



CHIROPRACTIC EXAMINING BOARD
Room 121A, 1400 East Washington Avenue, Madison
Contact: Tom Ryan (608) 266-2112
June 28, 2018

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 April 5, 2018 (5-6)**
- C) Conflicts of Interest**
- D) Administrative Matters**
 - 1) Department and Staff Updates
 - 2) Introductions, Announcements and Recognitions
 - 3) Board Members – Board Member Status
 - a) Scott Bautch – 7/1/2021
 - b) Bryan Gerondale – 7/1/2021
 - c) Jeffrey King – 7/1/2019
 - d) Juli McNeely – 7/1/2021
 - e) Patricia Schumacher – 7/1/2019
 - f) Public Member – Vacant
- E) Legislative and Administrative Rule Matters – Discussion and Consideration**
 - 1) Adoption Orders for Chir 1, Relating to Authority and Definitions, Chir 3, Relating to License Renewal, Chir 11, Relating to Patient Records, and Chir 4 and 10, Relating to Course of Study for and Delegation to Chiropractic Technicians and Chiropractic Radiological Technicians **(7-32)**
 - 2) Scope Statement for Chir 1, 4, 10, and 11, Relating to Delegation of Services to Health Care Professionals **(33-34)**
 - 3) Administrative Rules Reporting Requirement Under 2017 Wisconsin Act 108 **(35-38)**
 - 4) Proposals for Chir 4, Relating to Chiropractic Practice, Chir 5, Relating to Continuing Education, Chir 6, Relating to Standards of Conduct, Chir 9, Relating to Chiropractic Preceptorship, and Chir 12, Relating to Nutritional Counseling Certification **(39-53)**
 - 5) Update on Pending Legislation and Pending and Possible Rulemaking Projects

F) Discussion to Consider Employer Verification (54)

G) Speaking Engagements, Travel, or Public Relation Requests, and Reports

- 1) Travel Report: Patricia Schumacher – Federation of Chiropractic Licensing Boards (FCLB) / National Board of Chiropractic Examiners (NBCE) Annual Meetings on May 2-6, 2018 in Dallas, TX

H) Education and Examination Matters – Discussion and Consideration

I) Items Added After Preparation of Agenda:

- 1) Introductions, Announcements and Recognition
- 2) Nominations, Elections, and Appointments
- 3) Administrative Matters
- 4) Election of Officers
- 5) Appointment of Liaisons and Alternates
- 6) Delegation of Authorities
- 7) Education and Examination Matters
- 8) Credentialing Matters
- 9) Practice Matters
- 10) Legislative and Administrative Rule Matters
- 11) Preceptor Approvals
- 12) Liaison Reports
- 13) Board Liaison Training and Appointment of Mentors
- 14) Informational Items
- 15) Division of Legal Services and Compliance (DLSC) Matters
- 16) Presentations of Petitions for Summary Suspension
- 17) Petitions for Designation of Hearing Examiner
- 18) Presentation of Proposed Stipulations, Final Decisions and Orders
- 19) Presentation of Proposed Final Decisions and Orders
- 20) Presentation of Interim Orders
- 21) Petitions for Re-Hearing
- 22) Petitions for Assessments
- 23) Petitions to Vacate Orders
- 24) Requests for Disciplinary Proceeding Presentations
- 25) Motions
- 26) Petitions
- 27) Appearances from Requests Received or Renewed
- 28) Speaking Engagements, Travel, or Public Relation Requests, and Reports

J) Future Agenda Items

K) 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.).

L) Credentialing Matters

- 1) Application Review
 - a) Andrea Meleski, Chiropractic Technician Applicant **(55-102)**

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

- 1) **Case Closing(s)**
 - a) 16 CHI 033 – R.J.H. **(103-108)**
 - b) 17 CHI 018 – R.J.G. **(109-112)**

N) Deliberation of Items Added After Preparation of the Agenda

- 1) Education and Examination Matters
- 2) Credentialing Matters
- 3) DLSC Matters
- 4) Monitoring Matters
- 5) Professional Assistance Procedure (PAP) Matters
- 6) Petition(s) for Summary Suspensions
- 7) Petitions for Designation of Hearing Examiner
- 8) Proposed Stipulations, Final Decisions and Orders
- 9) Proposed Interim Orders
- 10) Administrative Warnings
- 11) Review of Administrative Warnings
- 12) Proposed Final Decisions and Orders
- 13) Matters Relating to Costs/Orders Fixing Costs
- 14) Case Closings
- 15) Board Liaison Training
- 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

O) Consulting with Legal Counsel

RECONVENE TO OPEN SESSION IMMEDIATELY FOLLOWING CLOSED SESSION

P) Vote on Items Considered or Deliberated Upon in Closed Session, if Voting is Appropriate

Q) Open Session Items Noticed Above Not Completed in the Initial Open Session

R) Delegation of Ratification of Examination Results and Ratification of Licenses and Certificates

S) Credentialing Liaison Training

ADJOURNMENT

NEXT SCHEDULED MEETING: AUGUST 30, 2018

MEETINGS AND HEARINGS ARE OPEN TO THE PUBLIC, AND MAY BE CANCELLED WITHOUT NOTICE.

Times listed for meeting items are approximate and depend on the length of discussion and voting. All meetings are held at 1400 East Washington Avenue, Madison, Wisconsin, unless otherwise noted. In order to confirm a meeting or to request a complete copy of the board's agenda, please call the listed contact person. The board may also consider materials or items filed after the transmission of this notice. Times listed for the commencement of disciplinary hearings

may be changed by the examiner for the convenience of the parties. Interpreters for the hearing impaired provided upon request by contacting the Affirmative Action Officer, 608-266-2112.

**CHIROPRACTIC EXAMINING BOARD
MEETING MINUTES
APRIL 5, 2018**

PRESENT: Bryan Gerondale, D.C.; Jeffrey King, D.C.; Scott Bautch, D.C.; Patricia Schumacher, D.C.

EXCUSED: Juli McNeely

STAFF: Tom Ryan, Executive Director; Dale Kleven, Administrative Rules Coordinator; Kate Stolarzyk, Bureau Assistant; and other Department Staff

CALL TO ORDER

Patricia Schumacher, Chair, called the meeting to order at 8:35 a.m. A quorum of four (4) members was confirmed.

ADOPTION OF AGENDA

Amendments to the Agenda:

MOTION: Jeffrey King moved, seconded by Bryan Gerondale, to adopt the agenda as published. Motion carried unanimously.

APPROVAL OF MINUTES

Amendments to the Minutes:

- Page 3 of the minutes: Correct the second motion under “Credentialing Authority Delegations” as outlined below:
 - “...to delegate credentialing authority to DSPS ~~to~~ act...”

MOTION: Bryan Gerondale moved, seconded by Jeffrey King, to approve the minutes of February 6, 2018 as amended. Motion carried unanimously.

ADMINISTRATIVE UPDATES

Liaison Appointments

2018 LIAISON APPOINTMENTS	
Credentialing Liaison	Jeffrey King <i>Alternate: Bryan Gerondale</i>
Exams, Education and Continuing Education Liaison	Patricia Schumacher <i>Alternate: Jeffrey King</i>
Monitoring Liaison	Jeffrey King <i>Alternate: Bryan Gerondale</i>
Professional Assistance Procedure (PAP) Liaison	Juli McNeely <i>Alternate: Bryan Gerondale</i>
Legislative Liaison	Patricia Schumacher

Travel Liaison	Patricia Schumacher <i>Alternate: Bryan Gerondale</i>
Preceptor Liaison	Bryan Gerondale <i>Alternate: Jeffrey King</i>
Rules Liaison	Scott Bautch <i>Alternate: Jeffrey King</i>
2018 SCREENING PANEL APPOINTMENTS	
Screening Panel	Jeffrey King, Juli McNeely, Patricia Schumacher <i>Alternate: Bryan Gerondale</i>

MOTION: Jeffrey King moved, seconded by Bryan Gerondale, to affirm the Chair's appointment of liaisons for 2018. Motion carried unanimously.

PUBLIC HEARING: CR 18-015 – CHIR 2 RELATING TO EXAMINATIONS

Review and Respond to Public Comments and Clearinghouse Report

MOTION: Scott Bautch moved, seconded by Jeffrey King, to authorize Patricia Schumacher to approve the Legislative Report and Draft for Clearinghouse Rule CR 18-015, relating to examinations, for submission to the Governor's Office and Legislature. Motion carried unanimously.

RATIFICATION OF EXAMINATIONS, LICENSES AND CERTIFICATES

MOTION: Scott Bautch moved, seconded by Bryan Gerondale, to delegate ratification of examination results to DSPS staff and to ratify all licenses and certificates as issued. Motion carried unanimously.

ADJOURNMENT

MOTION: Bryan Gerondale, seconded by Scott Bautch, to adjourn the meeting. Motion carried unanimously.

The meeting adjourned at 12:26 p.m.

**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: 6/18/18 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: 6/28/18	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. Adoption Orders for Chir 1 Relating to Authority and Definitions, Chir 3 Relating to License Renewal, Chir 11 Relating to Patient Records, and Chir 4 and 10 Relating to Courses of Study for and Delegation to Chiropractic Technicians and Chiropractic Radiological Technicians 2. Scope Statement for Chir 1, 4, 10, and 11 Relating to Delegation of Services to Health Care Professionals 3. Administrative Rules Reporting Requirement Under 2017 Wisconsin Act 108 4. Proposals for Chir 4 Relating to Chiropractic Practice, Chir 5 Relating to Continuing Education, Chir 6 Relating to Standards of Conduct, Chir 9 Relating to Chiropractic Preceptorship, and Chir 12 Relating to Nutritional Counseling Certification 5. 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>June 18, 2018</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
CHIROPRACTIC EXAMINING BOARD

IN THE MATTER OF RULEMAKING	:	ORDER OF THE
PROCEEDINGS BEFORE THE	:	CHIROPRACTIC EXAMINING
CHIROPRACTIC EXAMINING	:	BOARD
BOARD	:	ADOPTING RULES
	:	(CLEARINGHOUSE RULE 17-059)

ORDER

An order of the Chiropractic Examining Board to amend Chir 1.01 and 1.02 (intro.), relating to authority and definitions.

Analysis prepared by the Department of Safety and Professional Services.

ANALYSIS

Statutes interpreted:

None.

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 that interpret the statutes it enforces or administers as long as the proposed rule does not exceed proper statutory interpretation. 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:

Sections Chir 1.01 and 1.02 (intro.) incorrectly reference chs. Chir 1 to 11. The rules update these references to chs. Chir 1 to 13.

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

None.

Comparison with rules in adjacent states:

Illinois: Rules of the Illinois Department of Financial and Professional Regulation address chiropractic practice in Illinois (68 Ill. Adm. Code 1285).

Iowa: Rules of the Iowa Board of Chiropractic address chiropractic practice in Iowa (645 IAC 41 to 45).

Michigan: Rules of the Michigan Department of Licensing and Regulatory Affairs address chiropractic practice in Michigan (Mich Admin Code, R 338.12001 to R 338.12015).

Minnesota: Rules of the Minnesota Board of Chiropractic Examiners address chiropractic practice in Minnesota (Minnesota Rules, chapter 2500).

Summary of factual data and analytical methodologies:

The rules update references in ss. Chir 1.01 and 1.02 (intro.). No additional factual data or analytical methodologies were used to develop the rules.

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

The rules were posted for a period of 14 days to solicit public comment on economic impact, including how the rules may affect businesses, local government units, and individuals. No comments were received.

Fiscal Estimate and Economic Impact Analysis:

The Fiscal Estimate and Economic Impact Analysis document is attached.

Effect on small business:

These 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 Kirsten.Reader@wisconsin.gov, or by calling (608) 267-2435.

Agency contact person:

Dale Kleven, Administrative Rules Coordinator, Department of Safety and Professional Services, Division of Policy Development, 1400 East Washington Avenue, P.O. Box 8366, Madison, Wisconsin 53708; telephone 608-261-4472; email at DSPSAdminRules@wisconsin.gov.

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

The deadline for submission of comments was December 21, 2017.

TEXT OF RULE

SECTION 1. Chir 1.01 is amended to read:

Chir 1.01 Authority. The rules in chs. Chir 1 to ~~44~~ 13 are adopted under the authority ~~in~~ of ss. 15.08 (5) (b), 227.11 (2) and ch. 446, Stats.

SECTION 2. Chir 1.02 (intro.) is amended to read:

Chir 1.02 (intro.) Definitions. As used in chs. Chir 1 to ~~44~~ 13:

SECTION 3. 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

ADMINISTRATIVE RULES Fiscal Estimate & Economic Impact Analysis

1. Type of Estimate and Analysis

Original Updated Corrected

2. Administrative Rule Chapter, Title and Number

Chir 1

3. Subject

Authority and definitions

4. Fund Sources Affected

GPR FED PRO PRS SEG SEG-S

5. Chapter 20, Stats. Appropriations Affected

20.165(1)(g)

6. Fiscal Effect of Implementing the Rule

No Fiscal Effect Increase Existing Revenues Increase Costs
 Indeterminate Decrease Existing Revenues Could Absorb Within Agency's Budget
 Decrease Cost

7. The Rule Will Impact the Following (Check All That Apply)

State's Economy Specific Businesses/Sectors
 Local Government Units Public Utility Rate Payers
 Small Businesses (if checked, complete Attachment A)

8. Would Implementation and Compliance Costs Be Greater Than \$20 million?

Yes No

9. Policy Problem Addressed by the Rule

Sections Chir 1.01 and 1.02 (intro.) incorrectly reference chs. Chir 1 to 11. The proposed rules update these references to chs. Chir 1 to 13.

10. Summary of the businesses, business sectors, associations representing business, local governmental units, and individuals that may be affected by the proposed rule that were contacted for comments.

The proposed rule was posted on the Department of Safety and Professional Services' website for 14 days in order to solicit comments from businesses, representative associations, local governmental units, and individuals that may be affected by the rule. No comments were received.

11. Identify the local governmental units that participated in the development of this EIA.

No local governmental units participated in the development of this EIA.

12. Summary of Rule's Economic and Fiscal Impact on Specific Businesses, Business Sectors, Public Utility Rate Payers, Local Governmental Units and the State's Economy as a Whole (Include Implementation and Compliance Costs Expected to be Incurred)

This proposed rule will not have a significant impact on specific businesses, business sectors, public utility rate payers, local governmental units, or the state's economy as a whole.

13. Benefits of Implementing the Rule and Alternative(s) to Implementing the Rule

The benefit to implementing the rule is providing clarity and updated references. If the rule is not implemented, it will continue to provide outdated references.

14. Long Range Implications of Implementing the Rule

The long range implication of implementing the rule is clarity and updated references.

15. Compare With Approaches Being Used by Federal Government

None

16. Compare With Approaches Being Used by Neighboring States (Illinois, Iowa, Michigan and Minnesota)

Illinois: Rules of the Illinois Department of Financial and Professional Regulation address chiropractic practice in Illinois (68 Ill. Adm. Code 1285).

ADMINISTRATIVE RULES Fiscal Estimate & Economic Impact Analysis

Iowa: Rules of the Iowa Board of Chiropractic address chiropractic practice in Iowa (645 IAC 41 to 45).

Michigan: Rules of the Michigan Department of Licensing and Regulatory Affairs address chiropractic practice in Michigan (Mich Admin Code, R 338.12001 to R 338.12015).

Minnesota: Rules of the Minnesota Board of Chiropractic Examiners address chiropractic practice in Minnesota (Minnesota Rules, chapter 2500).

17. Contact Name

Dale Kleven

18. Contact Phone Number

(608) 261-4472

This document can be made available in alternate formats to individuals with disabilities upon request.

STATE OF WISCONSIN
CHIROPRACTIC EXAMINING BOARD

IN THE MATTER OF RULEMAKING	:	ORDER OF THE
PROCEEDINGS BEFORE THE	:	CHIROPRACTIC EXAMINING
CHIROPRACTIC EXAMINING	:	BOARD
BOARD	:	ADOPTING RULES
	:	(CLEARINGHOUSE RULE 17-058)

ORDER

An order of the Chiropractic Examining Board to amend ch. Chir 3 (title) and Chir 3.02 (1) (intro.), relating to license renewal.

Analysis prepared by the Department of Safety and Professional Services.

ANALYSIS

Statutes interpreted:

Section 440.08 (2) (a) 24., 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 that interpret the statutes it enforces or administers as long as the proposed rule does not exceed proper statutory interpretation. 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:

The rules revise the title of ch. Chir 3 to better reflect the content of the chapter and revise the license renewal deadline under s. Chir 3.02 (1) (intro.) from December 31 to December 15 to align with the renewal date under s. 440.08 (2) (a) 24., Stats.

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

None.

Comparison with rules in adjacent states:

Illinois: Rules of the Illinois Department of Financial and Professional Regulation specify the requirements for renewal of a license to practice chiropractic in Illinois (68 Ill. Adm. Code 1285.120).

Iowa: Rules of the Iowa Board of Chiropractic specify the requirements for renewal of a license to practice as a chiropractic physician in Iowa (645 IAC 41.8).

Michigan: Rules of the Michigan Department of Licensing and Regulatory Affairs specify the requirements for renewal of a license to practice chiropractic in Michigan (Mich Admin Code, R 338.12008).

Minnesota: Rules of the Minnesota Board of Chiropractic Examiners specify the requirements for renewal of a license to practice chiropractic in Minnesota (Minnesota Rules, Part 2500.1000).

Summary of factual data and analytical methodologies:

The rules revise the title of ch. Chir 3 to better reflect the content of the chapter and update the license renewal deadline specified in s. Chir 3.02 (1) (intro.) to align with the renewal date under s. 440.08 (2) (a) 24., Stats. No additional factual data or analytical methodologies were used to develop the rules.

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

The rules were posted for a period of 14 days to solicit public comment on economic impact, including how the rules may affect businesses, local government units, and individuals. No comments were received.

Fiscal Estimate and Economic Impact Analysis:

The Fiscal Estimate and Economic Impact Analysis document is attached.

Effect on small business:

These 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 Kirsten.Reader@wisconsin.gov, or by calling (608) 267-2435.

Agency contact person:

Dale Kleven, Administrative Rules Coordinator, Department of Safety and Professional Services, Division of Policy Development, 1400 East Washington Avenue, P.O. Box

8366, Madison, Wisconsin 53708; telephone 608-261-4472; email at
DSPSAdminRules@wisconsin.gov.

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

The deadline for submission of comments was December 21, 2017.

TEXT OF RULE

SECTION 1. Chapter Chir 3 (title) is amended to read:

CHAPTER CHIR 3

~~LICENSE RENEWAL~~ LICENSURE

SECTION 2. Chir 3.02 (1) (intro.) is amended to read:

Chir 3.02 (1) REQUIREMENTS FOR RENEWAL. (intro.) To renew and obtain a new license a licensee shall, by December ~~31~~ 15 of the even-numbered year following initial licensure and every 2 years thereafter, file with the department all of the following:

SECTION 3. 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

ADMINISTRATIVE RULES Fiscal Estimate & Economic Impact Analysis

1. Type of Estimate and Analysis

Original Updated Corrected

2. Administrative Rule Chapter, Title and Number

Chir 3

3. Subject

License renewal

4. Fund Sources Affected

GPR FED PRO PRS SEG SEG-S

5. Chapter 20, Stats. Appropriations Affected

20.165(1)(g)

6. Fiscal Effect of Implementing the Rule

No Fiscal Effect Increase Existing Revenues Increase Costs
 Indeterminate Decrease Existing Revenues Could Absorb Within Agency's Budget
 Decrease Cost

7. The Rule Will Impact the Following (Check All That Apply)

State's Economy Specific Businesses/Sectors
 Local Government Units Public Utility Rate Payers
 Small Businesses **(if checked, complete Attachment A)**

8. Would Implementation and Compliance Costs Be Greater Than \$20 million?

Yes No

9. Policy Problem Addressed by the Rule

The proposed rules revise the title of ch. Chir 3 to better reflect the content of the chapter and revise the license renewal deadline under s. Chir 3.02 (1) (intro.) from December 31 to December 14 to align with the renewal date under s. 440.08 (2) (a), Stats.

10. Summary of the businesses, business sectors, associations representing business, local governmental units, and individuals that may be affected by the proposed rule that were contacted for comments.

The proposed rule was posted on the Department of Safety and Professional Services' website for 14 days in order to solicit comments from businesses, representative associations, local governmental units, and individuals that may be affected by the rule. No comments were received.

11. Identify the local governmental units that participated in the development of this EIA.

No local governmental units participated in the development of this EIA.

12. Summary of Rule's Economic and Fiscal Impact on Specific Businesses, Business Sectors, Public Utility Rate Payers, Local Governmental Units and the State's Economy as a Whole (Include Implementation and Compliance Costs Expected to be Incurred)

This proposed rule will not have a significant impact on specific businesses, business sectors, public utility rate payers, local governmental units, or the state's economy as a whole.

13. Benefits of Implementing the Rule and Alternative(s) to Implementing the Rule

The benefit to implementing the rule is providing clarity and updated references. If the rule is not implemented, it will continue to provide an outdated reference to the license renewal deadline.

14. Long Range Implications of Implementing the Rule

The long range implication of implementing the rule is clarity and updated references.

15. Compare With Approaches Being Used by Federal Government

None

ADMINISTRATIVE RULES Fiscal Estimate & Economic Impact Analysis

16. Compare With Approaches Being Used by Neighboring States (Illinois, Iowa, Michigan and Minnesota)

Illinois: Rules of the Illinois Department of Financial and Professional Regulation specify the requirements for renewal of a license to practice chiropractic in Illinois (68 Ill. Adm. Code 1285.120).

Iowa: Rules of the Iowa Board of Chiropractic specify the requirements for renewal of a license to practice as a chiropractic physician in Iowa (645 IAC 41.8).

Michigan: Rules of the Michigan Department of Licensing and Regulatory Affairs specify the requirements for renewal of a license to practice chiropractic in Michigan (Mich Admin Code, R 338.12008).

Minnesota: Rules of the Minnesota Board of Chiropractic Examiners specify the requirements for renewal of a license to practice chiropractic in Minnesota (Minnesota Rules, Part 2500.1000).

17. Contact Name

Dale Kleven

18. Contact Phone Number

(608) 261-4472

This document can be made available in alternate formats to individuals with disabilities upon request.

STATE OF WISCONSIN
CHIROPRACTIC EXAMINING BOARD

IN THE MATTER OF RULEMAKING	:	ORDER OF THE
PROCEEDINGS BEFORE THE	:	CHIROPRACTIC EXAMINING
CHIROPRACTIC EXAMINING	:	BOARD
BOARD	:	ADOPTING RULES
	:	(CLEARINGHOUSE RULE 17-057)

ORDER

An order of the Chiropractic Examining Board to repeal and recreate Chir 11.01, relating to patient records.

Analysis prepared by the Department of Safety and Professional Services.

ANALYSIS

Statutes interpreted:

None.

Statutory authority:

Sections 15.08 (5) (b) and 446.02 (7m) (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 446.02 (7m) (a), Stats., provides a patient record created and maintained by a chiropractor “shall contain complete and comprehensive health care information, as defined by the examining board by rule.”

Related statute or rule:

None.

Plain language analysis:

The rules clarify the term “new patient” used in s. Chir 11.03 (intro.) by defining it under s. Chir 11.01 to mean an individual who has not been examined or treated by the chiropractor or another chiropractor in the same group practice within the last 3 years. The remainder of s. Chir 11.01 is revised to meet standards for drafting style and format.

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

None.

Comparison with rules in adjacent states:

Illinois: Illinois rules and statutes do not specify the record keeping requirements of licensees practicing chiropractic in Illinois.

Iowa: Rules of the Iowa Board of Chiropractic specify the record keeping requirements of chiropractic physicians (645 IAC 43.10). The rules do not contain requirements specific to new patients.

Michigan: Rules of the Michigan Department of Licensing and Regulatory Affairs specify requirements for patient records of a licensee practicing chiropractic in Michigan (Mich Admin Code, R 338.12015). The rules include a requirement that a patient record entry for an initial patient visit include all of the following:

- History, including description of presenting condition.
- Physical evaluation.
- Diagnostic studies, if applicable.
- Diagnosis.
- Treatment or care provided.

Minnesota: Minnesota statutes specify the record keeping requirements for licensees practicing chiropractic in Minnesota (Minnesota Statutes 2016, section 148.107). The statutes do not contain requirements specific to new patients.

Summary of factual data and analytical methodologies:

The Board utilized the definition of new patient in the American Medical Association's Current Procedural Terminology (CPT) code set to develop its definition of new patient. The CPT definition of new patient is "one who has not received any professional services from the physician, or another physician of the same specialty who belongs to the same group practice, within the past three years."

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

The rules were posted for a period of 14 days to solicit public comment on economic impact, including how the rules may affect businesses, local government units, and individuals. No comments were received.

Fiscal Estimate and Economic Impact Analysis:

The Fiscal Estimate and Economic Impact Analysis document is attached.

Effect on small business:

These 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 Kirsten.Reader@wisconsin.gov, or by calling (608) 267-2435.

Agency contact person:

Dale Kleven, Administrative Rules Coordinator, Department of Safety and Professional Services, Division of Policy Development, 1400 East Washington Avenue, P.O. Box 8366, Madison, Wisconsin 53708; telephone 608-261-4472; email at DSPSAdminRules@wisconsin.gov.

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

The deadline for submission of comments was December 21, 2017.

TEXT OF RULE

SECTION 1. Chir 11.01 is repealed and recreated to read:

Chir 11.01 Definitions. In this chapter:

(1) “New patient” means an individual who has not been examined or treated by the chiropractor or another chiropractor in the same group practice within the last 3 years.

(2) “Patient record” has the meaning given “patient health care records” in s. 146.81 (4), Stats.

SECTION 2. 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

ADMINISTRATIVE RULES Fiscal Estimate & Economic Impact Analysis

1. Type of Estimate and Analysis

Original Updated Corrected

2. Administrative Rule Chapter, Title and Number

Chir 11

3. Subject

Patient records

4. Fund Sources Affected

GPR FED PRO PRS SEG SEG-S

5. Chapter 20, Stats. Appropriations Affected

20.165(1)(g)

6. Fiscal Effect of Implementing the Rule

No Fiscal Effect Increase Existing Revenues Increase Costs
 Indeterminate Decrease Existing Revenues Could Absorb Within Agency's Budget
 Decrease Cost

7. The Rule Will Impact the Following (Check All That Apply)

State's Economy Specific Businesses/Sectors
 Local Government Units Public Utility Rate Payers
 Small Businesses **(if checked, complete Attachment A)**

8. Would Implementation and Compliance Costs Be Greater Than \$20 million?

Yes No

9. Policy Problem Addressed by the Rule

The proposed rules clarify the term "new patient" used in s. Chir 11.03 (intro.) by defining it under s. Chir 11.01 to mean an individual who has not been examined or treated by the chiropractor or another chiropractor in the same group practice within the last 3 years. The remainder of s. Chir 11.01 is revised to meet standards for drafting style and format.

10. Summary of the businesses, business sectors, associations representing business, local governmental units, and individuals that may be affected by the proposed rule that were contacted for comments.

The proposed rule was posted on the Department of Safety and Professional Services' website for 14 days in order to solicit comments from businesses, representative associations, local governmental units, and individuals that may be affected by the rule. No comments were received.

11. Identify the local governmental units that participated in the development of this EIA.

No local governmental units participated in the development of this EIA.

12. Summary of Rule's Economic and Fiscal Impact on Specific Businesses, Business Sectors, Public Utility Rate Payers, Local Governmental Units and the State's Economy as a Whole (Include Implementation and Compliance Costs Expected to be Incurred)

This proposed rule will not have a significant impact on specific businesses, business sectors, public utility rate payers, local governmental units, or the state's economy as a whole.

13. Benefits of Implementing the Rule and Alternative(s) to Implementing the Rule

The benefit to implementing the rule is providing clarity to the term "new patient" and updated style and format. If the rule is not implemented, the term "new patient" will remain unclear.

14. Long Range Implications of Implementing the Rule

The long range implication of implementing the rule is clarity and updated style and format.

15. Compare With Approaches Being Used by Federal Government

None

ADMINISTRATIVE RULES Fiscal Estimate & Economic Impact Analysis

16. Compare With Approaches Being Used by Neighboring States (Illinois, Iowa, Michigan and Minnesota)

Illinois: Illinois rules and statutes do not specify the record keeping requirements of licensees practicing chiropractic in Illinois.

Iowa: Rules of the Iowa Board of Chiropractic specify the record keeping requirements of chiropractic physicians (645 IAC 43.10). The rules do not contain requirements specific to new patients.

Michigan: Rules of the Michigan Department of Licensing and Regulatory Affairs specify requirements for patient records of a licensee practicing chiropractic in Michigan (Mich Admin Code, R 338.12015). The rules include a requirement that a patient record entry for an initial patient visit include all of the following:

- History, including description of presenting condition.
- Physical evaluation.
- Diagnostic studies, if applicable.
- Diagnosis.
- Treatment or care provided.

Minnesota: Minnesota statutes specify the record keeping requirements for licensees practicing chiropractic in Minnesota (Minnesota Statutes 2016, section 148.107). The statutes do not contain requirements specific to new patients.

17. Contact Name

Dale Kleven

18. Contact Phone Number

(608) 261-4472

This document can be made available in alternate formats to individuals with disabilities upon request.

STATE OF WISCONSIN
CHIROPRACTIC EXAMINING BOARD

IN THE MATTER OF RULEMAKING	:	ORDER OF THE
PROCEEDINGS BEFORE THE	:	CHIROPRACTIC EXAMINING
CHIROPRACTIC EXAMINING	:	BOARD
BOARD	:	ADOPTING RULES
	:	(CLEARINGHOUSE RULE 17-010)

ORDER

An order of the Chiropractic Examining Board to repeal Chir 10.01 (3) and 10.05; to amend Chir 4.04 (3), ch. Chir 10 (title), 10.01 (1) and (2), and 10.03; to repeal and recreate Chir 10.02; and to create Chir 10.01 (1g) and (1r), 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 446.02 (7) (d), 446.025 (2) (a) 3., and 446.026 (2) (a) 3., Stats.

Statutory authority:

Sections 15.08 (5) (b), 227.11 (2) (a), and 446.02 (7) (c), 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 that interpret the statutes it enforces or administers as long as the proposed rule does not exceed proper statutory interpretation. 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.

Section 446.02 (7) (c), Stats., provides that “[a] chiropractor who delegates the performance of a service that is adjunctive to the practice of chiropractic to a person who is not licensed under this chapter shall verify, according to standards and procedures established by the examining board by rule, that the person has adequate education, training and experience to perform the delegated service safely, and is responsible for that person’s performance of the delegated service.”

Related statute or rule:

None.

Plain language analysis:

Section 446.02 (7) (d) of the Wisconsin Statutes allows the delegation of adjunctive services only to chiropractic technologists (technicians) and the delegation of x-ray services only to chiropractic radiological technologists (technicians). Chapter Chir 10 allows for the delegation of these services to unlicensed persons. The rule amends the Chiropractic Examining Board's administrative rules to align them with section 446.02 (7) (d), Stats. Additionally, under sections 446.025 (2) (a) 3. and 446.026 (2) (a) 3., Stats., chiropractic technicians and chiropractic radiological technicians are required to complete courses of study approved by the Board in order to obtain certification. 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 rule defines the requirements for approved courses of study in administrative code, which should result in a more uniform application of the statutes. The rules establish the following requirements:

- Section Chir 10.015 is created to establish the required course of study for certification as a chiropractic technician.
- Section Chir 10.02 (2) and (3) (a) to (g) are created to establish the educational requirements a chiropractic technician must meet in order to perform a delegated adjunctive service other than taking and preparing preliminary patient histories.
- Section Chir 10.025 is created to establish the required course of study for certification as a chiropractic radiological technician.

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 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 rules were posted for a period of 14 days to solicit public comment on economic impact, including how the proposed rules may affect businesses, local government units, and individuals. No comments were received.

Fiscal Estimate and Economic Impact Analysis:

The Fiscal Estimate and Economic Impact Analysis document is attached.

Effect on small business:

These 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 Kirsten.Reader@wisconsin.gov, or by calling (608) 267-2435.

Agency contact person:

Dale Kleven, Administrative Rules Coordinator, Department of Safety and Professional Services, Division of Policy Development, 1400 East Washington Avenue, P.O. Box 8366, Madison, Wisconsin 53708; telephone 608-261-4472; email at DSPSAdminRules@wisconsin.gov.

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

Comments may be submitted to Dale Kleven, 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 DSPSAdminRules@wisconsin.gov. Comments must be received at or before the public hearing to be held at 8:30 a.m. on March 30, 2017, to be included in the record of rule-making proceedings.

TEXT OF RULE

SECTION 1. Chir 4.04 (3) is amended to read:

Chir 4.04 (3) A chiropractor may ~~employ a technician to operate~~ delegate the operation of 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~~ to a chiropractic radiological technician certified under ch. 446, Stats. ~~Any A chiropractic radiological technician employed may work only~~ shall operate x-ray equipment under the direct supervision and direction of a licensee. The chiropractor shall maintain records or ensure the chiropractor's employer maintains records that verify the chiropractic radiological technician is certified under ch. 446, Stats.

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

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

SECTION 3. Chir 10.01 (1) is amended to read:

Chir 10.01 (1) "Adjunctive services" means services which are preparatory or complementary to ~~chiropractic adjustments of the spine or skeletal articulations, or both the practice of chiropractic.~~ "Adjunctive services" include the taking and preparation of a preliminary patient history and providing physiotherapy treatment. "Adjunctive services" does not include making a chiropractic diagnosis, analyzing a diagnostic test, or performing a chiropractic adjustment.

SECTION 4. Chir 10.01 (1g) and (1r) are created to read:

Chir 10.01 (1g) "Massage therapy" or "bodywork therapy" has the meaning given in s. 460.01 (4), Stats.

(1r) "Physiotherapy treatment" means the therapeutic use of physical agents or means, including heat, cold, light, air, water, sound, electricity, massage therapy or bodywork therapy, and physical exercise with and without assistive devices, to treat or manage injury, disease, bodily defects, or bodily weaknesses.

SECTION 5. Chir 10.01 (2) is amended to read:

Chir 10.01 (2) "Preliminary patient history" means the process of taking patient vitals and 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.

SECTION 6. Chir 10.01 (3) is repealed.

SECTION 7. 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 be one of the following:

(1) A course of study meeting all of the following requirements:

(a) The course of study shall include a prerequisite 4 hour therapeutic overview course covering chiropractic technician scope of practice, anatomy, and contraindications followed by all of the following:

1. Four hours of instruction in gathering baseline data regarding a patient.
2. Four hours of instruction in taking patient vitals.

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

(c) The course of study shall be conducted by individuals who have specialized education, training, or experience by reason of which the individuals should be considered qualified concerning chiropractic technician scope of practice, anatomy, contraindications, and taking and preparing a preliminary patient history.

(2) A course of study the board determines is reasonably equivalent to the course of study under sub. (1).

SECTION 8. Chir 10.02 is repealed and recreated to read:

Chir 10.02 Delegation of adjunctive services to a chiropractic technician. A chiropractor may delegate the performance of adjunctive services only to a chiropractic technician certified under ch. 446, Stats. An adjunctive service may be delegated to a chiropractic technician only if all of the following conditions are met:

(1) The chiropractor maintains records or ensures the chiropractor's employer maintains records that verify the chiropractic technician is certified under ch. 446, Stats.

(2) For the delegation of massage therapy or bodywork therapy, the chiropractor maintains records or ensures the chiropractor's employer maintains records that verify the chiropractic technician is licensed under ch. 460, Stats.

(3) For the delegation of adjunctive services other than massage therapy or bodywork therapy and taking and preparing preliminary patient histories, the chiropractor maintains records or ensures the chiropractor's employer maintains records that verify the chiropractic technician 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. The didactic and clinical training

program shall meet or be determined by the board to be reasonably equivalent to all of the following criteria:

(a) The program constitutes an organized program of learning that contributes directly to the professional competency of a chiropractic technician to perform the delegated service.

(b) The program pertains to subject matters that integrally relate to the performance of the delegated service.

(c) The program is conducted by individuals who have specialized education, training, or experience by reason of which the individuals should be considered qualified concerning the performance of the delegated service.

(d) The program fulfills pre-established goals and objectives.

(e) The program provides proof of attendance.

(f) The program includes a final assessment of competency of the didactic and clinical components of the program.

(g) If the program includes instruction in one or more of the subject matters under subs. 1. to 7., the instruction shall meet the following requirements:

1. Instruction in the performance of thermotherapy and cryotherapy shall comprise one hour.

2. Instruction in the performance of electrotherapy shall comprise 3 hours.

3. Instruction in the performance of therapeutic ultrasound shall comprise 3 hours.

4. Instruction in the performance of light therapy shall comprise 3 hours.

5. Instruction in the performance of surface electromyography shall comprise 3 hours.

6. Instruction in the performance of mechanical therapy and decompression shall comprise 4 hours and may not include instruction in manual traction or manipulation.

7. Instruction in exercise and rehabilitation shall comprise 24 hours and include all of the following topics:

a. Basic functional anatomy.

b. Kinesiology and joint movement.

c. Indications and contraindications.

d. Recordkeeping and reporting.

e. Scope of practice.

f. Baselines assessment, outcomes, and goals.

(4) The chiropractor exercises direct supervision of the chiropractic technician performing the delegated service.

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

SECTION 9. 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 be one of the following:

(1) A course of study meeting all of the following requirements:

(a) The course of study shall comprise 48 hours, including all of the following topics:

1. Introduction to x-ray examination.
2. Physics of x-ray examination.
3. Anatomy.
4. Patient position.
5. Safety measures.
6. Machine operation.
7. Exposure techniques and accessories.
8. Processing and dark room techniques.
9. Film critique and quality assurance.
10. Professionalism.
11. Recordkeeping.
12. Emergency procedures summary.

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

(c) 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.

(2) A course of study the board determines is reasonably equivalent to the course of study under sub. (1).

SECTION 10. 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 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 only to a chiropractic radiological technician certified under ch. 446, Stats. The chiropractor shall comply with s. Chir 4.04 before delegating the performance of x-ray services to ~~an unlicensed person~~ a chiropractic radiological technician.

SECTION 11. Chir 10.05 is repealed.

SECTION 12. EFFECTIVE DATE. The rules 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

ADMINISTRATIVE RULES Fiscal Estimate & Economic Impact Analysis

1. Type of Estimate and Analysis

Original Updated Corrected

2. Administrative Rule Chapter, Title and Number

Chir 4 and 10

3. Subject

Courses of study for and delegation to chiropractic technicians and chiropractic radiological technicians

4. Fund Sources Affected

GPR FED PRO PRS SEG SEG-S

5. Chapter 20, Stats. Appropriations Affected

20.165(1)(g)

6. Fiscal Effect of Implementing the Rule

No Fiscal Effect Increase Existing Revenues Increase Costs
 Indeterminate Decrease Existing Revenues Could Absorb Within Agency's Budget
 Decrease Cost

7. The Rule Will Impact the Following (Check All That Apply)

State's Economy Specific Businesses/Sectors
 Local Government Units Public Utility Rate Payers
 Small Businesses (if checked, complete Attachment A)

8. Would Implementation and Compliance Costs Be Greater Than \$20 million?

Yes No

9. Policy Problem Addressed by the Rule

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 them with section 446.02 (7) (d), Stats. Additionally, under sections 446.025 (2) (a) 3. and 446.026 (2) (a) 3., Stats., chiropractic technicians and chiropractic radiological technicians are required to complete courses of study approved by the Board in order to obtain certification. 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 statutes.

10. Summary of the businesses, business sectors, associations representing business, local governmental units, and individuals that may be affected by the proposed rule that were contacted for comments.

The proposed rule was posted on the Department of Safety and Professional Services' website for 14 days in order to solicit comments from businesses, representative associations, local governmental units, and individuals that may be affected by the rule. No comments were received.

11. Identify the local governmental units that participated in the development of this EIA.

No local governmental units participated in the development of this EIA.

12. Summary of Rule's Economic and Fiscal Impact on Specific Businesses, Business Sectors, Public Utility Rate Payers, Local Governmental Units and the State's Economy as a Whole (Include Implementation and Compliance Costs Expected to be Incurred)

This proposed rule will not have a significant impact on specific businesses, business sectors, public utility rate payers, local governmental units, or the state's economy as a whole.

13. Benefits of Implementing the Rule and Alternative(s) to Implementing the Rule

The benefit to implementing the rule is providing updated requirements. If the rule is not implemented, it will continue to reference outdated requirements.

ADMINISTRATIVE RULES Fiscal Estimate & Economic Impact Analysis

14. Long Range Implications of Implementing the Rule

The long range implication of implementing the rule is updated requirements.

15. Compare With Approaches Being Used by Federal Government

None

16. Compare With Approaches Being Used by Neighboring States (Illinois, Iowa, Michigan and Minnesota)

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].

17. Contact Name

Dale Kleven

18. Contact Phone Number

(608) 261-4472

This document can be made available in alternate formats to individuals with disabilities upon request.

STATEMENT OF SCOPE

Chiropractic Examining Board

Rule No.: Chir 1, 4, 10, and 11

Relating to: Delegation of services to health care professionals

Rule Type: Permanent

1. Finding/nature of emergency (Emergency Rule only):

N/A

2. Detailed description of the objective of the proposed rule:

The objective of the proposed rule is to update chs. Chir 4 and 10 to reflect the provisions of 2017 Wisconsin Act 180, relating to a chiropractor's authority to delegate adjunctive services and x-ray services to certain health care professionals.

As part of the update, the statutory definition of "health care professional" under s. 446.01 (1v), Stats., will be added to the definitions in ch. Chir 1 and the term "health care professionals" as used in s. Chir 11.02 (4) will be compared against this definition and possibly revised.

3. Description of the existing policies relevant to the rule, new policies proposed to be included in the rule, and an analysis of policy alternatives:

Current rules address the delegation of adjunctive services to chiropractic technicians and the delegation of x-ray services to chiropractic radiological technicians. The rules will be updated to reflect the provisions 2017 Wisconsin Act 180, relating to a chiropractor's authority to delegate adjunctive services and x-ray services to certain health care professionals.

The proposed rule will create new policy by, as required under s. 446.02 (7) (c), Stats., establishing standards and procedures a chiropractor must use to verify a health care professional has adequate education, training, and experience to perform a delegated adjunctive service safely. The alternative of not updating the rules would be contrary to this statutory requirement.

4. Detailed explanation of statutory authority for the rule (including the statutory citation and language):

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 446.02 (7) (c), Stats., provides "[a] chiropractor who delegates the performance of a service that is adjunctive to the practice of chiropractic to a person who is not licensed under this chapter shall verify, according to standards and procedures established by the examining board by rule, that the person has adequate education, training and experience to perform the delegated service safely, and is responsible for that person's performance of the delegated service."

5. Estimate of amount of time that state employees will spend developing the rule and of other resources necessary to develop the rule:

State employees will spend approximately 80 hours developing this proposed rule.

6. List with description of all entities that may be affected by the proposed rule:

Chiropractors who delegate adjunctive and x-ray services and health care professionals who are delegated those services

7. Summary and preliminary comparison with any existing or proposed federal regulation that is intended to address the activities to be regulated by the proposed rule:

None.

8. Anticipated economic impact of implementing the rule (note if the rule is likely to have a significant economic impact on small businesses):

The proposed rule will have minimal to no economic impact on small businesses and the state's economy as a whole.

Contact Person: Dale Kleven, Administrative Rules Coordinator, (608) 261-4472, DSPSAdminRules@wisconsin.gov

Approved for publication:

Approved for implementation:

Authorized Signature

Authorized Signature

Date Submitted

Date Submitted

State of Wisconsin



2017 Assembly Bill 317

Date of enactment: **November 30, 2017**

Date of publication*: **December 1, 2017**

2017 WISCONSIN ACT 108

AN ACT to amend 227.135 (2); and to create 13.92 (2) (jg), 35.93 (2) (b) 3. fm., 35.93 (2) (b) 3. gm., 227.138, 227.26 (4) and 227.29 of the statutes; **relating to:** review by state agencies of administrative rules and enactments; an expedited process for repealing rules an agency no longer has the authority to promulgate; retrospective economic impact analyses for rules; and reporting by the Legislative Reference Bureau on rules in need of revision.

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

SECTION 1. 13.92 (2) (jg) of the statutes is created to read:

13.92 (2) (jg) Prior to the end of each even-numbered year, report to the joint committee for review of administrative rules regarding rules in the Wisconsin administrative code that the chief has identified as possibly being in need of revision.

SECTION 2. 35.93 (2) (b) 3. fm. of the statutes is created to read:

35.93 (2) (b) 3. fm. Retrospective economic impact analyses for rules under s. 227.138.

SECTION 3. 35.93 (2) (b) 3. gm. of the statutes is created to read:

35.93 (2) (b) 3. gm. Petitions and proposed rules submitted under s. 227.26 (4) (b) 1.

SECTION 4. 227.135 (2) of the statutes, as affected by [2017 Wisconsin Act 57](#), is amended to read:

227.135 (2) An agency that has prepared a statement of the scope of the proposed rule shall present the statement to the department of administration, which shall make a determination as to whether the agency has the explicit authority to promulgate the rule as proposed in

the statement of scope and shall report the statement of scope and its determination to the governor who, in his or her discretion, may approve or reject the statement of scope. The agency may not send the statement to the legislative reference bureau for publication under sub. (3) until the governor issues a written notice of approval of the statement. The agency shall also present the statement to the individual or body with policy-making powers over the subject matter of the proposed rule for approval. The individual or body with policy-making powers may not approve the statement until at least 10 days after publication of the statement under sub. (3) and, if a preliminary public hearing and comment period are held by the agency under s. 227.136, until the individual or body has received and reviewed any public comments and feedback received from the agency under s. 227.136 (5). No state employee or official may perform any activity in connection with the drafting of a proposed rule, except for an activity necessary to prepare the statement of the scope of the proposed rule until the governor and the individual or body with policy-making powers over the subject matter of the proposed rule approve the statement. This subsection does not prohibit an agency from

* Section 991.11, WISCONSIN STATUTES: Effective date of acts. "Every act and every portion of an act enacted by the legislature over the governor's partial veto which does not expressly prescribe the time when it takes effect shall take effect on the day after its date of publication."

performing an activity necessary to prepare a petition and proposed rule for submission under s. 227.26 (4).

SECTION 5. 227.138 of the statutes is created to read:

227.138 Retrospective economic impact analyses for rules. (1) The joint committee for review of administrative rules may direct an agency to prepare a retrospective economic impact analysis for any of an agency's rules that are published in the code. The committee may identify one or more specific chapters, sections, or other subunits in the code that are administered by the agency as the rules that are to be the subject of the analysis and may specify a deadline for the preparation of the analysis. A retrospective economic impact analysis shall contain information on the economic effect of the rules on specific businesses, business sectors, public utility ratepayers, local governmental units, and the state's economy as a whole. When preparing the analysis, the agency shall solicit information and advice from businesses, associations representing businesses, local governmental units, and individuals that have been affected by the rules. The agency shall prepare the retrospective economic impact analysis in coordination with local governmental units that have been affected by the rules. The agency may request information that is reasonably necessary for the preparation of a retrospective economic impact analysis from other businesses, associations, local governmental units, and individuals and from other agencies. The retrospective economic impact analysis shall include all of the following:

(a) An analysis and quantification of the policy problem that the rules were intended to address, including comparisons with the approaches used by the federal government and by Illinois, Iowa, Michigan, and Minnesota to address that policy problem.

(b) An analysis and detailed quantification of the economic impact of the rules, including the implementation and compliance costs that have been incurred by or passed along to the businesses, local governmental units, and individuals that have been affected by the rules.

(c) An analysis of the actual and quantifiable benefits of the rules, including an assessment of how effective the rules have been in addressing the policy problem that the rules were intended to address.

(d) An analysis of alternatives to the rules, including the alternative of repealing the rules.

(e) A determination made in consultation with the businesses, local governmental units, and individuals that have been affected by the rules as to whether the rules have adversely affected in a material way the economy, a sector of the economy, productivity, jobs, or the overall economic competitiveness of this state.

(f) An analysis of the ways in which and the extent to which the rules have placed limitations on the free use of private property, including a discussion of alternatives to the rules that would minimize any such limitations.

(g) A comparison of the actual economic effect of the rules being analyzed to any economic impact analysis that analyzed the expected economic effect of those rules when they were proposed.

(h) Any other information requested by the committee related to the economic impact of the rules.

(2) An agency that prepares a retrospective economic impact analysis under sub. (1) shall submit that analysis to the department of administration, to the governor, and to the chief clerks of each house of the legislature, who shall distribute the analysis to the presiding officers of their respective houses, to the chairpersons of the appropriate standing committees of their respective houses, as designated by those presiding officers, and to the cochairpersons of the joint committee for review of administrative rules. The agency shall also send an electronic copy of the analysis to the legislative reference bureau, in a format approved by the legislative reference bureau, for publication in the register.

SECTION 6. 227.26 (4) of the statutes is created to read:

227.26 (4) REPEAL OF UNAUTHORIZED RULES. (a) In this subsection, "unauthorized rule" means a rule that an agency lacks the authority to promulgate due to the repeal or amendment of the law that previously authorized its promulgation.

(b) Notwithstanding ss. 227.114 to 227.117 and 227.135 to 227.19, an agency that promulgated or that otherwise administers a rule that the agency determines is an unauthorized rule shall petition the joint committee for review of administrative rules for authorization to repeal that rule by using the following process:

1. The agency shall submit a petition with a proposed rule that repeals the rule the agency has determined is an unauthorized rule to the legislative council staff for review. The proposed rule shall be in the form required under s. 227.14 (1) and shall include the material required under s. 227.14 (2) (a) 1., 2., and 7. and a statement that the agency is petitioning the joint committee for review of administrative rules to use the process under this subsection to repeal a rule the agency has determined to be an unauthorized rule. The agency shall also send an electronic copy of the petition and the proposed rule to the legislative reference bureau, in a format approved by the legislative reference bureau, for publication in the register.

2. The legislative council staff shall review the petition and proposed rule in accordance with s. 227.15 (2) and submit to the joint committee for review of administrative rules the petition and proposed rule with a written report including a statement of its determination as to whether the proposed rule proposes to repeal an unauthorized rule. The legislative council staff shall send the agency a copy of its report with an indication of the date

on which the petition and proposed rule were submitted to the committee.

3. Following receipt of the petition and proposed rule submitted by the legislative council staff under subd. 2., the joint committee for review of administrative rules shall review the petition and proposed rule and may do any of the following:

a. Approve the agency's petition if the committee determines that the proposed rule would repeal an unauthorized rule.

b. Deny the agency's petition.

c. Request that the agency make changes to the proposed rule and resubmit the petition and proposed rule under subd. 1.

4. The committee shall inform the agency in writing of its decision as to the petition.

(c) If the joint committee for review of administrative rules approves a petition to repeal an unauthorized rule as provided in par. (b) 3. a., the agency shall promulgate the proposed rule by filing a certified copy of the rule with the legislative reference bureau under s. 227.20, together with a copy of the committee's decision.

SECTION 7. 227.29 of the statutes is created to read:

227.29 Agency review of rules and enactments. (1)

By March 31 of each odd-numbered year, each agency with any rules published in the code shall submit a report to the joint committee for review of administrative rules listing all of the following rules promulgated or otherwise administered by that agency:

(a) Unauthorized rules, as defined in s. 227.26 (4) (a), together with a description of the legislation that eliminated the agency's authority to promulgate any such rule.

(b) Rules for which the authority to promulgate has been restricted, together with a description of the legislation that restricted that authority.

(c) Rules that are obsolete or that have been rendered unnecessary, together with a description of why those rules are obsolete or have been rendered unnecessary.

(d) Rules that are duplicative of, superseded by, or in conflict with another rule, a state statute, a federal statute or regulation, or a ruling of a court of competent jurisdiction, together with a citation to or the text of any such statute, regulation, or ruling.

(e) Rules that the agency determines are economically burdensome.

(2) The report under sub. (1) shall also include all of the following:

(a) A description of the agency's actions, if any, to address each rule listed in the report. If the agency has not taken any action to address a rule listed in the report, the agency shall include an explanation for not taking action.

(b) A description of the status of each rule listed in the previous year's report not otherwise listed.

(c) If the agency determines that there is no rule as described under sub. (1) (a), (b), (c), (d), or (e), a statement of that determination.

(3) If an agency identifies an unauthorized rule under sub. (1) (a) and is not otherwise in the process of promulgating a rule that repeals the unauthorized rule, the agency shall, within 30 days after the agency submits the report, submit a petition to the legislative council staff under s. 227.26 (4) (b) 1. to repeal the unauthorized rule if the agency has not previously done so.

(4) (a) In this subsection, "enactment" means an act or a portion of an act that is required to be published under s. 35.095 (3) (a).

(b) Each agency shall review enactments to determine whether any part of an enactment does any of the following:

1. Eliminates or restricts the agency's authority to promulgate any rules promulgated or otherwise administered by that agency.

2. Renders any rules promulgated or otherwise administered by that agency obsolete or unnecessary.

3. Renders, for any reason, any rules promulgated or otherwise administered by that agency not in conformity with or superseded by a state statute, including due to statutory numbering or terminology changes in the enactment.

4. Requires or otherwise necessitates rule making by the agency.

(c) If an agency determines that any consequence specified in par. (b) 1. to 4. results from an enactment or part of an enactment, within 6 months after the applicable effective date for the enactment or part of the enactment, the agency shall do one or more of the following, as applicable, to address the consequence identified by the agency and notify the joint committee for review of administrative rules of its action:

1. Submit a statement of the scope of a proposed rule under s. 227.135 (2), unless the enactment requires otherwise or unless the agency submits a notice to the committee explaining why it is unable to submit the statement of scope within that time period and an estimate of when the agency plans to submit the statement of scope.

2. In the case of an affected rule that the agency determines is an unauthorized rule, as defined in s. 227.26 (4) (a), submit a petition to the legislative council staff under s. 227.26 (4) (b) 1.

3. In the case of a consequence specified under par. (b) 3. that can be addressed by the legislative reference bureau using its authority under s. 13.92 (4) (b), submit a request to the legislative reference bureau to use that authority.

SECTION 8. Initial applicability.

(1) The treatment of section 227.29 (4) of the statutes first applies to enactments published by the legislative

reference bureau under section 35.095 (3) (a) of the statutes on the effective date of this subsection.

Chapter Chir 4

PRACTICE

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.

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.~~

(1) “Chiropractic science” means the body of organized knowledge related to identifying the cause of departure from health of the human and the treatment of such conditions without use of drugs or surgery. “Chiropractic science” includes using patient examination to create a diagnosis that serves as a basis for forming clinical judgments of a patient’s condition, degree or nature of treatment needed, and management and rehabilitation necessary for the restoration and preservation of health.

(1m) “Examination” includes any of the following:

- (a) Patient history.
- (b) Evaluation techniques.
- (c) Lab analysis.
- (d) Use of analytical instruments to determine vital signs and screen health status.
- (e) Orthopedic and neurological testing.
- (f) Range of motion and muscle testing.
- (g) Diagnostic evaluation or imaging of the body.

(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.

(3) “Physiotherapy” has the meaning given “physiotherapy treatment” in s. Chir 10.01 (1r).

(4) “Practice of chiropractic” has the meaning given in s. 446.01 (2), Stats.

(5) “Treatment” includes any of the following:

- (a) Adjustment or manipulation of the spinal column.
- (b) Skeletal articulations.
- (c) Adjacent tissue and exercise rehabilitation.
- (d) Physiotherapy.
- (e) Education, lifestyle modification, and counseling.

~~**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.~~

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.

Chir 4.05 Prohibited practice.

(1) SCOPE OF PRACTICE. A person ~~who holds a license to practice chiropractic licensed under ch. 446, Stats.,~~ 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~~ the practice, as described in s. Chir 4.03 of chiropractic. Practice beyond the scope of the practice 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 including the following:~~

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 instrument~~ in the practice of chiropractic to diagnose, analyze, treat, or prevent the cause of departure from complete health and proper condition of the ~~human patient~~, 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 that~~ 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 that~~ 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 that~~ is represented as a means of attaining spiritual growth, spiritual comfort, or spiritual well-being.

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 Engage in the practice of chiropractic.~~

(2) Have any professional contact with patients.

(3) Be present in any chiropractic office, other than to receive care.

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. This subdivision shall not be construed to prohibit any of the following:

a. The use of cold laser therapy by a licensed chiropractor.

b. The practice of acupuncture by a licensed chiropractor who is also an acupuncturist certified under ch. 451, Stats., at the same location where he or she practices chiropractic.

(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; 2017 Wis. Act 180: renum. (1) (b) 3. to (1) (b) 3. (intro.), cr. (1) (b) 3. a., b., Register April 2018 No. 748, eff. 5-1-18.

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 9.02	Unlicensed practice by chiropractic students and graduate chiropractors.
Chir 9.03	Approved chiropractic college preceptorship programs.

Chir 9.04	Approved postgraduate preceptorship programs.
Chir 9.05	Approved chiropractor preceptors.
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 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; 2017 Wis. Act 180: am. (1) Register April 2018 No. 748, eff. 5-1-18.

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 educa-

tion, 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 chiropractor 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: renum. 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 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://dsps.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 chiropractor 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://dps.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.

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

AGENDA REQUEST FORM

1) Name and Title of Person Submitting the Request: Zack Hendrickson, Records Management Program Supervisor		2) Date When Request Submitted: 4/25/2018 <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: 6/28/2018	5) Attachments: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	6) How should the item be titled on the agenda page? Discussion to consider employer verification											
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 (<u>Fill out Board Appearance Request</u>) <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: The application for chiropractic licensure via endorsement requires an applicant to account for all activities and practice from their date of graduation to present in order to determine if the applicant meets the practice requirements for licensure established by rule. At this time, DPCP does not require an employer to submit an employer verification form verifying an applicant's employment. Discuss whether DPCP shall require an employer to verify an applicant's employment on a form provided by the Department.													
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%; border-bottom: 1px solid black;"> 11) Authorization </td> <td style="width: 40%; border-bottom: 1px solid black; text-align: right;"> 4-25-18 </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) </td> </tr> <tr> <td colspan="2"> Date </td> </tr> </table>				11) Authorization	4-25-18	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	
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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.													