



This policy outlines the minimum Currency of Practice requirements for obtaining and maintaining any Medical Licence in Newfoundland and Labrador

Scope

Licensed medical practitioners and physician assistants must remain qualified, competent, and fit to practice medicine in their defined areas of practice. The purpose of this policy is to define a “significant interruption in practice”. Factors considered in determining a significant interruption in practice include Currency of Practice and significant gaps in practice.

This policy applies to both new applicants as well as all College Registrants renewing their Medical Licence in Newfoundland and Labrador.

Definitions

Currency of Practice the minimum hours of Clinical Practice required to maintain clinical competency.

Clinical Practice direct patient care for the purpose of making a diagnosis and/or providing treatment. This includes diagnostic specialties such as pathology and radiology, and the specialty of public health and preventive medicine. Research, non-clinical teaching, administration, and medical regulation do not constitute clinical practice.

Policy

All applicants for licensure must demonstrate that they meet Currency of Practice and do not have a significant gap in practice to the satisfaction of the College. In determining whether an applicant has a significant gap in practice, the College will consider the time the applicant has cumulatively been out of discipline specific training or practice within a time frame defined by the College. Consideration shall be given to how recent and how much continuous time in practice the applicant has accrued.

All medical practitioners and physician assistants licenced by the College are expected to maintain Currency of Practice and only practice in the areas in which they meet the minimum standard for Currency of Practice.

Full and Provisional Licences

To be considered current and to maintain currency in an area of practice, a physician must have engaged in Clinical Practice in that area for a minimum of 450 hours within the previous three years.

In appropriate circumstances, and at the discretion of the College, Currency of Practice and/or demonstration that the applicant does not have significant gaps in practice may be waived for applicants who must successfully complete a Practice Ready Assessment prior to the issuance of a Licence to Practice.

Clinical Assistant Licences

To be considered current, and to maintain currency in an area of practice, a physician must have engaged in Clinical Practice (independent practice or in a role where the physician was not the most responsible physician) in that area for a minimum of six continuous months within the four years preceding the date of application.

In appropriate circumstances, and at the discretion of the College, an acceptable alternative combination of time in practice, to the satisfaction of the College, may be considered to meet the currency of practice requirement for a Clinical Assistant Licence.

Physician Assistant Licences

To be considered current and to maintain currency in physician assisting, a physician assistant must have engaged in Clinical Practice for a minimum of six continuous months within the four years preceding the date of application.

In appropriate circumstances, and at the discretion of the College, an acceptable alternative combination of time in practice, to the satisfaction of the College, may be considered to meet the currency of practice requirement for a Physician Assistant Licence.

Exceptions

At the discretion of the College, an applicant or registrant whose Medical Licence will be restricted to research, non-clinical teaching, administration, and/or medical regulation may be issued a Medical Licence if they maintain currency within the scope of the restriction on their Medical Licence. In order to return to active Clinical Practice, the applicant or registrant must satisfy the [Re-Entry to Practice and/or Change of Scope of Practice Policy](#).

References

[Medical Regulations, 2023](#) – Section 14(1)(d)

Document History

Approved by the Council of the CPSNL	August 25, 2022
Update approved by the Council of the CPSNL	May 28, 2026
Effective Date	May 28, 2026