



CHIROPRACTIC EXAMINING BOARD
Room 121A, 1400 East Washington Avenue, Madison
Contact: Tom Ryan (608) 266-2112
September 29, 2016

The following agenda describes the issues that the Board plans to consider at the meeting. At the time of the meeting, items may be removed from the agenda. Please consult the meeting minutes for a record of the actions of the Board.

AGENDA

8:30 A.M.

OPEN SESSION – CALL TO ORDER – ROLL CALL

A) Adoption of Agenda (1-4)

B) Approval of Minutes of June 23, 2016 (5-7)

C) Administrative Updates

- 1) Department and Staff Updates
- 2) Board Members – Term Expiration Dates
 - a) Kelly Brown – 07/01/2016
 - b) John Church – 07/01/2013
 - c) Jeffrey King – 07/01/2019
 - d) Jeffrey Mackey – 07/01/2017
 - e) Juli McNeely – 07/01/2017
 - f) Patricia Schumacher – 07/01/2019

D) Elections, Nominations, and Appointments

E) 2017 Chiropractic Examining Board Meeting Dates (8)

F) Legislation and Administrative Rule Matters – Discussion and Consideration (9-49)

- 1) Proposal for Chir 4 and 10 Relating to Courses of Study for and Delegation to Chiropractic Technicians and Chiropractic Radiological Technicians
 - a) Update from Dr. Mackey: Course of Study as it Relates to Protecting the Public
 - b) Course of Study Comparative Information from Neighboring States **(10-17)**
 - c) Review Draft Rule Language **(18-24)**
- 2) Proposals for Revised Statement to Scope on Chir 1 to 13 Relating to Chiropractic Practice
 - a) Review of Proposed Changes to Chir 1 to 13 in 2015 Assembly Bill 871 **(25-49)**
- 3) Update on Pending Legislation and Pending and Possible Rulemaking Projects

G) Education and Examination Matters – Discussion and Consideration

- 1) Wisconsin Chiropractic Association (WCA) Denied Course Review **(50-68)**
 - a) Review of Possible Conflict(s) of Interest
 - b) Review Quorum
 - c) Review of Course Denial (If Not Prohibited by Existing Conflict or Number of Board Members Needed to Act)
 - 1) **APPEARANCE: Peter Schramm, DSPS Continuing Education Specialist**
- 2) Continuing Education Course Denial Process **(69)**

H) Speaking Engagement(s), Travel, or Public Relation Request(s)

I) Informational Items

J) Future Agenda Items

K) Items Added After Preparation of Agenda:

- 1) Introductions, Announcements and Recognition
- 2) Administrative Updates
- 3) Education and Examination Matters
- 4) Credentialing Matters
- 5) Practice Matters
- 6) Legislation/Administrative Rule Matters
- 7) Preceptor Approvals
- 8) Liaison Report(s)
- 9) Informational Item(s)
- 10) Disciplinary Matters
- 11) Presentations of Petition(s) for Summary Suspension
- 12) Presentation of Proposed Stipulation(s), Final Decision(s) and Order(s)
- 13) Presentation of Proposed Decisions
- 14) Presentation of Interim Order(s)
- 15) Petitions for Re-Hearing
- 16) Petitions for Assessments
- 17) Petitions to Vacate Order(s)
- 18) Petitions for Designation of Hearing Examiner
- 19) Requests for Disciplinary Proceeding Presentations
- 20) Motions
- 21) Petitions
- 22) Appearances from Requests Received or Renewed
- 23) Speaking Engagement(s), Travel, or Public Relation Request(s), and Reports

L) Public Comments

CONVENE TO CLOSED SESSION to deliberate on cases following hearing (§ 19.85 (1) (a), Stats.); to consider licensure or certification of individuals (§ 19.85 (1) (b), Stats.); to consider closing disciplinary investigations with administrative warnings (§ 19.85 (1) (b), Stats. and § 440.205, Stats.); to consider individual histories or disciplinary data (§ 19.85 (1) (f), Stats.); and to confer with legal counsel (§ 19.85 (1) (g), Stats.).

M) Deliberation on Credentialing Matters

- 1) **9:40 APPEARANCE: Tiffany Roemaat** – Chiropractic Technician Application (**70-121**)

N) Deliberation on Division of Legal Services and Compliance (DLSC) Matters

- 1) Administrative Warning(s)
 - a) 16 CHI 006 (M.R.Z.) (**122-123**)
- 2) Proposed Stipulation(s), Final Decision(s) and Order(s)
 - a) 14 CHI 033 – Mark S. Drewicz, D.C. (**124-130**)
- 3) Case Closing(s)
 - a) 16 CHI 013 (T.E.S.) (**131-133**)
- 4) Monitoring (**134-156**)
 - a) Casimer Kobylinski – Requesting Full Licensure (**136-143**)
 - b) Karlye Stephenson – Requesting Full Licensure (**144-156**)

O) Deliberation on Order(s) Fixing Costs

- 1) Tyler G. Schneekloth, D.C., Respondent (ORDER0004705)(DHA Case # SPS 15-0036)(DLSC Case # 14 CHI 004) (**157-164**)

P) Deliberation of Items Added After Preparation of the Agenda

- 1) Education and Examination Matters
- 2) Credentialing Matters
- 3) Disciplinary Matters
- 4) Monitoring Matters
- 5) Professional Assistance Procedure (PAP) Matters
- 6) Petition(s) for Summary Suspensions
- 7) Proposed Stipulations, Final Decisions and Orders
- 8) Administrative Warnings
- 9) Proposed Decisions
- 10) Matters Relating to Costs
- 11) Complaints
- 12) Case Closings
- 13) Case Status Report
- 14) Petition(s) for Extension of Time
- 15) Proposed Interim Orders
- 16) Petitions for Assessments and Evaluations
- 17) Petitions to Vacate Orders
- 18) Remedial Education Cases
- 19) Motions
- 20) Petitions for Re-Hearing
- 21) Appearances from Requests Received or Renewed

Q) Consulting with Legal Counsel

RECONVENE TO OPEN SESSION IMMEDIATELY FOLLOWING CLOSED SESSION

- R) Open Session Items Noticed Above not Completed in the Initial Open Session
- S) Vote on Items Considered or Deliberated Upon in Closed Session, if Voting is Appropriate
- T) Ratification of Licenses and Certificates

ADJOURNMENT

The next scheduled meeting is December 1, 2016.

**CHIROPRACTIC EXAMINING BOARD
MEETING MINUTES
JUNE 23, 2016**

PRESENT: John Church, D.C; Jeffrey Mackey, D.C.; Juli McNeely; and Patricia Schumacher, D.C.

EXCUSED: Kelly Brown

STAFF: Tom Ryan, Executive Director; Nilajah Hardin, Bureau Assistant; and other Department Staff

CALL TO ORDER

Patricia Schumacher, Chair, called the meeting to order at 8:30 a.m. A quorum of four (4) members was confirmed.

ADOPTION OF AGENDA

MOTION: Jeffrey Mackey moved, seconded by John Church, to adopt the agenda as published. Motion carried unanimously.

APPROVAL OF MINUTES

MOTION: Jeffrey Mackey moved, seconded by John Church, to approve the minutes of April 12, 2016 as published. Motion carried unanimously.

ELECTIONS, NOMINATIONS, AND APPOINTMENTS

Appointment of Liaisons

2016 LIAISON APPOINTMENTS	
Credentialing Liaison	Patricia Schumacher <i>Alternate: John Church</i>
Professional Assistance Procedure (PAP) Liaison	John Church <i>Alternate: Juli McNeely</i>
Legislative Liaison	Patricia Schumacher

MOTION: Jeffrey Mackey moved, seconded by Juli McNeely, to affirm the Chair's appointment of liaisons. Motion carried unanimously.

LEGISLATION AND ADMINISTRATIVE RULE MATTERS

Chapters Chir 1 to 13 Relating to Chiropractic Practice

Review of Chapters Chir 1 to 13 to Determine Scope of Any Necessary Updates

MOTION: Jeffrey Mackey moved, seconded by John Church, to **table** the review of Chapters Chir 1 to 13 relating to Chiropractic Practice to the next Board meeting. Motion carried unanimously.

EDUCATION AND EXAMINATION MATTERS

Wisconsin Chiropractic Association (WCA) Denied Course Review

Jeffrey Mackey recused from the discussion regarding the Wisconsin Chiropractic Association (WCA) Denied Course Review. The Board suspended discussion regarding this item due to lack of quorum.

CLOSED SESSION

MOTION: Jeffrey Mackey moved, seconded by John Church, to convene to Closed Session to deliberate on cases following hearing (§ 19.85(1) (a), Stats.); to consider licensure or certification of individuals (§ 19.85 (1) (b), Stats.); to consider closing disciplinary investigations with administrative warnings (§ 19.85 (1) (b), Stats. and § 440.205, Stats.); to consider individual histories or disciplinary data (§ 19.85 (1) (f), Stats.); and to confer with legal counsel (§ 19.85 (1) (g), Stats.). The Patricia Schumacher read the language of the motion aloud for the record. The vote of each member was ascertained by voice vote. Roll Call Vote: John Church-yes; Jeffrey Mackey-yes; Juli McNeely-yes; Patricia Schumacher-yes. Motion carried unanimously.

The Board convened into Closed Session at 10:11 a.m.

RECONVENE TO OPEN SESSION

MOTION: Juli McNeely moved, seconded by Jeffrey Mackey, to reconvene in Open Session at 10:14 a.m. Motion carried unanimously.

VOTE ON ITEMS CONSIDERED OR DELIBERATED UPON IN CLOSED SESSION, IF VOTING IS APPROPRIATE

MOTION: Jeffrey Mackey moved, seconded by John Church, to affirm all motions made and votes taken in Closed Session. Motion carried unanimously.

DIVISION OF LEGAL SERVICES AND COMPLIANCE (DLSC) MATTERS

Proposed Stipulations, Final Decisions and Orders

MOTION: Jeffrey Mackey moved, seconded by Juli McNeely, to adopt the Findings of Fact, Conclusions of Law, Stipulation and Order, in the following matters:

1. 14 CHI 012 – Kurt R. Stein, D.C.
2. 16 CHI 001 – Scott H. Wruck, D.C.

Motion carried unanimously.

Case Closings

15 CHI 008 – G.J. and D.R.

MOTION: Jeffrey Mackey moved, seconded by Juli McNeely, to close DLSC case number 15 CHI 008 against G.J. and D.R. for **Insufficient Evidence**. Motion carried unanimously.

RATIFICATION OF LICENSES AND CERTIFICATES

MOTION: Jeffrey Mackey moved, seconded by John Church, to delegate ratification of examination results to DSPS staff and to ratify all licenses and certificates as issued. Motion carried unanimously.

ADJOURNMENT

MOTION: Jeffrey Mackey, seconded by Juli McNeely, to adjourn the meeting. Motion carried unanimously.

The meeting adjourned at 10:15 a.m.

DRAFT

**State of Wisconsin
Department of Safety & Professional Services**

AGENDA REQUEST FORM

1) Name and Title of Person Submitting the Request: Nilajah Hardin, Bureau Assistant on behalf of Tom Ryan, Executive Director		2) Date When Request Submitted: 08/15/16 <small>Items will be considered late if submitted after 12:00 p.m. on the deadline date which is 8 business days before the meeting</small>									
3) Name of Board, Committee, Council, Sections: Chiropractic Examining Board											
4) Meeting Date: 9/29/16	5) Attachments: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	6) How should the item be titled on the agenda page? 2017 Chiropractic Examining Board Meeting Dates									
7) Place Item in: <input checked="" type="checkbox"/> Open Session <input type="checkbox"/> Closed Session	8) Is an appearance before the Board being scheduled? <input type="checkbox"/> Yes (Fill out Board Appearance Request) <input checked="" type="checkbox"/> No	9) Name of Case Advisor(s), if required: N/A									
10) Describe the issue and action that should be addressed: Please see the following 2017 meeting dates for the Board: January 26, 2017 March 30, 2017 June 29, 2017 August 3, 2017 December 21, 2017											
11) Authorization <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%; border-bottom: 1px solid black;"><i>Nilajah D. Hardin</i></td> <td style="width: 40%; border-bottom: 1px solid black; text-align: right;"><i>08/15/16</i></td> </tr> <tr> <td style="border-bottom: 1px solid black;">Signature of person making this request</td> <td style="border-bottom: 1px solid black; text-align: right;">Date</td> </tr> <tr> <td style="border-bottom: 1px solid black;">Supervisor (if required)</td> <td style="border-bottom: 1px solid black; text-align: right;">Date</td> </tr> <tr> <td colspan="2" style="border-bottom: 1px solid black;">Executive Director signature (indicates approval to add post agenda deadline item to agenda) Date</td> </tr> </table>				<i>Nilajah D. Hardin</i>	<i>08/15/16</i>	Signature of person making this request	Date	Supervisor (if required)	Date	Executive Director signature (indicates approval to add post agenda deadline item to agenda) Date	
<i>Nilajah D. Hardin</i>	<i>08/15/16</i>										
Signature of person making this request	Date										
Supervisor (if required)	Date										
Executive Director signature (indicates approval to add post agenda deadline item to agenda) Date											
Directions for including supporting documents: 1. This form should be attached to any documents submitted to the agenda. 2. Post Agenda Deadline items must be authorized by a Supervisor and the Policy Development Executive Director. 3. If necessary, provide original documents needing Board Chairperson signature to the Bureau Assistant prior to the start of a meeting.											

**State of Wisconsin
Department of Safety & Professional Services**

AGENDA REQUEST FORM

1) Name and Title of Person Submitting the Request: Dale Kleven Administrative Rules Coordinator		2) Date When Request Submitted: 9/19/16 Items will be considered late if submitted after 12:00 p.m. on the deadline date: ▪ 8 business days before the meeting	
3) Name of Board, Committee, Council, Sections: Chiropractic Examining Board			
4) Meeting Date: 9/29/16	5) Attachments: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	6) How should the item be titled on the agenda page? Legislation and Rule Matters – Discussion and Consideration 1. Proposals for Chir 4 and 10 Relating to Courses of Study for and Delegation to Chiropractic Technicians and Chiropractic Radiological Technicians a. Update From Dr. Mackey: Course of Study as it Relates to Protecting the Public b. Course of Study Comparative Information From Neighboring States c. Review Draft Rule Language 2. Proposals for Revised Statement of Scope on Chir 1 to 13 Relating to Chiropractic Practice a. Review of Proposed Changes to Chir 1 to 13 in 2015 Assembly Bill 871 3. Update on Pending Legislation and Pending and Possible Rulemaking Projects	
7) Place Item in: <input checked="" type="checkbox"/> Open Session <input type="checkbox"/> Closed Session <input type="checkbox"/> Both		8) Is an appearance before the Board being scheduled? <input type="checkbox"/> Yes (Fill out Board Appearance Request) <input checked="" type="checkbox"/> No	9) Name of Case Advisor(s), if required:
10) Describe the issue and action that should be addressed:			
11) Authorization			
<i>Dale Kleven</i>		<i>September 19, 2016</i>	
Signature of person making this request		Date	
Supervisor (if required)		Date	
Executive Director signature (indicates approval to add post agenda deadline item to agenda) Date			
Directions for including supporting documents: 1. This form should be attached to any documents submitted to the agenda. 2. Post Agenda Deadline items must be authorized by a Supervisor and the Policy Development Executive Director. 3. If necessary, Provide original documents needing Board Chairperson signature to the Bureau Assistant prior to the start of a meeting.			

Registered Chiropractic Clinical Assistants

REGULATIONS

7.00 Standards for Registered Chiropractic Clinical Assistants

Section 7.01 Board Approved Education, Training, and Examination for Registered Chiropractic Clinical Assistants

- (A) To establish compliance with the requirements set forth in Article V, Section 505 of the Chiropractic Practice Act, an applicant must provide evidence satisfactory to the Board of the following:
1. Complete at least 24 hours of a Board-approved educational program; and
 2. Complete at least 300 hours of clinical training as a chiropractic clinical assistant, supervised by a Chiropractor; and
 3. Obtain a passing score on a competency examination approved by the Board.
- (B) An applicant seeking registration by endorsement as a Registered Chiropractic Clinical Assistant must comply with the requirements set forth in Article V, Section 506 of the Chiropractic Practice Act.

*Statutory authority: Article II Section 214 (A)(7) and Section 216;
and Article V, Section 501 (A) and (B); Section 505; Section 506*

Section 7.02 Acceptable Certification Entity

Based upon the statutory authority set forth in Article V, Section 507 of the Chiropractic Practice Act, the Board recognizes the FCLB Certified Chiropractic Clinical Assistant (CCCA) program as providing acceptable documentation of candidate qualifications under Article V, Section 505 of the Chiropractic Practice Act, and Section 701 (A) through (C) of these regulations for purposes of initial registration.

*Statutory authority: Article II Section 214 (A)(7) and Section 216; Article V, Section 504 (C);
and Article V, Section 507*

Section 7.03 Approved Education

A Registered Chiropractic Clinical Assistant educational program must provide evidence satisfactory to the Board of the following:

- (A) Submits a complete application in a form and manner provided by the Board;
- (B) Pays fees as determined by the Board;
- (C) Provides adequate instruction on each of the following topics: foundational knowledge, patient safety and procedures, therapeutic modalities and procedures, documentation, and ethics and boundaries;
- (D) Uses competent instructors as documented by appropriate academic training, professional licensure or certification, or professionally recognized experience;
- (E) Employs a reputable process for documenting attendance; and
- (F) Includes a minimum of twenty-four (24) hours of didactic study.

Statutory authority: Article II Section 214 (A)(7) and Section 216; and Article V, Section 501 (B)



FLORIDA

64B2-18.003 Approval of Training Programs.

(1) Application for approval of a training program by the Board and certification by the Department shall be made by letter and supporting documents submitted to the Board and must demonstrate to the satisfaction of the Board that such program fulfills the requirements set forth in subsections (2)-(8) of this rule. The supporting documents submitted to the Board must include, at the very least, a syllabus or program outline specifying the classroom hours for each segment of the program, a vitae of each instructor, and the method to be employed in checking attendance. Upon notification by the Director that the Board approves a training program, the Department shall issue a certification for the training program.

(2) The training program may be sponsored by or in conjunction with a chiropractic college maintaining a standard and reputability approved by the Board or may be sponsored by or in conjunction with a college or university which is accredited by, or has status with an agency or its successor which is recognized and approved by the United States Office of Education or the Council on Post Secondary Accreditation. The training program may also be conducted by any organization under the auspices of a chiropractic college maintaining a standard and reputability approved by the Board or under the auspices of a college or university which is accredited by, or has status with an agency or its successor which is recognized and approved by the United States Office of Education or the Council on Post Secondary Accreditation.

(3) The curriculum must provide adequate instruction in the basic sciences underlying chiropractic practice and shall include, at a minimum, instruction and training in the principles and practice of chiropractic, the nature of disease processes and symptoms, diagnostic tests, history taking, physical examination, venipuncture, therapeutic procedures, radiation safety, diet and nutrition, public health and first aid, and spinal anatomy. The curriculum must include both clinical and didactic training and must consist of a minimum of 200 classroom hours to be completed in no less than 24 months. A classroom hour is defined as 50 consecutive minutes of uninterrupted clinical or didactic instruction. The curriculum should be in sufficient depth to enable the graduate to integrate and organize historical and physical findings. The didactic instruction shall follow a planned and progressive outline and shall include an appropriate mixture of classroom lectures, text book assignments, discussions, demonstrations, and similar activities. The clinical instruction shall include practical instruction and chiropractic clinical experience under qualified supervision sufficient to provide understanding of and skill in performing those functions which the assistant may be asked to perform. There must be sufficient evaluative procedures to assure adequate evidence of minimal competence. The program must insure that the student possesses a broad general understanding of chiropractic practice and therapeutic techniques.

(4) To retain its approval by the Board, an approved program shall:

(a) Report to the Board yearly summaries of case loads and educational activities done by clinical affiliates, including volume of clinical patients or diagnoses, and the operating budget;

(b) Maintain a satisfactory record of the entrance qualifications and evaluations of all work done by each student, which shall be available to the Board; and

(c) Notify the Board in writing of any major changes in the curriculum or a change in the directorship, sponsorship or organization of the program.

(5) The approval of a program may be withdrawn when the Board finds that the program fails to maintain the educational standards described above. Withdrawal of approval from a program will in no way affect the status of an assistant who graduated from such a program while it was approved and who has been certified by the Board.

(6) In determining approval of a training program, the Board may investigate and make a personal inspection thereof, or delegate to one or more of its members or any other duly qualified person or persons, the power and authority to make such investigation for the Board and report their conclusions.

(7) The training program may also offer additional education and training in those specialty areas enumerated in Rule 64B2-18.004, F.A.C. This specialty education and training shall consist of at least seventy-five (75) classroom hours and shall be approved by the Board in the manner set forth in this rule. In order to be eligible for a specialty training program an individual must be previously certified as a chiropractic physician's assistant.

Specific Authority 460.405, 460.4165(9) FS. Law Implemented 460.4165(5) FS. History—New 11-25-81, Amended 11-23-82, Formerly 21D-18.03, 21D-18.003, 61F2-18.003, 59N-18.003, Amended 6-7-00.

645—43.12 (151) Chiropractic assistants. The requirements of this rule shall become effective on July 1, 2009.

43.12(1) *Supervisory responsibilities of the chiropractic physician.*

a. The supervising chiropractic physician shall ensure at all times that the chiropractic assistant has the necessary training and skills as required by these rules to competently perform the delegated services.

b. The supervising chiropractic physician may delegate services to a chiropractic assistant that are within the scope of practice of the chiropractic physician in a manner consistent with these rules. Violation of these rules shall be grounds for discipline under 645—Chapter 45.

c. A chiropractic physician shall not delegate to the chiropractic assistant the following:

- (1) Services outside the chiropractic physician's scope of practice;
- (2) Initiation, alteration, or termination of chiropractic treatment programs;
- (3) Chiropractic manipulation and adjustments;
- (4) Diagnosis of a condition.

d. A supervising chiropractic physician shall ensure that a chiropractic assistant is informed of the supervisor and chiropractic assistant relationship and is responsible for all services performed by the chiropractic assistant.

43.12(2) *Education requirements for chiropractic assistants.*

a. The supervising chiropractic physician shall ensure that a chiropractic assistant has completed a chiropractic assistant training program. A chiropractic assistant training program shall include training and instruction on the use of chiropractic physiotherapy procedures related to services to be provided by the chiropractic assistant. Any chiropractic assistant training program shall be provided by an approved CCE-accredited chiropractic college or a chiropractic state association.

b. Chiropractic assistants performing active chiropractic physiotherapy procedures are required to complete 12 hours of instruction, of which 6 hours shall be clinical experience under the supervision of the chiropractic physician.

c. Chiropractic assistants performing passive chiropractic physiotherapy procedures are required to complete 12 hours of instruction, of which 6 hours shall be clinical experience under the supervision of the chiropractic physician.

d. If both paragraphs "*b*" and "*c*" apply, then 12 hours of instruction for active chiropractic physiotherapy procedures and 12 hours of instruction for passive chiropractic physiotherapy procedures shall be required for a total of 24 hours of instruction.

e. The supervising chiropractic physician shall provide a written attestation to the chiropractic college that the chiropractic assistant has completed the clinical experience. The college shall issue a separate certificate of completion for the active or passive chiropractic training program as defined in paragraphs "*b*," "*c*" and "*d*" of this subrule.

f. The chiropractic physician shall maintain in the chiropractic physician's primary place of business proof of the chiropractic assistant's completion of the training program. Copies of such documents shall be provided to the board upon request.

[ARC 0006C, IAB 2/8/12, effective 3/14/12]

10.43.07.05

MARYLAND

.05 Chiropractic Applicant or Assistant Qualifications and Training.

A. At the time of application for hire and training, an applicant shall:

- (1) Be 18 years old or older;
- (2) Be of good moral character;
- (3) Be a U.S. Citizen or hold federal documentation authorizing employment;
- (4) Be proficient in the English language sufficiently to allow for clear interaction with patients;
- (5) Be enrolled in a Board-approved Cardiopulmonary Resuscitation (CPR) class or be currently CPR certified;
- (6) Be a graduate of a high school or hold a GED; and
- (7) Have any foreign transcripts professionally interpreted and certified

B. The supervising chiropractor shall complete and submit to the Board a legible application and documentation proving that the applicant meets the qualifications listed in §A of this regulation .

C. An applicant may not commence work or training until the supervising chiropractor receives an authorization letter from the Board.

D. Within 120 days of the date of hire, the applicant shall:

- (1) Satisfactorily complete the required CPR class;
- (2) Enroll in a Board-approved chiropractic assistant 103-hour course of instruction; and
- (3) Submit proof of completion of both requirements in a timely manner.

E. Within 1 calendar year of the date of hire, the applicant shall satisfactorily complete:

- (1) A minimum of 520 in-service training hours, of which:
 - (a) The initial 40 hours shall consist of observation procedures as listed in Regulation .09 of this chapter and performed by the supervising chiropractor or registered chiropractic assistant; and
 - (b) The remaining 480 hours shall consist of direct supervision by a supervising chiropractor in the treatment area; and
- (2) A 103 hour course of instruction from a Board-approved provider with a minimum of:
 - (a) 24 hours in anatomy and terminology;
 - (b) 3 hours in jurisprudence and risk management; and
 - (c) 76 hours in physical therapy modalities and indications.

F. No waivers, extensions, or exceptions shall be granted except by majority vote of the Board .

G. Failure to meet the requirements of §§D and E of this regulation shall result in immediate suspension from the applicant training program.

NORTH CAROLINA

21 NCAC 10 .0213 CERTIFICATION OF CLINICAL ASSISTANTS

(a) Classification of Applicants. The Board hereby establishes the following categories of applicants for clinical assistant competency certification. Different certification requirements apply to each category.

- (1) Grandfathered applicants. A "grandfathered applicant" is an applicant who is currently employed as a clinical assistant, who has been trained by the applicant's employing physician to perform the duties of a clinical assistant as defined in G.S. 90-143.4(a), and who shall have amassed at least 500 working hours in the capacity of a clinical assistant as of the effective date of this Rule. (Note: this category is temporary; the opportunity to be grandfathered shall expire 120 days after the effective date of this Rule.)
- (2) Reciprocity applicants. A "reciprocity applicant" is an applicant who is currently certified or registered as a clinical assistant in another state whose requirements for certification or registration are substantially similar to or more stringent than the requirements for certification in North Carolina.
- (3) New applicants. A "new applicant" is any applicant who is not a grandfathered applicant or a reciprocity applicant.

(b) Requirements for Certification. Every applicant, regardless of classification, shall complete an application form provided by the Board (available at www.ncchiroboard.com) and submit evidence satisfactory to the Board that the applicant is at least 18 years of age, a high school graduate or the equivalent, and possessed of good moral character. A photocopy of the applicant's birth certificate, driver's license or government-issued identification card shall constitute *prima facie* evidence of the applicant's age. A photocopy of the applicant's high school diploma, transcript or general equivalency diploma (G.E.D.) shall constitute *prima facie* evidence of the applicant's graduation from high school. An affidavit attesting to good moral character and signed by a chiropractic physician or other responsible party who knows the applicant and is not related to the applicant shall constitute *prima facie* evidence of the applicant's good moral character. Every applicant, regardless of classification, shall pay to the Board an initial certification fee in the amount of twenty dollars (\$20.00). In addition to the foregoing general requirements, an applicant shall satisfy the requirements for the applicant's individual category, as follows:

- (1) Grandfathered Applicants. A grandfathered applicant shall submit, on a form provided by the Board (available at www.ncchiroboard.com), an attestation signed by the applicant's employing physician confirming that the applicant is currently employed as a clinical assistant, has received sufficient on-the-job training, in the judgment of the employer, to perform the duties of a clinical assistant, and has amassed at least 500 hours of work experience in the capacity of a clinical assistant as of the effective date of this Rule. In addition, a grandfathered applicant shall take and pass a refresher proficiency examination administered by or under the authority of the Board, as described in Paragraph (d) of this Rule. (Note: grandfathered applications shall only be accepted for 120 days after the effective date of this Rule.)
- (2) Reciprocity Applicants. A reciprocity applicant shall submit a copy of the applicant's current certification or registration as a clinical assistant in a state with which North Carolina reciprocates and shall also submit written confirmation from the state's certifying authority or registrar that the applicant is in good standing in said state.
- (3) New Applicants. A new applicant shall submit evidence satisfactory to the Board that the applicant has completed an approved clinical assistant education program as described in Paragraph (c) of this Rule. A certificate of completion filed with the Board by the program sponsor shall constitute *prima facie* evidence that the applicant has obtained the required education. A new applicant shall also take and pass the standard proficiency examination administered by or under the authority of the Board, as described in Paragraph (d) of this Rule.

(c) Education Programs. In order to be approved by the Board, a clinical assistant education program for new applicants shall be at least 24 hours in length, of which at least six hours shall be in-person didactic training with an instructor or instructors who, based on education and experience, are deemed competent by the Board to teach the portion of the curriculum they have been assigned. Credit for online coursework shall not exceed 18 hours, and all online coursework shall precede didactic training. At a minimum, the education program shall provide sufficient instruction in the five subjects set forth in G.S. 90-143.4(c) to enable its graduates to satisfy all applicable standards of care. To obtain approval of an education program, the program sponsor shall submit to the Board, at least 30 days prior to the proposed starting date, all instructional materials to be used in the program, including a syllabus of the didactic training, and a *curriculum vitae* for each instructor.

(d) Examinations. The refresher proficiency examination shall emphasize the practical skills possessed by grandfathered applicants and shall be available online. The standard proficiency examination for new applicants

§ 90-143.4. Chiropractic clinical assistants; certification of competency.

(a) "Chiropractic clinical assistant" means a nonlicensed employee of a chiropractic physician whose duties include (i) collecting general health data, such as the taking of an oral history or vital sign measurements, (ii) applying therapeutic procedures, such as thermal, sound, light and electrical modalities, and hydrotherapy, and (iii) monitoring prescribed rehabilitative activities. Nothing in this section shall be construed to allow a chiropractic clinical assistant to provide a chiropractic adjustment, manual therapy, nutritional instruction, counseling, or any other therapeutic service that requires individual licensure.

(b) Any person employed as a chiropractic clinical assistant shall obtain a certificate of competency from the State Board of Chiropractic Examiners (Board) within 120 days after the person begins employment. Certification shall not be required for employees whose duties are limited to administrative activities of a nonclinical nature. Except as otherwise provided in this section, it shall be unlawful for any person to practice as a chiropractic clinical assistant unless duly certified by the Board.

(c) An applicant for certification under this section shall be (i) at least 18 years of age, (ii) a high school graduate or the equivalent, (iii) of good moral character, and (iv) able to demonstrate proficiency in the following subjects:

- (1) Basic anatomy.
- (2) Chiropractic philosophy and terminology.
- (3) Utilization of standard therapeutic modalities.
- (4) Contraindications and response to emergencies.
- (5) Jurisprudence and patient privacy protection.

(d) If an applicant for certification is already certified or registered as a chiropractic clinical assistant in another state, the Board shall issue a certificate of competency upon evidence that the applicant is in good standing in the other state, provided the requirements for certification or registration in the other state are substantially similar to or more stringent than the requirements for certification in this State.

(e) Any certificate issued under this section shall expire at the end of the calendar year unless renewed in a time and manner established by the Board. Applicants for initial certification or renewal of certification shall pay to the secretary of the Board a fee as prescribed and set by the Board, which fee shall not exceed fifty dollars (\$50.00).

(f) The Board may adopt rules pertaining to initial educational requirements, course approval, instructor credentials, examination of applicants, grandfathering, reciprocity, continuing education requirements, and the submission and processing of applications as are reasonably necessary to enforce this section. (2013-290, s. 1.)

Oregon Board of Chiropractic Examiners

Chiropractic Assistant Initial Training 8 Hours Didactic Requirements AND 4 Hours Hands-on

1. Licensing & Regulation: **30 minutes (1/2 hour)**
 - Scope of practice
 - Board recommends add'l training for CAs who perform massage/soft tissue work
 - Duty to Report: To whom does this apply?
 - Supervision required at all times (DC in office)
2. Principles of Chiropractic: **60 minutes (1 hour)**
3. Basic Medical Terminology: **60 minutes (1 hour)**
 - Subluxation/joint dysfunction
 - Sprain/strain
 - Contusion
 - Tendinitis
 - Bursitis
 - Ligament vs. Tendon
 - Joint capsule
 - Rotator cuff
 - Fracture vs. broken bone vs. cracked bone (all the same)
 - Hypertonicity / Hypotonicity
 - Traction / Distraction
 - Cryotherapy
 - Trigger point therapy
 - Effleurage
 - Physiotherapy / Modality
 - Prone / Supine
 - Therapeutic Exercise
 - Activities of Daily Living (ADL)
 - Outcomes measures (e.g. Oswestry, NDI, VAS pain scale)
 - S.O.A.P. (explain parts)
4. Boundaries: **45 minutes (3/4 hour)**
 - Draping
 - CA/patient power differential (applies also to DC/patient)
 - Sexual/Personal/Cultural boundaries:
 - Language
 - Professional touch (inform patient/permission)
 - Dating patients (no!) and how to respond if asked out by a patient
 - Cultural differences that may require extra care or change in procedures

5. Patient Positioning: **15 minutes (1/4 hour)**
 - Bolsters prone and supine
 - Side-lying head support
 - Be aware of injured body parts, and communicate with the patient and DC

6. HIPAA: What happens in the clinic, stays in the clinic!: **30 minutes (1/2 hour)**
 - Patient information may not be used for personal use
 - Charts/patient information in common areas (verbal and written)
 - Computer screens: (Appointment Calendars/Scheduling/Account balances)
 - Release of records requirements:
 - i. When family members are treated in the same clinic, can you share information? What is *required* before any information can be shared?
 - ii. Confidentiality extends to friends, coworkers, employees, injured workers!

7. Sanitation/Safety: **30 minutes (1/2 hour)**
 - Equipment (tables, physiotherapy, exercise)
 - Laundry (gowns/towels/shorts etc)
 - Personal
 - Other OSHA

8. Basic Anatomy: **75 minutes (1 hour 15 minutes)**

Spine, muscles, bone, bony landmarks
Phases in treatment and healing

9. Indications and Contraindications for physiotherapy modalities, exercise, soft tissue therapies
105 minutes (1 hour 45 minutes)

10. (Understanding) CPT Timed Codes & General Chart Noting: **30 minutes (1/2 hour)**
 - *Each* author of any written information in the chart must be identified on *each* page
 - Procedure vs. Modality (e.g. 97039 vs. 97139)
 - Attended vs. Unattended (e.g. US vs. EMS)
 - Time matters:
 - i. Procedures & Modalities with codes that require start and stop times, (includes setup and post-treatment cleanup)
 - ii. Procedures & Modalities with codes that are billed in 15 minute increments: (8-23 minutes, includes setup and post-treatment cleanup)
 - iii. What to do if less than 8 minutes of treatment time: (code modifier -52)

**** The remaining 4 hour training is required as HANDS ON
Covering all of hydrotherapy, electrotherapy and physiotherapy **
When recording this instruction, you MUST identify the specific therapies taught!**

STATE OF WISCONSIN
CHIROPRACTIC EXAMINING BOARD

IN THE MATTER OF RULEMAKING	:	PROPOSED ORDER OF THE
PROCEEDINGS BEFORE THE	:	CHIROPRACTIC EXAMINING
	:	BOARD
CHIROPRACTIC EXAMINING	:	ADOPTING RULES
BOARD	:	(CLEARINGHOUSE RULE)

PROPOSED ORDER

An order of the Chiropractic Examining Board to repeal Chir 4.04 (3), 10.01 (3), and 10.02 (1) and (2); to amend Chir Chapter 10 (title), 10.02 (title) and (intro.), 10.03, and 10.05; and to create Chir 10.015 and 10.025 relating to courses of study for and delegation to chiropractic technicians and chiropractic radiological technicians.

Analysis prepared by the Department of Safety and Professional Services.

ANALYSIS

Statutes interpreted:

Sections 446.025 (2) (a) 3., 446.026 (2) (a) 3., and 446.02 (7) (d), Stats.

Statutory authority:

Sections 15.08 (5) (b) and 227.11 (2) (a), Stats.

Explanation of agency authority:

Section 15.08 (5) (b), Stats., provides that examining boards, such as the Chiropractic Examining Board, “shall promulgate rules for its own guidance and for the guidance of the trade or profession to which it pertains, . . .”

Section 227.11 (2) (a), Stats., discusses the parameters of an agency’s rule-making authority, stating an agency, “may promulgate rules interpreting the provisions of the statute, but a rule is not valid if it exceeds the bounds of correct interpretation. . .” This section allows an agency to promulgate administrative rules which interpret the statutes it enforces or administers as long as the proposed rule does not exceed proper interpretation of the statute. Section 227.01 (1), Stats., defines agency as a board. The Chiropractic Examining Board falls within the definition of agency and is therefore allowed to apply s. 227.11 (2) (a), Stats., to statutes it administers.

Related statute or rule:

None.

Plain language analysis:

Section 446.02 (7) (d) of the Wisconsin Statutes restricts the delegation of adjunctive and x-ray services to chiropractic technologists (technicians) and chiropractic radiological technologists (technicians). Chapter Chir 10 allows for the delegation of these services to unlicensed persons. The proposed rule would amend the Chiropractic Examining Board's administrative rules to align with them with section 446.02 (7) (d), Stats. Additionally, under sections 446.025 (2) (a) 3. and 446.026 (2) (a) 3. of the Wisconsin Statutes chiropractic technicians and chiropractic radiological technicians are required to complete courses of study approved by the Board in order to obtain licensure. The Chiropractic Examining Board's administrative rules are currently silent with regards to the specific requirements used to determine whether a course of study is approved. This undefined term has led to an inconsistent application of the statute. The proposed rule seeks to define the requirements for approved courses of study in administrative code which should result in a more uniform application of the statute.

Summary of, and comparison with, existing or proposed federal regulation:

The Consumer-Patient Radiation Health and Safety Act of 1981, 42 USCS 10001, et seq. establishes federal guidelines for standards of accreditation of educational programs for certain occupations that administer radiologic procedures. The standards are in place to protect the public from excessive exposure to radiation by health care professionals who use radiation in the treatment of disease or other medical conditions. The regulations are directed towards radiologic technologists, dental hygienists, nuclear medicine technologists and radiation therapy technologists.

42 USCS §10003 (5) defines, "persons who administer radiologic procedures means any person, other than a practitioner, who intentionally administers radiation to other persons for medical purposes, and includes medical radiologic technologists (including dental hygienists and assistants), radiation therapy technologists, and nuclear medicine technologists." 42 CFR 75.2 defines radiation therapy technologist as, "a person other than a licensed practitioner who utilizes ionizing radiation-generating equipment for therapeutic purposes on human subjects." Although chiropractic radiological technicians are not specifically addressed, they could be captured under the broad definition of radiation therapy technologists. The federal statute and regulations are comparable to the proposed rule in that they both set forth a course of study for persons who administer radiologic procedures.

Comparison with rules in adjacent states:

Illinois: Illinois defines a chiropractic radiographer as, "[A] person other than a licensed practitioner who performs medical radiation procedures and applies x-radiation to the human body for diagnostic evaluation of skeletal anatomy, while under the general supervision of a licensed chiropractor." 32 Ill. Adm. Code 401.20. Persons seeking accreditation as a chiropractic radiographer must take the exam administered by the

American Chiropractic Registry of Radiologic Technologists (ACRRT). 32 Ill. Adm. Code 401.70 b) 4).

Iowa: Iowa does not have a license classification for chiropractic radiological technologists or chiropractic technologists.

Michigan: Michigan does not have a license classification for chiropractic radiological technologists or chiropractic technologists.

Minnesota: Minnesota issues a registration for chiropractic radiologic technologist after the applicant has passed the radiography examination of the American Chiropractic Registry of Radiologic Technologists. (ACRRT) Minn. R. 4732.0585.

Summary of factual data and analytical methodologies:

The methodologies used to develop this proposed rule include reviewing neighboring states' statutes and rules, obtaining feedback from the Chiropractic Examining Board, and reviewing the curriculum from a variety of chiropractic schools.

Analysis and supporting documents used to determine effect on small business or in preparation of economic impact analysis:

The rule will be posted for public comment on the economic impact of the proposed rule, including how this proposed rule may affect businesses, local government units, and individuals for a period of 14 days.

Fiscal Estimate and Economic Impact Analysis:

~~The Fiscal Estimate and Economic Impact Analysis document is attached.~~
The Department will be soliciting information and advice from businesses, local governmental units and individuals in order to prepare the Economic Impact Analysis.

Effect on small business:

These proposed rules do not have an economic impact on small businesses, as defined in s. 227.114 (1), Stats. The Department's Regulatory Review Coordinator may be contacted by email at Eric.Esser@wisconsin.gov, or by calling (608) 267-2435.

Agency contact person:

Kathleen Vieira, Administrative Rules Coordinator, Department of Safety and Professional Services, Division of Policy Development, 1400 East Washington Avenue, Room 151, P.O. Box 8935, Madison, Wisconsin 53708; telephone 608-261-4472; email at Kathleen.Vieira@wisconsin.gov.

Place where comments are to be submitted and deadline for submission:

Comments may be submitted to Kathleen Vieira, Administrative Rules Coordinator, Department of Safety and Professional Services, Division of Policy Development, 1400 East Washington Avenue, Room 151, P.O. Box 8366, Madison, WI 53708-8935, or by email to Kathleen.Vieira@wisconsin.gov. ~~Comments must be received on or before to be included in the record of rule-making proceedings.~~

TEXT OF RULE

SECTION 1. Chir 4.04 (3) is repealed.

SECTION 2. Chir Chapter 10 (title) is amended to read:

~~UNLICENSED PERSONS~~ DELEGATION TO UNLICENSED PERSONS CHIROPRACTIC TECHNICIANS AND CHIROPRACTIC RADIOLOGICAL TECHNICIANS

SECTION 3. Chir 10.01 (3) is repealed.

SECTION 4. Chir 10.015 is created to read:

Chir 10.015 Chiropractic technician course of study. The board shall grant certification as a chiropractic technician to an applicant who satisfies the requirements under s. 446.026 (2) (a), Stats. The course of study required under s. 446.026 (2) (a) 3., Stats., shall meet all of the following:

(1) The course of study shall include a prerequisite 4.5 hour therapeutic overview course covering chiropractic technician scope of practice, anatomy, and contraindications followed by all of the following:

(a) 36 hours in exercise/rehabilitation including all of the following topics:

1. Basic functional anatomy
2. Kinematics
3. Joint movement
4. Microbiology
5. Indications and contraindications
6. Recordkeeping/reporting
7. Report writing
8. Scope of practice
9. Outcome tools
10. Baselines assessment and goals

(b) 4 hours in patient history

(c) 4 hours in physical examination (height, weight, and blood pressure)

- (d) 1 hour in thermotherapy/cryotherapy
- (e) 2 hours in mechanical therapy with necessary equipment available
- (f) 3 hours in electrotherapy
- (g) 3 hours in therapeutic ultrasound therapy
- (h) 3 hours in light therapy
- (i) 3 hours in surface electromyography
- (j) 4 hours in decompression/traction with necessary equipment available

(2) The course of study shall include a final assessment of competency of the didactic and clinical components of the program.

(3) The certification program shall have a chiropractor licensed under ch. 446, Stats., present in the facility and available to the students of the course of study.

SECTION 5. Chir 10.02 (title) and (intro.) are amended to read:

Chir 10.02 Delegation of adjunctive services to ~~unlicensed persons~~ a chiropractic technician. A chiropractor licensed under ch. 446, Stats., may delegate the performance of adjunctive services to ~~an unlicensed person~~ a chiropractic technician licensed under ch. 446, Stats. only if all of the following conditions are met: The chiropractor exercises direct, on premises supervision of the chiropractic technician performing the delegated service.

SECTION 6. Chir 10.02 (1) and (2) are repealed.

SECTION 7. Chir 10.025 is created to read:

Chir 10.025 Chiropractic radiological technician course of study. The board shall grant certification as a chiropractic radiological technician to an applicant who satisfies the requirements under s. 446.025 (2) (a), Stats. The course of study required under s. 446.025 (2) (a) 3., Stats., shall meet all of the following:

(1) The course of study shall include 48 hours including all of the following topics:

- (a) Introduction to x-ray examination
- (b) Physics of x-ray examination
- (c) Anatomy
- (d) Patient position
- (e) Safety measures

- (f) Machine operation
- (g) Exposure techniques and accessories
- (h) Processing and dark room techniques
- (i) Film critique and quality assurance
- (j) Professionalism
- (k) Recordkeeping
- (l) Emergency procedures summary

(2) The course of study shall include a final assessment of competency of the didactic and clinical components of the program.

(3) The certification program shall have a chiropractor licensed under ch. 446, Stats., present in the facility and available to the students of the course of study.

SECTION 8. Chir 10.03 is amended to read:

Chir 10.03 X-ray services. A chiropractor may delegate x-ray examination procedures to ~~an unlicensed person~~ a chiropractic radiological technician licensed under ch. 446, Stats. ~~only if the delegation is consistent with s. Chir 10.02 and the unlicensed person has successfully completed a course of instruction comprising at least 48 hours and including the following components: introduction to x-ray examination; physics of x-ray examination; anatomy; patient positioning; safety measures; machine operation; exposure techniques and accessories; processing and dark room techniques; film critique and quality assurance; professionalism; recordkeeping; emergency procedures, summary; and successful completion of an examination on the content of the course of instruction.~~ The chiropractor shall comply with s. Chir 4.04 before delegating the performance of x-ray services to ~~an unlicensed person.~~ The chiropractor shall maintain direct, on premises supervision of the chiropractic radiological technician.

SECTION 9. Chir 10.05 is amended to read:

Chir 10.05 Physiological therapeutics. A chiropractor may delegate the performance of patient services through physiological therapeutics that include but are not limited to heat, cold, light, air, water, sound, electricity, massage, and physical exercise with and without assistive devices to ~~an unlicensed person~~ a chiropractic technician only if the delegation is consistent with s. Chir 10.02 and the ~~unlicensed person~~ chiropractic technician has adequate training, education and experience to perform the delegated function to minimally acceptable chiropractic standards.

SECTION 10. EFFECTIVE DATE. The rules adopted in this order shall take effect on the first day of the month following publication in the Wisconsin Administrative Register, pursuant to s. 227.22 (2) (intro.), Stats.

 (END OF TEXT OF RULE)

Dated _____

Agency _____

Chairperson
Chiropractic Examining Board



2015 ASSEMBLY BILL 871

February 5, 2016 - Introduced by Representatives SANFELIPPO and KOLSTE.
Referred to Committee on Health.

- 1 **AN ACT relating to:** modifying various administrative rules promulgated by the
2 Chiropractic Examining Board.

Analysis by the Legislative Reference Bureau

This bill makes a number of changes to the administrative rules promulgated by the Chiropractic Examining Board, including the following:

1. Authorizes a chiropractor to delegate certain services that are preparatory or complementary to chiropractic adjustments to various health care professionals holding a license, registration, certification, or permit in this state without the need for the chiropractor to 1) maintain records showing the health care professional has satisfied certain educational and training requirements; 2) exercise direct supervision over the health care professional; and 3) retain ultimate responsibility for the manner and quality of the services. Currently, the board's rules authorize such a delegation only to another licensed chiropractor.

2. Provides that a chiropractic student need not be in his or her last academic quarter, semester, or trimester in order to qualify for a preceptorship, provided the student is eligible for graduation.

3. Specifies that a licensed chiropractor is not prohibited from using cold laser therapy and that a licensed chiropractor may practice acupuncture at the same location as the chiropractor practices chiropractic if the chiropractor is also a certified acupuncturist.

The people of the state of Wisconsin, represented in senate and assembly, do enact as follows:

ASSEMBLY BILL 871

1 **SECTION 1.** Chir 2.01 (2) of the administrative code is repealed.

2 **SECTION 2.** Chir 3.02 (1) (intro.) of the administrative code is amended to read:

3 Chir 3.02 (1) **REQUIREMENTS FOR RENEWAL.** (intro.) To renew and obtain a new
4 license a licensee shall, by December 31 14 of the even-numbered year following
5 initial licensure and every 2 years thereafter, file with the department:

6 **SECTION 3.** Chir 4.05 (1) (b) 3. of the administrative code is renumbered Chir
7 4.05 (1) (b) 3. (intro.) and amended to read:

8 Chir 4.05 (1) (b) 3. (intro.) Acupuncture by needle insertion or invasive laser
9 application. This subdivision shall not be construed to prohibit any of the following:

10 **SECTION 4.** Chir 4.05 (1) (b) 3. a. of the administrative code is created to read:

11 Chir 4.05 (1) (b) 3. a. The use of cold laser therapy by a licensed chiropractor.

12 **SECTION 5.** Chir 4.05 (1) (b) 3. b. of the administrative code is created to read:

13 Chir 4.05 (1) (b) 3. b. The practice of acupuncture by a licensed chiropractor
14 who is also an acupuncturist certified under ch. 451, Stats., at the same location
15 where he or she practices chiropractic.

16 **SECTION 6.** Chir 4.05 (2m) of the administrative code is created to read:

17 Chir 4.05 (2m) The board may consider the opinion of the National Board of
18 Chiropractic Examiners with respect to the techniques, ancillary procedures, and
19 instruments that are safe and effective for the practice of chiropractic for purposes
20 of sub. (2).

21 **SECTION 7.** Chir 9.01 (1) of the administrative code is amended to read:

22 Chir 9.01 (1) "Chiropractic student" means a student of an approved college of
23 chiropractic ~~in his or her last academic quarter, semester, or trimester of study,~~ who
24 is eligible for graduation from the college of chiropractic but for completion of a
25 preceptorship period.

ASSEMBLY BILL 871

1 **SECTION 8.** Chir 10.01 (1f) of the administrative code is created to read:

2 Chir 10.01 (1f) “Licensed health care professional” means an individual who
3 is licensed, registered, certified, or permitted by any of the following:

4 (a) Board of nursing under ch. 441.

5 (b) Chiropractic examining board under ch. 446.

6 (c) Dentistry examining board under ch. 447.

7 (d) Medical examining board under subch. II of ch. 448.

8 (e) Physical therapy examining board under subch. III of ch. 448.

9 (f) Podiatry affiliated credentialing board under subch. IV of ch. 448.

10 (g) Dietitians affiliated credentialing board under subch. V of ch. 448.

11 (h) Athletic trainers affiliated credentialing board under subch. VI of ch. 448.

12 (i) Occupational therapists affiliated credentialing board under subch. VII of
13 ch. 448.

14 (j) Optometry examining board under ch. 449.

15 (k) Pharmacy examining board under ch. 450.

16 (L) Department of safety and professional services under ch. 451.

17 (m) Psychology examining board under ch. 455.

18 (n) Marriage and family therapy, professional counseling, and social work
19 examining board under ch. 457.

20 (o) Hearing and speech examining board under subch. II of ch. 459.

21 (p) Massage therapy and bodywork therapy affiliated credentialing board
22 under ch. 460.

23 **SECTION 9.** Chir 10.01 (3) of the administrative code is amended to read:

Chapter Chir 1

AUTHORITY AND DEFINITIONS

Chir 1.01 Authority.

Chir 1.02 Definitions.

Note: Chapter Chir 1 as it existed on December 31, 1984 was repealed and a new chapter Chir 1 was created effective January 1, 1985.

Chir 1.01 Authority. The rules in chs. [Chir 1](#) to [11](#) are adopted under authority in ss. [15.08 \(5\) \(b\)](#), [227.11 \(2\)](#) and ch. [446](#), Stats.

History: Cr. Register, December, 1984, No. 348, eff. 1-1-85; correction made under s. 13.93 (2m) (b) 7., Stats., Register, March, 1990, No. 411; am. Register, January, 1995, No. 469, eff. 2-1-95; am. Register, September, 1999, No. 525, eff. 10-1-99.

Chir 1.02 Definitions. As used in chs. [Chir 1](#) to [11](#):

(1) “Board” means the chiropractic examining board.

(1m) “Current proficiency in the use of an automated external defibrillator” means that a person has successfully completed a course of instruction in the use of an automated external defibrilla-

tor provided by an individual, organization or institution of higher education approved to provide the instruction under s. [46.03 \(38\)](#), Stats., within the 24 months immediately prior to application.

(2) “Department” means the department of safety and professional services.

(3) “Direct supervision” means that the treating chiropractor has ordered a specific patient care function to be performed by a specific person, and is present in the treatment facility while the patient care function is being performed, and is immediately available to exercise personal supervision of the patient care function if the person performing the function requests.

History: Cr. Register, December, 1984, No. 348, eff. 1-1-85; am. (intro.), cr. (3), Register, January, 1995, No. 469, eff. 2-1-95; am. (intro.), Register, September, 1999, No. 525, eff. 10-1-99; CR 08-093; cr. (1m) Register October 2009 No. 646, eff. 11-1-09; correction in (2) made under s. [13.92 \(4\) \(b\) 6.](#), Stats., Register January 2012 No. 673.

Chapter Chir 2

EXAMINATIONS

<p>Chir 2.01 Scheduling of examination. Chir 2.02 Applications. Chir 2.025 Time for completing applications and taking examination. Chir 2.03 Form of examination.</p>	<p>Chir 2.04 Unauthorized assistance or cheating on examinations. Chir 2.07 Passing grade. Chir 2.11 Reexamination. Chir 2.12 Practical examination demonstrating clinical competence.</p>
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Chir 2.01 Scheduling of examination. (1) The board shall determine the subjects for examination of applicants for license as a chiropractor. The scope, content, form and character of the examination shall be the same for all applicants.

(2) Examinations shall be held at least twice a year at a time and place designated by the board.

(3) An otherwise qualified applicant with a disability shall be provided with reasonable accommodations.

History: Cr. Register, December, 1984, No. 348, eff. 1-1-85; CR 03-082: cr. (3) Register July 2004 No. 583, eff. 8-1-04.

Chir 2.02 Applications. An applicant for licensure as a chiropractor shall make an application on a form prescribed by the board at least 30 days prior to the date of the next scheduled board meeting and shall also submit:

Note: Applications are available upon request from the Department of Safety and Professional Services, 1400 East Washington Avenue, P.O. Box 8935, Madison, Wisconsin 53708.

(1) The fee required under s. 440.05 (1), Stats.

(3) An official certified transcript sent directly to the board from a college or university or post-secondary technical college accredited by an agency approved by the United States Office of Education or its successor, or from a foreign school determined to be equivalent to an accredited college or post-secondary technical college showing completion by the applicant of a minimum of 60 credits in post-secondary academic education as specified in s. 446.02 (2), Stats.

Note: Accrediting bodies nationally recognized by the United States Office of Education include the New England Association of Schools and Colleges, the Middle States Association of Colleges and Schools, the North Central Association of Colleges and Schools, the Northwest Association of Schools and Colleges, the Southern Association of Colleges and Schools, and the Western Association of Schools and Colleges.

(4) An official certified transcript sent directly to the board from a chiropractic college accredited by the Commission on Accreditation of the Council on Chiropractic Education (CCE) or by an agency approved by the United States Office of Education or its successor, or from a foreign school determined to be equivalent to an accredited college of chiropractic by the CCE or another approved accrediting agency.

(5) Proof of successful completion of the initial licensure examinations of the national board of chiropractic examiners.

(6) Applications for an initial license to practice chiropractic in this state received on or after July 1, 1998, shall include all of the following:

(a) An official certified transcript sent directly to the board from a college or university accredited by an accrediting body listed as nationally recognized by the secretary of the federal department of education, or from a foreign school determined to be equivalent to an accredited college or university by an approved accrediting agency, stating that the applicant has graduated from that college or university with a bachelor's degree.

(b) An official certified transcript sent directly to the board from a college of chiropractic accredited by the Council on Chiropractic Education (CCE) or by an agency approved by the United States Office of Education or its successor, or from a foreign school determined to be equivalent to an accredited college of chi-

ropractic by the CCE or another approved accrediting agency, stating that the applicant has graduated from the college with the degree of doctor of chiropractic.

(c) Evidence that the applicant has current proficiency in the use of an automated external defibrillator.

Note: The bachelor's degree and the doctor of chiropractic degree may be earned in either order or simultaneously, but the board may not grant a license to any applicant who does not have both degrees.

History: Cr. Register, December, 1984, No. 348, eff. 1-1-85; am. (4), Register, May, 1986, No. 365, eff. 6-1-86; am. (4), Register, November, 1989, No. 407, eff. 12-1-89; cr. (6), Register, September, 1994, No. 465, eff. 7-1-98; am. (4), Register, September, 1995, No. 477, eff. 10-1-95; am. (intro.), (1), (3) to (6), r. (2), cr. (7), Register, September, 1999, No. 525, eff. 10-1-99; CR 03-082: am. (intro.), (3), (4), (6) (a) and (b), r. (7) Register July 2004 No. 583, eff. 8-1-04; CR 08-093: cr. (6) (c) Register October 2009 No. 646, eff. 11-1-09.

Chir 2.025 Time for completing applications and taking examination. An application is incomplete until all materials described in s. Chir 2.02 are filed with the board. All application materials described in s. Chir 2.02 shall be filed with the board within one year from the date the first item is filed. If an application is incomplete for more than one year, or if an applicant fails to take an examination within one year from the date the first item was filed, the applicant shall begin the application process anew.

History: Cr. Register, November, 1989, No. 407, eff. 12-1-89; am. Register, June, 1993, No. 450, eff. 7-1-93; am. Register, September, 1999, No. 525, eff. 10-1-99; CR 14-068: am. Register July 2015 No. 715, eff. 8-1-15.

Chir 2.03 Form of examination; state law examination. An applicant shall pass an examination on state laws including ch. 446, Stats., and chs. Chir 1 to 12.

History: Cr. Register, December, 1984, No. 348, eff. 1-1-85, am. Register, October, 1988, No. 394, eff. 11-1-88; am. (1), (2) (intro.) and (b), Register, September, 1999, No. 525, eff. 10-1-99; CR 03-082: am. (intro.) Register July 2004 No. 583, eff. 8-1-04; CR 14-068: renum. from (1) and am., r. (2) Register July 2015 No. 715, eff. 8-1-15; correction in title made under s. 13.92 (4) (b) 2., Stats., Register July 2015 No. 715.

Chir 2.04 Unauthorized assistance or cheating on examinations. The board may withhold the grade, deny release of grades or deny issuance of a credential of an applicant who gives or receives unauthorized assistance during the state law examination, violates rules of conduct of an examination, or otherwise cheats or acts dishonestly respecting an examination. The board may consider this applicant for retesting at a future time.

History: Cr. Register, December, 1984, No. 348, eff. 1-1-85; r. and recr. Register, October, 1988, No. 394, eff. 11-1-88; am. Register, September, 1999, No. 525, eff. 10-1-99; CR 03-082: am. Register July 2004 No. 583, eff. 8-1-04.

Chir 2.07 Passing grade. (1) NATIONAL EXAMINATION. To pass the examination of the national board of chiropractic examiners, each applicant for licensure by exam shall receive a grade determined by the legislature to represent minimum competence to practice.

(2) STATE LAW EXAMINATION. To pass the state law examination, each applicant shall receive a grade determined by the board to represent minimum competence to practice.

History: Cr. Register, October, 1988, No. 394, eff. 11-1-88; am. (2) and (3), Register, September, 1999, No. 525, eff. 10-1-99; CR 03-082: am. (3) Register July 2004

No. 583, eff. 8-1-04; CR 14-068: am. (1), r. (3) Register July 2015 No. 715, eff. 8-1-15.

Chir 2.11 Reexamination; state law examination. An applicant who fails the state law examination shall be required to retake that examination.

History: Cr. Register, October, 1988, No. 394, eff. 11-1-88; am. (1) and (2), Register, June, 1994, No. 462, eff. 7-1-94; am. (2) and (3), Register, September, 1999, No. 525, eff. 10-1-99; CR 03-082: am. (2) and (3) Register July 2004 No. 583, eff. 8-1-04; CR 14-068: r. (2) and (3) Register July 2015 No. 715, eff. 8-1-15; renum. from (1) under s. 13.92 (4) (b) 1., correction in title made under s. 13.92 (4) (b) 2., Stats., Register July 2015 No. 715.

Chir 2.12 Practical examination demonstrating clinical competence. An applicant who applied for licensure as a chiropractor between January 1, 2012 and July 2, 2013, and who

took the practical exam, under s. 446.02 (3) (a), 2011 Stats., shall not be required to have successfully completed the practical exam and shall be considered to have satisfied all examination requirements to obtain a license to practice as a chiropractor in this state if the person has completed all of the following:

(1) Achieved a score of 375 or higher on Part III of the examination administered by the National Board of Chiropractic Examiners.

(2) Achieved a score of 375 or higher on Part IV of the examination administered by the National Board of Chiropractic Examiners.

(3) Successfully completed the exam on Wisconsin laws, pursuant to s. Chir 2.03, related to the practice of chiropractic.

History: CR 14-068: cr. Register July 2015 No. 715, eff. 8-1-15.

Chapter Chir 3

LICENSE RENEWAL

Chir 3.02	License renewal.
Chir 3.03	Licensure by endorsement.
Chir 3.035	Temporary chiropractic permits.
Chir 3.04	Display of license.
Chir 3.05	Change of name and address.

Chir 3.06	Professional title.
Chir 3.07	Professional liability insurance.
Chir 3.08	Limited liability entities.
Chir 3.09	Cardiopulmonary resuscitation certification.

Note: Chapter Chir 3 as it existed on December 31, 1984 was repealed and a new chapter Chir 3 was created effective January 1, 1985.

Chir 3.02 License renewal. (1) REQUIREMENTS FOR RENEWAL. To renew and obtain a new license a licensee shall, by December 31 of the even-numbered year following initial licensure and every 2 years thereafter, file with the department:

(a) An application for renewal on a form prescribed by the department.

(b) The fee required under s. 440.08 (2) (a), Stats.

(c) Verification that the licensee has, during the biennial period immediately preceding application, completed the continuing education requirement specified in s. 446.02 (1) (b), Stats., except that the requirement may be waived if the licensee was not practicing in Wisconsin during that period. Licensees shall retain original documents showing attendance at programs for at least 4 years from the time that credit is claimed for the continuing education program. Licensees shall deliver their original documents or copies to the board upon request.

(d) Evidence that the licensee is certified in cardiopulmonary resuscitation or has been granted a waiver of the requirement by the board.

(e) Evidence that the applicant has current proficiency in the use of an automated external defibrillator.

(2) REQUIREMENTS FOR LATE RENEWAL. A licensee who fails to meet the requirements in sub. (1) by the renewal date shall cease and desist from practice as a chiropractor until all requirements for renewal are met. Within 5 years following the renewal date, a licensee may renew and obtain a new license by filing with the department the materials specified in sub. (1) and a late renewal fee specified in s. 440.08 (3) (a), Stats.

(3) REQUIREMENTS FOR REINSTATEMENT. (a) *Reinstatement following failure to renew.* A licensee who fails to renew within 5 years of the renewal date may be reinstated by meeting requirements in sub. (2), completing continuing education requirements for the previous biennium, and may be required to take an examination prescribed by the board.

(b) *Reinstatement following disciplinary action.* An applicant for reinstatement of license following disciplinary action shall meet requirements in sub. (1) and may be required to successfully complete an examination as the board prescribes.

History: Cr. Register, December, 1984, No. 348, eff. 1-1-85; am. (1) (intro), (a), (b), (2) and (3) (a), Register, January, 1993, No. 445, eff. 2-1-93; am. (1) (b), Register, September, 1999, No. 525, eff. 10-1-99; correction in (2) made under s. 13.93 (2m) (b) 7., Stats; cr. (1) (d), Register, June, 2001, No. 546, eff. 7-1-01; CR 03-082; am. (1) (intro.), (c), (d), (2) and (3) (a) Register July 2004 No. 583, eff. 8-1-04; CR 08-093; cr. (1) (e) Register October 2009 No. 646, eff. 11-1-09.

Chir 3.03 Licensure by endorsement. (1) QUALIFICATIONS. The board shall grant a license to a chiropractor who holds a valid license by the proper authorities of any other state or country provided the applicant:

(a) Does not have an arrest or conviction record subject to ss. 111.321, 111.322 and 111.335, Stats.

(b) Has graduated from a college of chiropractic accredited by the Council on Chiropractic Education (CCE) or by an agency

approved by the United States Office of Education or its successor, or from a foreign school determined to be equivalent to an accredited college of chiropractic by the CCE or another approved accredited agency.

(c) 1. If the applicant first applied for a license to practice chiropractic in any state or country before July 1, 1960, the applicant must have graduated from a reputable college of chiropractic.

2. If the applicant first applied for a license to practice chiropractic in any state or country between July 1, 1960 and June 30, 1998, the applicant must have completed at least a minimum of 60 credits in post-secondary academic education at a college or university accredited by the Council on Chiropractic Education (CCE) or by an agency approved by the United States Office of Education or its successor, or from a foreign school determined to be equivalent to an accredited college of chiropractic by the CCE or another approved accrediting agency.

3. If the applicant first applied for a license to practice chiropractic in any state or country on or after July 1, 1998, the applicant must have graduated with a baccalaureate degree from a college or university accredited by the Council on Chiropractic Education (CCE) or by an agency approved by the United States Office of Education or its successor, or from a foreign school determined to be equivalent to an accredited college of chiropractic by the CCE or another approved accrediting agency.

Note: Accrediting bodies nationally recognized by the secretary of the federal Department of Education include the New England Association of Schools and Colleges, the Middle States Association of Colleges and Schools, the North Central Association of Colleges and Schools, the Northwest Association of Schools and Colleges, the Southern Association of Colleges and Schools, and the Western Association of Schools and Colleges.

(d) Has been engaged in clinical chiropractic case management at least 24 hours per week in one or more jurisdictions in which the applicant has a current license for at least 3 of the 5 years immediately preceding application in Wisconsin.

(e) Has successfully completed a practical examination demonstrating clinical competence which is acceptable to the board. The board will find acceptable any one of the following as an equivalent to a practical examination: Part IV of the examination administered by the National Board of Chiropractic Examiners, the state practical exam from the endorsement candidate's jurisdiction, or the special purpose examination in chiropractic under par. (f).

(f) Has successfully completed the special purpose examination in chiropractic, if the applicant has not completed one of the following:

1. Passed Parts I and II of the examination administered by the National Board of Chiropractic Examiners and a state practical exam from the endorsement candidate's jurisdiction.

2. Passed Parts I, II, III and IV of the examination administered by the National Board of Chiropractic Examiners.

(g) Has successfully completed a state law examination on the provisions of the Wisconsin statutes and administrative rules relating to chiropractic.

(h) Has not had a license or other credential limited, suspended or revoked by a licensing or regulatory authority in Wisconsin or other state or country.

(i) Has current proficiency in the use of an automated external defibrillator.

(2) APPLICATION PROCEDURE. Each applicant shall file a completed application on forms provided by the board. The application shall include all of the following:

(a) The signature of the applicant.

(b) The fee required under s. 440.05 (1), Stats.

(d) A certified transcript from a chiropractic college accredited by the Commission on Accreditation of the Council on Chiropractic Education (CCE) or by an agency approved by the United States Office of Education or its successor, or from a foreign school determined to be equivalent to an accredited college of chiropractic by the CCE or another approved accrediting agency, sent directly to the board by the college.

(e) A certified transcript verifying that the applicant has a bachelor's degree from a college or university accredited by an accrediting body nationally recognized by the United States Department of Education, or from a foreign school determined to be equivalent to an accredited college or university by an approved accrediting agency, if the applicant first applies for any license to practice chiropractic in any jurisdiction on or after July 1, 1998. The transcript shall be sent directly to the board by the college or university.

(f) Verification of successful completion of a practical examination, or its equivalent, demonstrating clinical competence which is accepted by the board. The verification shall be forwarded directly to the board from the state that administered the examination or from the national board.

(g) Proof of successful completion of the special purpose examination in chiropractic or Parts I, II, III, and IV of the examination of the national board of chiropractic examiners. The proof of completion shall be forwarded directly to the board from the institution that administered the examination.

(h) Proof of successful completion of the state law examination.

(i) Verification of licensure status in all states in which the applicant is or has been licensed to practice chiropractic.

(j) Information requested by the board relating to any convictions or pending charges for criminal offenses.

Note: Applications are available upon request from the Department of Safety and Professional Services, 1400 East Washington Avenue, P. O. Box 8935, Madison, Wisconsin 53708.

History: Cr. Register, December, 1984, No. 348, eff. 1-1-85; r. and recr., Register, September, 1995, No. 477, eff. 10-1-95; am. (1) (e), (f), (2) (intro.), (b), (e) to (h), r. (2) (c), cr. (2) (k), Register, September, 1999, No. 525, eff. 10-1-99; CR 03-082; am. (1) (intro.), (b), (c), (e), (h) and (2) (d) to (g), r. (2) (k) Register July 2004 No. 583, eff. 8-1-04; CR 08-093; cr. (1) (i) Register October 2009 No. 646, eff. 11-1-09; CR 14-068; am. (1) (e), r. and recr. (1) (f), am. (2) (f) and (g) Register July 2015 No. 715, eff. 8-1-15; correction in (1) (e) made under s. 35.17, Stats., Register July 2015 No. 715.

Chir 3.035 Temporary chiropractic permits. (1) The board may grant a temporary permit to practice chiropractic to any chiropractor who files an application prescribed by the board, pays the fee required under s. 440.05 (6), Stats., and meets all of the following conditions:

(a) The applicant has a chiropractic license in good standing in another jurisdiction and has no disciplinary action pending in connection with any chiropractic license the applicant holds.

(b) The applicant will be practicing chiropractic only as a chiropractor for participants in an athletic or performing arts event, or as an instructor in a specific chiropractic education seminar approved for continuing education by the board.

(c) The applicant has current proficiency in the use of an automated external defibrillator.

Note: Applications are available upon request from the Department of Safety and Professional Services, 1400 East Washington Avenue, P.O. Box 8935, Madison, Wisconsin 53708.

(2) The board may issue a temporary permit to practice chiropractic to an individual who is licensed to practice chiropractic in another state or country. The applicant for a temporary permit shall inform the board, in writing, of the locations at which and the dates on which the applicant or holder of the temporary permit requests to practice under the temporary permit and shall request the issuance of a temporary permit. The board may issue a temporary permit for a reasonable time period based on the activity.

(3) A chiropractor holding a temporary permit to practice chiropractic may not use the temporary permit to provide relief services or practice coverage for the practice of any chiropractor licensed in this state. All temporary permits issued by the board shall bear the legend "limited to sporting or performing arts events and approved educational purposes."

(4) A temporary permit may be denied or revoked for any of the following reasons:

(a) Violation of any provision of ch. 446, Stats., or ch. Chir 6.

(b) Failure to pay the fees required under s. 440.05 (6), Stats.

(c) Provision of fraudulent or misrepresented information on the application for a temporary permit.

History: Cr. Register, September, 1994, No. 465, eff. 10-1-94; am. (1) (intro.), (b) and (3), Register, September, 1999, No. 525, eff. 10-1-99; CR 03-082; am. (2) Register July 2004 No. 583, eff. 8-1-04; CR 08-093; cr. (1) (c) Register October 2009 No. 646, eff. 11-1-09.

Chir 3.04 Display of license. The license shall be displayed in a prominent place by every person licensed and currently registered by the board.

History: Cr. Register, December, 1984, No. 348, eff. 1-1-85; CR 03-082; am. Register July 2004 No. 583, eff. 8-1-04.

Chir 3.05 Change of name and address. Every licensee shall report his or her address to the department and shall notify the board of a change of name or address within 30 days of the change.

History: Cr. Register, December, 1984, No. 348, eff. 1-1-85; am. Register, October, 1988, No. 394, eff. 11-1-88.

Chir 3.06 Professional title. A licensee shall use the suffix "D.C." or "Chiropractor" immediately following his or her surname for proper identification. The title "Doctor" or "Dr." may be used if "Chiropractor" is used following the name.

History: Cr. Register, December, 1984, No. 348, eff. 1-1-85; am. Register, June, 1993, No. 450, eff. 7-1-93; CR 03-082; am. Register July 2004 No. 583, eff. 8-1-04.

Chir 3.07 Professional liability insurance. Every chiropractor practicing in the state of Wisconsin shall have professional liability insurance coverage in effect at all times in the amount of at least \$100,000 for each occurrence and \$300,000 for all occurrences in one year. The board may conduct random audits of chiropractors licensed and practicing in this state, and institute disciplinary proceedings against any chiropractor who fails to submit proof that he or she has insurance coverage meeting the minimum limits required by this section.

History: Cr. Register, May, 1994, No. 461, eff. 6-1-94; CR 03-082; am. Register July 2004 No. 583, eff. 8-1-04.

Chir 3.08 Limited liability entities. (1) A chiropractor may practice with or in a business that is organized as a limited liability organization under the laws of this state, including a limited liability partnership, a service corporation, and limited liability company.

(2) A chiropractor may not practice with or in a business organized so that a person other than a chiropractor has the right to direct or control the professional judgment of the chiropractor. This restriction does not prohibit a chiropractor from working with or in a business organized so that someone other than the patient pays the chiropractor's fee or salary, provided the fee or

salary arrangements do not modify the chiropractor's obligation to his or her patient.

(3) Nothing in this section shall relieve a chiropractor from personal liability for any acts, errors or omissions of the chiropractor arising out of the performance of professional services.

(4) Nothing in this section shall relieve a chiropractor from the requirement that every practicing chiropractor shall have in effect professional liability insurance in the amounts required by the

board in s. [Chir 3.07](#).

History: Cr. [Register, February, 2000, No. 530](#), eff. 3-1-00.

Chir 3.09 Cardiopulmonary resuscitation certification. Every chiropractor shall obtain certification in cardiopulmonary resuscitation at least every 2 years. The board may grant a waiver of this requirement in cases of hardship or retirement from practice.

History: Cr. [Register, June, 2001, No. 546](#), eff. 7-1-01; [CR 03-082](#): am. [Register July 2004 No. 583](#), eff. 8-1-04.

Chapter Chir 4

PRACTICE

Chir 4.01	Authority.
Chir 4.02	Definitions.
Chir 4.03	Practice.

Chir 4.04	X-ray.
Chir 4.05	Prohibited practice.
Chir 4.07	Suspension.

Note: Chapter Chir 4 as it existed on December 31, 1984 was repealed and a new chapter Chir 4 was created effective January 1, 1985.

Chir 4.01 Authority. This chapter is adopted under authority in ss. 15.08 (5) (b), 227.11 and ch. 446, Stats., to interpret the statutory definition of chiropractic practice specified in s. 446.01 (2), Stats.

History: Cr. Register, December, 1984, No. 348, eff. 1-1-85; correction made under s. 13.93 (2m) (b) 7., Stats., Register, March, 1990, No. 411.

Chir 4.02 Definitions. As used in this chapter,

(1) "Chiropractic science" means that body of systematic and organized knowledge relating primarily to the identification, location, removal or reduction of any interference to nervous system integrity or nerve energy expression and the resulting change in biomechanical or physiological homeostasis. It is based on the major premise that disease or abnormal function may be caused by abnormal nerve impulse transmission or expression due to biochemical factors, compression, traction, pressure or irritation upon nerves as a result of bony segments, especially of the spine or contiguous structures, either deviating from normal juxtaposition or function which irritates nerves, their receptors or effectors.

(2) "Instrument" means a device employed or applied in accordance with the principles and techniques of chiropractic science, which is used in the practice of chiropractic to diagnose, analyze, treat or prevent the cause of departure from complete health and proper condition of the human.

History: Cr. Register, December, 1984, No. 348, eff. 1-1-85; renum. to be (1) and cr. (2), Register, January, 1992, No. 433, eff. 2-1-92.

Chir 4.03 Practice. The practice of chiropractic is the application of chiropractic science in the adjustment of the spinal column, skeletal articulations and adjacent tissue which includes diagnosis and analysis to determine the existence of spinal subluxations and associated nerve energy expression and the use of procedures and instruments preparatory and complementary to treatment of the spinal column, skeletal articulations and adjacent tissue. Diagnosis and analysis may include physical examination, specimen analysis, drawing of blood, blood-analysis and the use of x-ray and other instruments.

History: Cr. Register, December, 1984, No. 348, eff. 1-1-85.

Chir 4.04 X-ray. (1) X-ray may be used only for diagnostic or analytical purposes in the practice of chiropractic.

Note: The requirements of ch. DHS 157 apply to licensees who use x-ray equipment.

(2) A chiropractor may not use the following forms of x-ray:

(a) X-ray procedures that require introduction of drugs, clinical dyes or radioactive substances;

(b) Therapeutic x-ray.

(3) A chiropractor may employ a technician to operate x-ray equipment only upon submitting proof satisfactory to the board that the technician has successfully completed a course of instruction approved by the board. Any technician employed may work only under the direct supervision and direction of a licensee.

Note: A list of board-approved programs is available upon request from the Department of Safety and Professional Services, 1400 East Washington Avenue, P.O. Box 8935, Madison, Wisconsin 53708.

History: Cr. Register, December, 1984, No. 348, eff. 1-1-85; renum. (2) to be (3), cr. (2), Register, October, 1989, No. 406, eff. 11-1-89; am. (3), Register, January, 1995, No. 469, eff. 2-1-95.

Chir 4.05 Prohibited practice. (1) SCOPE OF PRACTICE.

A person who holds a license to practice chiropractic may engage in the practice of chiropractic, as described in s. Chir 4.03. A license to practice chiropractic does not authorize the license holder to engage in practice beyond the scope of chiropractic practice, as described in s. Chir 4.03. Practice beyond the scope of chiropractic includes, but is not limited to, the following:

(a) Obstetrics and abortions, except nothing in this paragraph may be construed to prevent the practice of chiropractic as described in s. Chir 4.03 during a patient's pregnancy.

(b) Invasive procedures, such as:

1. Surgery.
2. Subcutaneous administration of substances.
3. Acupuncture by needle insertion or invasive laser application.

(c) Colonic irrigation.

(d) The prescribing, dispensing, delivery or administration of drugs as defined in s. 450.01 (10), Stats., except nothing in this paragraph may be construed to prevent the sale of vitamins, herbs or nutritional supplements consistent with the provisions of ch. Chir 12.

(2) TECHNIQUES, ANCILLARY PROCEDURES OR INSTRUMENTS.

The use of techniques, ancillary procedures or instruments which are unsafe or ineffective, including but not limited to the following or their substantially similar counterparts, are prohibited in the practice of chiropractic:

(a) Acuclips.

(b) Pfeiffer technique.

Note: The Pfeiffer technique is the application of magnets to the surface or near vicinity of the human body, either alone or in conjunction with the use of other devices, as a purported basis of a chiropractic diagnosis which depends on the measurement or observation of changes to the functioning or structure of the human body resulting from the application of the magnetic force.

(c) Hair analysis if it is used as the only determinant for recommending chiropractic treatment or nutritional supplementation.

(d) Therapeutic ultrasound and galvanic therapy may be used by a licensee only if:

1. The licensee has completed the physiologic therapeutics portion of the examinations of the national board of examiners; or,

2. The licensee has completed a course of instruction in therapeutic ultrasound and galvanic therapy approved by the board, submits proof of completion to the board and receives acknowledgement of submittal; and,

3. The use of therapeutic ultrasound and galvanic therapy is limited to neurological and musculoskeletal conditions that are amenable to treatment, are not contra-indicated, and are within the scope of chiropractic practice as described in s. 446.01 (2) (a) and (b), Stats.

Note: A list of courses of instruction in therapeutic ultrasound and galvanic therapy approved by the board is available upon request from the Department of Safety and Professional Services, 1400 East Washington Avenue, P.O. Box 8935, Madison, Wisconsin 53708.

(e) The use of any device in the practice of chiropractic to diagnose, analyze, treat or prevent the cause of departure from complete health and proper condition of the human, which is not employed or applied in accordance with the principles and techniques of chiropractic science is prohibited. Such devices include, but are not limited to:

1. The following electro-diagnostic devices: EAV, VEGATEST, BIOTRON 1000, ACCUPATH 1000, VI-TEL 618, INTERRO System, PRO-PHYLE, or substantially similar counterparts of any of these devices.

(f) Any practice system, analysis, method or protocol which does not include the competent assessment, evaluation or diagnosis of the condition to be treated before beginning treatment of the patient.

(g) Any practice system, analysis, method or protocol which relies upon diagnostic methods that are not generally recognized

or accepted within the profession or which do not have scientific validity.

(h) Any practice system, analysis, method or protocol which is represented as a means of attaining spiritual growth, spiritual comfort or spiritual well-being.

History: Cr. Register, December, 1984, No. 348, eff. 1-1-85; r. and recr. Register, October, 1989, No. 406, eff. 11-1-89; cr. (2) (e), Register, January, 1992, No. 433, eff. 2-1-92; am. (2) (b), Register, May, 1992, No. 437, eff. 6-1-92; cr. (2) (f), (g), (h), Register, February 1995, No. 470, eff. 3-1-95; am. (2) (f) to (h), Register, July, 1999, No. 523, eff. 8-1-99; am. (1) (a), (b) 1., 2., 3., (c), (2) (a) and (b), Register, September, 1999, No. 525, eff. 10-1-99; CR 03-082; am. (1) (b) 3. Register July 2004 No. 583, eff. 8-1-04; CR 06-051; am. (1) (d) Register November 2006 No. 611, eff. 12-1-06.

Chir 4.07 Suspension. During a period in which a licensee is suspended under s. 446.03, Stats., unless the board specifies otherwise in its final order or a subsequent order, the licensee may not do any of the following:

- (1) Perform any of the functions in s. Chir 4.03.
- (2) Have any professional contact with patients.
- (3) Be present in any chiropractic office, other than to receive care.

History: Cr. Register, March, 2000, No. 531, eff. 4-1-00.

Chapter Chir 5

CONTINUING EDUCATION

Chir 5.01 Continuing education requirements for credential renewal.
Chir 5.02 Approval of continuing education programs.

Chir 5.03 Application denials.

Note: Chapter Chir 5 as it existed on February 29, 1996, was repealed and a new chapter Chir 5 was created effective March 1, 1996.

Chir 5.01 Continuing education requirements for credential renewal. (1) (a) Every chiropractor shall complete at least 40 continuing education credit hours in approved continuing education programs during each 2-year license registration period ending on December 14 of each even-numbered year, except as specified in s. **Chir 3.02 (1) (c)**.

(b) Continuing education requirements for license renewal apply to the first full 2-year period in which a chiropractor is licensed.

(c) The board may grant a waiver, partial waiver, or postponement of the continuing education requirements in cases of hardship.

(d) Course work completed in pursuit of the educational requirements of ch. **Chir 12** may be counted on an hour-for-hour basis.

(e) Of the 40 continuing education credit hours in par. (a), a chiropractor holding a nutritional counseling certificate issued under ch. **Chir 12** shall complete at least 4 continuing education hours in nutrition.

(f) One credit of course work completed to become proficient in the use of an automated external defibrillator as required in ss. **Chir 2.02 (6) (c)**, **3.02 (1) (e)**, and **3.03 (1) (i)**, may be counted as a continuing education credit hour.

(1g) (a) Every chiropractic radiological technician shall complete at least 12 continuing education credit hours in approved continuing education programs during each 2-year certificate registration period ending on December 14 of each even-numbered year. A chiropractic radiological technician who receives an initial certificate during a licensing biennium is not required to satisfy the continuing education requirement from the date of that certificate to the end of that licensing biennium.

(b) The board may grant a waiver, partial waiver, or postponement of the continuing education requirements in cases of hardship.

(1r) (a) Every chiropractic technician shall complete at least 6 continuing education credit hours in approved continuing education programs during each 2-year certificate registration period ending on December 14 of each even-numbered year. A chiropractic technician who receives an initial certificate during a licensing biennium is not required to satisfy the continuing education requirement from the date of that certificate to the end of that licensing biennium.

(b) The board may grant a waiver, partial waiver, or postponement of the continuing education requirements in cases of hardship.

(2) Continuing education credit hours may apply only to the 2-year license period in which the credit hours are acquired, unless either of the following applies:

(a) The continuing education credit hours required of a particular chiropractor, chiropractic radiological technician, or chiropractic technician as a consequence of a disciplinary proceeding, informal settlement conference, or resolution of an investigation into the conduct or competence of the chiropractor, chiropractic radiological technician, or chiropractic technician may not be

counted towards the fulfillment of generally applicable continuing education requirements.

(b) If the chiropractor, chiropractic radiological technician, or chiropractic technician has failed to meet the credential renewal requirement during the period, continuing education hours acquired on or after December 14 of any even-numbered year will apply to the preceding period only if the chiropractor, chiropractic radiological technician, or chiropractic technician has failed to meet the credential renewal requirement during that period, and will not apply to any other period or purpose.

(3) To obtain credit for completion of continuing education programs, a chiropractor, chiropractic radiological technician, or chiropractic technician shall certify on his or her application for credential renewal that he or she has completed all continuing education credits as required in this section for the previous 2-year credential registration period. A chiropractor, chiropractic radiological technician, or chiropractic technician shall retain for a minimum period of 4 years, and shall make available to the board or its agent upon request, certificates of attendance issued by the program sponsor for all continuing education programs for which he or she claims credit for purposes of renewal of his or her credential. Chiropractors, chiropractic radiological technicians, or chiropractic technicians attending a program for credit shall be present in the room where a program is being presented in order to claim credit. A chiropractor, chiropractic radiological technician, or chiropractic technician may claim credit hours for continuing education for which he or she was in actual attendance in the room, except for authorized break periods or to attend to personal hygiene needs.

History: Cr. Register, February, 1996, No. 482, eff. 3-1-96; am. (1), (2) (intro.), (a) and (3), Register, March, 1998, No. 507, eff. 4-1-98; renum. (1) to be (1) (a), cr. (1) (b) to (d), Register, June, 2001, No. 546, eff. 7-1-01; CR 03-082: cr. (1) (e) Register July 2004 No. 583, eff. 8-1-04; CR 06-051: cr. (1) (f) and (g) Register November 2006 No. 611, eff. 12-1-06; CR 08-093: cr. (1) (h) Register October 2009 No. 646, eff. 11-1-09; CR 11-019: am. (title), (1) (a), (2) (a), (b), (3), r. and rec. (1) (c), (d), (e), (f), r. (1) (g), (h), cr. (1g), (1r) Register September 2011 No. 669, eff. 10-1-11.

Chir 5.02 Approval of continuing education programs. (1) The board may approve a continuing education program which meets the following minimum requirements:

(a) The program is sponsored by the Wisconsin chiropractic association, the American chiropractic association, the international chiropractors association, a college of chiropractic approved by the board, or a college of medicine or osteopathy accredited by an agency recognized by the United States department of education.

(b) *Chiropractors.* The program subject matter relates to improving the clinical skills of a chiropractor and is generally taught at the undergraduate or postgraduate level of a chiropractic college meeting the requirements of s. **Chir 2.02 (6) (b)**. The board will not approve credit for continuing education regarding a technique or practice which the board has determined to be unsafe or ineffective.

(bm) *Chiropractic radiological technician and chiropractic technician.* The program subject matter relates to improving the clinical skills of a chiropractic radiological technician or chiropractic technician, as applicable.

(c) The program sponsor agrees to provide a responsible person to monitor and verify the attendance of each registered chiropractor, chiropractic radiologic technician, or chiropractic techni-

cian, as applicable, at the program, and the program sponsor agrees to keep the records of attendance for 3 years from the date of the program and to furnish each participant with evidence of having attended the program.

(d) A program sponsor shall not assign or delegate its responsibilities to monitor or record attendance, provide evidence of attendance, validate course content, or provide information on instructors or other aspects of the program unless the assignment or delegation is specifically identified in the application for approval and approved by the board.

(e) The program sponsor has reviewed and validated the program's course content to ensure its compliance with pars. (b) and (bm).

(f) When a course instructor of the program is on the undergraduate or postgraduate faculty of a chiropractic college, the program sponsor has provided written verification that the course instructor has been appointed in accordance with the accreditation standards of the council on chiropractic education, and that the chiropractic college exercises sufficient supervision over a faculty member's course content.

(g) The program offers significant professional educational benefit for participants, as determined by the board.

(h) The instructor is qualified to present the course.

(1m) The board shall approve a continuing education program that is approved under s. 46.03 (38), Stats., to provide instruction in the use of an automated external defibrillator. Subsections (1) to (4) and (6) do not apply to programs approved under this section.

(2) (a) Continuing education programs may include subject material other than that which relates to improving the clinical skills of a chiropractor and is generally taught at the undergraduate or postgraduate level of a chiropractic college, meeting the requirements of s. Chir 2.02 (6) (b). However, only the parts of the program which relate to improving the clinical skills of a chiropractor and are generally taught at the undergraduate or postgraduate level of a chiropractic college are eligible for credit.

(am) Continuing education programs may include subject material other than that which relates to improving the clinical skills of a chiropractic radiological technician or chiropractic technician. However, only the parts of the program which relate to improving the clinical skills of a chiropractic radiological technician or chiropractic technician, as applicable, are eligible for credit.

(b) Any presentation, program content, materials or displays for the advertising, promotion, sale or marketing of equipment, devices, instruments or other material of any kind or purpose shall be kept separate from the program content and presentation for which approval is applied and granted.

(c) Programs shall be approved for one hour of continuing education for every 50 minutes of instruction.

(3) Home study programs may be approved for credit only in cases of extreme hardship, as determined by the board.

(4) (a) An application for approval of a continuing education program shall:

1. Be on a form provided by the board.

Note: Application forms are available on request from the Department of Safety and Professional Services, 1400 East Washington Avenue, P.O. Box 8935, Madison, Wisconsin 53708.

2. Identify the name and address of the program sponsor and describe how the program sponsor qualifies under this section.

3. Describe the time and place of the program.

4. Be complete as prescribed in this subsection and filed with the board no later than 75 days prior to the program date. An application is not considered complete until such time as all information required to be submitted with the application, and any supplementary information requested by the board, is received by the board.

5. Include evidence of the program sponsor's verification showing to the satisfaction of the board that the subject matter is generally taught at the undergraduate or postgraduate level of a chiropractic college meeting the requirements of s. Chir 2.02 (6) (b) and relates to improving the clinical skills of a chiropractor. A detailed course outline or syllabus describing the subject matter of the program, and the amount of time devoted to each section of the outline or syllabus shall be attached to the application.

5m. Include evidence of the program sponsor's verification showing to the satisfaction of the board that the subject matter relates to improving the clinical skills of a chiropractic radiological technician or a chiropractic technician, as applicable. A detailed course outline or syllabus describing the subject matter of the program, and the amount of time devoted to each section of the outline or syllabus shall be attached to the application.

6. Describe the names and qualifications of all instructors, and if applicable, whether an instructor of the program who is an undergraduate or postgraduate faculty member of a sponsoring college was appointed in accordance with accreditation standards of the Council on Chiropractic Education (CCE) or by an agency approved by the United States Office of Education or its successor.

7. Identify whether the program sponsor intends to assign or delegate any of its responsibilities to another person or entity, and if so, include each of the following:

a. A specific description of the assignment or delegation.

b. The person or entity who is assigned or delegated to perform the responsibility, including name, address and qualification to perform the responsibility.

c. The method by which the program sponsor intends to assure that the delegated or assigned responsibility is performed.

(b) If necessary in order to determine whether an applicant meets the requirements of this chapter, the board may require that the applicant submit information in addition to that described in this section.

(5) Continuing education credit may not be awarded for meals or break periods.

(6) The sponsor of an approved program shall ensure that the program is carried out and presented as represented to and approved by the board, and that all responsibilities of the program sponsor, an instructor, and any person or entity delegated or assigned a responsibility relating to a program approved by the board are fulfilled.

Note: Continuing education approval request forms are available upon request from the Department of Safety and Professional Services, 1400 East Washington Avenue, P.O. Box 8935, Madison, Wisconsin 53708.

History: Cr. Register, February, 1996, No. 482, eff. 3-1-96; am. (1) (a) to (c), renum. (1) (d) to be (1) (g) and am., cr. (1) (d) to (f), r. and recr. (2) and (4), cr. (6), Register, March, 1998, No. 507, eff. 4-1-98; CR 03-082: am. (1) (b) and (4) (a) 6., cr. (1) (h) Register July 2004 No. 583, eff. 8-1-04; CR 08-093: cr. (1m) Register October 2009 No. 646, eff. 11-1-09; CR 11-019: cr. (1) (b) (title), (bm), (2) (am), (4) (a) 5m., am. (1) (c), (e) Register September 2011 No. 669, eff. 10-1-11.

Chir 5.03 Application denials. The board may deny approval of an application for any of the following reasons:

(1) The program or program sponsor does not meet requirements established in this chapter.

(2) The emphasis of the program is on the business, management, or insurance aspects of a chiropractic practice rather than on improving the clinical skills of the chiropractor, chiropractic radiological technician, or chiropractic technician, as applicable.

(3) The board determines that the program sponsor has not provided adequate assurance that responsibilities delegated or assigned to others will be satisfactorily performed.

(4) The program sponsor, an instructor, or a person delegated or assigned a responsibility has a financial, personal or professional interest which conflicts directly with the performance of responsibilities in this chapter.

(5) Failure on the part of a program sponsor, an instructor, or a person delegated or assigned a responsibility to carry out a pro-

gram as represented to and approved by the board or as provided in this chapter.

History: Cr. Register, March, 1998, No. 507, eff. 4-1-98; CR 11-019: am. (2) Register September 2011 No. 669, eff. 10-1-11.

Chapter Chir 6

STANDARDS OF CONDUCT

Chir 6.01 Authority.
Chir 6.015 Definition.

Chir 6.02 Unprofessional conduct.
Chir 6.03 Duty to evaluate and inform.

Chir 6.01 Authority. The rules in ch. Chir 6 are adopted under authority in ss. 15.08 (5) (b), 227.11 and 446.04, Stats.

History: Cr. Register, December, 1984, No. 348, eff. 1-1-85; correction made under s. 13.93 (2m) (b) 7., Stats., Register, March, 1990, No. 411.

Chir 6.015 Definition. In this chapter:

(1) "Advertisement" means any communication disseminated or intended to be disseminated to the public which is likely to or intended to induce, directly or indirectly, the rendering of professional services by the chiropractor named in or identified by the communication. "Advertisement" includes professional business cards, professional announcement cards, office signs, letterhead, telephone directory listings, directories or listings of health care practitioners, and communications which are likely to or intended to induce, directly or indirectly, the rendering of professional services by the chiropractor named in or identified by the communication in newspapers, broadsides, flyers, radio, television, books, magazines, or motion pictures.

History: Cr. Register, November, 1997, No. 503, eff. 12-1-97.

Chir 6.02 Unprofessional conduct. Unprofessional conduct by a chiropractor includes:

(1) Engaging in any practice which constitutes a substantial danger to the health, welfare or safety of a patient or the public.

(2) Practicing or attempting to practice when unable to do so with reasonable skill and safety to patients.

(3) Practicing in a manner which substantially departs from the standard of care ordinarily exercised by a chiropractor.

(4) Practicing or attempting to practice beyond the scope of a license issued by the board, including but not limited to acts prohibited under s. Chir 4.05 (1).

(5) Practicing or attempting to practice while the ability to perform is impaired by physical, mental or emotional disorder, drugs or alcohol.

(6) Performing professional services inconsistent with training, education or experience.

(7) Engaging in sexual contact, exposure, gratification, or other sexual behavior with or in the presence of a patient.

(8) Engaging in excessive evaluation or treatment of a patient.

(9) Failing to conduct a competent assessment, evaluation or diagnosis as a basis for treatment or consultation.

(10) Revealing confidential patient information without consent of a patient, except that information shall be revealed to the board or its representatives pursuant to investigation of a licensee or as otherwise authorized by law.

(11) Refusing to render services to a person because of race, color, sex or religion.

(12) Knowingly falsifying patient records.

(13) Impersonating another chiropractor.

(14) Obtaining or attempting to obtain any compensation for chiropractic services by fraud, including billing for services not rendered or submitting a claim for a fraudulent diagnosis.

Note: The use by a licensee of "no out-of-pocket expense" payment arrangements may constitute insurance fraud, and may therefore violate this subsection as well as s. 943.395, Stats.

(15) Advertising in a manner which is false, deceptive or misleading. An advertisement which does any of the following is false, deceptive or misleading:

(a) Contains a misrepresentation of fact.

(b) Is likely to mislead or deceive because of a failure to disclose material facts.

(c) Is intended to or is likely to create false or unjustified expectations of favorable results.

(d) Fails to prominently disclose complete details of all variables and material factors relating to any advertised fee.

(e) Contains any representation or implication that in reasonable probability will cause an ordinarily prudent person to misunderstand or be deceived.

(f) Includes reference to or implies specialization or advanced training unless all of the following are true:

1. The specialty is recognized by a council of the American chiropractic association or the international chiropractors association.

2. The specialty requires at least 300 hours of postgraduate credit hours and passage of a written examination approved by the American chiropractic association or the international chiropractors association.

3. The title applied to the specialty by the chiropractor is the title applied by the American chiropractic association or the international chiropractors association.

(g) Includes reference to or implies advanced training unless all of the following are true:

1. The postgraduate training was received in one, unified program approved by the American chiropractic association or the international chiropractors association, or through one, unified program at a college accredited by the council on chiropractic education and approved by the board.

2. The chiropractor has completed at least 100 hours of postgraduate training in the area in which the chiropractor claims advanced training.

3. The postgraduate training program includes successful completion of a written examination as a requirement for successful completion of the training program.

(h) Appears in any classified directory, listing or other compendium under a heading, which when considered together with the advertisement, has the capacity or tendency to be deceptive or misleading with regard to the profession or professional status of the chiropractor.

(i) Implies that the chiropractic services provided will result in emotional or spiritual benefits.

(16) Aiding or abetting or permitting unlicensed persons in the practice of chiropractic.

(17) Failing to exercise a reasonable degree of supervision over subordinate employees.

(18) Obtaining or attempting to obtain a license through fraud or misrepresentation or making any material misstatement, omission or falsification in connection with an application for a license, registration or renewal.

(19) Refusing upon request to cooperate in a timely manner with the board's investigation of a complaint lodged against a

licensee. Licensees taking longer than 30 days to respond shall have the burden of demonstrating that they have acted in a timely manner.

(20) Knowingly providing false information to the board or its representative.

(21) Failing to notify the board of having a chiropractic license, certificate, permit or registration granted by any other jurisdiction subject to disciplinary action.

(22) Having a license, certificate, permit or registration granted by another jurisdiction to practice as a chiropractor limited, suspended or revoked, or subject to any other disciplinary action.

(23) Failing to notify the board of any criminal conviction, the circumstances of which relate substantially to the practice of chiropractic.

(24) Being convicted of a crime substantially related to the practice of chiropractic.

(25) Violating any provision of ch. 446, Stats., or any rule or order of the board.

(26) Violating a law, or aiding or abetting the violation of any law substantially related to the practice of chiropractic.

(27) Failing to maintain patient records for a minimum period of 7 years after the last treatment or after the patient reaches the age of majority, whichever is greater.

(28) Failing to release patient health care records to a patient in accordance with s. 146.83, Stats.

(29) Negating the co-payment or deductible provisions of a contract of insurance by agreeing to forgive any or all of the patient's obligation for payment under the contract unless the chiropractor reduces the chiropractor's claim to the insurance carrier in regard to that patient by an equal proportion. In this section, "co-payment or deductible provisions" means any terms in a contract of insurance with a third party whereby the patient remains financially obligated to the chiropractor for payment.

Note: It is no violation of this rule for a chiropractor to adjust fees, but the fee charged must be accurately reported to any third party payor. It is no violation of this rule for a chiropractor to provide treatment without any charge.

(30) Giving or receiving unauthorized assistance, violating rules of conduct, or otherwise cheating or acting dishonestly respecting any examination required for the granting of a license or registration to practice chiropractic.

(31) Making a representation likely to create an unjustified expectation about the results of a nutritional counseling service or procedure.

History: Cr. Register, December, 1984, No. 348, eff. 1-1-85; am. (4), Register, October, 1989, No. 406, eff. 11-1-89; cr. (27) and (28), Register, January, 1992, No. 433, eff. 2-1-92; cr. (29), Register, January, 1993, No. 445, eff. 2-1-93; am. (7), Register, June, 1993, No. 450, eff. 7-1-93; am. (27), Register, May, 1997, No. 497, eff. 6-1-97; r. and recr. (15), Register, November, 1997, No. 502, eff. 12-1-97; am. (18), cr. (30), Register, September, 1999, No. 525, eff. 10-1-99; CR 03-082: am. (14) Register July 2004 No. 583, eff. 8-1-04; CR 06-051: cr. (31) Register November 2006 No. 611, eff. 12-1-06.

Chir 6.03 Duty to evaluate and inform. (1) A chiropractor shall evaluate each patient to determine whether the patient presents a condition that is treatable through chiropractic means. An evaluation shall be based upon an examination appropriate to the presenting patient. In conducting an evaluation, a chiropractor shall utilize chiropractic science as described in s. Chir 4.02 and the principles of education and training of the chiropractic profession.

(2) If an evaluation indicates a condition treatable by chiropractic means, the chiropractor shall treat the patient using appropriate chiropractic means.

(3) If an evaluation indicates a condition which is not treatable through chiropractic means, the chiropractor shall inform the patient that the condition is not treatable through chiropractic means and recommend that the patient seek additional advice or care.

(4) A chiropractor may render concurrent or supportive chiropractic care to a patient, but a chiropractor shall refrain from further chiropractic treatment when a reasonable chiropractor should be aware that the patient's condition will not be responsive to further treatment.

History: Cr. Register, June, 2000, No. 534, eff. 7-1-00.

Chapter Chir 9

CHIROPRACTIC PRECEPTORSHIP

Chir 9.01	Definitions.	Chir 9.04	Approved postgraduate preceptorship programs.
Chir 9.02	Unlicensed practice by chiropractic students and graduate chiropractors.	Chir 9.05	Approved chiropractor preceptors.
Chir 9.03	Approved chiropractic college preceptorship programs.	Chir 9.06	Termination of preceptorship.

Chir 9.01 Definitions. In this chapter:

(1) “Chiropractic student” means a student of an approved college of chiropractic in his or her last academic quarter, semester, or trimester of study, who is eligible for graduation from the college of chiropractic but for completion of a preceptorship period.

(2) “Chiropractor preceptor” means a chiropractor licensed and practicing in Wisconsin pursuant to ch. 446, Stats., who accepts a chiropractic student into his or her practice for the purpose of providing the chiropractic student with a clinical experience of the practice of chiropractic.

(3) “Graduate chiropractor” means a person who has received a doctor of chiropractic degree from a college of chiropractic approved by the board, but who has not taken any licensing examination the results of which have been declared by a licensing authority.

(4) “Preceptorship practice” means the chiropractic practice of a single chiropractor or group of chiropractors in a particular business or clinic, into which a licensed, practicing chiropractor has accepted a chiropractic student for the limited purpose of providing the chiropractic student with a clinical experience in the practice of chiropractic.

History: Cr. Register, June, 1994, No. 462, eff. 7-1-94.

Chir 9.02 Unlicensed practice by chiropractic students and graduate chiropractors. The board may approve the unlicensed practice of chiropractic in this state by a bona fide student of a chiropractic college which offers an approved preceptorship program, if the chiropractic college preceptorship program, the chiropractor preceptor and the practice of chiropractic by the student meet the criteria established by the board. The board may approve the unlicensed practice of chiropractic in this state by a graduate chiropractor in an approved postgraduate chiropractic preceptorship program, if the postgraduate chiropractic preceptorship program, the chiropractor preceptor and the practice of chiropractic by the graduate chiropractor meet the criteria established by the board.

History: Cr. Register, June, 1994, No. 462, eff. 7-1-94.

Chir 9.03 Approved chiropractic college preceptorship programs. The board shall approve a chiropractic college preceptorship program which includes all of the following criteria:

(1) Is operated by a chiropractic college approved by the board. The board shall consider whether the college is accredited by the council on chiropractic education, and shall also consider the degree of consumer protection provided by the defined standards and practices of the chiropractic college’s preceptor program, as well as degree of consumer protection demonstrated by the actual operation of the chiropractic college’s preceptor program.

(2) Is an established component of the curriculum of the chiropractic college.

(3) Certifies to the board, on forms supplied by the department:

(a) That all students who participate in the preceptorship program are in the last semester, trimester, or quarter of their education, and have met all requirements for graduation from the chiropractic college except for completion of the preceptorship period, and

(b) That no chiropractor who is a preceptor shall supervise more than one chiropractic student.

(4) Certifies to the board, on forms supplied by the department, that all chiropractors who participate as preceptors are faculty of the chiropractic college.

(5) Certifies to the board, on forms supplied by the department, that the chiropractor preceptor and the chiropractic student have agreed on the goals of the preceptor program to be completed by the chiropractic student.

Note: Forms may be obtained upon request from the Department of Safety and Professional Services, 1400 East Washington Avenue, P.O. Box 8935, Madison, Wisconsin 53708.

(6) Provides a list to the board at least 45 days prior to every trimester or academic quarter of the chiropractors in Wisconsin who will be acting as preceptors in the program.

History: Cr. Register, June, 1994, No. 462, eff. 7-1-94; am. (6), Register, July, 1996, No. 487, eff. 8-1-96; CR 03-082: am. (3) (intro.), (4) and (5) Register July 2004 No. 583, eff. 8-1-04.

Chir 9.04 Approved postgraduate preceptorship programs. The board shall approve a preceptorship program for the training of graduate chiropractors which meets all of the following criteria:

(1) Is operated by a chiropractic college approved by the board. The board shall consider whether the college is accredited by the council on chiropractic education, and shall also consider the degree of consumer protection provided by the defined standards and practices of the chiropractic college’s preceptor program, as well as degree of consumer protection demonstrated by the actual operation of the chiropractic college’s preceptor program.

(2) Is an established postgraduate program of the chiropractic college.

(3) Certifies to the board, on forms supplied by the board:

(a) That all graduate chiropractors who participate in the postgraduate preceptorship program have graduated from a college of chiropractic approved by the board, and

(b) That no chiropractor who is a preceptor shall supervise more than one graduate chiropractor.

(4) Certifies to the board, on forms supplied by the board, that all chiropractors who participate as preceptors are faculty of the chiropractic college.

(5) Certifies to the board, on forms supplied by the board, that the chiropractor preceptor and graduate chiropractor have agreed on the goals of the preceptor program to be completed by the graduate chiropractor.

Note: Forms may be obtained upon request from the Department of Safety and Professional Services, 1400 East Washington Avenue, P.O. Box 8935, Madison, Wisconsin 53708.

(6) Provides a list to the board 45 days prior to every trimester or academic quarter of the chiropractors in Wisconsin who will be acting as preceptors in the program.

History: Cr. Register, June, 1994, No. 462, eff. 7-1-94; am. (6), Register, September, 1999, No. 525, eff. 10-1-99.

Chir 9.05 Approved chiropractor preceptors. The board shall approve a chiropractor to be a chiropractor preceptor if the chiropractor meets all of the following conditions:

(1) Certifies to the board, on forms supplied by the department, that:

(a) The chiropractor preceptor has been continuously licensed in Wisconsin for the previous 5 years, and that there are no pending disciplinary actions or malpractice claims against the chiropractor preceptor in any state or country. If any discipline has ever been imposed in any state or country on any professional license held by the preceptor, the preceptor shall provide details of the discipline for the board's review.

(b) The chiropractor preceptor is a member of the faculty of the chiropractic college from which the chiropractor preceptor will accept a chiropractic student or graduate chiropractor into a preceptorship practice.

(c) The chiropractor preceptor is responsible for the practice of the chiropractic student or graduate chiropractor the chiropractor preceptor accepts into a preceptorship practice.

(d) The chiropractor preceptor will identify the chiropractic student or graduate chiropractor to the patients of the preceptorship practice in such a way that no patient will tend to be misled as to the status of the chiropractic student or graduate chiropractor, and that each patient or parent or guardian of each patient will be required to provide informed consent to treatment of that patient by the chiropractic student or graduate chiropractor.

(e) The chiropractor preceptor will supervise no more than one chiropractic student or graduate chiropractor at any one time.

(f) The chiropractor preceptor will exercise direct, on-premises supervision of the chiropractic student or graduate chiroprac-

tor at all times during which the chiropractic student or graduate chiropractor is engaged in any facet of patient care in the chiropractor preceptor's clinic.

Note: Forms may be obtained upon request from the Department of Safety and Professional Services, Chiropractic Examining Board, 1400 East Washington Avenue, P.O. Box 8935, Madison, Wisconsin 53708.

History: Cr. Register, June, 1994, No. 462, eff. 7-1-94; CR 03-082: am. (1) (intro.) and (a) Register July 2004 No. 583, eff. 8-1-04.

Chir 9.06 Termination of preceptorship. (1) A preceptorship shall terminate upon the occurrence of the earliest applicable of the following events:

(a) A chiropractic student participating in a preceptorship program graduates from the college of chiropractic operating the program.

(b) A graduate chiropractor participating in a postgraduate preceptorship program is declared to have passed or failed a chiropractic licensing examination by any licensing authority or the national board.

(c) Six months have passed since the graduate chiropractor graduated from a college of chiropractic.

(d) A chiropractor preceptor is formally charged with a criminal offense, the circumstances of which substantially relate to the practice of chiropractic.

(e) A chiropractor preceptor is formally alleged to have violated the statutes or administrative rules pertaining to the practice of chiropractic.

(f) A chiropractor preceptor is formally complained against in a civil action for malpractice.

(2) If a preceptorship is terminated under sub. (1) (d), (e) or (f), the board may approve a replacement preceptor proposed by the chiropractic student or graduate chiropractor who satisfies the requirements in s. Chir 9.05 (1) (a) and (c) to (f). The proposed chiropractor preceptor need not have been listed by the chiropractic college operating the preceptorship program.

History: Cr. Register, June, 1994, No. 462, eff. 7-1-94; CR 03-082: renun. Chir 9.06 to be Chir 9.06 (1) and am. (1) (b), cr. (2) Register July 2004 No. 583, eff. 8-1-04.

Chapter Chir 10

DELEGATION TO UNLICENSED PERSONS

Chir 10.01 Definitions.

Chir 10.02 Delegation of adjunctive services to unlicensed persons.

Chir 10.03 X-ray services.

Chir 10.05 Physiological therapeutics.

Chir 10.01 Definitions. In this chapter:

(1) “Adjunctive services” means services which are preparatory or complementary to chiropractic adjustments of the spine or skeletal articulations, or both. “Adjunctive services” include the taking of a preliminary patient history. “Adjunctive services” does not include making a chiropractic diagnosis, analyzing a diagnostic test, or performing a chiropractic adjustment.

(2) “Preliminary patient history” means the process of gathering baseline data regarding a patient, including the nature of the chief complaint, family history, and medical history. The “preliminary patient history” is intended to provide a starting point for further inquiry by the chiropractor into the patient’s condition.

(3) “Unlicensed person” means a person who does not possess a valid license to practice chiropractic in this state pursuant to ch. 446, Stats.

History: Cr. Register, January, 1995, No. 469, eff. 2-1-95; CR 03-082: am. (1) and (2) Register July 2004 No. 583, eff. 8-1-04.

Chir 10.02 Delegation of adjunctive services to unlicensed persons. A chiropractor licensed under ch. 446, Stats., may delegate the performance of adjunctive services to an unlicensed person only if all of the following conditions are met:

(1) The chiropractor maintains records by which the chiropractor has verified that the unlicensed person has successfully completed a didactic and clinical training program approved by the board and covering the performance of the delegated service. Successful completion of a training program is demonstrated by attaining proficiency in the delivery of that service to minimally competent chiropractic practice standards as measured by objective knowledge and skills testing.

(2) The chiropractor exercises direct supervision of the unlicensed person performing the delegated service.

(3) The chiropractor retains ultimate responsibility for the manner and quality of the service.

History: Cr. Register, January, 1995, No. 469, eff. 2-1-95; CR 03-082: cr. (3) Register July 2004 No. 583, eff. 8-1-04.

Chir 10.03 X-ray services. A chiropractor may delegate x-ray examination procedures to an unlicensed person only if the delegation is consistent with s. Chir 10.02 and the unlicensed person has successfully completed a course of instruction comprising at least 48 hours and including the following components: introduction to x-ray examination; physics of x-ray examination; anatomy; patient positioning; safety measures; machine operation; exposure techniques and accessories; processing and dark room techniques; film critique and quality assurance; professionalism; recordkeeping; emergency procedures, summary; and successful completion of an examination on the content of the course of instruction. The chiropractor shall comply with s. Chir 4.04 before delegating the performance of x-ray services to an unlicensed person.

Note: The coursework specified in s. Chir 10.03 provides the training required by s. Chir 4.04. A list of board-approved programs is available upon request from the Department of Safety and Professional Services, 1400 East Washington Avenue, P.O. Box 8935, Madison, Wisconsin 53708.

History: Cr. Register, January, 1995, No. 469, eff. 2-1-95.

Chir 10.05 Physiological therapeutics. A chiropractor may delegate the performance of patient services through physiological therapeutics that include but are not limited to heat, cold, light, air, water, sound, electricity, massage, and physical exercise with and without assistive devices to an unlicensed person only if the delegation is consistent with s. Chir 10.02 and the unlicensed person has adequate training, education and experience to perform the delegated function to minimally acceptable chiropractic standards.

History: Cr. Register, January, 1995, No. 469, eff. 2-1-95.

Chapter Chir 11

PATIENT RECORDS

Chir 11.01 Definition.
Chir 11.02 Patient record contents.

Chir 11.03 Initial patient presentation.
Chir 11.04 Daily notes.

Chir 11.01 Definition. As used in this chapter “patient record” means patient health care records as defined under s. 146.81 (4), Stats.

History: Cr. Register, May, 1997, No. 497, eff. 6-1-97.

Chir 11.02 Patient record contents. (1) Complete and comprehensive patient records shall be created and maintained by a chiropractor for every patient with whom the chiropractor consults, examines or treats.

(2) Patient records shall be maintained for a minimum period of 7 years as specified in s. Chir 6.02 (27).

(3) Patient records shall be prepared in substantial compliance with the requirements of this chapter.

(4) Patient records shall be complete and sufficiently legible to be understandable to health care professionals generally familiar with chiropractic practice, procedures and nomenclature.

(5) Patient records shall include documentation of informed consent of the patient, or the parent or guardian of any patient under the age of 18, for examination, diagnostic testing and treatment.

(6) Rationale for diagnostic testing, treatment or other ancillary services shall be documented in or readily inferred from the patient record.

(7) Significant, relevant patient health risk factors shall be identified and documented in the patient record.

(8) Each entry in the patient record shall be dated and shall identify the chiropractor, chiropractic assistant or other person making the entry.

Note: Chiropractors should be aware that federal requirements, especially in the Health Insurance Portability and Accountability Act of 1996 (HIPAA), may have an impact on record-keeping requirements.

History: Cr. Register, May, 1997, No. 497, eff. 6-1-97.

Chir 11.03 Initial patient presentation. Upon presentation of a new patient, patient records shall contain the following essential elements as relevant or applicable to the evaluation and treatment of the patient:

(1) History of the present illness or complaints, and significant past health, medical and social history.

(2) Significant family medical history and health factors which may be congenital or familial in nature.

(3) Review of patient systems, including cardiovascular, respiratory, musculoskeletal, integumentary and neurologic.

(4) Results of physical examination and diagnostic testing focusing on areas pertinent to the patient’s chief complaints.

(5) Assessment or diagnostic impression of the patient’s condition.

(6) Treatment plan for the patient, including all treatments rendered, and all other ancillary procedures or services rendered or recommended.

History: Cr. Register, May, 1997, No. 497, eff. 6-1-97.

Chir 11.04 Daily notes. For patient visits in which the chiropractor carries out a previously devised treatment plan, daily notes shall be made and maintained documenting all treatments and services rendered, and any significant changes in the subjective presentation, objective findings, assessment or treatment plan for the patient.

History: Cr. Register, May, 1997, No. 497, eff. 6-1-97.

Chapter Chir 12

NUTRITIONAL COUNSELING CERTIFICATION

Chir 12.01 Definitions.
Chir 12.02 Requirements for nutritional counseling certification.
Chir 12.03 Approval of nutritional counseling education programs.

Chir 12.04 Application denials.
Chir 12.05 Revocation of approval.
Chir 12.06 Prohibited practices.

Chir 12.01 Definitions. In this chapter:

(1) “Administering” means the direct application of a product, whether by ingestion or any other means, to the body of a patient or research subject by any of the following:

- (a) A chiropractor.
- (b) A patient or research subject at the direction of the chiropractor.

(2) “Dispensing” means delivering a product to an ultimate user or research subject by a chiropractor.

(3) “Nutritional counseling” means providing counsel, direction, guidance, advice or a recommendation to a patient regarding the health effects of vitamins, herbs or nutritional supplements.

(4) “Nutritional supplement” means a product, other than tobacco, that is intended to supplement the diet that contains one or more of the following dietary ingredients: a vitamin, a mineral, an herb or other botanical, an amino acid, a dietary substance for use by man to supplement the diet by increasing the total daily intake, or concentrate, metabolics, constituent, extract or combination of these ingredients; or is labeled as a nutritional or dietary supplement.

History: CR 06–051: cr. Register November 2006 No. 611, eff. 12–1–06.

Chir 12.02 Requirements for nutritional counseling certification. (1) The board shall grant a certificate for nutritional counseling to a licensed chiropractor who does all of the following:

- (a) Submits an application for a certificate to the department on a form provided by the department.

Note: Application forms are available on request to the board office located at 1400 East Washington Avenue, P.O. Box 8935, Madison, Wisconsin 53708, or from the department’s website at: <http://dps.wi.gov>.

- (b) Pays the fee specified in s. 446.02 (2) (c), Stats.

(c) Submits evidence satisfactory to the board that he or she has completed any of the following:

1. Received a postgraduate degree in human nutrition, nutrition education, food and nutrition or dietetics conferred by a college or university that is accredited by an accrediting body listed as nationally recognized by the secretary of the federal department of education.

2. Received diplomate status in human nutrition conferred by a college of chiropractic accredited by the Council on Chiropractic Education (CCE) or approved by the board or by an agency approved by the United States office of education or its successor.

3. Received a postgraduate degree in human nutrition conferred by a foreign school determined to be equivalent to an accredited college of chiropractic by the CCE or approved by the board or another board approved accrediting agency, indicating that the applicant has graduated from a program that is substantially equivalent to a postgraduate or diplomate program under subd. 1. or 2.

4. Received a degree from or otherwise successfully completed a postgraduate program after December 1, 2006 consisting of a minimum of 48 hours in human nutrition that is approved by the board as provided in s. Chir 12.03, after December 1, 2006.

History: CR 06–051: cr. Register November 2006 No. 611, eff. 12–1–06.

Chir 12.03 Approval of nutritional counseling education programs. (1) To qualify for board approval as a nutritional counseling education program under s. Chir 12.02 (1) (c) 4., a program shall meet all of the following minimum requirements:

(a) The program is sponsored by the Wisconsin Chiropractic Association, the American Chiropractic Association, the International Chiropractors Association, a college of chiropractic approved by the board, or a college of medicine or osteopathy accredited by an agency recognized by the United States department of education.

(b) The program subject matter includes core curriculum education in each of the following areas:

1. Nutrition counseling and initial screening to include nutrition physical examination.
2. Diet history taking.
3. Analysis of laboratory data including hair, saliva, urine and blood samples.
4. Symptoms of severe vitamin and nutritional deficiencies, and the toxicity of excess vitamin and mineral supplementation, herbals or other nutritional supplements.
5. Protein, carbohydrates, and fat macronutrient needs and symptoms of deficiencies of any of these nutrients.
6. Vitamin recommended daily allowances and dietary reference intakes.
7. Mineral and metals needs of the human body and the biochemistry of essential and non-essential nutritional supplements.
8. Fiber needs.
9. Codex Alimentarius Commission.
10. Dietary supplement health and education act of 1994, P.L. 103–417 and related regulations.
11. Etiology of organ system dysfunction, internal medicine diseases and conditions.
12. Supplements and nutrition.
13. The efficacy, safety, risks and benefits of glandular products, chelation therapy and therapeutic enzymes.
14. Food composition and foods as a source of vitamins.
15. Sports nutrition, endurance, body building and exercise physiology.
16. Weight management and control.
17. Contraindications, side effects, and toxic effects of botanicals, nutritional supplements and diet products.
18. Nutrition across the life cycle.
19. Nutrition relating to infants, pregnancy and lactation.
20. Geriatric nutritional needs.
21. Adolescent nutrition needs.
22. Male and female nutrition needs.
23. Therapeutic use of botanical medicine.
24. Food, drug, and nutritional supplements interactions.
25. Safety and efficacy – risks and benefits of nutritional supplements.

(c) The program sponsor agrees to provide a responsible person to monitor and verify the attendance of each registered chiro-

practor at the program, and the program sponsor agrees to keep the records of attendance for 3 years from the date of the program and to furnish each participant with evidence of having attended the program.

(d) The program sponsor shall not assign or delegate its responsibilities to monitor or record attendance, provide evidence of attendance, compare course content with subject matter content required under sub. (1) (b), or provide information on instructors or other aspects of the program unless the assignment or delegation is specifically identified in the application for approval and approved by the board.

(e) The program sponsor has reviewed and validated the program's content to insure its compliance with par. (b).

(f) When a course instructor of the program is on the undergraduate or postgraduate faculty of a chiropractic college, the program sponsor has provided written verification that the course instructor has been appointed in accordance with the accreditation standards of the Council on Chiropractic Education.

(g) The program offers significant professional educational benefit for participants, as determined by the board.

(h) The instructor is qualified to present the course.

(i) The program shall include a written assessment instrument, designed to ensure that the chiropractor actively participated in the presentation of material and derived a measurable benefit from participation. There shall be an assessment or test at the conclusion of each 12 hours of education. A score of 75% or higher shall be considered a passing score.

(j) The program shall contain a reasonable security procedure to assure that the chiropractor enrolled is the actual participant.

(k) Programs shall be approved for one hour of education credit for every 50 minutes of instruction. The time used for testing and assessment purposes shall not be included in the computation of educational credit.

(2) (a) An application for approval of a nutritional counseling education program shall meet all of the following requirements:

1. Be on a form provided by the board.

Note: Application forms are available on request to the board office located at 1400 East Washington Avenue, P.O. Box 8935, Madison, Wisconsin 53708, or from the department's website at: <http://dsps.wi.gov>.

2. Identify the name and address of the program sponsor and describe how the program sponsor qualifies under s. **Chir 12.03 (1) (a)**.

3. Describe the time and place of the program.

4. Be complete as prescribed in this subsection and filed with the board no later than 75 days prior to the program date. An application is not considered complete until such time as all information required to be submitted with the application, and any supplementary information requested by the board, is received by the board.

5. Include evidence of the program sponsor's verification showing to the satisfaction of the board that the subject matter is generally taught at the undergraduate or postgraduate level of a chiropractic college and relates to improving the clinical skills of a chiropractor. A detailed course outline or syllabus describing the subject matter of the program, and the amount of time devoted to each section of the outline or syllabus shall be attached to the application.

6. Describe the names and qualifications of all instructors, and if applicable, whether an instructor of the program who is an undergraduate or postgraduate faculty member of a sponsoring college was appointed in accordance with accreditation standards of the Council on Chiropractic Education.

7. Identify whether the program sponsor intends to assign or delegate any of its responsibilities to another person or entity, and if so, include all of the following:

a. A specific description of the assignment or delegation.

b. The person or entity who is assigned or delegated to perform the responsibility, including name, address and qualification to perform the responsibility.

c. The method by which the program sponsor intends to assure that the delegated or assigned responsibility is performed.

8. Include a written assessment instrument, designed to ensure that the chiropractor actively participated in the presentation of material and derived a measurable benefit from participation.

9. Include a reasonable security procedure to assure that the chiropractor enrolled is the actual participant.

(b) If necessary, in order to determine whether an applicant meets the requirements of this chapter, the board may require that the applicant submit information in addition to that described in this section.

(3) Continuing education credit may not be awarded for meals, breaks, testing or assessment periods.

(4) The sponsor of an approved program shall ensure that the program is carried out and presented as represented to and approved by the board, and that all responsibilities of the program sponsor, an instructor, and any person or entity delegated or assigned a responsibility relating to a program approved by the board are fulfilled.

(5) The approval of a course shall be effective only for the biennium in which it is approved.

History: CR 06-051: cr. Register November 2006 No. 611, eff. 12-1-06.

Chir 12.04 Application denials. The board may deny approval of an application submitted under s. **Chir 12.03** for any of the following reasons:

(1) The program or program sponsor does not meet requirements established in this chapter.

(2) The emphasis of the program is on the business, management, or insurance aspects of a chiropractic practice rather than on improving the clinical skills of the chiropractor.

(3) The board determines that the program sponsor has not provided adequate assurance that responsibilities delegated or assigned to others will be satisfactorily performed.

(4) Any presentation, program content, materials or displays for the advertising, promotion, sale or marketing of equipment, devices, instruments or other material of any kind or purpose is not kept separate from the program content and presentation for which approval is applied and granted.

History: CR 06-051: cr. Register November 2006 No. 611, eff. 12-1-06.

Chir 12.05 Revocation of approval. The board may revoke approval of a program for any of the following reasons:

(1) The program sponsor, an instructor, or a person delegated or assigned a responsibility has a financial, personal or professional interest which conflicts directly with the performance of responsibilities in this chapter.

(2) Failure on the part of a program sponsor, an instructor, or a person delegated or assigned a responsibility to carry out a program as represented to and approved by the board or as provided in this chapter.

History: CR 06-051: cr. Register November 2006 No. 611, eff. 12-1-06.

Chir 12.06 Prohibited practices. **(1)** A chiropractor shall not delegate to any chiropractic assistant or other person any recommendations, analysis, advice, consultation or dispensing with respect to vitamins, herbs, or nutritional supplements. Nothing in this subsection may be construed to prevent chiropractic assistants or administrative employees from processing sales of vitamins, herbs, or nutritional supplements.

(2) After December 1, 2008 a chiropractor shall not sell, barter, trade or give away vitamins, herbs or nutritional supplements unless the chiropractor holds a certificate for nutritional counseling and except as consistent with the provisions of this chapter.

(3) A chiropractor shall not deliver, dispense, administer, transfer or sell a product unless that product is prepackaged for use by consumers and labeled in accordance with the requirements of state and federal law.

History: CR 06-051: cr. Register November 2006 No. 611, eff. 12-1-06.

Chapter Chir 13

INFORMED CONSENT

Chir 13.01 Authority and purpose.
Chir 13.02 Informed consent.

Chir 13.03 Exceptions to communication of alternate modes of treatment.
Chir 13.04 Recordkeeping.

Chir 13.01 Authority and purpose. (1) AUTHORITY. The rules in this chapter are adopted pursuant to the authority delegated by ss. 15.08 (5) (b), 227.11 (2) (a), and 446.08, Stats.

(2) PURPOSE. The purpose of the rules is to define the obligation of a chiropractor to communicate alternate modes of treatment to a patient.

History: CR 14-069; cr. Register July 2015 No. 715, eff. 8-1-15.

Chir 13.02 Informed consent. Any chiropractor who treats a patient shall inform the patient about the availability of reasonable alternate modes of treatment and about the benefits and risks of these treatments. The reasonable chiropractor standard is the standard for informing a patient. The reasonable chiropractor standard requires disclosure only of information that a reasonable chiropractor would know and disclose under the circumstances.

History: CR 14-069; cr. Register July 2015 No. 715, eff. 8-1-15.

Chir 13.03 Exceptions to communication of alternate modes of treatment. The chiropractor's duty to inform patients of alternate modes of treatment does not require disclo-

sure of any of the following:

(1) Detailed technical information that in all probability a patient would not understand.

(2) Risks apparent or known to the patient.

(3) Extremely remote possibilities that might falsely or detrimentally alarm the patient.

(4) Information in emergencies where failure to provide treatment would be more harmful to the patient than treatment.

(5) Information in cases where the patient is incapable of consenting.

(6) Information about alternate modes of treatment for any condition the chiropractor has not included in their diagnosis at the time the chiropractor informs the patient.

History: CR 14-069; cr. Register July 2015 No. 715, eff. 8-1-15.

Chir 13.04 Recordkeeping. A chiropractor's patient record shall include documentation that he or she has communicated alternate modes of treatment to their patient and has obtained informed consent from their patient in keeping with s. Chir 11.02 (5).

History: CR 14-069; cr. Register July 2015 No. 715, eff. 8-1-15.

**State of Wisconsin
Department of Safety & Professional Services**

AGENDA REQUEST FORM

1) Name and Title of Person Submitting the Request: Peter Schramm, CE Specialist		2) Date When Request Submitted: 6/23/2016 <small>Items will be considered late if submitted after 12:00 p.m. on the deadline date which is 8 business days before the meeting</small>	
3) Name of Board, Committee, Council, Sections: Chiropractic Examining Board			
4) Meeting Date: 9/29/2016	5) Attachments: <input type="checkbox"/> Yes <input type="checkbox"/> No	6) How should the item be titled on the agenda page? WCA Denied Course Review	
7) Place Item in: <input checked="" type="checkbox"/> Open Session <input type="checkbox"/> Closed Session		8) Is an appearance before the Board being scheduled? <input type="checkbox"/> Yes (Fill out Board Appearance Request) <input checked="" type="checkbox"/> No	
9) Name of Case Advisor(s), if required:			
10) Describe the issue and action that should be addressed: WCA request for a full Board discussion of course denial			
11) Authorization			
Peter Schramm		6/23/2016	
Signature of person making this request		Date	
Supervisor (if required)		Date	
Executive Director signature (indicates approval to add post agenda deadline item to agenda) Date			
Directions for including supporting documents: 1. This form should be attached to any documents submitted to the agenda. 2. Post Agenda Deadline items must be authorized by a Supervisor and the Policy Development Executive Director. 3. If necessary, provide original documents needing Board Chairperson signature to the Bureau Assistant prior to the start of a meeting.			

Wisconsin Department of Safety and Professional Services

Mail To: P.O. Box 8935
Madison, WI 53708-8935

1400 E. Washington Avenue
Madison, WI 53703

FAX #: (608) 266-2602
Phone #: (608) 266-2112

E-Mail: web@dsps.wi.gov
Website: http://dsps.wi.gov

CHIROPRACTOR/CHIROPRACTIC RADIOLOGICAL TECHNICIAN/CHIROPRACTIC TECHNICIAN CONTINUING EDUCATION APPROVAL FORM

Return as a Word attachment to Ryan Zeinert at ryan.zeinert@wisconsin.gov, at least 75 days prior to initial course date.

Area of Continuing Education:

(Check one or all that apply)

Chiropractor

Chiropractic Technician (CT)

Chiropractic Radiological Technician (CRT)

Course Title: Motion Preservation and a Collaborative Approach to Care

Course Sponsor Name: Wisconsin Chiropractic Association

Total CE Hours Requested: 4

Does Course Sponsor meet the requirements under Chir 5.02(1)(a)? Yes No

Contact Information for Course Sponsor:

Leslie Strangfeld, 521 East Washington Avenue, Madison, WI 53703, (608) 256-7023, lstrangfeld@wichiro.org

Course Objectives/Outcomes (provide on additional sheet of paper if needed):

1. Spine Fundamentals: Bone Biology & Principles of Fusion
2. Surgical Intervention: Fusion vs Total Disc Replacement
3. Total Disc Replacement Options: Competitive Landscape

Initial Course Date(s) and Location(s): April 16, 2016, Olympia Resort 1350 Royale Mile Rd., Oconomowoc, WI 53066

**PLEASE NOTE*: Additional dates and/or locations may be offered within the biennium without submitting requests for further approval as long as the original approved course content is offered by the approved instructor; however, if course content and/or instructor change, you must submit a new request for approval, at least 75-days in advance.*

If the program sponsor is delegating any responsibilities of this seminar, please complete information below:

Name of Delegated Entity/Person: Wisconsin Chiropractic Association

Specific personnel responsible:

Name: WCA Member

Address: 521 East Washington Avenue, Madison, WI 53703

Qualifications: _____

(Attach CV/Bio if available)

- If a written contract exists between sponsor and delegated entity, please attach a copy to this form.
- Regardless of whether a written contract exists, please provide specific detail of how sponsor will ensure that delegated duties are in compliance with Chir 5.02 requirements.

Continuing Education Vouchers supervised by Credit Monitor

The Delegate will perform the following: (check all that apply)

Monitor and verify attendance

Provide monitoring and attendance evidence to Sponsor for proper record retention

___ Validate course content
___ Provide instructor information

Method of monitoring attendance: Sponsor Monitored Delegated Monitoring

Nutritional Counseling Credit Consideration? Yes, for ___ # of hours No ___

You must also submit the following via E-mail:

1. Condensed instructor's qualifications of no more than two (2) pages indicating the areas of expertise related to the specific areas of instruction per this seminar request (CV may be sent as a PDF)
2. A clear, hourly breakdown of the proposed sessions (breakdown may be sent as a PDF).

For Department Use Only

___ Course approved for ___ number of hours; including ___ hours of nutritional counseling

___ Course(s) not approved because:

___ Course does not meet the 75-day rule ___ Content does not pertain to Wisconsin Clinical Practice

___ Other: _____

Reviewed by: _____ **Date:** _____

#2986 (8/14)

Committed to Equal Opportunity in Employment and Licensing

Spine Care Updates: Motion Preservation and a Collaborative Approach to Care

April 16, 2016

1:00 pm – 5:00 pm

Speakers: Dr. Andrew Beykovsky, Dr. Christopher King, Dr. Lynn Bartl, Dr. Reichert

1:00 – 2:00

Spine Fundamentals: Bone Biology & Principles of Fusion

Dr. Andrew Beykovsky

Break

2:00 – 2:30

Surgical Intervention: Fusion vs Total Disc Replacement

Dr. Andrew Beykovsky

2:30 – 3:00

Total Disc Replacement Options: Competitive Landscape

Dr. Christopher King

Break

3:00 – 4:00

Total Disc Replacement Data from IDE Study

Dr. Lynn Bartl

Break

4:00 – 5:00

Case Studies with Q&A

Dr. Beykovsky, Dr. King, Dr. Bartl

Curriculum Vitae
Andrew V. Beykovsky, M.D.
2014

Home Address: 1985 Pilgrim Parkway
Brookfield, WI 53005

Office Address: Neurologic Associates of Waukesha
1111 Delafield Street, #105
Waukesha, WI 53188

Date of Birth: November 12, 1964

Place of Birth: San Francisco, California USA

Citizenship: American, Guatemalan

Languages: English, Spanish

Marital Status: Married: Olga-Kyra

Children: William (12-21-2001)
Fernando (06-21-2005)
David (05-02-2007)

Education:

High School: American School of Guatemala
B.S. Universidad Francisco Marroquin, Guatemala
M.D. Universidad Francisco Marroquin, Guatemala

Graduate Training:

Internships:

Internal Medicine: Medical College of Wisconsin, 1994-1995
Surgery: Medical College of Wisconsin, 1998-1999

Residencies:

Neurology Residency: Medical College of Wisconsin, 1995-1998
Neurosurgery: Medical College of Wisconsin, 1999-2006

Teaching Appointments:

Universidad Francisco Marroquin, Guatemala: 1993-1994;
Assistant, Neuropsychology course; Premed.

Concordia University, Wisconsin: 1995-1996;
“Introduction to Neurology” Ph.D. nursing course.

Medical College of Wisconsin, Wisconsin: 1998;
“Best Resident Teaching” Award; Department of Neurology.

Medical College of Wisconsin, Wisconsin: 2003-2004;
“Neurosurgery for the Third year Medical student”

Appointments:

Serving on the Wisconsin Medical Society Board of Directors
April 2011 - present

Waukesha County Medical Society
President, 2010 - 2011

Wisconsin Medical Society
Ethics Board Member, 2007 - present, Vice Chair

Education Committee (Community Memorial Hospital)
2008-2009

Medical Ethics Advisory Committee (Community Memorial Hospital)
Since 2008

Certifications and Membership:

Licensed Guatemala #9332

Licensed Wisconsin #36886

Licensed ECFMG #0-495-541-5

American Medical Association (AMA)

American Academy of Neurological Surgeons (AANS)

Wisconsin Neurological Society

American Board of Neurologic Surgery Board Certified 2013

Research Experience:

WARS Study (Ischemic Stroke)
CERASTAT Study (Ischemic Stroke)
T-PA Study (Ischemic Stroke)
Baclofen pump trials
Vagal Nerve Stimulators

Publications:

Trauma Manual for the Medical Student, IGSS. 1992 p.p. 42

Nerve Regeneration with the use of DMSO, Thesis, 1993.

Language Function Following Temporal Lobectomy with Functional Mapping, Co-author, 1997.

Conferences:

Guest speaker at the XVI World Conference of Neurology; Buenos Aires, Argentina 1997; Theme: "Dementia: Tools for Diagnosis".

Guest Speaker at the AANS Congress; Orlando, FL May 2004; Theme: "Ossification Patterns of the Cervical Spine in the Pediatric Population".

Hospitals:

Waukesha Memorial Hospital – Waukesha, Wisconsin

Oconomowoc Memorial Hospital – Oconomowoc, Wisconsin

Community Memorial Hospital – Menomonee Falls, Wisconsin

Elmbrook Memorial Hospital – Brookfield, Wisconsin

Aurora Summit Hospital-Oconomowoc, Wisconsin

CURRICULUM VITAE

Christopher King, D.O.

1111 Delafield Street, Suite 105
Waukesha, WI 53188

Profession: Neurosurgery

Board Certification **The American Osteopathic Board of Surgery 11/01/1993**

Experience Neurosurgery – Staff Physician

1992- Present Waukesha Memorial Hospital – Waukesha, WI
1992- Present Community Memorial Hospital – Menomonee Falls, WI
1992- Present Elmbrook Memorial Hospital – Brookfield, WI
1992- Present Oconomowoc Memorial Hospital – Oconomowoc, WI
2012- Present Aurora Medical Center – Summit, WI

Emergency Room Staff Physician/ House Officer

1991-1992 Haverford Hospital – Haverford, PA
1989-1991 Girard Medical Center – Philadelphia, PA
1987-1992 Metropolitan Hospital – Philadelphia, PA
 (Including Springfield Hospital – Springfield, PA)
1986-1987 North Care – Anchorage, AK

Education

1991-1992 Fellowship – Neurosurgery
 Allegheny General Hospital – Pittsburgh, PA

1987-1992 Residency - Neurosurgery
 Hospitals of the Philadelphia College of Osteopathic
 Medicine – Philadelphia, PA

1985-1986 Internship – Rotating
 Chicago College of Osteopathic Medicine
 Chicago, IL

1981-1985 Medical School
 Kirksville College of Osteopathic Medicine
 Kirksville, MO

1978-1981 Undergraduate
 Northeast Missouri State University
 Kirksville, MO
 Major – Biology

Licensure	Wisconsin #33081 Pennsylvania #OS006304E (expired) Alaska #AA2213 (expired)
Certification	Diplomat of the National Board of Osteopathic Examiners
Research	Physiologic Response to Holmium Laser
Papers	
Published	Cranial Gunshot Wounds (Co-Author) JAOA 1990:90(6):515-18
Unpublished	Imaging of Spinal Pigmented Villonodular Synovitis Hemicraniectomy for Infarct-Related Cerebral Edema Central Pontine Myelinolysis: Diagnosis & Treatment Shunt-Related Pseudocysts: Diagnosis & Treatment
Didactic	Instructor in Neurosurgery Philadelphia College of Osteopathic Medicine
Memberships	Wisconsin Neurosurgical Society American Medical Society American Osteopathic Association State Medical Society of Wisconsin Waukesha County Medical Society
Positions	
2000-2003	Chairman, Dept. of Surgery – Community Memorial Hospital
2000-2008	Executive Committee, Waukesha County Medical Society

CURRICULUM VITAE

Lynn M. Bartl, M.D., FACS
1111 Delafield Street, Suite 105
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lbartl@neurologicltd.com

Profession: Neurosurgery

Board Certification

American Board of Neurological Surgery – May 26, 2005

Experience

Neurosurgery – Staff Physician

1999 – present
1999 – present
1999 – present
1999 – present
2011

Waukesha Memorial Hospital – Waukesha, WI
Oconomowoc Memorial Hospital – Oconomowoc, WI
Elmbrook Memorial Hospital – Brookfield, WI
Community Memorial Hospital – Menomonee Falls, WI
Aurora Summit Hospital

Postgraduate Training

1994 – 1999

Residency in Neurological Surgery
St. Louis University Medical Center
3635 Vista Ave. at Grand Ave.
St. Louis, Missouri 63110

1993 – 1994

Intern in General Surgery – Neurosurgery
St. Louis University Medical Center
3635 Vista Ave. at Grand Ave.
St. Louis, Missouri 63110

Medical Education

1989 – 1993

Medical College of Wisconsin
8701 Watertown Plank Rd.
Milwaukee, Wisconsin 53226
M.D. degree May 1993

Undergraduate Education

1985 – 1989
Connecticut College
270 Mohegan Ave.
New London, Connecticut
Major: Zoology
Degree: Bachelor of Arts, May 1989

Honors and Awards

Cum Laude with honors and distinction in Zoology
E. Frances Botsford Prize for Excellence in Zoology, 1989
Dorothy Richardson Prize for Excellence in Zoology, 1988
Sybil A. Hausman Prize for Excellence in Zoology, 1987

Publications

Barnes P.T., Bartl, L.M.: Variation of Flight Metabolism Within and Among Ten Species of Drosophila. 31st Annual Drosophila Research Conference, Page 53, 1990.

Barnes, P.T., Bartl, L.M., and Coulovo, M.I.: Variation Within and Among 20 Species of Drosophila for Wing Size and Flight, Population Biologists of New England, Fall Meeting, November 16, 1991, Boston University

Bartl, L.M., Yoon K.W.: Pathophysiology of Spinal Cord Disruption and Injury in Modern Surgical Care, Physiologic Foundations, and Clinical Applications, 2nd Edition, Edited by Thomas A. Miller, Quality Medical Publishing, Inc., 1998.

Subspecialty Courses

Surgical Approaches to the Skull Base, 1996

Surgical Approaches to the Skull Base, 1997

Microsurgical Tech for Epilepsy and Intrinsic Brain, 1997

Microsurgery of the Brain, Cranial Nerves, and Skull Base
1997.

Midas Rex, Hands-on Work Shop, 1997

Vertebroplasty Course

Professional Associations

American Association of Neurological Surgeons

Fellow of the American College of Surgeons

American Medical Association

Congress of Neurological Surgeons

State Medical Society

Waukesha County Medical Society

Wisconsin Neurosurgical Society

Women in Neurological Surgery

Fellow of the North American Spine Society

Updated: May 5015

Curriculum Vitae
Kenneth William Reichert, II, M.D.

Home Address: 20910 Bradford Lane
Brookfield, Wisconsin 53045
Cell: 414-840-9395
Fax: 262-786-8978

Office Address: Neurologic Associates
1111 Delafield St #105
Waukesha, WI 53188
Phone: 262-542-9503
Fax: 262-542-8447

Social Security Number: 397-76-7936

Date of Birth: January 16th, 1961

Place of Birth: Waukesha, Wisconsin

Marital Status: Married-Karen, 1986
Children: Megan 1988, Sarah 1989,
Heather 1990, Kenneth III 1992,
Kristin 1997

Education:

1983 B.S., University of Wisconsin
Major - Medicine Science
Milwaukee, WI

1986 M.D., The Medical College of
Wisconsin, Milwaukee, WI

Postgraduate Training and Fellowship Appointments:

July 1986-June 1987 Internship, General Surgery
Medical College of Wisconsin
Affiliated Hospitals
Milwaukee, WI
Program Director: Robert E.
Condon, M.D.

July 1987-June 1992	Residency, Neurological Surgery Medical College of Wisconsin Affiliated Hospitals, Milwaukee, WI Program Director: Sanford J. Larson, M.D., Ph.D.
January 1992-June 1992	Fellowship, Pediatric Neurological Surgery Children's Hospital of Eastern Ontario University of Ottawa Ottawa, ON, Canada Program Director: Enrique C.G. Ventureyra, M.D.
July 1992-June 1993	Fellowship, Cerebrovascular/Skull Base Neurological Surgery University of Cincinnati College of Medicine, Cincinnati, OH Program Director: John M. Tew, Jr., M.D.

Academic Faculty Appointments:

2005 - present	Teacher in Family Medicine American Academy of Family Physicians
March 1997 - June 1999	Chief, Section of Neurosurgery Children's Hospital of Wisconsin Milwaukee, WI
May 1995 - June 1999	Medical Director Neurosurgical Intensive Care Unit Froedtert Memorial Lutheran Hospital Milwaukee, WI
December 1993 - June 1999	Assistant Professor Department of Pediatrics Medical College of Wisconsin, Milwaukee WI
July 1992 - June 1999	Assistant Professor Department of Neurosurgery Medical College of Wisconsin, Milwaukee, WI
July 1992 - June 1993	Assistant Professor Department of Neurosurgery University of Cincinnati College of Medicine Cincinnati, OH

January 1992 - June 1992
Instructor
Department of Neurosurgery
Medical College of Wisconsin,
Milwaukee, WI

Hospital Committees:

August 1999- Present
Cancer Center Committee
Waukesha Memorial Hospital
Waukesha, WI

August 1999 - Present
ICU Committee
Waukesha Memorial Hospital
Waukesha, WI

December 1995 - June 1999
Laser Committee
Children's Hospital of Wisconsin
Milwaukee, WI

July 1995 - June 1999
Operating Room Committee
Children's Hospital of Wisconsin
Milwaukee, WI

July 1995 - June 1999
Patient Care Committee Division of Surgery
Children's Hospital of Wisconsin
Milwaukee, WI

May 1995 - June 1999
Critical Care Committee
Froedtert Memorial Lutheran Hospital
Milwaukee, WI

April 1994 - June 1999
Medical Director
Neurovascular Laboratory
Froedtert Memorial Lutheran Hospital
Milwaukee, WI

Hospital Appointments:

May 2011 – Present
Attending Neurosurgeon
Aurora Summit Hospital
Oconomowoc, WI

January 2001 - Present
Consulting Neurosurgeon
Oconomowoc Memorial Hospital
Milwaukee, WI

September 2000 - Present
Attending Neurosurgeon
Community Memorial Hospital
Menomonee Falls, WI

June 1999- Present	Attending Neurosurgeon Elmbrook Memorial Hospital Brookfield, WI
April 1999- Present	Attending Neurosurgeon Waukesha Memorial Hospital Waukesha, WI
April 1993 - June 2005	Attending Neurosurgeon Department of Neurosurgery, Children's Hospital of WI Milwaukee, WI
January 1997 - June 1999	Associate Neurosurgeon St. Luke's Medical Center Milwaukee, WI
April 1993 - June 1999	Attending Neurosurgeon, Department of Neurosurgery, Froedtert Memorial Lutheran Hospital. Veterans Affairs Medical Center, Milwaukee WI
March 1994 - June 1999	Consulting Neurosurgeon St. Joseph's Hospital Milwaukee, WI
July 1992 - June 1993	Attending Neurosurgeon Children's Hospital Medical Center The Christ Hospital Good Samaritan Hospital The Jewish Hospital of Cincinnati University of Cincinnati Medical Center Veterans Hospital Medical Center Cincinnati, OH

Specialty Certification

1987	Diplomat of the National Board of Medical Examiners
1996	Diplomat of the American Board of Neurological Surgery

Licensure:

State of Wisconsin 28579
 State of Illinois 036-095312 (Inactive)
 State of Ohio 63368 (Inactive)
 State of Kentucky 28978 (Inactive)
 Providence of Ontario, Canada 64772 (Inactive)

Awards, Honors

1980	<i>Phi Eta Sigma</i> Honor Society University of Wisconsin- Milwaukee
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1981	Sigma Epsilon Sigma Honor Society University of Wisconsin- Milwaukee
1983	Graduated with Distinction University of Wisconsin- Milwaukee
1992	Best Resident Paper Ohio State Neurological Society
1996 - 2015	Best Doctors in Milwaukee Milwaukee Magazine
1999- 2015	Guide to Top Doctors “American’s Top-rated Physicians” Published by the Consumer Research Council of America
2005 - 2015	Guide to Top Surgeons Published by the Consumer Research Council of America
1999	Inducted in NASA - Space Technology Hall of Fame for development of technology light emitting diode use in photodynamic therapy of brain tumors. United States Space Foundation
2001	Discover Magazine Award for Technological Innovation
2004 - 2015	Best Doctors in America

Memberships in Professional and Honorary Societies:

1999	Waukesha County Medical Society
1997	American Association of Neurological Surgeons and Congress of Neurological Surgeons Section on Cerebrovascular Surgery
1995	Milwaukee Pediatric Society
1994	Spina Bifida Association of America
1994	Congress of Neurological Surgeons
1994	Hydrocephalus Association
1994	Wisconsin Neurological Society
1993	Frank H. Mayfield Neurosurgical Society
1992	American Association of Neurological Surgeons

1991	American College of Surgeons, Fellow
1988	American Paraplegia Society
1988	State Medical Society of Wisconsin
1999	Waukesha County Medical Society

Editorial Boards:

Journal of Pediatric Neurosurgery
Journal of Photochemistry and Photobiology

National Advisory Committees and/or Activities:

1992 - 1999
Grant and Contract Review Committee
National Institute on Disability and Rehabilitation
Research Office of Special Education and
Rehabilitation United States Department of Education,
Washington, D.C.

Bibliography

Publications (Peer Reviewed):

1. Tew JM, Lewis KM, **Reichert** KW: Management Strategies and Surgical Techniques for Deep-Seated Supratentorial Arteriovenous Malformations, Neurosurgery, 36; 1065-1072, 1995
2. Mueller WM, Yetkin FZ, Hammeke TA, Morris GL, Swanson SJ, **Reichert** K, Haughton VM; Functional magnetic resonance imaging mapping of the motor cortex in patients with cerebral tumors. Neurosurgery, 39; 515-521, 1996.
3. Schmidt MH, Bajic DM, **Reichert** KW, Martin TS, Meyer GA, Whelan HT; Light-emitting diodes as a light source for intraoperative photodynamic therapy. Neurosurgery, 38-552-557, 1996.
4. Schmidt MH, Bajic DM, **Reichert** KW, Meyer GA, Martin TS, Whelan HT; The role of light-emitting diodes for photodynamic therapy of brain tumors. Space Technology Applications, 361;403-412, 1996.
5. Whelan HT, Houle JM, Bajic DM, Schmidt MH, **Reichert** KW, Meyer GA: Benzoporphyrin derivatives and light-emitting diode for use in photodynamic therapy; applications of space light-emitting diode technology. Space Technology Applications, 420:729-735, 1998.
6. Whelan HT, Krouwer HG, Schmidt MH, **Reichert** KW, Kovnar EH; Current therapy and new perspectives in the treatment of medulloblastoma. Pediatric Neurology, 18:103-115, 1998.
7. Whelan HT, Houle JM, Donohou DL, Bajic DM, Schmidt MH, **Reichert** KW, Weyenberg GT, Larson DL, Meyer GA, Caviness JA; Medical applications of space light-emitting diode technology - space station and beyond. Space Technology Applications. 458:3-15, 1999.

8. Schmidt MH, **Reichert** KW, Bajic DM, Martin TS, Meyer GA, Whelan HT: Benzoporphyrin derivatives for use in photodynamic therapy for childhood brain tumors. A laboratory study. Pediatric Neurosurgery 30: 225-331, 1999.
9. Ozker K, **Reichert** KW, Bajic D, Schmidt HW, Meyer GA, Whelan HT; Selective incorporation of Inlabeled Benzoporphyrin by glioma tissue in vivo. Journal of Neuro-Oncology (submitted 12/2003)
10. Schmidt MH, Meyer GA, **Reichert** KW, Cheng J, Krouwer HG, Ozker K, Buchmann EV, Kare M, Kau J, Mathews A, Whelan HT: Evaluation of Photodynamic Therapy near functional brain tissue in patients with recurrent brain tumors. Journal of Neuro-Oncology 67: 201-204, 2004.

Book Chapters:

1. **Reichert** KW, Tew JM: The management of thalamic-basal ganglia arteriovenous malformations, Cerebrovascular Surgery. Takakura and Sasaki, editors, pp. 166-171. University of Tokyo Press, 1994.
2. **Reichert** KW, Tew JM, Tomsick TA: Intraoperative temporary balloon occlusion as an aid in basilar artery aneurysm clipping. Cerebrovascular Surgery. Takakura and Sasaki, editors, pp. 58-61. University of Tokyo Press, 1994.
3. **Reichert** KW, Lewis AI, Tew JM: Surgical management of thalamic-basal ganglia vascular malformations, in: Operative Neurosurgical Techniques: Indications, Methods, and Results. Third Edition. Schmidek and Sweet, editors, Vol. 2, Chapter 121, pp. 1501-1521. W.B. Saunders Co., Philadelphia, 1995.

**State of Wisconsin
Department of Safety & Professional Services**

AGENDA REQUEST FORM

1) Name and Title of Person Submitting the Request: Dr. Jeff Mackey		2) Date When Request Submitted: 8/10/2016 <small>Items will be considered late if submitted after 4:30 p.m. and less than:</small> <ul style="list-style-type: none"> ▪ 10 work days before the meeting for Medical Board ▪ 14 work days before the meeting for all others 	
3) Name of Board, Committee, Council, Sections: Chiropractic Examining Board			
4) Meeting Date: 9/29/2016	5) Attachments: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	6) How should the item be titled on the agenda page? Continuing Education Course Denial Process	
7) Place Item in: <input checked="" type="checkbox"/> Open Session <input type="checkbox"/> Closed Session <input type="checkbox"/> Both	8) Is an appearance before the Board being scheduled? If yes, who is appearing? No	9) Name of Case Advisor(s), if required:	
10) Describe the issue and action that should be addressed: Dr. Jeff Mackey has asked that the Board review the process in place for continuing education course denials.			
11) Authorization			
Signature of person making this request		Date	
Supervisor (if required)		Date	
Bureau Director signature (indicates approval to add post agenda deadline item to agenda)		Date	