

**BOARD OPINION**  
**REGARDING “PRACTICE DRIFT”**

**LEGAL AUTHORITY**

Pursuant to KRS 311.602, the following Board opinion is issued to assist Board licensees in determining what actions would constitute unacceptable conduct under the provisions of KRS 311.595 and/or KRS 311.597. The Board has decided to publish this opinion because it addresses issues of significant public and medical interest.

**DEFINITION**

As used in this opinion, “practice drift” means a physician’s shift away from the scope of the specialty in which he/she formally trained (in traditional medical education and training pathways) into the scope of another specialty.

**OPINION**

A license to practice medicine or osteopathy in the Commonwealth of Kentucky provides the licensee the privilege of practicing the full scope of medicine or osteopathy. This privilege comes with substantial responsibility and commensurate accountability. Therefore, it is incumbent upon the licensee, who shifts from their primary and formally trained area of practice expertise to another, to ensure that they are able to meet and conform to all acceptable and prevailing standards of any practice area/specialty in which they engage. Relevant to this responsibility, the Board may discipline a license for any departure from, or failure to conform to, the standards of acceptable and prevailing medical practice within the Commonwealth of Kentucky. *See* KRS 311.595(9) and KRS 311.597(4).

When investigating cases, the Board holds the licensee accountable to the acceptable and prevailing medical practices of the specialty in which the licensee engaged as impetus for a grievance. For instance, a board-certified orthopedic surgeon offering hormone therapy will be held to the acceptable and prevailing medical practices within the specialty of endocrinology; and a board-certified emergency medicine physician offering botox, lasers and cosmetic procedures will be held to the acceptable and prevailing medical practices within the specialty of aesthetic dermatology or plastic and reconstructive surgery.

The Board cautions licensees who engage in practice drift. Licensees should consider the quality of training programs offered outside of traditional education and training pathways and should carefully consider whether the education and/or training offered would be comparable to the rigor and quality of a formal education, residency or fellowship training, or board certification within a practice specialty. The Board expects licensees to conform to the acceptable and prevailing medical practices associated with specialists in those fields.

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