   a. Respondent does not have a newly initiated or existing documented relationship with the patient, as a primary care physician or specialist, relating to the diagnosis and ongoing treatment or monitoring of the patient's terminal or debilitating medical condition;
   b. Respondent has not completed an appropriate physical examination;
   c. Respondent has not documented the terminal or debilitating medical condition of the patient in the patient's record and that the patient may benefit from treatment of this condition or its symptoms with medical cannabis; and
   d. Respondent has not adequately informed the patient of other options for treating the terminal or debilitating medical condition that were unsuccessful.

2.13 Patient I
   (1) Patient I was not treated in a manner consistent with the required standard of care for a naturopathic physician in the state of Washington:
      a. No differential diagnosis accomplished. The assessment does not rule out other possible causes. Pain could have been a result of tumor or other morbidity that may be curable now but not curable later. Diagnostic x-ray or other study was needed to rule out other etiology but not done;
      b. Patient did not sign a records release request, there are no records in the chart and no indication that records were ever requested; and
      c. If pain is the result of repetitive "aggravation" injury that continues but is not essential, that behavior should be modified or discontinued. Continuing repetitive injury can lead to greater and sometimes irreversible disability in the future such as permanent spinal injury. There is no mention of correcting the offending behavior.
(2) Patient authorization does not meet the requirements of 69.51A RCW:
   a. Respondent has not completed an appropriate physical examination; and
   b. Respondent has not adequately informed the patient of other options for treating the terminal or debilitating medical condition.

2.14 Patient J
(1) Patient J was not treated in a manner consistent with the required standard of care for a naturopathic physician in the state of Washington:
   a. No differential diagnosis accomplished. The assessment does not rule out other possible causes. Pain could have been a result of tumor or other morbidity that may be curable now but not curable later. Diagnostic x-ray or other study was needed to rule out other etiology but not done. Chiropractic records include physical exam from a year earlier but do not include diagnostic x-ray if that was accomplished; and
   b. If pain is the result of repetitive “aggravation” injury that continues but is not essential, that behavior should be modified or discontinued. Continuing repetitive injury can lead to greater and sometimes irreversible disability in the future such as permanent spinal injury. There is no mention of correcting the offending behavior.

(2) Patient authorization does not meet the requirements of 69.51A RCW:
   a. Respondent has not completed an appropriate physical examination;
   b. Respondent has not adequately informed the patient of other options for treating the terminal or debilitating medical condition that were unsuccessful; and
   c. Patient’s report does not meet the definition of intractable nor is it terminal.

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2.15 Patient K

(1) Patient K was not treated in a manner consistent with the required standard of care for a naturopathic physician in the state of Washington:

a. No differential diagnosis accomplished. The assessment does not rule out other possible causes. Pain could have been a result of tumor or other morbidity that may be curable now but not curable later. Diagnostic x-ray or other study was needed to rule out other etiology but not done. This is especially concerning given the patient report of tingling in her hands;

b. Patient did not sign a records release request, there are no records in the chart and no indication that records were ever requested;

c. There is no consideration that cannabis may exacerbate the patient's anxiety or other health problems; and

d. If pain is the result of repetitive "aggravation" injury that continues but is not essential, that behavior should be modified or discontinued. Continuing repetitive injury can lead to greater and sometimes irreversible disability in the future such as permanent spinal injury. There is no mention of investigating or correcting the offending behavior.

(2) Patient authorization does not meet the requirements of 69.51A RCW:

a. Respondent does not have a newly initiated or existing documented relationship with the patient, as a primary care physician or specialist, relating to the diagnosis and ongoing treatment or monitoring of the patient's terminal or debilitating medical condition;

b. Respondent has not completed an appropriate physical examination;

c. Respondent has not adequately informed the patient of other options for treating the terminal or debilitating medical condition that were unsuccessful; and

d. Patient's report does not meet the definition of intractable nor is it terminal.
2.16 Patient L

(1) Patient L was not treated in a manner consistent with the required standard of care for a naturopathic physician in the state of Washington:
   a. There is no indication that the patient is receiving follow-up care or being monitored;
   b. There is no consideration that cannabis may exacerbate the patient's anxiety or other health problems; and
   c. If pain is the result of repetitive "aggravation" injury that continues but is not essential, that behavior should be modified or discontinued. Continuing repetitive injury can lead to greater and sometimes irreversible disability in the future such as permanent spinal injury. There is no mention of correcting the offending behavior.

(2) Patient authorization does not meet the requirements of 69.51A RCW:
   a. Respondent does not have a newly initiated or existing documented relationship with the patient, as a primary care physician or specialist, relating to the diagnosis and ongoing treatment or monitoring of the patient's terminal or debilitating medical condition;
   b. Respondent has not completed an appropriate physical examination;
   c. Respondent has not documented the terminal or debilitating medical condition of the patient in the patient's record and that the patient may benefit from treatment of this condition or its symptoms with medical cannabis;
   d. Respondent has not adequately informed the patient of other options for treating the terminal or debilitating medical condition that were unsuccessful;
   e. Respondent has not documented other adequate measures attempted to treat the terminal or debilitating medical condition; and
f. Patient's report does not meet the definition of intractable nor is it terminal especially given the chiropractic report for the same month.

2.17 **Patient M**

(1) Patient M was not treated in a manner consistent with the required standard of care for a naturopathic physician in the state of Washington:

a. No differential diagnosis accomplished. The assessment does not rule out other possible causes. Pain could have been a result of tumor or other morbidity that may be curable now but not curable later. Diagnostic x-ray or other study was needed to rule out other etiology but not done. Prior records are very old;

b. There is no indication that the patient is receiving follow-up care or being monitored; and

c. If pain is the result of repetitive "aggravation" injury that continues but is not essential, that behavior should be modified or discontinued. Continuing repetitive injury can lead to greater and sometimes irreversible disability in the future such as permanent spinal injury. There is no mention of investigating or correcting the offending behavior.

(2) Patient authorization does not meet the requirements of 69.51A RCW:

a. Respondent does not have a newly initiated or existing documented relationship with the patient, as a primary care physician or specialist, relating to the diagnosis and ongoing treatment or monitoring of the patient's terminal or debilitating medical condition; and

b. Respondent has not completed an appropriate physical examination.
2.18 **Patient N**

(1) Patient N was not treated in a manner consistent with the required standard of care for a naturopathic physician in the state of Washington:
   a. There is no indication that the patient is receiving follow-up care or being monitored; and
   b. There is no consideration that cannabis may exacerbate the patient's anxiety or other health problems

(2) Patient authorization does not meet the requirements of 69.51A RCW:
   a. Respondent does not have a newly initiated or existing documented relationship with the patient, as a primary care physician or specialist, relating to the diagnosis and ongoing treatment or monitoring of the patient's terminal or debilitating medical condition

2.19 **Patient O**

(1) Patient O was not treated in a manner consistent with the required standard of care for a naturopathic physician in the state of Washington:
   a. There is no indication that the patient is receiving follow-up care or being monitored.

(2) Patient authorization does not meet the requirements of 69.51A RCW:
   a. Respondent does not have a newly initiated or existing documented relationship with the patient, as a primary care physician or specialist, relating to the diagnosis and ongoing treatment or monitoring of the patient's terminal or debilitating medical condition.

2.20 **Patient P**

(1) Patient P was not treated in a manner consistent with the required standard of care for a naturopathic physician in the state of Washington:
   a. There is no indication that the patient is receiving follow-up care or being monitored; and
   b. There is no consideration that cannabis may exacerbate the patient's anxiety or other health problems. The patient's history of depression in the chart note in the possession of Dr. Doughty at the time of the visit should have raised some suspicion of
contraindication of cannabis. The primary care doctor's notes were not in the materials provided nor was there a records release showing which doctors the patient listed. The SSM patient form that asks about anxiety is missing from this record. It was included in the other patient records reviewed.

(2) Patient authorization does not meet the requirements of 69.51A RCW:
   
a. Respondent does not have a newly initiated or existing documented relationship with the patient, as a primary care physician or specialist, relating to the diagnosis and ongoing treatment or monitoring of the patient's terminal or debilitating medical condition; and

b. Respondent has not completed an appropriate physical examination.

2.21 Based on the above, Respondent enabled the operation of a medical marijuana mill at SSM, and has inappropriately compromised the standard of care for a naturopathic physician by rendering substandard exams to patients seeking medical marijuana.

3. CONCLUSIONS OF LAW

The Board and Respondent agree to the entry of the following Conclusions of Law:

3.1 The Board has jurisdiction over Respondent and over the subject matter of this proceeding.

3.2 Respondent has committed unprofessional conduct in violation of RCW 18.130.180(1), (4), and (7), RCW 69.51A.010(4)(b) and (6)(b), RCW 69.51A.030(2)(a)(i), (ii), and (b)(iv).

3.3 The above violations provide grounds for imposing sanctions under RCW 18.130.160.

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4. COMPLIANCE WITH SANCTION RULES

4.1 The disciplining authority applies WAC 246-16-800, et seq., to determine appropriate sanctions. WAC 246-16-800(2)(c) requires the disciplining authority to impose terms based on a specific sanction schedule unless “the schedule does not adequately address the facts in a case.”

4.2 Respondent’s alleged conduct falls in Tier B of the “Practice Below Standard of Care” schedule, WAC 246-16-810. The sanction range associated with that tier does adequately address the alleged facts of this case.

4.3 The disciplining authority considered the following aggravating and mitigating factors:
   A. Number and frequency of acts. (aggravator)
   B. Lack of prior disciplinary history. (mitigator)

5. AGREED ORDER

Based on the Findings of Fact and Conclusions of Law, the Board and Respondent agree to entry of the following Agreed Order:

5.1 Respondent’s credential to practice as a naturopathic physician in the state of Washington is SUSPENDED. Respondent may not petition for reinstatement of credential for a period of at least four (4) months from the effective date of this Agreed Order.

5.2 Upon reinstatement, Respondent’s credential to practice as a naturopathic physician in the state of Washington shall be placed on PROBATION and RESTRICTED for at least thirty-six (36) months. During the period of probation and restriction, Respondent shall comply with all of the following terms and conditions:

   A. Respondent shall not authorize, recommend, or prescribe medical marijuana.

   B. Respondent shall notify the Board of current and future employment in the health care field by submitting a job description directly to the Board within ten (10) days of reinstatement.

   C. Respondent shall not engage in the solo practice as a naturopathic physician for a period of at least thirty-six (36) months from the effective date of reinstatement.
D. Respondent shall cause her health care employer to submit quarterly performance evaluation reports directly to the Board on forms provided by the Department. If Respondent is not employed as a naturopathic physician, Respondent shall submit quarterly declarations, under penalty of perjury, on forms provided by the Department, stating dates of unemployment as a naturopathic physician, in lieu of the employer reports.

The first employer report or unemployment declaration shall be due thirty (30) days from the effective date of reinstatement. Reports or declarations shall be submitted every three (3) months thereafter, for thirty-six (36) months or until otherwise ordered by the Board. Failure to submit information and/or to make true statements may lead to further disciplinary action, up to and including suspension and revocation.

E. In addition to mandatory continuing education, within twelve (12) months of reinstatement, Respondent shall complete thirty-two (32) hours of continuing education, pre-approved by the Board or its designee, as follows:

i. Ten (10) hours of continuing education in the area of diagnosis;

ii. Ten (10) hours of continuing education in the area of treatment planning;

iii. Six (6) hours of continuing education in the area of recordkeeping; and

iv. Six (6) hours of continuing education in the area of ethics.

F. In addition to any other inspections it may make, the Department of Health and/or Board may audit records and review Respondent's practice at her place of employment on an unannounced basis at least two (2) times per year for thirty-six (36) months after
reinstatement. Audits will assess patient records and Respondent's prescribing practices.

5.3 Within thirty-six (36) months of reinstatement, Respondent shall pay a fine to the Board in the amount of five thousand dollars ($5,000.00). The fine shall be paid by certified or cashier’s check or money order, made payable to the Department of Health and mailed to the Department of Health, Board of Naturopathy, at PO Box 1099, Olympia, WA 98507-1099. Credit or Debit cards can also be used for payment at the front counter of the Department of Health building at 111 Israel Road SE, Tumwater, WA 98501, during regular business hours.

5.4 Any documents required by this Agreed Order shall be sent to Department of Health Compliance at PO Box 47873, Olympia, WA 98504-7873.

5.5 Respondent is responsible for all costs of complying with this Agreed Order.

5.6 Respondent shall inform the Department of Health Office of Customer Service, in writing, of changes in Respondent's residential and/or business address within thirty (30) days of the change. The mailing address for the Office of Customer Service is PO Box 47865, Olympia, WA 98504-7865.

5.7 The effective date of this Agreed Order is the date the Adjudicative Clerk Office places the signed Agreed Order into the U.S. mail. If required, Respondent shall not submit any fees or compliance documents until after the effective date of this Agreed Order.

6. FAILURE TO COMPLY

Protection of the public requires practice under the terms and conditions imposed in this order. Failure to comply with the terms and conditions of this order may result in suspension of the credential after a show cause hearing. If Respondent fails to comply with the terms and conditions of this order, the Board may hold a hearing to require Respondent to show cause why the credential should not be suspended. Alternatively, the Board may bring additional charges of unprofessional conduct under RCW 18.130.180(9). In either case, Respondent will be afforded notice and an opportunity for a hearing on the issue of non-compliance.

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7. ACCEPTANCE

I, JAMIE ANNE DOUGHTY, have read, understand and agree to this Agreed Order. This Agreed Order may be presented to the Board without my appearance. I understand that I will receive a signed copy if the Board accepts this Agreed Order.

JAMIE ANNE DOUGHTY
RESPONDENT

DATE

DOUGLAS HIATT, WSBA #21017
ATTORNEY FOR RESPONDENT

DATE
8. ORDER

The Board accepts and enters this Stipulated Findings of Fact, Conclusions of Law and Agreed Order.

DATED: June 16, 2015

STATE OF WASHINGTON
DEPARTMENT OF HEALTH
BOARD OF NATUROPATHY

PANEL CHAIR

PRESENTED BY:

ALEXANDER H. LEE, WSBA #35824
DEPARTMENT OF HEALTH STAFF ATTORNEY

DATE

June 15, 2015