

**DEPARTMENT OF STATE**  
**DIVISION OF PROFESSIONAL REGULATION**  
**Board of Podiatry**

Statutory Authority: 24 Delaware Code, Section 506(a)(1) (24 **Del.C.** §506(a)(1))  
24 **DE Admin. Code** 500

**PROPOSED**

**PUBLIC NOTICE**

**500 Board of Podiatry**

The Delaware Board of Podiatry, pursuant to 24 **Del.C.** §506(a)(1), proposes to revise its regulations. The proposed amendments to the regulations eliminate the requirement that an inactive license must be renewed biennially.

The Board will hold a public hearing on the proposed rule change on September 4, 2024 at 5:00 p.m., in the Second Floor Conference Room A, Cannon Building, 861 Silver Lake Blvd., Dover, DE 19904 and virtually. The virtual link will be published on the meeting agenda at least seven days prior to the hearing. Written comments should be sent to Michelle Loper, Administrator of the Delaware Board of Podiatry, Cannon Building, 861 Silver Lake Blvd, Dover, DE 19904. Written comments will be accepted until September 19, 2024.

**500 Board of Podiatry**

**1.0 General Provisions**

- 1.1 Pursuant to 24 **Del.C.** Ch. 5, the Delaware Board of Podiatry (“the Board”) is authorized to, and has adopted, these Rules and Regulations.
- 1.2 Information about the Board, including its meeting dates, may be obtained by contacting the Board’s Administrative Assistant at the Division of Professional Regulation, Cannon Building, 861 Silver Lake Boulevard, Ste. 203, Dover, Delaware 19904-2467, telephone (302) 739-4522. Requests to the Board may be directed to the same office.
- 1.3 The Board’s President shall preside at all meetings of the Board and shall sign all official documents of the Board. In the President’s absence, the Board’s Secretary shall preside at meetings and perform all duties usually performed by the President.
- 1.4 The Board shall elect officers, pursuant to 24 **Del.C.** §504 in January of each year.
- 1.5 The Board may seek counsel, advice and information from other governmental agencies and such other groups as it deems appropriate.
- 1.6 The Board may establish such subcommittees as it determines appropriate for the fair and efficient processing of the Board’s duties.
- 1.7 Board members are subject to the provisions applying to honorary state officials in the “State Employees’, Officers’ and Officials’ Code of Conduct,” found at 29 **Del.C.** Ch. 58.

Statutory authority: 24 **Del.C.** §503; 504; 506.

**2.0 Application And Licensing Requirements**

- 2.1 Application and Requirements for Licensure. Pursuant to 24 **Del.C.** §508, an applicant for licensure must meet the requirements of 24 **Del.C.** §508(a). An applicant for licensure must arrange to provide the Board with a copy of his or her record with the National Practitioners’ Data Bank. Upon completion of these requirements, the Board shall issue a license.
- 2.2 The Board may require additional information or explanation when it has questions about an applicant’s qualifications or application materials. An application is not complete or in proper form until the Board has received all required and requested documents, materials, information and fees.
- 2.3 Graduates of non-United States (U.S.) degree programs will be required to have their credentials evaluated by a credential evaluation service acceptable to the Board, to determine equivalency to U.S. degree programs.  
Statutory authority: 24 **Del.C.** §508.
- 2.4 Residency Program. The hospital residency program shall be approved by and comply with the Special Standards and Requirements established for residency programs by the American Podiatric Medical Association (APMA) and Council on Podiatric Medical Education (CPME).

Statutory authority: 24 **Del.C.** §§508(a)(2)

**19 DE Reg. 427 (11/01/15)**

**3.0 Examinations**

- 3.1 Examination. Pursuant to 24 **Del.C.** §508 and 509, applicants for licensure must have taken an approved national examination and achieved the minimum passing score recommended by the testing service providing the examination. The approved national examination is the PMLexis administered by the National Board of Podiatry Medical Examiners (NBPME).
- 3.2 An applicant for licensure is required to have successfully completed the NBPME Part I and Part II exams as a prerequisite to sitting for the PMLexis.
- 3.3 An applicant for licensure shall, prior to sitting for the examination, notify the testing service administering the PMLexis to forward his or her examination results directly to the Board. Failure to do so may constitute grounds for denial of licensure.

Statutory authority: 24 **Del.C.** §506(a)(3); 509.

**4.0 Reciprocity**

- 4.1 In addition to other requirements for licensure by reciprocity set forth in 24 **Del.C.** §510, the Board may only approve licensure by reciprocity where said applicants are currently licensed in other state(s) whose requirements for registration or certification are substantially similar to those of the State of Delaware, or as set forth in Rules 4.3 and 4.4, below. Equivalency shall be determined by comparing the laws in effect at the time of application. Prior to issuing a license by reciprocity, the Board will determine whether said applicants have ever been disciplined or whether there are any disciplinary actions pending in any jurisdiction.
- 4.2 Requirements for registration and certification, as they relate to states other than Delaware, are deemed by the Board to be substantially similar to those of the State of Delaware when said requirements include:
  - 4.2.1 Satisfactory completion of a degree of Doctor of Podiatric Medicine or its equivalent from a school currently accredited by the APMA or its successor;
  - 4.2.2 Satisfactory completion of the NBPME Part I, Part II and PMLexis examinations, with at least the minimum passing score recommended by the testing service providing the examination; and;
  - 4.2.3 Satisfactory completion of a hospital residency program approved by the American Podiatric Medical Association (APMA).
- 4.3 An applicant licensed in a state whose standards for licensure are not substantially similar to those of Delaware may obtain licensure by reciprocity if he or she holds a license in good standing in that state and has practiced podiatry for a minimum of five years after licensure.
- 4.4 An applicant for licensure by reciprocity, who is licensed in a state whose standards are not substantially similar to those of this state, must provide the Board with an affidavit from his or her employer(s) in the state of licensure, or other evidence acceptable to the Board, documenting at least five (5) years of practice following licensure in that state.

Statutory authority: 24 **Del.C.** §510.

**19 DE Reg. 427 (11/01/15)**

**5.0 Licenses (In-Training, Lapse/Renewal, Inactive)**

- 5.1 In-Training License.
  - 5.1.1 Pursuant to 24 **Del.C.** §513(d), the Board will issue, without examination, an In-Training license to podiatric physicians who are (1) participating in this State in a residency program accredited by the Council on Podiatric Medical Education and (2) are otherwise qualified for licensure.
  - 5.1.2 A podiatric physician who will be employed by a hospital as a resident or fellow in an accredited residency or fellowship program may apply for an In-Training license. Application shall be made on forms provided by the Board. Such applications shall include:
    - 5.1.2.1 An affidavit of the employer hospital's residency program director certifying that the podiatric physician will be employed by the hospital and meets all requirements for licensure specified in 24 **Del.C.** §508(a)(1) through (a)(7), excluding 24 **Del.C.** §508(a)(2).
    - 5.1.2.2 An affidavit of the podiatric physician seeking licensure certifying that he meets all the requirements for licensure specified in 24 **Del.C.** §508(a)(1) through (a)(7), excluding 24 **Del.C.** §508(a)(2). Parts I and II of the Podiatric Medical Licensing Examination for States (PM Lexis) exam must be satisfactorily completed prior to residency. Satisfactory completion of Part III of the PM Lexis exam will have to be completed by the end of the first year of residency.

5.1.2.3 An affidavit of the podiatric physician seeking licensure certifying that he intends to limit himself solely to practice within the hospital or the performance of such medical duties outside the hospital which may be assigned to him as part of the residency program.

5.1.3 Residents employed by accredited hospitals who have been granted In-Training licenses shall be specifically limited to the practice of medicine within the hospital where they are employed, except for any medical duties which may be assigned as part of the residency program as long as those outside duties are performed under the supervision of a fully licensed podiatric physician.

5.1.4 An In-Training license is required for all podiatric physicians who will spend 45 or more consecutive days in a Delaware institution as part of a rotation for an out-of-state residency program.

5.1.5 The licensee and the employer hospital shall notify the board not later than three (3) days after the licensee's completion of or withdrawal from the residency program.

5.1.6 Valid In-Training licenses may be renewed by the licensee by paying the renewal fee set by the Division of Professional Regulation.

## 5.2 Lapse/Renewal

5.2.1 A licensee whose license lapses for non-renewal may renew within one year by paying the late fee required by 24 Del.C. §511 and having completed all continuing education required for renewal. Late renewals shall be audited for satisfactory completion of the continuing education requirement.

5.2.2 If a licensee allows his or her license to lapse for over one year and has not been granted inactive status, that licensee must reapply for licensure in the same manner as a new applicant.

5.2.3 It shall be the responsibility of all licensees, active or inactive, to keep the Board informed of any change in name, home or business address.

5.2.4 License renewal may be accomplished online at <http://dpr.delaware.gov>.

## 5.3 Inactive Status

5.3.1 A licensee may be placed on inactive status by the Board for a fixed period of no more than ~~five (5)~~ 5 years. Requests for inactive status shall be made, in writing, to the Board ~~and requests which exceed one (1) year shall be renewed biennially at the time of regular license renewals~~. After application to the Board and payment of a renewal fee, an inactive licensee may obtain a new license and re-enter active practice after completion of the continuing education requirements below.

5.3.1.1 Inactive status for one (1) year or less: 16 CE hours.

5.3.1.2 Inactive status for more than one (1) year: 32 CE hours, completed within 24 months prior to reapplication.

**10 DE Reg. 1153 (01/01/07)**

**12 DE Reg. 817 (12/01/08)**

**16 DE Reg. 1195 (05/01/13)**

## 6.0 Continuing Education

6.1 "Continuing medical education (CME)," as that term is herein applied by the Board, includes any and all continuing education requirements, as herein below provided, which must be satisfied biennially by all licensed practitioners as a condition for licensure renewal. Each licensed practitioner shall complete, on or before June 30 of even numbered years at least 32 hours of continuing education as a condition of license renewal.

6.2 Each practitioner shall be exempt from the continuing education requirement in the first biennial licensing period, or any portion thereof, in which he is licensed to practice in Delaware. During the renewal process, a practitioner shall attest to his satisfactory completion of the continuing education requirements for the previous two (2) years. Attestation may be completed electronically if the renewal is accomplished online. In the alternative, paper renewal documents that contain the attestation of completion may be submitted. Each licensee must maintain a Podiatry CME log, on a form to be supplied by the Board, indicating the date, title, sponsor, and number of hours the licensee attended, for each continuing education program submitted for credit. Random audits will be performed by the Board to ensure compliance with the continuing education requirement. Licensees selected for the random audit shall submit validated documents which evidence satisfactory completion of the continuing education requirements for the previous two (2) years. The Board reserves the right to request additional documentation, such as copies of program materials, to verify CME compliance in the course of a random audit.

6.3 Only approved courses will be counted toward the 32 hour biennial continuing education requirement. A practitioner may gain approval of any course or program by written application to the Board, stating the title, sponsor and summary of course content. The Board may act upon all such requests at the next regularly scheduled meeting, may act upon such requests at any intervening special meeting convened to consider other issues, or may delegate to any member of the Board the authority to approve continuing education

courses on behalf of the Board. Any practitioner who attends and/or completes a course which has not yet been approved by the Board does so at his own risk that the Board may not approve the said course nor allow it to be counted toward completion of the annual requirement of 32 hours of continuing education.

- 6.4 Content. The overriding consideration in determining if a specific program qualifies for continuing education is that it be a formal program of learning which contributes directly to the professional competence of the licensee. No credit shall be given for business or practice seminars.
- 6.4.1 Computer, television or video based courses and other independent study courses may be submitted to the Board for approval, however no such course will be approved for credit unless it includes successful completion of a final examination or paper.
- 6.4.2 The following programs will be deemed to qualify for continuing education without prior Board approval:
- 6.4.2.1 Any program approved by the American Podiatric Medical Association (APMA), and approved affiliates.
- 6.4.2.2 Any seminar sponsored by the Delaware Podiatric Medical Association (DMPA).
- 6.4.2.3 Any podiatric program sponsored by a hospital or clinic as part of a CPME approved residency program.
- 6.5 Hardship. The Board has the authority to make exceptions to the continuing education requirements upon written request of the licensee and a showing of good cause. "Good cause" may include, but is not limited to, disability, illness, military service, foreign residency, and retirement. Upon application, the Board shall set the time in which the licensee must complete the continuing education requirement. No extension shall be granted for more than 120 days after the end of the licensing period.
- 6.6 Self-directed activity
- 6.6.1 The Board may, upon request, review and approve credit for self-directed activities, including research, preparation and/or presentation of professional papers and articles, to a maximum of eight (8) hours per biennial licensing period. A licensee must obtain pre-approval of the Board prior to undertaking the self-directed activity in order to assure continuing education credit for the activity. Any self-directed activity submitted for approval must include a written proposal outlining the scope of the activity, the number of continuing education hours requested, the anticipated completion date(s), the role of the licensee in the case of multiple participants (e.g. research) and whether any part of the self-directed activity has ever been previously approved or submitted for credit by the same licensee.
- 6.6.2 The Board may award up to a maximum of eight (8) continuing education hours for the first-time preparation and presentation of an approved podiatric clinical course, in-service training, workshop, or seminar. A copy of the course syllabus and verification that the course was presented is required for Board approval.

Statutory authority: 24 **Del.C.** §§506(a)(7).

**10 DE Reg. 1153 (01/01/07)**

**16 DE Reg. 1195 (05/01/13)**

## **7.0 Grounds for Discipline and Hearing Procedures**

- 7.1 Grounds for discipline are listed in 24 **Del.C.** §515.
- 7.1.1 Advertising – communications to the public must be accurate and not convey false, untrue, deceptive, or misleading information. Licensees shall provide truthful and accurate representations of their credentials, training, experience, or ability. Licensees shall not communicate claims of superiority that cannot be substantiated. Violation of these standards is an act of consumer fraud or deception.
- 7.2 Disciplinary proceedings against a licensee may be initiated by submitting a complaint in writing to the Director of the Division of Professional Regulation as specified in 29 **Del.C.** §8735(h).
- 7.2.1 A copy of the written complaint shall be forwarded to the administrative assistant for the Board. At the next regularly scheduled Board meeting, a contact person for the Board shall be appointed and a copy of the written complaint given to that person.
- 7.2.2 The contact person appointed by the Board shall maintain strict confidentiality with respect to the contents of the complaint and shall not discuss the matter with other Board members or with the public. The contact person shall maintain contact with the investigator or Deputy Attorney General assigned to the case regarding the progress of the investigation.
- 7.2.3 In the instance when the case is being closed by the Division, the contact person shall report the facts and conclusions to the Board without revealing the identities of the parties involved. No vote of the Board is necessary to close the case.

- 7.2.4 If a hearing has been requested by the Deputy Attorney General, a copy of these Rules and Regulations shall be provided to the respondent upon request. The notice of hearing shall fully comply with 29 Del.C. §10122 and 10131 pertaining to the requirements of the notice of proceedings. All notices shall be sent to the respondent's address as reflected in the Board's records.
- 7.2.5 At any disciplinary hearing, the respondent shall have the right to appear in person or be represented by counsel, or both. The Respondent shall have the right to produce evidence and witnesses on his or her behalf and to cross examine witnesses. The Respondent shall be entitled to the issuance of subpoenas to compel the attendance of witnesses and the production of documents on his or her behalf.
- 7.2.6 No less than 10 days prior to the date set for a disciplinary hearing, the Department of Justice and the respondent shall submit to the Board and to each other, a list of the witnesses they intend to call at the hearing. Witnesses not listed shall be permitted to testify only upon a showing of reasonable cause for such omission.
- 7.2.7 If the respondent fails to appear at a disciplinary hearing after receiving proper notice, the Board may proceed to hear and determine the validity of the charges against the respondent.
- 7.3 Hearing procedures
- 7.3.1 The Board may administer oaths, take testimony, hear proofs and receive exhibits into evidence at any hearing. All testimony at any hearing shall be under oath.
- 7.3.2 Strict rules of evidence shall not apply. All evidence having probative value commonly accepted by reasonably prudent people in the conduct of their affairs shall be admitted.
- 7.3.3 An attorney representing a party in a hearing or matter before the Board shall notify the Board of the representation in writing as soon as practicable.
- 7.3.4 Requests for postponements of any matter scheduled before the Board shall be submitted to the Board's office in writing no less than three (3) days before the date scheduled for the hearing. Absent a showing of exceptional hardship, there shall be a maximum of one postponement allowed to each party to any hearing.
- 7.3.5 A complaint shall be deemed to "have merit" and the Board may impose disciplinary sanctions against the licensee if a majority of the members of the Board find, by a preponderance of the evidence, that the respondent has committed the act(s) of which he or she is accused and that those act(s) constitute grounds for discipline.

**11 DE Reg. 688 (11/01/07)**

**8.0 Voluntary Treatment Option for Chemically Dependent or Impaired Professionals**

- 8.1 If the report is received by the chairperson of the regulatory Board, that chairperson shall immediately notify the Director of Professional Regulation or his/her designate of the report. If the Director of Professional Regulation receives the report, he/she shall immediately notify the chairperson of the regulatory Board, or that chairperson's designate or designates.
- 8.2 The chairperson of the regulatory Board or that chairperson's designate or designates shall, within 7 days of receipt of the report, contact the individual in question and inform him/her in writing of the report, provide the individual written information describing the Voluntary Treatment Option, and give him/her the opportunity to enter the Voluntary Treatment Option.
- 8.3 In order for the individual to participate in the Voluntary Treatment Option, he/she shall agree to submit to a voluntary drug and alcohol screening and evaluation at a specified laboratory or health care facility. This initial evaluation and screen shall take place within 30 days following notification to the professional by the participating Board chairperson or that chairperson's designate(s).
- 8.4 A regulated professional with chemical dependency or impairment due to addiction to drugs or alcohol may enter into the Voluntary Treatment Option and continue to practice, subject to any limitations on practice the participating Board chairperson or that chairperson's designate or designates or the Director of the Division of Professional Regulation or his/her designate may, in consultation with the treating professional, deem necessary, only if such action will not endanger the public health, welfare or safety, and the regulated professional enters into an agreement with the Director of Professional Regulation or his/her designate and the chairperson of the participating Board or that chairperson's designate for a treatment plan and progresses satisfactorily in such treatment program and complies with all terms of that agreement. Treatment programs may be operated by professional Committees and Associations or other similar professional groups with the approval of the Director of Professional Regulation and the chairperson of the participating Board.
- 8.5 Failure to cooperate fully with the participating Board chairperson or that chairperson's designate or designates or the Director of the Division of Professional Regulation or his/her designate in regard to the Voluntary Treatment Option or to comply with their requests for evaluations and screens may disqualify the regulated

professional from the provisions of the Voluntary Treatment Option, and the participating Board chairperson or that chairperson's designate or designates shall cause to be activated an immediate investigation and institution of disciplinary proceedings, if appropriate, as outlined in subsection 8.8 of this section.

- 8.6 The Voluntary Treatment Option may require a regulated professional to enter into an agreement which includes, but is not limited to, the following provisions:
- 8.6.1 Entry of the regulated professional into a treatment program approved by the participating Board. Board approval shall not require that the regulated professional be identified to the Board. Treatment and evaluation functions must be performed by separate agencies to assure an unbiased assessment of the regulated professional's progress.
  - 8.6.2 Consent to the treating professional of the approved treatment program to report on the progress of the regulated professional to the chairperson of the participating Board or to that chairperson's designate or designates or to the Director of the Division of Professional Regulation or his/her designate at such intervals as required by the chairperson of the participating Board or that chairperson's designate or designates or the Director of the Division of Professional Regulation or his/her designate, and such person making such report will not be liable when such reports are made in good faith and without malice.
  - 8.6.3 Consent of the regulated professional, in accordance with applicable law, to the release of any treatment information from anyone within the approved treatment program.
  - 8.6.4 Agreement by the regulated professional to be personally responsible for all costs and charges associated with the Voluntary Treatment Option and treatment program(s). In addition, the Division of Professional Regulation may assess a fee to be paid by the regulated professional to cover administrative costs associated with the Voluntary Treatment Option. The amount of the fee imposed under this subparagraph shall approximate and reasonably reflect the costs necessary to defray the expenses of the participating Board, as well as the proportional expenses incurred by the Division of Professional Regulation in its services on behalf of the Board in addition to the administrative costs associated with the Voluntary Treatment Option.
  - 8.6.5 Agreement by the regulated professional that failure to satisfactorily progress in such treatment program shall be reported to the participating Board's chairperson or his/her designate or designates or to the Director of the Division of Professional Regulation or his/her designate by the treating professional who shall be immune from any liability for such reporting made in good faith and without malice.
  - 8.6.6 Compliance by the regulated professional with any terms or restrictions placed on professional practice as outlined in the agreement under the Voluntary Treatment Option.
- 8.7 The regulated professional's records of participation in the Voluntary Treatment Option will not reflect disciplinary action and shall not be considered public records open to public inspection. However, the participating Board may consider such records in setting a disciplinary sanction in any future matter in which the regulated professional's chemical dependency or impairment is an issue.
- 8.8 The participating Board's chairperson, his/her designate or designates or the Director of the Division of Professional Regulation or his/her designate may, in consultation with the treating professional at any time during the Voluntary Treatment Option, restrict the practice of a chemically dependent or impaired professional if such action is deemed necessary to protect the public health, welfare or safety.
- 8.9 If practice is restricted, the regulated professional may apply for unrestricted licensure upon completion of the program.
- 8.10 Failure to enter into such agreement or to comply with the terms and make satisfactory progress in the treatment program shall disqualify the regulated professional from the provisions of the Voluntary Treatment Option, and the participating Board shall be notified and cause to be activated an immediate investigation and disciplinary proceedings as appropriate.
- 8.11 Any person who reports pursuant to this section in good faith and without malice shall be immune from any civil, criminal or disciplinary liability arising from such reports, and shall have his/her confidentiality protected if the matter is handled in a nondisciplinary matter.
- 8.12 Any regulated professional who complies with all of the terms and completes the Voluntary Treatment Option shall have his/her confidentiality protected unless otherwise specified in a participating Board's rules and regulations. In such an instance, the written agreement with the regulated professional shall include the potential for disclosure and specify those to whom such information may be disclosed.

#### **4 DE Reg. 683 (10/01/00)**

**9.0 Definitions** - The following words and terms, when used in this regulation, should have the following meaning unless the context clearly indicates otherwise:

**“Conviction”**, unless otherwise defined by specific statute, means a verdict of guilty by whether entered by a judge or jury, or a plea of guilty or a plea of nolo contendere or other similar plea such as a “Robinson” or “Alford” plea unless the individual has been discharged under §4218 of Title 11 of the Delaware Code (probation before judgment) or under §1024 of Title 10 (domestic violence diversion program) or by §4764 of Title 16 (first offenders controlled substances diversion program).

**“Substantially similar crimes in another State or Jurisdiction”**, shall include all crimes prohibited by or punishable under Title 18 of the United States Code Annotated (U.S.C.A.) such as, but not limited to, Federal Health Care offenses.

- 9.1 Any crime which involves the use of physical force or violence toward or upon the person of another and shall include by way of example and not of limitation the following crimes set forth in Title 11 of the Delaware Code Annotated:

#### Assaults and Related Offenses

- 9.1.1 §603. Reckless endangering in the second degree;
- 9.1.2 §604. Reckless endangering in the first degree;
- 9.1.3 §605. Abuse of a pregnant female in the second degree;
- 9.1.4 §606. Abuse of a pregnant female in the first degree;
- 9.1.5 §611. Assault in the third degree;
- 9.1.6 §612. Assault in the second degree;
- 9.1.7 §613. Assault in the first degree;
- 9.1.8 §614. Assault on a sports official.
- 9.1.9 §615. Assault by abuse or neglect;
- 9.1.10 §621. Terroristic threatening;
- 9.1.11 §625. Unlawfully administering drugs;
- 9.1.12 §626. Unlawfully administering controlled substance or counterfeit substance or narcotic drugs;
- 9.1.13 §628. Vehicular assault in the second degree;
- 9.1.14 §629. Vehicular assault in the first degree;
- 9.1.15 §630. Vehicular homicide in the second degree;
- 9.1.16 §630A. Vehicular homicide in the first degree;
- 9.1.17 §631. Criminally negligent homicide;
- 9.1.18 §632. Manslaughter;
- 9.1.19 §633. Murder by abuse or neglect in the second degree;
- 9.1.20 §634. Murder by abuse or neglect in the first degree;
- 9.1.21 §635. Murder in the second degree;
- 9.1.22 §636. Murder in the first degree;

#### Sexual Offenses

- 9.1.23 §763. Sexual harassment;
- 9.1.24 §765. Indecent exposure in the first degree;
- 9.1.25 §766. Incest;
- 9.1.26 §767. Unlawful sexual contact in the third degree;
- 9.1.27 §768. Unlawful sexual contact in the second degree;
- 9.1.28 §769. Unlawful sexual contact in the first degree;
- 9.1.29 §770. Rape in the fourth degree;
- 9.1.30 §771. Rape in the third degree;
- 9.1.31 §772. Rape in the second degree;
- 9.1.32 §773. Rape in the first degree;
- 9.1.33 §774. Sexual extortion;
- 9.1.34 §776. Continuous sexual abuse of a child;
- 9.1.35 §780. Female genital mutilation.

#### Kidnapping and Related Offenses

- 9.1.36 §781. Unlawful imprisonment in the second degree;
- 9.1.37 §782. Unlawful imprisonment in the first degree;
- 9.1.38 §783. Kidnapping in the second degree;

9.1.39 §783A. Kidnapping in the first degree;

9.1.40 §785. Interference with custody;

Coercion

9.1.41 §791. Acts constituting coercion;

9.2 Crimes of dishonesty or aberrant behavior:

Arson and Related Offenses

9.2.1 §801. Arson in the third degree;

9.2.2 §802. Arson in the second degree;

9.2.3 §803. Arson in the first degree;

Criminal Trespass and Burglary

9.2.4 §820. Trespassing with intent to peer or peep into a window or door of another;

9.2.5 §823. Criminal trespass in the first degree;

9.2.6 §824. Burglary in the third degree;

9.2.7 §825. Burglary in the second degree;

9.2.8 §826. Burglary in the first degree;

9.2.9 §828. Possession of burglar's tools or instruments facilitating theft;

Robbery

9.2.10 §831. Robbery in the second degree;

9.2.11 §832. Robbery in the first degree.

9.2.12 §835. Carjacking in the second degree;

9.2.13 §836. Carjacking in the first degree;

Theft and Related Offenses

9.2.14 §840. Shoplifting; class G felony;

9.2.15 §841. Theft;

9.2.16 §842. Theft; lost or mislaid property; mistaken delivery.

9.2.17 §843. Theft; false pretense.

9.2.18 §844. Theft; false promise.

9.2.19 §845. Theft of services.

9.2.20 §846. Extortion;

9.2.21 §851. Receiving stolen property;

9.2.22 §854. Identity theft;

Forgery and Related Offenses

9.2.23 §861. Forgery; class F felony;

9.2.24 §862. Possession of forgery devices;

Offenses Involving Falsification of Records

9.2.25 §871. Falsifying business records;

9.2.26 §873. Tampering with public records in the second degree;

9.2.27 §876. Tampering with public records in the first degree;

9.2.28 §877. Offering a false instrument for filing;

9.2.29 §878. Issuing a false certificate;

Bribery Not Involving Public Servants

9.2.30 §881. Bribery;

9.2.31 §882. Bribe receiving;

Frauds on Creditors

9.2.32 §891. Defrauding secured creditors;

9.2.33 §892. Fraud in insolvency;

Other Frauds and Cheats

9.2.34 §900. Issuing a bad check;

9.2.35 §903. Unlawful use of credit card;

9.2.36 §903A. Reencoder and scanning devices;

9.2.37 §906. Deceptive business practices;



- 9.2.38 §907. Criminal impersonation;
- 9.2.39 §907A. Criminal impersonation, accident related;
- 9.2.40 §907B. Criminal impersonation of a police officer;
- 9.2.41 §913. Insurance fraud;
- 9.2.42 §913A. Health care fraud;

9.3 Crimes involving children or animals:

Child Welfare; Sexual Offenses, Animal Offenses

- 9.3.1 §1100A. Dealing in children;
- 9.3.2 §1101. Abandonment of child;
- 9.3.3 §1102. Endangering the welfare of a child;
- 9.3.4 §1105. Crime against a vulnerable adult;
- 9.3.5 §1106. Unlawfully dealing with a child;
- 9.3.6 §1107. Endangering children;
- 9.3.7 §1108. Sexual exploitation of a child;
- 9.3.8 §1109. Unlawfully dealing in child pornography;
- 9.3.9 §1111. Possession of child pornography;
- 9.3.10 §1112. Sexual offenders; prohibitions from school zones.
- 9.3.11 §1112A. Sexual solicitation of a child;
- 9.3.12 §1113. Criminal non-support and aggravated criminal non-support.
- 9.3.13 §1325. Cruelty to animals;
- 9.3.14 §1326. Animals; fighting and baiting prohibited;
- 9.3.15 §1327. Maintaining a dangerous animal;

9.4 Crimes against public order:

Bribery and Improper Influence

- 9.4.1 §1201. Bribery;
- 9.4.2 §1203. Receiving a bribe;
- 9.4.3 §1207. Improper influence;
- 9.4.4 §1211. Official misconduct;
- 9.4.5 §1212. Profiteering.

Perjury and related offenses

- 9.4.6 §1221. Perjury in the third degree;
- 9.4.7 §1222. Perjury in the second degree;
- 9.4.8 §1223. Perjury in the first degree;
- 9.4.9 §1233. Making a false written statement;
- 9.4.10 §1239. Wearing a disguise during the commission of a felony;
- 9.4.11 §1240. Terroristic threatening of public officials or public servants;
- 9.4.12 §1243. Obstructing fire-fighting operations;
- 9.4.13 §1244. Hindering prosecution;
- 9.4.14 §1245. Falsely reporting an incident;
- 9.4.15 §1246. Compounding a crime;
- 9.4.16 §1249. Abetting the violation of driver's license restrictions;
- 9.4.17 §1250. Offenses against law-enforcement animals;
- 9.4.18 §1251. Escape in the third degree;
- 9.4.19 §1252. Escape in the second degree;
- 9.4.20 §1253. Escape after conviction;
- 9.4.21 §1254. Assault in a detention facility;
- 9.4.22 §1259. Sexual relations in detention facility;

Offenses Relating to Judicial and Similar Proceedings

- 9.4.23 §1261. Bribing a witness;
- 9.4.24 §1262. Bribe receiving by a witness;
- 9.4.25 §1263. Tampering with a witness;

- 9.4.26 §1263A. Interfering with child witness.
- 9.4.27 §1264. Bribing a juror;
- 9.4.28 §1265. Bribe receiving by a juror;
- 9.4.29 §1266. Tampering with a juror;
- 9.4.30 §1267. Misconduct by a juror;
- 9.4.31 §1269. Tampering with physical evidence;
- 9.4.32 §1271. Criminal contempt;
- 9.4.33 §1271A. Criminal contempt of a domestic violence protective order;
- 9.5 Crimes against public health and decency:
  - Disorderly Conduct and Related Offenses
  - 9.5.1 §1304. Hate crimes;
  - 9.5.2 §1312. Stalking;
  - 9.5.3 §1312A.Stalking;
  - 9.5.4 §1313. Malicious interference with emergency communications;
  - 9.5.5 §1335. Violation of privacy;
  - 9.5.6 §1338. Bombs, incendiary devices, Molotov cocktails and explosive devices;
  - 9.5.7 §1339. Adulteration;
  - 9.5.8 §1340. Desecration of burial place.
  - Offenses Involving Public Indecency
  - 9.5.9 §1351. Promoting prostitution in the third degree;
  - 9.5.10 §1352. Promoting prostitution in the second degree;
  - 9.5.11 §1353. Promoting prostitution in the first degree;
  - Obscenity
  - 9.5.12 §1361. Obscenity; acts constituting;
  - 9.5.13 §1365. Obscene literature harmful to minors;
- 9.6 Drug related crimes:
  - 9.6.1 §4751. Prohibited acts A;
  - 9.6.2 §4752 (Former). Prohibited acts B;
  - 9.6.3 §4752A.Unlawful delivery of noncontrolled substance.
  - 9.6.4 §4753 (Former).Prohibited acts C.
  - 9.6.5 §4753A.Trafficking in marijuana, cocaine, illegal drugs, methamphetamines, L.S.D., designer drugs.
  - 9.6.6 §4754 (Former).Prohibited acts D;
  - 9.6.7 §4754A.Possession and delivery of noncontrolled prescription drug.
  - 9.6.8 §4755. Prohibited acts E;
  - 9.6.9 §4761 (Former).Distribution to persons under 21 years of age;
  - 9.6.10 §4761A.Purchase of drugs from minors;
  - 9.6.11 §4767 (Former).Distribution, delivery, or possession of controlled substance within 1,000 feet of school property;
  - 9.6.12 §4768 (Former).Distribution, delivery or possession of controlled substance in or within 300 feet of park, recreation area, church, synagogue or other place of worship.
  - 9.6.13 Drug Dealing - Aggravated Possession; class B felony. 16 **Del.C.** §4752.
  - 9.6.14 Drug Dealing - Aggravated Possession; class C felony. 16 **Del.C.** §4753.
  - 9.6.15 Drug Dealing - Aggravated Possession; class D felony. 16 **Del.C.** §4754.
  - 9.6.16 Drug Dealing - Aggravated Possession; class E felony. 16 **Del.C.** §4755.
  - 9.6.17 Drug Dealing - Aggravated Possession; class F felony. 16 **Del.C.** §4756.
  - 9.6.18 Prohibited acts under the Uniform Controlled Substances Act. 16 **Del.C.** §4756(a)(1)-(5) and (b).
  - 9.6.19 Drug paraphernalia; felony. 16 **Del.C.** §4771(a) and (b).
- 9.7 Weapons related crimes:
  - Offenses Involving Deadly Weapons and Dangerous Instruments
  - 9.7.1 §1442. Carrying a concealed deadly weapon;
  - 9.7.2 §1443. Carrying a concealed dangerous instrument;
  - 9.7.3 §1444. Possessing a destructive weapon;

- 9.7.4 §1445. Unlawfully dealing with a dangerous weapon;
- 9.7.5 §1446. Unlawfully dealing with a switchblade knife;
- 9.7.6 §1447. Possession of a deadly weapon during commission of a felony;
- 9.7.7 §1447A. Possession of a firearm during commission of a felony;
- 9.7.8 §1448. Possession and purchase of deadly weapons by persons prohibited;
- 9.7.9 §1448A. Criminal history record checks for sales or firearms;
- 9.7.10 §1449. Wearing body armor during commission of felony;
- 9.7.11 §1450. Receiving a stolen firearm;
- 9.7.12 §1451. Theft of a firearm;
- 9.7.13 §1454. Giving a firearm to person prohibited;
- 9.7.14 §1455. Engaging in a firearms transaction on behalf of another;
- 9.7.15 §1456. Unlawfully permitting a minor access to a firearm;
- 9.7.16 §1457. Possession of a weapon in a Safe School and Recreation Zone;
- 9.7.17 §1458. Removing a firearm from the possession of a law enforcement officer;
- 9.7.18 §1459. Possession of a weapon with a removed, obliterated or altered serial number;

Offenses Involving Organized Crime and Racketeering

- 9.7.19 §1504. Criminal Penalties for Organized Crime & Racketeering Offenses Involving Intimidation of Victims or Witnesses
- 9.7.20 §3533. Aggravated act of intimidation, Class D felony
- 9.7.21 §3532. Acts of Intimidation: Class E felony

Other Crimes

- 9.7.22 §3532. Act of intimidation;
- 9.7.23 §3533. Aggravated act of intimidation;
- 9.7.24 §3534. Attempt to intimidate;
- 9.7.25 Title 12 §210. Alteration, theft or destruction of Will.
- 9.7.26 Title 16 §1136. Abuse or neglect of a patient or resident of a nursing facility.
- 9.7.27 Title 21 §2118A. Unlawful possession or manufacture of proof of insurance;
- 9.7.28 Title 23 §2302. Operation of a vessel or boat while under the influence of intoxicating liquor and/or drugs; felony.
- 9.7.29 §4177. Driving a vehicle while under the influence or with a prohibited alcohol content; evidence; arrests; and penalties; felony
- 9.7.30 §4177M. Operating a commercial motor vehicle with a prohibited blood alcohol concentration or while impaired by drugs;
- 9.7.31 Title 30 §571. Attempt to evade or defeat tax;
- 9.7.32 §572. Failure to collect or pay over tax;
- 9.7.33 §573. Failure to file return, supply information or pay tax;
- 9.7.34 §3913. Welfare violations [knowing or reckless abuse of an infirm adult]
- 9.8 Any crime which is a violation of Title 24, Chapter 5 as it may be amended from time to time or of any other statute which requires the reporting of a medical situation or condition to state, federal or local authorities or a crime which constitutes a violation of the Podiatric Practice Act of the state in which the conviction occurred or in which the physician is licensed.
- 9.9 The Board reserves the jurisdiction and authority to modify this regulation as and if it becomes necessary to either add or delete crimes including such additions as may be required on an emergency basis under 29 Del.C. §10119 to address imminent peril to the public health, safety or welfare.

**4 DE Reg. 683 (10/01/00)**

**8 DE Reg. 1273 (03/01/05)**

**10 DE Reg. 1153 (01/01/07)**

**11 DE Reg. 688 (11/01/07)**

**12 DE Reg. 817 (12/01/08)**

**16 DE Reg. 1195 (05/01/13)**

**19 DE Reg. 427 (11/01/15)**

**21 DE Reg. 582 (01/01/18)**

**28 DE Reg. 33 (07/01/24) (Prop.)**