



**VIRTUAL/TELECONFERENCE
CHIROPRACTIC EXAMINING BOARD
Virtual, 4822 Madison Yards Way, Madison
Contact: Will Johnson (608) 266-2112
July 16, 2026**

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 description of the actions of the Board.

AGENDA

9:00 A.M.

OPEN SESSION – CALL TO ORDER – ROLL CALL

- A. Adoption of Agenda (1-4)**
- B. Approval of Minutes of April 16, 2026 (5-6)**
- C. Reminders: Conflicts of Interest, Scheduling Concerns
- D. Introductions, Announcements and Recognition**
 - 1. Introduction and Welcome: DSPP Secretary Hereth
- E. Administrative Matters – Discussion and Consideration**
 - 1. Department, Staff, and Board Updates
 - 2. Board Members – Term Expiration Dates
 - a. Bradley, Barbara C. – 7/1/2027
 - b. Damrow, James M. – 7/1/2027
 - c. Erlandson, Kris N. – 7/1/2029
 - d. Heffernan, Amy L. – 7/1/2029
 - e. Hendrickson, Kathleen A. – 7/1/2028
 - f. Meschefske, Daniel – 7/1/2029
- F. Legislation and Policy Matters – Discussion and Consideration
- G. Administrative Rule Matters – Discussion and Consideration (7-138)**
 - 1. Drafting: Chir 3, relating to renewal requirements (8-137)
 - 2. Pending and Possible Rulemaking Projects (138)
- H. Education and Examination Matters – Discussion and Consideration**
 - 1. CE Course Approval Update

I. Speaking Engagements, Travel, or Public Relation Requests, and Reports – Discussion and Consideration (139)

1. Travel Report: FCLB 99th Annual Educational Conference – April 29-May 3, 2026, – Atlanta, GA (Heffernan)
2. National Board of Chiropractic Examiners Committee Meeting – Report (Bradley)
3. FCLB District Meeting – September 17-20, 2026, Ft. Walton, FL – Consideration

J. Discussion and Consideration of Items Added After Preparation of Agenda

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

K. Public Comments

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

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

1. Proposed Stipulations, Final Decisions and Orders

a. 25 CHI 0012 – Ray G. Roddan (140-146)

M. 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. Petitions 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

N. Consulting with Legal Counsel

RECONVENE TO OPEN SESSION IMMEDIATELY FOLLOWING CLOSED SESSION

O. Vote on Items Considered or Deliberated Upon in Closed Session if Voting is Appropriate

P. Open Session Items Noticed Above Not Completed in the Initial Open Session

Q. Delegation of Ratification of Examination Results and Ratification of Licenses and Certificates

ADJOURNMENT

NEXT MEETING: OCTOBER 22, 2026

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 virtually unless otherwise indicated. In-person meetings are typically conducted at 4822 Madison Yards Way, Madison, Wisconsin, unless an alternative location is listed on the meeting notice. In order to confirm a meeting or to request a complete copy of the board's agenda, please visit the Department website at <https://dsps.wi.gov>. The board may also consider materials or items filed after the transmission of this notice. Times listed for the commencement of any agenda item may be changed by the board for the convenience of the parties. The person credentialed by the board has the right to demand that the meeting at which final action may be taken against the credential be held in open session. Requests for interpreters for the hard of hearing, or other accommodations, are considered upon request by contacting the Affirmative Action Officer or reach the Meeting Staff by calling 608-267-7213.

**VIRTUAL/TELECONFERENCE
CHIROPRACTIC EXAMINING BOARD
MEETING MINUTES
APRIL 16, 2026**

PRESENT: Barbara Bradley, James Damrow, Amy Heffernan, Kathleen Hendrickson, Daniel Meschefske

ABSENT: Kris Erlandson

STAFF: Will Johnson, Executive Director; Jameson Whitney, Legal Counsel; Sofia Anderson, Administrative Rules Coordinator; Tracy Drinkwater, Board Administration Specialist; and other Department Staff

CALL TO ORDER

Amy Heffernan, Chairperson, called the meeting to order at 9:01 a.m. A quorum was confirmed with five (5) members present.

ADOPTION OF AGENDA

MOTION: Barbara Bradley moved, seconded by Kathleen Hendrickson, to adopt the Agenda as published. Motion carried unanimously.

APPROVAL OF MINUTES OF JANUARY 29, 2026

MOTION: James Damrow moved, seconded by Daniel Meschefske, to approve the Minutes of January 29, 2026, as published. Motion carried unanimously.

CLOSED SESSION

MOTION: James Damrow moved, seconded by Barbara Bradley, to convene to Closed Session to deliberate on cases following hearing (§ 19.85(1)(a), Stats.); to consider licensure or certification of individuals (§ 19.85(1)(b), Stats.); to consider closing disciplinary investigations with administrative warnings (§§ 19.85(1)(b), 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.). Amy Heffernan, Chairperson, read the language of the motion aloud for the record. The vote of each member was ascertained by voice vote. Roll Call Vote: Barbara Bradley-yes; James Damrow-yes; Amy Heffernan-yes; Kathleen Hendrickson-yes; and Daniel Meschefske-yes. Motion carried unanimously.

The Board convened into Closed Session at 10:33 a.m.

CREDENTIALING MATTERS

Application Reviews

J.T. – License by Examination Application (IA-894752)

MOTION: Amy Heffernan moved, seconded by Barbara Bradley, to approve the License by Examination application IA-894752, once all requirements are met. Motion carried unanimously.

DLSC MATTERS

Administrative Warnings

23 CHI 024 – A.T.P.

MOTION: James Damrow moved, seconded by Barbara Bradley, to issue an Administrative Warning in the matter of A.T.P., DLSC Case Number 23 CHI 024. Motion carried unanimously.

RECONVENE TO OPEN SESSION

MOTION: Kathleen Hendrickson moved, seconded by Daniel Meschefske, to reconvene into Open Session. Motion carried unanimously.

The Board reconvened into Open Session at 10:49 a.m.

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

MOTION: Barbara Bradley moved, seconded by Daniel Meschefske, to affirm all motions made and votes taken in Closed Session. Motion carried unanimously.

(Be advised that any recusals or abstentions reflected in the Closed Session motions stand for the purposes of the affirmation vote.)

DELEGATION OF RATIFICATION OF EXAMINATION RESULTS AND RATIFICATION OF LICENSES AND CERTIFICATES

MOTION: James Damrow moved, seconded by Barbara Bradley, to delegate ratification of examination results to DSPS staff and to ratify all licenses and certificates as issued. Motion carried unanimously.

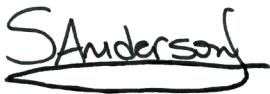
ADJOURNMENT

MOTION: James Damrow moved, seconded by Kathleen Hendrickson, to adjourn the meeting. Motion carried unanimously.

The meeting adjourned at 10:52 a.m.

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

AGENDA REQUEST FORM

1) Name and title of person submitting the request: Sofia Anderson – Administrative Rules Coordinator		2) Date when request submitted: 07/06/2026 Items will be considered late if submitted after 12:00 p.m. on the deadline date which is 8 business days before the meeting	
3) Name of Board, Committee, Council, Sections: Chiropractic Examining Board			
4) Meeting Date: July 16, 2026	5) Attachments: ☒ Yes ☐ No	6) How should the item be titled on the agenda page? Administrative Rules Matters – Discussion and consideration 1. Drafting: Chir 3, relating to renewal requirements. 2. Pending and possible rulemaking projects.	
7) Place Item in: ☒ Open Session ☐ Closed Session	8) Is an appearance before the Board being scheduled? <i>(If yes, please complete Appearance Request for Non-DSPS Staff)</i> ☐ Yes ☒ No	9) Name of Case Advisor(s), if required: N/A	
10) Describe the issue and action that should be addressed: Attachments: 1. Scope Statement for Chir 3. 2. Chapter Chir 3 redline. 3. 4-State analysis. 4. FCLB chiropractic assistants scope charts across states. 5. Maryland, North Carolina, and Oregon regulations for chiropractic assistants. 6. Chiropractic rules projects chart.			
11) Authorization  07/06/2026 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.			

STATEMENT OF SCOPE

CHIROPRACTIC EXAMINING BOARD

Rule No.: Chir 3

Relating to: Renewal requirements

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 review and potentially clarify the language in ch. Chir 3 related to the renewal requirements for chiropractic credentials. These revisions may update the language to align with current standards of practice and provide clarity for applicants seeking to renew an expired license.

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:

Chapter Chir 3 contains provisions that specify the requirements for license renewal and outlines separate pathways for licensees who renew late within 5 years and for those who seek reinstatement after their license has been expired for 5 years or more. However, the current language may not be aligned with current standards of practice and may not clearly specify the process for applicants seeking to renew a license that has been expired for 5 years or more with no unmet disciplinary requirements, which may lead to confusion.

The alternative to this change is that the chapter will continue to cause confusion for credentialed chiropractic professionals regarding renewal requirements.

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, “[s]hall 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., states that “[e]ach agency may promulgate rules interpreting the provisions of any statute enforced or administered by the agency, if the agency considers it necessary to effectuate the purpose of the statute...”

Section 446.02 (1) (b), Stats., states that a person must submit “... evidence satisfactory to the examining board that the person meets the requirements of continuing education for license renewal as the examining board may require...”

Section 446.025 (3) (b), Stats., states that a "... chiropractic radiological technician shall, at the time that he or she applies for renewal of a certificate [...] submit evidence satisfactory to the examining board that he or she has completed at least 12 continuing educational credit hours in programs established by rules promulgated by the examining board."

Section 446.026 (3) (b), Stats., states that a "... chiropractic technician shall, at the time that he or she applies for renewal of a certificate [...] submit evidence satisfactory to the examining board that he or she has completed at least 6 continuing educational credit hours in programs established by rules promulgated by the examining board."

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

60 hours

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

Wisconsin credentialed chiropractors, chiropractic radiological technicians, and chiropractic technicians.

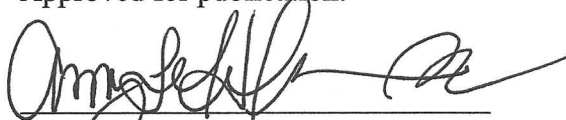
7. Summary and preliminary comparison with any existing or proposed federal regulation that is intended to address the activities to be regulated by the proposed rule: None

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.

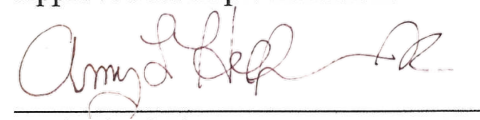
Contact Person: Sofia Anderson, DSPSAdminRules@wisconsin.gov

Approved for publication:


Authorized Signature

11-6-25
Date Submitted

Approved for implementation:


Authorized Signature

01/29/2026

Date Submitted

Chapter Chir 3

LICENSURE

[Chir 3.02](#) License renewal.

[Chir 3.025](#) Reciprocal credentials for service members, former service members, and their spouses.

[Chir 3.03](#) Licensure by endorsement.

[Chir 3.035](#) Temporary chiropractic permits.

[Chir 3.04](#) Display of license.

[Chir 3.05](#) Change of name and address.

[Chir 3.06](#) Professional title.

[Chir 3.07](#) Professional liability insurance.

[Chir 3.08](#) Limited liability entities.

[Chir 3.09](#) Cardiopulmonary resuscitation certification.

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

Chir 3.02 License renewal.

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

- (a)** An application for renewal on a form prescribed by the department.
- (b)** The fee required under s. [440.08 \(2\) \(a\)](#), Stats.
- (c)** Verification that the licensee has, during the biennial period immediately preceding application, completed the continuing education requirement specified in s. [446.02 \(1\) \(b\)](#), Stats., except that the requirement may be waived if the licensee was not practicing in Wisconsin during that period. Licensees shall retain original documents showing attendance at programs for at least 4 years from the time that credit is claimed for the continuing education program. Licensees shall deliver their original documents or copies to the board upon request.
- (d)** Evidence that the licensee is certified in cardiopulmonary resuscitation or has been granted a waiver of the requirement by the board.

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

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

(3) REQUIREMENTS FOR REINSTATEMENT.

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

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



Chir 3.025 Reciprocal credentials for service members, former service members, and their spouses. A reciprocal license to practice chiropractic shall be granted to a service member, former service member, or the spouse of a service member or former service member who the board determines meets all of the requirements under s. [440.09 \(2\)](#), Stats. Subject to s. [440.09 \(2m\)](#), Stats., the board may request verification necessary to make a determination under this section.

Chir 3.03 Licensure by endorsement.

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

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

(b) Has graduated from a college of chiropractic accredited by the Council on Chiropractic Education (CCE) or by an agency approved by the United States Office of Education or its successor, or from a foreign school determined to be equivalent to an accredited college of chiropractic by the CCE or another approved accredited agency.

(c)

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

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

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

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

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

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

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

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

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

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

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

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

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

(a) The signature of the applicant.

(b) The fee required under s. [440.05 \(1\)](#), Stats.

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

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

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

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

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

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

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

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

~~**Note:** Instructions for applications can be found on the department of safety and professional services' website at <http://dsps.wi.gov>.~~

Chir 3.035 Temporary chiropractic permits.

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

- (a) The applicant has a chiropractic license in good standing in another jurisdiction and has no disciplinary action pending in connection with any chiropractic license the applicant holds.
- (b) The applicant will be practicing chiropractic only as a chiropractor for participants in an athletic or performing arts event, or as an instructor in a specific chiropractic education seminar approved for continuing education by the board.
- (c) The applicant has current proficiency in the use of an automated external defibrillator.

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

~~**Note:** Instructions for applications can be found on the department of safety and professional services' website at <http://dsps.wi.gov>.~~

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

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

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

- (a) Violation of any provision of ch. [446](#), Stats., or ch. [Chir 6](#).
- (b) Failure to pay the fees required under s. [440.05 \(6\)](#), Stats.

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

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

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

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

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

Chir 3.08 Limited liability entities.

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

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

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

(4) Nothing in this section shall relieve a chiropractor from the requirement that every practicing chiropractor shall have in effect professional liability insurance in the amounts required by the board in s. [Chir 3.07](#).

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

Illinois

Illinois chiropractic physicians are regulated by the Medical Practice Act. These professions are in a three-year renewal cycle that finishes on July 31st of the renewal year. Illinois requires 150 hours of Continuing Medical Education (CME) with a minimum of 60 hours of formal programs conducted or endorsed by hospitals, specialty societies and facilities, while a maximum of 90 hours can be allocated to informal programs such as unstructured online searching and learning, consultation with peers and medical experts, and medical writing. Formal continuing medical education programs must consist of educational activities designed to advance a physician's clinical knowledge, skills, and professional performance. Eligible topics include clinical science, public health, risk management, bioethics, and the physician-patient relationship. These programs must be evidence-based, developed by qualified individuals, and clearly outline their learning objectives, content, teaching methods, and applicable hours toward Illinois license renewal. Additionally, every program must include an evaluation process completed by participants, the results of which the sponsor and instructor must review to improve future sessions.

Approved sponsors are fully responsible for the integrity of their programs, even if they subcontract with outside presenters. Advertising materials must explicitly identify the licensed sponsor and their license number. Sponsors must also provide participants with certificates of attendance containing specific details such as the sponsor's credentials, participant information, subject matter, dates, hours earned, and a signature. To maintain their status, sponsors must submit a renewal application along with a fee every renewal year by July thirty-first, maintain attendance records for at least five years, and ensure that credit is only awarded for active participation.

Chiropractic physicians applying for license renewal must officially certify on their applications that they have met all continuing medical education requirements. While applicants report this compliance during renewal, they bear the sole responsibility of keeping their verification documents, such as certificates of attendance. The state regulatory division reserves the right to request this additional evidence at any time to audit and confirm an applicant's compliance.

Illinois does not license or certify chiropractic assistants under the Medical Practice Act.

[IL Admin Code Title 68 Section 1285]

Iowa

The Iowa Board of Chiropractic enforces a biennial renewal on July 1st of even-numbered years on all chiropractic physicians. To renew, practitioners must submit an online application, pay the required fee, and upload proof of their continuing education credits before the expiration date. Individuals issued an initial license within 6 months of a renewal date are granted an exemption and do not need to renew until the subsequent 2-year cycle. Licensees who treat children or dependent adults must complete training through the Department of Health and Human Services for identifying and reporting abuse, keeping physical records of this training for 3 years. The board reserves the right to audit these records, though exceptions are made for active-duty military personnel or those with approved hardship waivers. If a practitioner misses the deadline, they must complete all renewal steps and pay a penalty within a 30-day grace period, after which the license

becomes inactive and the privilege to practice is suspended until reactivation occurs. Those whose licenses have been inactive for 5 years or less must prove they completed 40 hours of continuing education within the past 2 years and provide disciplinary verifications from their most recent practicing jurisdiction. If a license has been inactive for more than 5 years, the applicant must provide background verifications from every jurisdiction where they have ever held a license and may be required to pass the Special Purposes Examination for Chiropractic if they have not actively practiced in the United States for 3 of the past 5 years. Finally, any license that was revoked, suspended, or voluntarily surrendered requires official board-approved reinstatement alongside the standard reactivation process before the physician can legally resume practice. [481 IAC Chapter 841]

Licensed chiropractic physicians are permitted to carry over up to fifty percent of their excess hours into the next compliance biennium. To qualify for licensure renewal, chiropractors must complete at least 40 hours of continuing education per biennium. New licensees are exempt from this requirement during their first renewal cycle, needing only two hours specifically focused on Iowa statutory and administrative rules. For subsequent renewals, the rules mandate that at least 36 of the required hours directly relate to the clinical case management of chiropractic patients. Practitioners must earn at least 20 of these clinical hours through traditional, in-person classroom presentation, while the remaining 16 may be obtained through independent study or online courses. Licensees must complete at least 2 hours per biennium on professional boundaries and ethics, alongside mandatory training on child and dependent adult abuse. Practitioners certified in acupuncture must dedicate 12 specific hours to that field. Credit may also be earned through non-traditional methods such as teaching at approved institutions, presenting a course for the first time, or proctoring professional examinations. However, the board strictly prohibits introductory or undergraduate-level coursework, and all presenters must verbally and in writing disclose any commercial affiliations or marketing relationships to their participants. [481 IAC Chapter 844]

Iowa certifies chiropractic assistants executing clinical physiotherapy modalities. Assistants must complete a professional certification program through an approved entity, such as a state chiropractic association or a Council on Chiropractic Education accredited college. The training requirements are divided by the types of procedures being performed. Assistants administering active physiotherapy must complete 12 hours of instruction, half of which must be supervised clinical experience, and those administering passive physiotherapy must fulfill an identical, separate 12-hour requirement. If an assistant performs both active and passive procedures, they must complete a total of 24 hours of instruction. The supervising physician must submit a written attestation to the training college verifying that the assistant successfully completed their clinical hours, which prompts the institution to issue a certificate of completion. Finally, the practicing physician is required to maintain physical proof of the assistant's certifications at their primary place of business and must provide these records to the board upon request. The rules do not specify renewal requirements for chiropractic assistants. [481 IAC Chapter 843]

Michigan

Michigan licensees must complete 30 hours of continuing education within the 2 years immediately preceding their application. Submitting the renewal certifies compliance, and licensees must keep documentation of their hours for 4 years. If a licensee requires a waiver for

these educational mandates, a formal request must be submitted to the department at least 30 days before the final regularly scheduled board meeting prior to the expiration date of the license.

When a chiropractic license has lapsed, the rules establish 2 pathways for relicensure based on the duration of the inactivity. An applicant whose license has lapsed for 3 years or less must submit an application form, pay the required fee, establish good moral character, and complete 45 hours of approved continuing education within the preceding 3 years. This coursework must feature no more than 20 hours of distance learning and must include mandated specific topics. If the license has been lapsed for more than 3 years, the applicant must complete the application, pay the fee, establish good moral character, and submit fingerprints. They must then either prove they held an unrestricted license in another state or Canadian province during the 3 years immediately preceding the application, or prove they completed 45 hours of continuing education within the last 3 years, including 24 live, in-person hours on chiropractic adjusting techniques, a maximum of 20 distance learning hours, and the mandatory specific topic hours. All applicants must disclose any current or past healthcare licenses held across other countries, the United States military, the federal government, or individual states, alongside providing verification that no disciplinary actions or sanctions are active.

Licensees cannot earn more than 12 credit hours within a single 24-hour period, and at least 10 hours must be completed in a live, in-person setting. Repeat credit is barred for identical courses taken within the same licensing cycle. The total must include specific coursework distributions: at least 1 hour in pain and symptom management, a minimum of 1 hour in sexual boundaries, at least 1 hour in ethics, and no less than 2 hours in physical measures. Additionally, implicit bias training completed during the 2 years prior to renewal can be counted toward the total.

Beyond traditional seminars, the state recognizes alternative professional activities to fulfill the biennial requirements. Licensees can earn up to a maximum of 30 hours per renewal cycle by attending programs or self-study options sponsored by approved groups like the Michigan Association of Chiropractors or Providers of Approved Continuing Education, or by completing courses at an approved chiropractic school. Practitioners can also earn credit by delivering an initial presentation of a chiropractic program to a recognized regional, national, or international organization, provided it falls outside their normal job duties. This teaching earns 2 hours of credit for every 50 to 60 minutes of presentation time, up to a maximum of 10 hours per renewal period. If selected for an audit, the licensee is required to provide physical letters or certificates of completion detailing their name, the date of completion, the total hours approved, and the provider's information.

[MI Admin. Code R 338.12036, 338.12037, and 338.12041]

Michigan does not issue credentials or licenses to chiropractic assistants.

Minnesota

Minnesota requires all licensed chiropractors to acquire at least 20 continuing education units by December 31 of each calendar year. This requirement includes specific content mandates, requiring at least 3 units in radiographic or advanced imaging safety, technique, or interpretation,

and at least 1 unit focused on professional boundaries in the clinical setting. Chiropractors registered to provide acupuncture services must also dedicate 2 of their annual units to acupuncture-related subjects. Newly licensed individuals are exempt from acquiring continuing education units during their initial calendar year of licensure. Full-time faculty members at accredited chiropractic colleges can apply up to 6 units toward their annual requirement if they were employed for at least 8 months of that calendar year, though this credit cannot replace the mandated professional boundaries or imaging units.

If a license is terminated due to a failure to meet renewal or continuing education demands, the reinstatement process is dictated by the duration of the termination and whether the applicant maintained active practice elsewhere. For an absence of less than 5 years with proof of continuous out-of-state practice, an applicant must complete all interim continuing education, pay any accrued penalty fees and renewal fees, and fix all deficiencies that led to the license termination. If the absence with continuous practice exceeds 5 years, the applicant must additionally pass the board's jurisprudence examination. When continuous practice cannot be verified, an applicant away for less than 5 years must complete all interim continuing education plus an additional 10 units for each intervening year, alongside paying all accrued fees. Those without continuous practice who are away for more than 5 years must pay all interim and penalty fees, pass the jurisprudence examination, and pass the Special Purposes Examination in Chiropractic. Alternatively, the board will waive the continuing education requirements for these pathways if the applicant passes the Special Purposes Examination in Chiropractic within 12 months prior to applying.

Chiropractors intending to practice in another jurisdiction can apply for an inactive license by submitting a board-approved application and a signed affidavit. The board may deny this status if the applicant faces pending or final disciplinary actions in Minnesota or another state, or if they have outstanding fees, penalties, or continuing education deficiencies. To reinstate an inactive license to active status, a practitioner must complete the reinstatement application, pay a fee of 100 dollars, provide certifications of good standing from every state where they hold a license, and submit a notarized statement detailing their active out-of-state practice locations. They must also prove they completed either the continuing education required by the states where they practiced or at least 12 units for each year of inactive status, whichever is greater, alongside completing 20 units of board-approved continuing education in the year prior to the reinstatement application.

A practitioner may also place their license into voluntary retirement under the same compliance and disciplinary clear-standing conditions required for inactive status. The pathways to reinstate a voluntarily retired license mirror those of a terminated license. Reinstatement requires a board-approved application, a fee of 100 dollars, and certifications of good standing from all licensed jurisdictions. From there, the exact requirements branch out depending on whether the retirement lasted under or over 5 years, and whether the chiropractor can verify continuous practice elsewhere during that period. Just like terminated licenses, retired licensees can choose to pass the Special Purposes Examination in Chiropractic within 12 months of their application to waive the interim continuing education requirements. For both terminated and voluntarily retired reinstatements, units earned in other jurisdictions may be applied to the interim totals, but no units completed for reinstatement purposes can count toward the standard annual 20-unit requirement. If a licensee fails to submit the necessary documentation or fees, the board will deny the request for reinstatement.

[MN Admin. Rules Chapter 2500]

Minnesota does not issue credentials or licenses to chiropractic assistants.

DISCLAIMER: Some regulations might be out of date.

Chiropractic Assistant Regulations/Statutes/Policies

This chart serves to provide results from a 50 state survey of existing regulations, statutes, and Chiropractic Board policies regarding chiropractic assistants (CAs). If no information was found regarding CAs from the sources listed above, “no language identified” is listed in column C.

Issues:

1. How many chiropractors with active licenses are in the state? (Column A)
2. How many chiropractic assistants are in the state? (Column B)

**Note:* The data listed in columns A and B was taken from the Federation of Chiropractic Licensing Boards’ Official Directory page (found at: <http://directory.fclb.org/LicensingBoards/US.aspx>).

**Note:* If no data was available, the space was left blank.

3. Is the supervising chiropractor required to be physically present when the CA performs his or her CA duties? (Column C)
 - a. **Note:* If available, the definition of “direct supervision” is also provided.
4. What is a CA’s scope of practice? (Column D)
5. Are CAs required to be licensed, certified, or registered to practice as a CA? (Column E)

**Note:* If the state does require CAs to be licensed, certified, or registered, the requirements to attain these are listed. If the language was silent on any of these requirements, the existing CA policy from the respective state’s Board of Chiropractic page is included if available.

Research by:
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	A	B	C	D	E
State	# Active licenses	# CAs	Requires DC physically present?	Scope of CA Practice	Requires CA licensure/registration/certification?
Alabama	799 (2018)		No language identified		
Alaska	343 (2018)		No language identified		
Arizona	2492 (2018)		Yes. "Supervision" means a licensed chiropractor is present in the office, sees a patient, assigns the work to be done regarding the patient, and is available to check the work of the supervised individual as it progresses and the completed work." R4-7-101. Definitions	May include: a) Performing delegated duties commensurate with the chiropractic assistant's education and training Does not include: a) evaluating, interpreting, designing or modifying established treatment programs of chiropractic care or violate any statute." B. Clinical duties that a chiropractic assistant may perform as directed by the supervising chiropractor under subsection (A) include, but are not limited to: 1. Asepsis and infection control, 2. Taking patient histories and vital signs, 3. Performing first aid and CPR, 4. Preparing patients for procedures, 5. Assisting the supervising chiropractor with examinations and treatments, and 6. Collecting and processing specimens. C. A chiropractic assistant who meets the education requirements for physiotherapy under R4-7-1102(A) may administer, under the direct supervision of a chiropractor	Yes. "Chiropractic assistant" means an unlicensed person who has completed an educational training program approved by the board, who assists in basic health care duties in the practice of chiropractic under the supervision of a doctor of chiropractic and who performs delegated duties commensurate with the chiropractic assistant's education and training but who does not evaluate, interpret, design or modify established treatment programs of chiropractic care or violate any statute." A.R.S. § 32-900. Requirements: 24 hours of coursework, with a minimum of four hours in each of the following: a) chiropractic principles, b) management of common diseases, c) history taking, d) recordkeeping, e) professional standards of conduct, and f) CPR. If a chiropractor supervising a C.A. is certified in physiotherapy under A.R.S. § 32-922.02, the C.A. shall complete 12 hours of training in physiotherapy in addition to the 24 hours of coursework. If a chiropractor supervising a C.A. is certified in acupuncture under A.R.S. § 32-922.02, the C.A. shall

				certified in physiotherapy, but is not limited to administering: 1. Whirlpool treatments, 2. Diathermy treatments, 3. Electronic galvanization stimulation treatments, 4. Ultrasound therapy, 5. Massage therapy, 6. Traction treatments, 7. Transcutaneous nerve stimulation unit treatments, and 8. Hot and cold pack treatments. D. A chiropractic assistant that meets the education requirements for acupuncture under R4-7-1102(A) may prepare and sterilize instruments and may remove acupuncture needles under the direct supervision of a chiropractor certified in acupuncture. A C.A. shall not: 1. Take an x-ray, 2. Perform an independent examination, 3. Diagnose a patient, 4. Determine a regimen of patient care, 5. Change the regimen of patient care set by the supervising chiropractor, 6. Perform an adjustment, or 7. Perform acupuncture by needle insertion. R4-7-1103. Scope of Practice.	complete two hours of training in acupuncture in addition to the 24 hours of coursework. R4-7-1102. Chiropractic Assistant Training
Arkansas	563 (2018)		Unclear “under the order, direction and responsibility of the supervising doctor”	May include: Performing specific testing procedures and/or adjunctive therapeutics under the order, direction and responsibility of the supervising doctor Does not include:	No. (4) 'Chiropractic aide' means an unlicensed member of the chiropractic team who may assist a chiropractic physician in the performance of those procedures and techniques constituting the practice of chiropractic as defined in this chapter with the exception of spinal manipulation and adjustment, provided that such

				a. rendering any diagnosis, submitting treatment plans to patients, or in any other way assuming responsibility for the management of patient care b. rendering any manipulative adjustment treatment or spinal mobilization AR ADC 029.00.2-E. Professional Practices.	assistance shall be performed under the direct supervision of a licensed chiropractic physician. <i>Unless:</i> must obtain Radiologic Technology License through the Arkansas DOH to perform x-rays. Also, those who use radioactive materials or medical equipment emitting or detecting ionizing radiation on human beings for diagnostic or therapeutic purposes, be licensed to do so. 17-81-102. Definitions.
California	12957 (2019)		Yes. “Immediate and direct supervision” means the licensed Doctor of Chiropractic shall be at all times on the premises where the examinations are being conducted. 16 CA ADC § 312. Illegal Practice.	May include: a) Taking the history of a patient. However, this activity is separate from the consultation which at all times must be conducted by the licensed doctor b) Conducting standard neurological, orthopedic, physical and chiropractic examinations, c) Administering physical therapy treatments as an adjunct to chiropractic adjustment, provided the physical therapy treatment is conducted under the adequate supervision of a licensed doctor of chiropractic. Does not include: a) Performing such examinations which require diagnostic or analytic interpretations nor b) Rendering a conclusion either verbally or in writing regarding a patient’s physical condition 16 CA ADC § 312. Illegal Practice.	No. “An unlicensed individual is defined as any person, including a student or graduate of chiropractic institution, who does not hold a valid California chiropractic license. An exemption is hereby created for student doctors participating in board approved preceptorship programs” §312 Illegal Practice.”
Colorado	2565 (2017)		Yes. “direct supervision”	A chiropractic assistant may perform his or her duties under the direct supervision of a chiropractor and only in those areas in which the chiropractic assistant has the requisite skill and training. Does not include: a diagnosis, an adjustment, or acupuncture, or any duties outside the CA’s requisite skill and training. CO ST 12-33-128.	

Connecticut	995 (2018)		No language identified		
Delaware	352 (2013)		No language identified		
DC	160 (2017)			4810 Practice of Chiropractic Assistants. A chiropractic assistant may not perform the following: 4810.1 A chiropractic assistant may perform the following under the supervision of a licensed doctor of chiropractic: (a) Case histories, if properly trained by the supervising chiropractor; (b) Diagnostic testing, but must have specialized training by a program or institution listed in Subsection 4807.1; (c) Therapeutic ancillary procedures, but must have specialized training by a program or institution listed in Subsection 4807.1, and in addition, have specific written instructions from the supervising licensed chiropractor with ancillary privileges; and (d) The taking of x-rays, but must have specialized training by a program or institution listed in Subsection 4807.1, and in addition, have specific written instructions from the supervising licensed chiropractor. 4810.2 (a) Any tasks requiring manipulative or adjustment techniques; (b) The rendering of diagnostic results or interpretations; or (c) Giving treatment advice without direct written orders from the Doctor of Chiropractic.	

Florida	6, 069 (2017)	3,361	Yes Direct Supervision defined: requires the physical presence of the licensed chiropractic physician for consultation and direction of the actions of the registered chiropractic assistant or a chiropractic student enrolled in a community-based intern program”	Includes: Assist[ing] with patient care management, executes administrative and clinical procedures, and often performs managerial and supervisory functions. Registered chiropractic assistant duties: (a) Perform clinical procedures, which include: 1. Preparing patients for the chiropractic physician's care. 2. Taking vital signs. 3. Observing and reporting patients' signs or symptoms. (b) Administer basic first aid. (c) Assist with patient examinations or treatments other than manipulations or adjustments. (d) Operate office equipment. (e) Collect routine laboratory specimens as directed by the chiropractic physician or certified chiropractic physician's assistant. (f) Administer nutritional supplements as directed by the chiropractic physician or certified chiropractic physician's assistant. (g) Perform office procedures required by the chiropractic physician or certified chiropractic physician's assistant under direct supervision of the chiropractic physician or certified chiropractic physician's assistant. FL ST § 460.4166	Registration. A “registered chiropractic assistant.” (3) Registration. Registered chiropractic assistants may be registered by the board for a biennial fee not to exceed \$25.
Georgia	3563 (2018)		Yes. “direct supervision” defined: shall mean that a licensed doctor of chiropractic is	Does not include: Performing adjustments of the articulations of the human body May include: (c) A chiropractic assistant may administer modalities, in accordance with <u>O.C.G.A §43-9-16</u>, to patients only in those	

			physically present in the facility or office and is responsible for all practices and procedures performed under his or her direct order.	instances in which the assistant is acting under the direct order and direct supervision of a licensed chiropractor certified by the Board to utilize these modalities. GA ADC 100-15-.01.	
Hawaii	479 (2018)		No language identified		
Idaho	659 (2018)		Unclear. “The chiropractic physician shall be responsible and liable for: a) direct supervision; b) any acts of the assistant in performance of chiropractic practice; c) proper training and capabilities of the CA before authorization is given to perform any chiropractic practice.” IDAPA 24.03.01. Direct <i>personal</i> supervision defined as: the licensed chiropractic physician is physically present in the clinic, is monitoring the	A chiropractic assistant is defined as any individual functioning in a dependent relationship with a supervising chiropractic physician in the performance of any chiropractic practice. Chiropractic Physician Responsible and Liable. The chiropractic physician shall be responsible and liable for: a. Direct supervision; b. Any acts of the assistant in the performance of chiropractic practice; c. Proper training and capabilities of the chiropractic assistant before authorization is given to perform any chiropractic practice. Does not include: a) Manipulate articulations; b) provide diagnostic results or interpretations to the patient; c) provide treatment advice to any patient without instructions from the supervising Chiropractic Physician IDAPA 24.03.01. Rules of State Board Chiropractic Physicians. § 550. Chiropractic Assistants.	None identified.

			activities of the supervisee, and is available to intervene, if necessary.		
Illinois	4,077 (2018)		No language identified		
Indiana	1262 (2016)		No language identified		
Iowa 				C. A chiropractic physician shall not delegate to the chiropractic assistant the following: (1) Services outside the chiropractic physician's scope of practice; (2) Initiation, alteration, or termination of chiropractic treatment programs; (3) Chiropractic manipulation and adjustments; (4) Diagnosis of a condition. IA ADC 645-43.12 (151) Chiropractic Assistants.	Yes. Requirements: complete a CA training program that includes training and instruction on the use of chiropractic physiotherapy procedures related to services to be provided by the CA. Any chiropractic assistant training program shall be provided by an approved CCE-accredited chiropractic college or a chiropractic state association. CAs performing active chiropractic physiotherapy procedures: required to complete 12 hours of instruction, of which 6 hours shall be clinical experience under the supervision of the chiropractic physician. CAs performing passive chiropractic physiotherapy: required to complete 12 hours of instruction, of which 6 hours shall be clinical experience under the supervision of the chiropractic physician. IA ADC 645-43.12(2)(151) Education requirements for chiropractic assistants.
Kansas	1,118 (2016)		No language identified		
Kentucky	898 (2017)		No language identified		

Louisiana	737 (2017)	425			Only certification for X-ray Chiropractic Assistants identified “B. The Board shall certify and issue an appropriate certificate of proficiency to any chiropractic assistant who files with it a certified application therefore, accompanied by the payment of the fee fixed by law, together with evidence verified by oath and satisfactory to the board that he: (1) Is eighteen years of age. (2) Is a high school graduate or equivalent. (3) Has completed a course in x-ray function and safety approved by the board, including passage of a proficiency examination given in conjunction with the course.” § 2828. Chiropractic assistants performing chiropractic x-ray functions; certification; requirements; penalties.
Maine	645 (2018) DCs- 406	134	No. Under the supervision and control of a licensed chiropractor as long as that individual has successfully completed a training program recognized by the board. "Supervision and control" may not be construed as requiring the personal presence of the supervising and controlling chiropractor at the place where those services are rendered, unless physical	May include, but is not limited to: a) history taking, b) limited physical examinations, therapeutic modalities, c) similar therapies, and d) rehabilitation, provided that such training is included within Board approved programs of chiropractic colleges accredited by the USOE. Does not include: a) any tasks requiring the implementation of manipulative or adjustive techniques, b) the rendering of diagnostic results or interpretations, or the rendering of treatment advice. ME ADC 02-297 Ch. 1, § 3	Yes. Requirements: A. Must be at least eighteen (18) years of age; B. Must be a high school graduate or have successfully completed an equivalent educational Program; C. Must have successfully completed a course of study approved by the Board after January 1, 1990, or completed a course of study provided by a chiropractic college accredited by the CCE, or by any other USOE approved national chiropractic accrediting agency; and D. Must have successfully passed an examination with a minimum score of 75%, which has been offered pursuant to a course of study approved by the Board or by a chiropractic college accredited by the CCE, or by any other USOE approved National Chiropractic Accrediting Agencies; or E. Must have been employed as an assistant for a minimum of three (3) years immediately prior to the

			presence is necessary to provide patient care of the same quality as provided by the chiropractor. <i>Note: Maine has a Chiropractic Assistants Association</i>		enactment of this statute, submit valid proof of such employment, and met the requirements of A and B. ME ADC 02-297 Ch. 5, § 1. Qualifications for certification. Fees: -License fee: \$15.00 -Criminal background check fee: \$21.00 Term: annual, December 31 (Found at https://www.maine.gov/pfr/professionallicensing/professions/chiropractors/certified_assistant.html)
Maryland	893 (2018)	772	No. “Direct supervision” defined: supervision provided by a supervising chiropractor who is personally present and immediately available in the area where the procedures are performed to give aid, direction, and instruction when certain procedures or activities are performed.	MD ADC 10.43.07.08. Activities that may be performed by Chiropractic Applicants and Assistants without Direct Supervision Only a chiropractic applicant or assistant may perform the following activities without the direct supervision of a supervising chiropractor: A. Taking the height, the weight, and vital signs of a patient and recording them in the patient record; B. Assisting in the dressing, undressing, and draping of a patient; C. Removing and applying assistive and supportive devices; D. Observing treatments and modalities as authorized by the supervising chiropractor; E. Providing preprinted non-patient specific health and chiropractic concepts and information that has been approved and reviewed by the supervising chiropractor; and F. Taking patient histories. MD ADC 10.43.07.09. Activities that may be performed by Chiropractic Applicants and Assistants Under Direct Supervision of a supervising chiropractor.	Licensure. Licensure requirements: CAs a) Be a high school graduate and must receive Board approved classroom training consisting of 103 hours (24 hours of anatomy, 76 hours of physical therapy, 3 hours of jurisprudence) b) Successfully complete 480 hours of in-service clinical training by a certified Supervising Chiropractor, reported by the Supervising Chiropractor. The report log must be submitted at the time of the application for the examination. c) Must have a clean record with no serious history of arrests, convictions or addictions to drugs, alcohol or prescription medication and no disabilities that would endanger health or safety of a patient. d) Successfully complete a multiple choice subject matter exam consisting of 100 professional questions and 20-30 risk management/jurisprudence questions. e) Obtain an employment commitment with a Board Certified Supervising Chiropractor who will submit a CA Notification of Employment Form to the Board

			a) A chiropractic applicant or assistant may perform the following activities only under the direct supervision of a supervising chiropractor who is in the treatment area: A. Functional activities of daily living and hygiene; B. Gait practice and ambulation; C. Demonstration, administration, and observation of therapeutic exercises as prescribed by a supervising chiropractor; D. Assist in moving a patient within the treatment area; E. Contrast baths; F. Hot and cold packs; G. Hubbard tank; H. Infrared, ultraviolet irradiation, non-laser light therapy, and non-ablative therapeutic laser; I. Muscle stimulation; J. Electrotherapy; K. Paraffin baths; L. Traction therapy; M. Ultrasound; N. Whirlpool; O. Diathermy; P. Therapeutic massage, if licensed under Health Occupations Article, Title 6, Annotated Code of Maryland; and Q. Mechanical or computerized examination procedures for the sole purpose of collecting data subject to the following conditions: (1) All data will later be used and interpreted by the chiropractor to form a diagnosis and treatment plan; and (2) No test may be performed that requires diagnosis or interpretation as part of the data collecting or testing procedure. MD ADC 10.43.07.10. Chiropractic Applicant or Assistant Prohibited Acts. b) A chiropractic applicant or assistant may not engage in any of the following activities:	f) Obtain a current CPR certification (provider level) by the American Heart Association or American Red Cross or bona fide affiliate g) Upon completion of the foregoing, satisfactorily take/pass the Board CA proficiency exam and jurisprudence exam (Found at: https://health.maryland.gov/chiropractic/Pages/licensureca.aspx)
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				A. Communicate an evaluation or diagnosis to a patient; B. Perform an act requiring the professional skill or judgment of a licensed chiropractor; C. Take x-rays or position patients for x-rays; D. Perform orthopedic or neurological tests; E. Engage in dietary or nutritional advice or counseling; or F. Other acts not within the chiropractic applicant or assistant's specified scope.	
Massachusetts					None. <u>Policy:</u> "... When delegating permissible procedures, the Board recommends that chiropractors adhere to the following guidelines. 1. The patient must be properly evaluated by the licensed chiropractor and a determination made that a supportive procedure or therapy is clinically indicated before any supportive procedure or therapy may be applied to the patient by an unlicensed assistant during the same patient visit. 2. The licensed chiropractor must make all clinical decisions regarding the type of supportive procedure or therapy to be applied, the location to which such supportive procedure or therapy will be applied, and the duration and intensity of the supportive procedure or therapy where applicable. 3. The licensed chiropractor must generally supervise the unlicensed assistant in the application of any supportive procedure or therapy by being present on the premises and readily available to provide direction and guidance to the unlicensed assistant throughout the performance of the supportive procedure or therapy.

					4. The licensed chiropractor must ensure that the assistant possesses a sufficient level of education and training in the application and use of the supportive procedure or therapy. The licensed chiropractor must maintain written documentation of the education and training possessed by each office assistant regarding the proper application and use of supportive procedures and therapies. 5. The licensed chiropractor must properly report and code any supportive procedure or therapy in a manner consistent with appropriate reporting and coding requirements.” Massachusetts State Government, <i>Board Policy Guidelines on Informed Consent</i> (found at: https://www.mass.gov/policy-statement/board-policies-and-guidelines-chiropractor#policy-guideline-on-the-performance-of-chiropractic-supportive-procedures-and-therapies-by-unlicensed-assistants)
Michigan			No language identified		
Minnesota	3,145 (2018)		No language identified		
Mississippi	348 (2019)	327	No “supervision and control” may not be construed as requiring the personal presence of the supervising and controlling chiropractor at the place where those services are rendered, unless physical presence is necessary to provide patient care of the same quality	Does not prohibit a chiropractic assistant from rendering ancillary services or procedures used in chiropractic practice, other than the adjustments or manipulative techniques, if those services are rendered under the supervision and control of a licensed chiropractor as long as the chiropractic assistant has successfully completed a training program recognized by the board. Miss. Code Ann. § 73-6-5. May include: Access to patient records and participating in direct patient care under direct supervision of the chiropractor.	Certification. Requirements: 1. Educational qualification. High school diploma or GED certificate. (Exceptions to this requirement will be at the discretion of the Board.) 2. Continuing education. Six (6) classroom hours annually at a course of study approved by the Mississippi State Board of Chiropractic Examiners. These hours must be received within six (6) months of employment. ...

			provided by the chiropractor.		30 MS ADC Pt. 2001, R. 10
Missouri	2,428 (2017)		No language identified		
Montana	407 (2016)		No language identified		
Nebraska	737 (2017)		No language identified		No.
Nevada	614 (2019)	292	Yes. “Direct supervision” means that the supervising licensee or licensed provider of health care, as appropriate, is actually present in the chiropractic facility during the period of supervision.	May include: a) Ancillary services relating to chiropractic, other than chiropractic adjustment, under the supervision and control of the chiropractor a. The services must be ones the board authorizes the CA to perform NRS 634.125	Yes. The Board shall specify the formal training, including at least 12 months of study or the equivalent, which such an applicant must have completed before the Board awards the applicant a certificate as a chiropractor's assistant. NRS 634.123. CAs must: b) pass the Board's jurisprudence and chiropractor's assistant examination, which are currently administered by the Board twice per year. c) fulfill 6-months of full time, on-the-job training (21 hours/week or more) or 12-months of part-time on-the-job training. d) Pursuant to NAC 634.130, chiropractor's assistants must renew their certificates biennially and 12 hours of continuing education must accompany their renewal. Requirements from the Chiropractic Physicians' Board of Nevada: (found at: https://www.leg.state.nv.us/App/InterimCommittee/REL/Document/11620).

New Hampshire	433 (2016)		No language identified		
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New Jersey	3262 (2015)	Yes. “Supervision” means the oversight provided by a licensed chiropractor of the clinical services performed by a licensed chiropractic assistant, and for which the chiropractor shall be on the premises at all times and readily available to instruct the licensed chiropractic assistant throughout the performance of the clinical services.” NJ ADC 13:44E-2.7	May include: “1. Completing a medical history of a patient; 2. Preparing the patient for chiropractic care; 3. Writing into the patient record subjective complaints from the patient and objective findings provided by the licensee; 4. Performing a urinary dipstick analysis; 5. Taking and recording vital signs; 6. Preparing and developing X-ray films; 7. Providing patient education activities; 8. Providing instruction in activities of daily living; 9. Administering cryotherapy, hot packs, non-fulcrum mechanical traction without restraints (such as roller tables and roller chairs) and non-invasive surface screening; 10. Setup and preparation of the patient for the administration of physical modalities; 11. Administering thermal, sound, light, mechanical, and electrical modalities and hydrotherapy, including, but not limited to, the following: i. Ultraviolet (B and C bands) or electromagnetic rays including, but not limited to, deep heating agents, microwave diathermy, short-wave diathermy, and ultrasound; ii. Electro-therapy devices powered by an alternating current or any interferential devices, as set forth in (a) above; or iii. Decompression therapy devices or mechanical traction; and 12. Instructing and monitoring prescribed rehabilitative exercises.” NJ ADC 13:44E-2.7. Delegable tasks or functions of chiropractic aides and licensed chiropractic assistants.	2. “Licensed chiropractic assistant” means a person who is licensed pursuant to the provisions of sections 5 through 8 of <u>P.L. 2015, c. 283</u> and the rules set forth in this subchapter and in N.J.A.C. 13:44E-4 to practice chiropractic assistance under the supervision of a licensed chiropractor. NJ ADC 13:44E-2.7.
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New Mexico	668 (2018)		Yes “under the supervision of the chiropractic physician” defined: “(3) the chiropractic physician must be physically present in the same building and immediately available in order for the chiropractic assistant to treat the patient.”	May include: Under the direct supervision of the chiropractic physician: a) perform diagnostic tests and b) administer the use of any or all natural agencies imbued with the healing act such as a. food, water, heat, cold, electrical mechanical appliances, herbs, nutritional supplements and homeopathic remedies NM ADC 16.4.19.8 Chiropractic Assistant	Not specified which. Requirements: a) high school graduation or equivalent with a minimum of three months of supervised training in the specific duties and procedures the chiropractic assistant will perform. NM ADC 16.4.19.8 Chiropractic Assistant
New York	5248 (2018)		No language identified		
NC	2049 (2019)			"Chiropractic clinical assistant" means a nonlicensed employee of a chiropractic physician whose duties include (i) collecting general health data, such as the taking of an oral history or vital sign measurements, (ii) applying therapeutic procedures, such as thermal, sound, light and electrical modalities, and hydrotherapy, and (iii) monitoring prescribed rehabilitative activities. Nothing in this section shall be construed to allow a chiropractic clinical assistant to provide a chiropractic adjustment, manual therapy, nutritional instruction, counseling, or any other therapeutic service that requires individual licensure." § 90-143.4. Chiropractic clinical assistants; certification of competency.	Certification. An applicant for certification under this section shall be (i) at least 18 years of age, (ii) a high school graduate or the equivalent, (iii) of good moral character, and (iv) able to demonstrate proficiency in the following subjects: 1. Basic anatomy. 2. Chiropractic philosophy and terminology. 3. Utilization of standard therapeutic modalities. 4. Contraindications and response to emergencies. 5. Jurisprudence and patient privacy protection. § 90-143.4. Chiropractic clinical assistants; certification of competency. To apply for the Certified Chiropractic Assistant certification examination, you must complete #1 and send items 2-5 listed below to the Board office no later than 15 days prior to the exam. 1. Completed Education Hours. 18 online and six (6) classroom.

					2. Completed CA Application. 3. Copy of your diploma or obtain transcripts for the following: High School, GED, or equivalency. 4. Copy of Driver's License or Birth Certificate. 5. An application fee of \$20. (found at: https://ncchiroboard.com/certified-chiropractic-assistant/)
ND	438 (2018)	129	Yes “Direct Supervision” defined: requires the chiropractor to be on the premises at all times and readily available to instruct the certified chiropractic clinical assistant throughout the performance of the clinical services. N.D. Cent. Code, § 43-06-16.1	“The certified chiropractic clinical assistant may assist the chiropractor in patient care involving physiotherapy, electrotherapy, hydrotherapy, chiropractic rehabilitative therapy, administrative processes, and other activities as needed to assist in the practice of chiropractic. The certified chiropractic clinical assistant may perform delegated duties commensurate with the certified chiropractic clinical assistant's education and training,” A certified clinical assistant may not: a) evaluate, interpret, design, or modify established treatment programs of chiropractic care or violate any statute. b) participate in clinical decisionmaking, c) render manipulative chiropractic care, d) create or change the course of a chiropractic treatment plan, or e) represent themselves as independent health care providers. f) perform medical imaging unless also licensed under chapter 43-62 or upon meeting an exception from that chapter. N.D. Cent. Code, § 43-06-16.1. Certified chiropractic clinical assistant.	Certification. To be certified as a chiropractic clinical assistant, an applicant must provide evidence satisfactory to the board the applicant: a. Graduated from high school, or holds a graduate equivalency degree. b. Is at least eighteen years of age. c. Successfully completed the certified chiropractic clinical assistant program and examination by the federation of chiropractic licensing boards. (<i>Some exceptions apply</i>) d. Is of good moral character and submits documentation of good moral character as prescribed by the board, including criminal records review. e. Completed an application in a manner and form provided by the board. f. Paid all applicable fees relative to the application process as determined by the board. g. Received practical experience to the extent required to demonstrate competency to safely provide patient care pertinent to the

					chiropractic office at which the certified chiropractic clinical assistant is employed. ... “4. A minimum examination score of seventy-five percent is required to obtain certification. . . .” “5. The fee for renewal of the certification is fifty dollars per year. Certificate renewal is March first of every year.” Renewal: 6 hours of continuing education every 2 years. These hours must be a program approved by providers of approved continuing education, a seminar sponsored by the North Dakota chiropractic association and approved by the board, or a seminar approved for continuing education by another state's board of chiropractic examiners or equivalent. . . . N.D. Cent. Code, § 43-06-16.1.
Ohio	2,532 (2017)		Yes “(D) A licensed chiropractic physician must properly supervise all unlicensed supportive personnel to whom responsibilities are delegated. Properly supervise within the meaning of this rule is defined as on-site initial and ongoing direction, procedural guidance, observation, and evaluation by a licensed chiropractic physician.”	May include: “(1) Taking measurements for height, weight, blood pressure, respiration, pulse, and temperature; (2) Recording observable signs and symptoms; (3) Collecting bodily fluids for diagnostic purposes; (4) Applying hot and/or cold packs; (5) Applying mechanical traction; (6) Applying electrical stimulation; (7) Applying vasopneumatic devices; (8) Applying diathermy; (9) Applying therapeutic ultrasound; (10) Instruction and supervision of therapeutic exercises; (11) Instruction and supervision of therapeutic procedures and activities; (12) Instruction and supervision of neuromuscular reeducation; (13) Low level laser therapy up to and including class IV lasers; (14) Assist patients to safely perform activities related to the development of strength and endurance; (15) Other services or procedures as deemed appropriate by the board.” Rule 4734-8-02. Unlicensed Supportive Personnel.	No. (C) . . . Unlicensed supportive personnel do not hold professional licensure and work under the direction of a chiropractic physician utilizing their education, training, and/or experience to perform designated tasks and duties related to the practice of chiropractic. This does not include any activity that would require performance, clinical interpretation and/or treatment by a licensed professional. Rule 4734-8-02. Unlicensed Supportive Personnel.

Oklahoma	838 (2017)			The supervisory chiropractic physician shall only delegate services to a certified chiropractic assistant, and other employees which services are within the scope of practice of the chiropractic physician. Such delegation may only be made in a manner consistent with the Chiropractic Practice Act or Rules. Does not include: a) Performing independent patient examinations b) Diagnosing conditions c) Determining or changing a regimen of patient care/case management d) Performing chiropractic manipulation or adjustments e) Performing acupuncture f) Unlawfully disclosing patient information g) Violating any portion of the Chiropractic Act or Rules 140:30-3-7. Prohibited acts	Certification. Requirements: Must have taken a 12 hour training course approved by the Board before taking the certified chiropractic assistant exam offered by the OK Board of Chiropractic. The applicant must receive a seventy (70%) or higher to pass. Six (6) hours of continuing education every two (2) years beginning the year following certification by the Board. 140:30-3-2. Application for Certification; 140:30-3-3. Certified chiropractic assistant examination <i>Exemptions apply to applicants with certain amounts of hours employed by a licensed Oklahoma chiropractic physician.</i>
Oregon	1,195 (2017)		Yes “Direct supervision” the supervising chiropractor must be on the premises	May include: a) physiotherapy, b) electrotherapy and c) hydrotherapy, d) taking vitals such as height, weight, blood pressure, temperature, pulse, respiration and/or body fat percentages, e) and other duties as described by the Board Does not include: a) performing physical examinations, b) taking initial histories, c) taking X-rays (unless properly licensed), d) interpretation of postural screening,	Certification. Requirements: (2) Chiropractic assistants may be certified upon compliance with the following: (a) The chiropractic assistant applicant shall successfully complete a Board approved training course. The initial training course shall be at least twelve hours in length, of which eight hours shall be didactic training and four hours shall be practical training. (A) The practical training must be in physiotherapy, electrotherapy and hydrotherapy administered by a health care provider licensed to

				e) performing manual muscle testing, or osseous adjustments or manipulations, or f) other tasks prohibited by the Board OR ADC 811-010-0110 Chiropractic Assistants.	independently provide those therapies. ... (C) The initial training must have been completed within 60 days preceding the application submission date. (b) The applicant shall complete an application packet, and an open book examination administered by a national testing agency. (c) If an applicant has a certificate or license from another state and adequate documentation of training, the Board may waive the requirement for the initial training course. (3) Prior to initial certification, the training course verification form, completed application packet, passing examination results, and fees in the following amounts shall be submitted to the Board: (a) A non-refundable application fee - \$50; (b) A non-refundable examination fee \$35; and (c) An initial certification fee - \$50. (e) In the event the Board requires the NBCE chiropractic assistant examination in lieu of the Board's examination, the fee in subsection (b) will be waived. ... (5) The applicant shall be at least 18 years of age. OR ADC 811-010-0110
Pennsylvania	4,173 (2019)		No language identified		
Rhode Island	248 (2019)		No language identified		

South Carolina	1,571 (2016)		No language identified		
South Dakota	439 (2018)	231	Yes. Direct Supervision defined: “personal presence and availability of the supervising chiropractor where the chiropractic healthcare services are rendered.”		Certificate of Registration Any person who practices or attempts to practice as a chiropractic assistant without first having secured a certificate of registration from the Board of Chiropractic Examiners and an annual renewal is guilty of a Class 1 misdemeanor. S.D. Codified Laws § 36-5-29. Minimum training requirements: a) Graduation from high school or graduate equivalency degree (GED) b) Attainment of 18 years of age c) Successful completion of an approved program or course of study consisting of at least 20 hours in chiropractic assisting that includes coursework in basic chiropractic assistant duties, introduction to physiotherapy, use of modalities, rehabilitation and exercise programs as designed by the chiropractor, evaluations, and other programs as designated by the board; and d) Certification in cardiopulmonary resuscitation (CPR) 20:41:15:01. Minimum training requirements.
Tennessee	1,195 (2018)	531	No. “does not require the physical presence of the chiropractic physician(s) at all times at the site where the services are being provided. However, it does require that the chiropractic physicians have his/her primary practice physically	Includes: a) offering physical agent modalities and rehabilitation advice and services to the public, specifically and only on orders from a duly licensed physician TN ADC 0260-05-.10; TN ADC 0260-05-.20.	Certification. (1) To become certified as a chiropractic therapy assistant in Tennessee, a person must comply with the following procedures and requirements prior to submitting an application: (a) Be at least eighteen (18) years of age. (b) Be of good moral character. (c) Be a high school graduate or equivalent. (d) Complete prior to the date of examination a minimum combined total of fifty (50) hours of instruction approved by any board member or board designee, subject to full board approval,

			present at the site where the services are being provided within a reasonable amount of time.”		and which shall include but not be limited to such subject material as anatomy, physiology, patient protection, safety, emergency procedures, professional boundaries training, chiropractic therapy, and rehabilitation techniques. (e) Provide proof of twelve hundred (1,200) hours of clinical internship under direct supervision. The supervisor is required to provide the Board of Chiropractic Examiners a report concerning the certificate holder’s performance in each area of internship on forms provided by the board to become certified as a chiropractic therapy assistant. Such hours shall be completed within one (1) year from the date of examination, unless an extension is requested and granted by the Board. (f) Pass to the satisfaction of the board an examination conducted to determine fitness for practice as a chiropractic therapy assistant pursuant to rule 0260-05-.08. TN ADC 0260-05-.04.
Texas	5,709 (2018)		Yes. “must be on-site at the time of the adjustment or manipulation.” A licensee (licensed chiropractor) must be on-call when any or all treatment is provided under the licensee's direction unless there is another licensee present on-site or designated as being on-call. On-call	May include: (f) . . . to perform a task or procedure that assists the doctor of chiropractic in making a diagnosis, prescribing a treatment plan or treating a patient if the performance of the task or procedure does not require the training of a doctor of chiropractic in order to protect the health or safety of a patient, such as: (1) taking the patient's medical history; (2) taking or recording vital signs; (3) performing radiologic procedures; (4) taking or recording range of motion measurements; (5) performing other prescribed clinical tests and measurements;	(1) Requisite education may be determined by a license, degree, coursework, on-the-job training, or relevant general knowledge. (2) Requisite training may be determined by instruction in a specific task or procedure, relevant experience, or on-the-job training. (3) Requisite skill may be determined by a person's talent, ability, and fitness to perform a specific task or procedure. 22 TX ADC § 78.3. Delegation of Authority.

			means that the licensee must be available for consultation within 15 minutes either in person or by other means of telecommunication. 22 TX ADC § 78.3. Delegation of Authority.	(6) performing prescribed physical therapy modalities, therapeutic procedures, physical medicine and rehabilitation, or other treatments as described in the American Medical Association's Current Procedural Terminology Codebook, the Centers for Medicare and Medicaid Services' Health Care Common Procedure Coding System, or other national coding system; (7) demonstrating prescribed exercises or stretches for a patient; or (8) demonstrating proper uses of dispensed supports and devices.” (g) A licensed chiropractor may not allow or direct a person: “(1) to perform activities that are outside the licensee's scope of practice; (2) to perform activities that exceed the education, training, and skill of the person or for which a person is not otherwise qualified and properly trained; or (3) to exercise independent clinical judgment unless the person holds a valid Texas license or certification that would allow or authorize the person to exercise independent clinical judgment.” 22 TX ADC § 78.3. Delegation of Authority.	
Utah	949 (2016)		Yes. “The supervising chiropractic physician . . . must always be available to provide advice, instruction and consultation”	(2) The Supervising chiropractic physician shall never delegate the following to a chiropractic assistant: (a) adjustment of the articulation of the spinal column; (b) diagnosis of the articulation of the spinal column; (c) manipulation of the articulation of the spinal column; (d) therapeutic positioning of the articulation of the spinal column; and (e) administration of injections per Subsection R156-73-501(14). UT ADC R156-73-502.	

Vermont	238 (2019)		No language identified		
Virginia	1,779 (2018)		No language identified		
Washington	2545 (2017)		No language identified		
West Virginia	316 (2017)			May include, but not limited to: a) set up and administration of electrical muscle stimulation, ultrasound, traction, massage, diathermy, hydrocollation, cryotherapy, blood pressure examination, range of motion examination and obtaining and recording patient histories. W. Va. Code St. R. § 4-1-14. Chiropractic Assistants.	No. 14.2. The licensed chiropractor shall ensure that a chiropractic assistant receives proper training before beginning his or her duties. The licensed chiropractor shall annually reevaluate each chiropractic assistant to ensure that the chiropractic assistant is competent and qualified to perform the assigned duties and is in compliance with subsection 14.3. The licensed chiropractor may provide the required training or may require that the chiropractic assistant acquire the required training from a program accredited by the Council on Chiropractic Education (CCE) or the West Virginia Board of Chiropractic. The licensed chiropractor shall document each annual review and all training received by each chiropractic assistant employed and keep the documentation in the chiropractic assistant's employee file. W. Va. Code St. R. § 4-1-14. Chiropractic Assistants.
Wisconsin	2,489 (2017)		No language identified		
Wyoming	192 (2018)				“CAs are not regulated by the Board. The Board does highly recommend that CAs in Wyoming obtain the <u>Certified Chiropractic Clinical Assistant (CCCA)</u> certification through the Federation of Chiropractic Licensing Boards (FCLB) to ensure a high standard of care for Wyoming patients.”

.03 Refunds.

- A. Fees are nonrefundable with the exception of the examination fee.
- B. The examination fee may be refunded at the discretion of the Board if the applicant's written request is received by registered mail at least 14 days before the examination.

.04 Assessment for Health Care Professionals.

The applicant shall pay at the time of license renewal a fee for health care professionals, assessed by the Maryland Health Care Commission (MHCC), as specified in [COMAR 10.25.02](#).

Chapter 07 Chiropractic Assistants

Administrative History

Effective date: May 9, 1994 (21:9 Md. R. 751)

[Regulation .01B](#) amended effective June 9, 2003 (30:11 Md. R. 735)

[Regulation .02](#) amended effective June 9, 2003 (30:11 Md. R. 735)

[Regulation .03B](#), C amended effective June 9, 2003 (30:11 Md. R. 735)

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[Regulation .05B](#) amended effective August 6, 2001 (28:15 Md. R. 1398)

[Regulation .06](#) amended effective June 9, 2003 (30:11 Md. R. 735)

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[Regulation .11](#) amended effective August 6, 2001 (28:15 Md. R. 1398)

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[Regulation .09C](#) amended effective January 6, 2014 (40:26 Md. R. 2164)

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[Regulation .03](#) amended effective April 4, 2022 (49:7 Md. R. 467)

[Regulation .08](#) amended effective April 4, 2022 (49:7 Md. R. 467)

[Regulation .10](#) amended effective April 4, 2022 (49:7 Md. R. 467)

[Regulation .11](#) amended effective April 4, 2022 (49:7 Md. R. 467)

Authority

Health Occupations Article, §§[3-205](#), [3-302](#).1, and 3-404, Annotated Code of Maryland

.01 Definitions.

A. In this chapter, the following terms have the meanings indicated.

B. Terms Defined.

- (1) “Board” means the Maryland Board of Chiropractic Examiners.
- (2) “Chiropractic assistant” means an individual who is registered by the Board to perform the duties authorized under this chapter.
- (3) “Chiropractic assistant program” means a structured 1-year program of clinical chiropractic training under a Board-licensed supervising chiropractor in order to qualify and apply for a registration as a Maryland chiropractic assistant.
- (4) “Chiropractic assistant trainee” means a person who is:
 - (a) Undergoing training to become a chiropractic assistant; or
 - (b) Applying to the Board for registration as a chiropractic assistant.
- (5) “Direct supervision” means supervision provided by a supervising chiropractor who is personally present and immediately available in the area where the procedures are performed to give aid, direction, and instruction when certain procedures or activities are performed by a chiropractic assistant or a chiropractic assistant trainee.
- (6) “Established patient” means an individual who has received professional services from a practicing supervising chiropractor who belongs to the same group practice in the past 3 years.
- (7) “Inactive status” means the period of time that a registration is on hold.
- (8) “Indirect supervision” means supervision by a supervising chiropractor that is provided by a phone call or text to give aid, direction, and instructions when certain activities, as set forth under [Regulation .10 of this chapter](#), are performed by a chiropractic assistant.
- (9) “Practice day” means the hours of physical practice with a patient, excluding the office’s designated lunch or exclusive administrative time.
- (10) “Supervising chiropractor” means a chiropractor licensed by the Board in chiropractic with the right to practice physical therapy as set forth in [Health Occupations Article, §3-301\(c\)](#), [Annotated Code of Maryland](#) [↗](#), and approved as a supervising chiropractor by the Board.

.02 Chiropractic Applicant or Assistant Qualifications and Training.

- A. At the time of application on the Request to Employ form for training, an applicant shall:
- (1) Be 18 years old or older;
 - (2) Be of good moral character;
 - (3) Be a U.S. Citizen or hold federal documentation authorizing employment;
 - (4) Be proficient in the English language sufficiently to allow for clear interaction with patients;
 - (5) Be enrolled in a Board-approved Cardiopulmonary Resuscitation (CPR) class within 4 months of the commencement of the chiropractic assistant training or be currently CPR certified;
 - (6) Be a graduate of a high school or hold a GED; and
 - (7) Have any foreign transcripts professionally interpreted and certified
- B. An applicant who otherwise qualifies for being employed within the 1-year chiropractic assistant training program shall:
- (1) Complete the profile portion of the application;
 - (2) Provide the supervising chiropractor with:
 - (a) The requested documentation;
 - (b) A diploma or transcripts;
 - (c) A valid State picture identification; and
 - (d) An authorization to work in the U.S. for the application documentation, if applicable; and

- (3) Submit satisfactory evidence of having completed a State and national criminal history records check in accordance with [Health Occupations Article, §3-302](#).1, Annotated Code of Maryland.
- C. The supervising chiropractor shall complete and submit to the Board a legible application and documentation proving that the applicant meets the qualifications listed in [§A of this regulation](#).
- D. An applicant may not commence work or training until the supervising chiropractor receives an authorization letter from the Board.
- E. Within 120 days of the date of hire, the applicant shall:
 - (1) Satisfactorily complete the required CPR class;
 - (2) Enroll in a Board-approved chiropractic assistant 103-hour course of instruction; and
 - (3) Submit proof of completion of both requirements in a timely manner on the form provided by the Board.
- F. Within 1 calendar year of the date of hire, the applicant shall satisfactorily complete:
 - (1) A minimum of 520 in-service training hours, of which:
 - (a) The initial 20 hours shall consist of observation procedures as listed in [Regulation .09 of this chapter](#) and performed by the supervising chiropractor or registered chiropractic assistant; and
 - (b) The remaining 500 hours shall consist of direct supervision by a supervising chiropractor in the treatment area; and
 - (2) A 103 hour course of instruction from a Board-approved provider with a minimum of:
 - (a) 24 hours in anatomy and terminology;
 - (b) 3 hours in jurisprudence and risk management; and

(c) 76 hours in physical therapy modalities and indications.

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

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

Cross References

[10.43.07.05C\(1\)](#)

.03 Chiropractic Assistant Examinations and Registration.

A. A chiropractic assistant trainee who otherwise qualifies for registration is entitled to be examined as provided in this regulation.

B. The chiropractic assistant trainee shall pass a Board proficiency and jurisprudence examination.

C. The chiropractic assistant trainee shall:

(1) Pay to the Board as set forth in [COMAR 10.43.06](#):

(a) A nonrefundable application fee; and

(b) An examination fee; and

(2) Submit all fees, transcripts, and application documentation postmarked no later than 30 days before the examination date.

D. The Board shall:

(1) Give examinations to chiropractic assistant trainees at least twice a year, at the times and places that the Board determines;

- (2) Notify each qualified chiropractic assistant trainee of the time and place of examinations;
and
- (3) Determine the subject scope, form, and passing score for examination.

E. Reexaminations.

- (1) If the chiropractic assistant trainee fails the examination twice, the chiropractic assistant trainee may retake the examination only if the chiropractic assistant trainee:
 - (a) Pays the reexamination fee; and
 - (b) Completes additional minimum 10 hour refresher classroom training courses as approved by the Board in areas of deficiency.
- (2) A chiropractic assistant trainee who fails the examination twice may not perform in-service training duties in direct patient care or treatment under [Regulation .03 of this chapter](#).

- F. A chiropractic assistant shall notify the Board of any change in the name or electronic or physical address of the chiropractic assistant, in writing, within 60 days after the change occurs.
- G. A chiropractic assistant shall display the registration and any current renewal registration conspicuously in the space where the registration holder is engaged in practice, including in any temporary space, or in any exhibit location.

.04 Requirements for Achieving Supervising Chiropractor Status.

- A. Only a supervising chiropractor may work with or train a chiropractic assistant or applicant.
- B. Only an active, licensed chiropractor who holds physical therapy privileges and has no outstanding disciplinary orders may qualify for supervising chiropractor status.
- C. An applicant for supervising chiropractor status shall:
 - (1) Submit to the Board the required application and fee;

- (2) Successfully pass the Board supervising chiropractor examination and interview; and
 - (3) Satisfactorily follow Board regulations and statutes.
- D. The Board may deny, suspend, or revoke supervising chiropractor status for violation of the Board's statutes and regulations by the supervising chiropractor.

.05 Responsibilities of the Supervising Chiropractor.

The supervising chiropractor shall:

- A. Submit:
 - (1) The required Board Request to Employ form before undertaking any hands on training or coursework with any chiropractic assistant applicant; and
 - (2) All other Board-required reports and forms in a timely manner as determined by the Board.
- B. Notify the Board and course instructor or instructors of any change in status of any chiropractic applicant or assistant within 10 days of the change, including:
 - (1) Reasons for the change in status;
 - (2) Training received by the applicant or assistant;
 - (3) Hours completed by the applicant or assistant; and
 - (4) The applicant's or assistant's forwarding address;
- C. Maintain accurate, legible, and comprehensive records of all clinical training provided to the chiropractic applicant or assistant, including, but not limited to:
 - (1) Dates and times and duration of training as described in [Regulation .02 of this chapter](#);
 - (2) Modalities;
 - (3) Equipment used; and

- (4) Any other information as directed by the Board;
- D. Follow indirect supervision procedures set forth under [Regulation .10 of this chapter](#);
- E. Immediately produce the records described in [§C of this regulation](#) and [Regulation .10D\(1\) of this chapter](#) upon request or audit by the Board;
- F. Promptly:
 - (1) Report a chiropractic applicant or assistant not making satisfactory training progress; and
 - (2) Report before the Board as directed regarding the details of the training program issue;
- G. Maintain competency in knowledge of applicable laws and regulations and successfully complete any jurisprudence requirements that may be directed by the Board;
- H. Ensure that all patient records accurately and legibly reflect the extent and degree of the involvement or assistance of the chiropractic applicant or assistant;
- I. Submit the in-service training hours and verification of chiropractic applicant or assistant competency on a form provided by the Board within 30 days of completion of training or transfer of the chiropractic applicant or assistant to another supervising chiropractor;
- J. Be fully responsible for the safe and competent performance of the chiropractic applicant or assistant at all times; and
- K. Provide direct supervision to not more than five chiropractic assistants or applicants.

.06 Supervising Chiropractor Prohibited Acts.

- A. The supervising chiropractor may not:
 - (1) Delegate responsibilities in any manner to anyone not holding supervising chiropractor status;
 - (2) Leave the treatment area:

- (a) When treating a patient;
 - (b) When a chiropractic applicant is treating a patient; or
 - (c) During a chiropractic applicant's 20-hour observation period;
- (3) Permit a chiropractic applicant to treat a patient without the presence of the supervising chiropractor in the treatment area; or
- (4) Be unavailable by phone call or text when a chiropractic assistant is treating an established patient with an established treatment program as set forth under [Regulation .10B of this chapter](#).
- B. The license of a licensee who violates this regulation shall be subject to the penalties set forth in [COMAR 10.43.10](#).

.07 Activities That May Be Performed by Chiropractic Applicants and Assistants Without Direct Supervision.

A chiropractic applicant or assistant may perform the following activities without the direct supervision of a supervising chiropractor:

- A. Taking the height, the weight, and vital signs of a patient and recording them in the patient record;
- B. Assisting in the dressing, undressing, and draping of a patient;
- C. Removing and applying assistive and supportive devices;
- D. Observing treatments and modalities as authorized by the supervising chiropractor;
- E. Providing preprinted non-patient specific health and chiropractic concepts and information that has been approved and reviewed by the supervising chiropractor; and
- F. Taking patient histories.

.08 Activities That May Be Performed by Chiropractic Assistants or Chiropractic Assistant Trainees Under Direct Supervision of a Supervising Chiropractor.

A chiropractic assistant or a chiropractic assistant trainee may perform the following activities under the direct supervision of a supervising chiropractor who is in the treatment area:

- A. Functional activities of daily living and hygiene;
- B. Gait practice and ambulation;
- C. Demonstration, administration, and observation of therapeutic exercises as prescribed by a supervising chiropractor;
- D. Assist in moving a patient within the treatment area;
- E. Contrast baths;
- F. Hot and cold packs;
- G. Hubbard tank;
- H. Infrared, ultraviolet irradiation, non-laser light therapy, and non-ablative therapeutic laser;
- I. Muscle stimulation;
- J. Electrotherapy;
- K. Paraffin baths;
- L. Traction therapy;
- M. Ultrasound;
- N. Whirlpool;
- O. Diathermy;

- P. Therapeutic massage, if licensed under [Health Occupations Article, Title 6, Annotated Code of Maryland](#); and
- Q. Mechanical or computerized examination procedures for the sole purpose of collecting data subject to the following conditions:
- (1) All data will later be used and interpreted by the chiropractor to form a diagnosis and treatment plan; and
 - (2) No test may be performed that requires diagnosis or interpretation as part of the data collecting or testing procedure.

.09 Chiropractic Applicant or Assistant Prohibited Acts.

A chiropractic applicant or assistant may not engage in any of the following activities:

- A. Communicate an evaluation or diagnosis to a patient;
- B. Perform an act requiring the professional skill or judgment of a licensed chiropractor;
- C. Perform orthopedic or neurological tests;
- D. Engage in dietary or nutritional advice or counseling; or
- E. Other acts not within the chiropractic applicant or assistant's specified scope.

Cross References

[10.43.07.02F\(1\)\(a\)](#)

.10 Activities That May Be Performed by Chiropractic Assistants Under Indirect Supervision of a Supervising Chiropractor.

- A. Indirect supervision may only be provided by a supervising chiropractor to a chiropractic assistant who is treating an established patient.

B. A chiropractic assistant may perform the following activities under the indirect supervision of a supervising chiropractor to an established patient with an established treatment program for not more than 10 percent of the treatment time in a given 30 days, without exceeding 3 consecutive days in a given week:

- (1) Functional activities of daily living and hygiene;
- (2) Gait practice, ambulation, administration, and observation of therapeutic exercises as prescribed by a supervising chiropractor;
- (3) Assist in moving a patient within the treatment area;
- (4) Contrast baths;
- (5) Hot and cold packs;
- (6) Hubbard tank;
- (7) Infrared, ultraviolet irradiation, nonlaser light therapy, and nonablative therapeutic laser;
- (8) Muscle stimulation;
- (9) Electrotherapy;
- (10) Paraffin baths;
- (11) Traction therapy;
- (12) Ultrasound;
- (13) Whirlpool;
- (14) Diathermy;
- (15) Therapeutic massage, if licensed under [Health Occupations Article, Title 6, Annotated Code of Maryland](#); and

(16) Mechanical or computerized examination procedures for the sole purpose of collecting data subject to the following conditions:

- (a) All data will later be used and interpreted by the chiropractor to form a diagnosis and treatment plan; and
- (b) No test may be performed that requires diagnosis or interpretation as part of the data collecting or testing procedure.

C. A chiropractic assistant who participates in indirect supervision shall be:

- (1) In good standing with the Board; and
- (2) Trained and proficient in the office's indirect supervision protocol, which includes:
 - (a) Informed consent to the patient; and
 - (b) Immediate access to the supervising chiropractor.

D. The supervising chiropractor shall:

- (1) Prior to the implementation of indirect supervision, establish and make readily available an:
 - (a) Emergency procedures protocol; and
 - (b) Indirect supervision protocol;
- (2) Maintain a log of indirect supervision treatment, which includes:
 - (a) Patient's name or identification information; and
 - (b) Treatment:
 - (i) Date;
 - (ii) Time initiated;

(iii) Duration; and

(iv) Procedure or activity provided; and

(3) Review or update, or both, indirect supervision orders every 30 days.

E. An indirect supervision protocol shall be listed on the office's:

(1) Consent to treatment form signed by the patient; or

(2) Informed consent protocol.

Cross References

[10.43.07.01B\(8\)](#)

[10.43.07.05D](#)

[10.43.07.05E](#)

[10.43.07.06A\(4\)](#)

.11 Chiropractic Assistants with X-ray Privileges.

A. A chiropractic assistant may perform the duties of a chiropractic assistant with X-ray privileges only as directed by a supervising chiropractor.

B. A chiropractic assistant, with or without X-ray privileges, may not:

(1) Provide oral or written diagnosis; or

(2) Work independently.

C. A chiropractic assistant may perform X-rays only after the completion of:

(1) 60 hours of didactic training in a Board-approved course of instruction that includes:

- (a) Radiation physics;
 - (b) Radiation biology;
 - (c) Radiation protection;
 - (d) Imaging principles in radiation exposure;
 - (e) Patient preparation and positioning;
 - (f) Human anatomy and physiology; and
 - (g) Emergency procedures; and
- (2) 46 X-ray studies under the direct supervision of a supervising chiropractor that include:
- (a) 10 cervical series which include at least one of each of the following views:
 - (i) Anterior to posterior;
 - (ii) Lateral;
 - (iii) Anterior to posterior open mouth;
 - (iv) Flexion;
 - (v) Extension; and
 - (vi) Oblique;
 - (b) 6 thoracic series which include at least one of each of the following views:
 - (i) Anterior to posterior;
 - (ii) Lateral;
 - (iii) Flexion; and

- (iv) Extension;
- (c) 10 lumbar series which include at least one of each of the following views:
- (i) Anterior to posterior;
 - (ii) Lateral;
 - (iii) Flexion;
 - (iv) Extension; and
 - (v) Oblique; and
- (d) 20 extremity views which include at least one of each of the following:
- (i) Shoulder;
 - (ii) Elbow;
 - (iii) Wrist;
 - (iv) Hand;
 - (v) Ribs;
 - (vi) Hip;
 - (vii) Knee;
 - (viii) Ankle; and
 - (ix) Foot.

.12 Term and Renewal of Registration.

- A. A registration expires every 2 years, unless the registration is renewed for a 2-year term.

B. Before a registration expires, the registrant periodically may renew it for another term if the registrant:

(1) Otherwise is entitled to be registered;

(2) Pays a renewal fee as set forth in [COMAR 10.43.06](#);

(3) Submits to the Board a renewal application on the form that the Board requires; and

(4) Submits to the Board verification of at least 10 hours of continuing education in courses approved by the Board.

.13 Inactive Status.

A. The Board shall place a registration holder on inactive status if the registration holder submits to the Board the:

(1) Completed application for inactive status on the form provided by the Board; and

(2) Biennial fee for inactive status as specified in [COMAR 10.43.06](#).

B. The registration holder on inactive status:

(1) Is not entitled to practice chiropractic until the registration is reactivated; and

(2) May reactivate the registration at any time if the:

(a) Application for reactivation is completed; and

(b) Reactivation fee is paid as set forth in [COMAR 10.43.06](#).

.14 Nonrenewed Status.

A. The Board shall place a registration holder in a nonrenewed status if the registration holder fails to complete an application for:

(1) Registration renewal during the biennial cycle; or

(2) Inactive status during the renewal cycle.

B. The registration holder may reinstate a nonrenewed status for registration within 5 years of the expiration date of the last active registration.

C. If the expired registration holder is on nonrenewed status for more than 5 years, the holder shall:

(1) Reapply; and

(2) Meet all of the requirements set forth in this chapter.

.15 Practicing Without Registration.

A. Except as otherwise provided in this chapter, a person may not practice, attempt to practice, or offer to practice as a chiropractic assistant in this State unless registered by the Board.

B. A person may not serve as a chiropractic applicant or assistant unless approved by the Board.

.16 Penalties for Violations of This Chapter.

A. Violations of these regulations may result in disciplinary action against the supervising chiropractor as set forth in [Health Occupations Article, §3-313, Annotated Code of Maryland](#).

B. A person practicing as a chiropractic assistant without being registered, except as provided in these regulations, is guilty of a misdemeanor, and may be fined \$5,000 or imprisoned for 1 year, or both.

C. A chiropractic assistant and an applicant for registration is subject to the Board's disciplinary authority under [Health Occupations Article, §3-313, Annotated Code of Maryland](#).

.17 Display of Registration.

A chiropractic assistant shall display the registration and any current renewal registration conspicuously in the space where the license holder is engaged in practice, including in any temporary space, or in any exhibit location.

.18 Notification of Change of Address.

A registered chiropractic assistant shall notify the Board of any change in the name or address of the chiropractic assistant, in writing, within 60 days after the change occurs.

Chapter 08 Licensure and Registration

Examination — Special Needs Applicants

Administrative History

Effective date: October 26, 1992 (19:21 Md. R. 1892)

[Regulation .01](#) amended effective January 24, 2000 (27:1 Md. R. 77)

[Regulation .02](#) amended effective August 6, 2001 (28:15 Md. R. 1398)

[Regulation .02A](#) amended effective January 24, 2000 (27:1 Md. R. 77)

Subtitle and Chapter name amended to be, Board of Chiropractic Examiners, Licensure and Registration Examination — Special Needs Applicants, effective January 2, 2017 (43:26 Md. R. 1446)

Authority

Health Occupations Article, §§[3-205](#) and [3-304](#), Annotated Code of Maryland

.01 Scope.

These regulations establish the procedures to be followed by examination applicants who have special needs because of a handicap or religious convictions.

.02 Eligibility Requirements.

- A. An applicant with a disability may request modifications in examination materials or procedures by making a written request to the Board that includes:
- (1) The applicant's name;
 - (2) The date of the examination to be modified;
 - (3) A letter from the appropriate medical professional that:
 - (a) Confirms the disability; and
 - (b) Provides information describing the accommodations required; and
 - (4) A letter from the applicant's education program, indicating what modifications, if any, were granted by the program.
- B. The applicant shall send the request for modification and supporting documentation to the Board by the application deadline.
- C. The Board reserves the right to review each special needs application and evaluate each on its individual merit.
- D. The applicant may be required to bear the cost of special arrangements or procedures to accommodate the applicant's special needs.

Chapter 09 Monetary Penalties

Administrative History

Effective date:

Chapter and Subtitle renamed and recodified from [COMAR 10.43.10](#) to [COMAR 10.43.09](#), Board of Chiropractic Examiners, Monetary Penalties, effective January 2, 2017 (43:26 Md. R. 1446)

[Regulation .02](#) amended effective January 2, 2017 (43:26 Md. R. 1446)

Authority

[Health Occupations Article, §3-314, !\[\]\(fa765698ce0babdf783a1bfdd7000f6e_img.jpg\)](#) Annotated Code of Maryland

.01 Scope.

This chapter establishes standards for the imposition of penalties not exceeding \$5,000 against any chiropractor in the State if, after a hearing, the Board finds that there are grounds under [Health Occupations Article, §3-313, !\[\]\(801e99145fad6ede5611e1f5d0ccd0ef_img.jpg\)](#) Annotated Code of Maryland [§3-313, !\[\]\(1616aee0ace599326979924bf59f440c_img.jpg\)](#), to suspend or revoke a license.

.02 Definitions.

A. In this chapter, the following terms have the meanings indicated.

B. Terms Defined.

- (1) “Board” means the State Board of Chiropractic Examiners.
- (2) “License” means a license issued by the Board to practice chiropractic or to practice chiropractic with the right to practice physical therapy.
- (3) “Licensee” means a chiropractor who is licensed by the Board to practice chiropractic or to practice chiropractic with the right to practice physical therapy.
- (4) “Penalty” means monetary penalty.

.03 Imposition of a Penalty — General.

- A. Imposition of a Penalty After a Hearing. If, after a hearing under [Health Occupations Article, §3-315, !\[\]\(5d057e3057f89149a1e1dfab0e76f6c5_img.jpg\)](#) Annotated Code of Maryland [§3-315, !\[\]\(91de3590b437a1dad4f5769bcb11f3a5_img.jpg\)](#), the Board finds that there are grounds under [Health Occupations Article, §3-313, !\[\]\(7dc2b55efafdd28138d8ceb7f08026e6_img.jpg\)](#) to suspend or revoke a license, the Board may impose a penalty of not more than \$5,000:
- (1) Instead of, or in addition to, suspending the license; or
 - (2) In addition to revoking the license.

- B. Imposition of a Penalty Without a Hearing. If, after disciplinary procedures have been brought against a licensee, the licensee waives the right to a hearing required under this subtitle, and if the Board finds that there are grounds under [Health Occupations Article, §3-313, Annotated Code of Maryland](#), to reprimand the licensee, place the licensee on probation, or suspend or revoke a license, the Board may impose a penalty not exceeding \$5,000 for each violation in addition to reprimanding, placing the licensee on probation, or suspending or revoking the license.

.04 Imposition of a Penalty on a Chiropractor.

- A. The Board may impose a penalty of not less than \$100 or more than \$2,000 on a chiropractor found guilty of any of the following, if the chiropractor:
- (1) Willfully fails to file or record a report as required by law; or
 - (2) Refuses, withholds from, denies, or discriminates against an individual with regard to the provision of professional services for which the licensee is licensed and qualified to render because the individual is HIV positive.
- B. The Board may impose a penalty of not less than \$300 or more than \$3,500 on a chiropractor found guilty of any of the following, if the chiropractor:
- (1) Practices chiropractic under a false name or trade name;
 - (2) Provides professional services while:
 - (a) Under the influence of alcohol; or
 - (b) Using any narcotic or controlled dangerous substance as defined in [Criminal Law Article, Title 5, Subtitle 4, Annotated Code of Maryland](#), or other drug that is in excess of therapeutic amounts, or without valid medical indication;
 - (3) Solicits or advertises in a false or misleading manner, or in any other manner not approved by the Board;
 - (4) Abandons a patient;

- (5) Misrepresents the effectiveness of any treatment, drugs, devices, appliances, or goods to a patient so as to exploit the patient for financial gain;
 - (6) Willfully impedes or obstructs the filing or recording of a report, or induces another to fail to file or record the report;
 - (7) Pays or agrees to pay a sum to an individual for bringing or referring a patient; or
 - (8) Violates any rule or regulation adopted by the Board.
- C. The Board may impose a penalty of not less than \$500 or more than \$5,000 on a chiropractor found guilty of any of the following:
- (1) Fraudulently or deceptively obtaining or attempting to obtain a license for the applicant or licensee, or for another;
 - (2) Fraudulently or deceptively using a license;
 - (3) Impersonating another practitioner;
 - (4) Having been convicted of or pleading guilty or nolo contendere to a felony or to a crime involving moral turpitude, whether any appeal or other proceeding is pending to have the conviction or plea set aside;
 - (5) Unethically conducting the practice of chiropractic;
 - (6) Being professionally, physically, or mentally incompetent;
 - (7) Grossly and willfully:
 - (a) Overcharging for professional services; or
 - (b) Submitting false statements to collect fees for which services are not provided;
 - (8) Having been disciplined by a licensing or disciplinary authority of any other state or country or convicted by a court of any state or country for an act that would be grounds for

disciplinary action under [Health Occupations Article, §3-313, Annotated Code of Maryland](#) ;

- (9) Practicing chiropractic with an unauthorized individual or supervising or aiding an unauthorized individual in the practice of chiropractic;
- (10) Behaving immorally in the practice of chiropractic; or
- (11) Committing an act of unprofessional conduct in the practice of chiropractic.

.05 Factors to be Considered in the Assessment of a Penalty.

In those cases in which the Board determines that the imposition of a penalty is appropriate, the Board shall take into consideration the following factors, without limitations, in determining the amount of penalty:

- A. The extent to which the chiropractor derived any financial benefit from unprofessional or improper conduct;
- B. The willfulness of the unprofessional or improper conduct;
- C. The extent of actual or potential public harm caused by the unprofessional or improper conduct; and
- D. The cost of investigating and prosecuting the case against the chiropractor.

.06 Payment of a Penalty.

- A. A chiropractor shall pay to the Board a penalty imposed under these regulations as of the date the Board's order is issued, unless the Board's order specifies otherwise.
- B. Filing an appeal under [State Government Article, §10-215, Annotated Code of Maryland](#) , or [Health Occupations Article, §3-316, Annotated Code of Maryland](#) , does not automatically stay payment of a penalty imposed by the Board pursuant to these regulations.
- C. If a chiropractor fails to pay, in whole or in part, a penalty imposed by the Board pursuant to these regulations, the Board may not restore, reinstate, or renew a license until the penalty

has been paid in full.

- D. In its discretion, the Board may refer all cases of delinquent payment to the Central Collection Unit of the Department of Budget and Fiscal Planning to institute and maintain proceedings to ensure prompt payment.
- E. The Board shall pay all monies collected pursuant to these regulations into the State's General Fund.

Chapter 10 Continuing Education Requirements

Administrative History

Effective date: March 9, 1998 (25:5 Md. R. 370)

[Regulation .02B](#) amended effective June 9, 2003 (30:11 Md. R. 735); June 13, 2011 (38:12 Md. R. 705); January 6, 2014 (40:26 Md. R. 2164)

[Regulation .03B](#) amended effective August 6, 2001 (28:15 Md. R. 1398); June 9, 2003 (30:11 Md. R. 735); October 22, 2007 (34:21 Md. R. 1915); June 13, 2011 (38:12 Md. R. 705)

[Regulation .03D](#) amended effective October 22, 2007 (34:21 Md. R. 1915)

[Regulation .03E](#) adopted effective January 6, 2014 (40:26 Md. R. 2164)

[Regulation .04](#) amended effective October 22, 2007 (34:21 Md. R. 1915)

[Regulation .04B](#) amended effective August 6, 2001 (28:15 Md. R. 1398); June 9, 2003 (30:11 Md. R. 735)

[Regulation .04G](#) amended effective June 13, 2011 (38:12 Md. R. 705)

[Regulation .04](#) repealed and new Regulation .04 adopted effective January 6, 2014 (40:26 Md. R. 2164)

[Regulation .05](#) amended effective June 13, 2011 (38:12 Md. R. 705)

[Regulation .05I](#) amended effective January 6, 2014 (40:26 Md. R. 2164)

Chapter and Subtitle renamed and recodified from [COMAR 10.43.11](#) to [COMAR 10.43.10](#), Board of Chiropractic Examiners, Continuing Education Requirements, effective January 2, 2017 (43:26 Md. R. 1446)

[Regulation .01](#) amended effective January 8, 2024 (50:26 Md. R. 1132)

[Regulation .02B](#) amended effective January 2, 2017 (43:26 Md. R. 1446); January 8, 2024 (50:26 Md. R. 1132)

[Regulation .03](#) amended effective January 8, 2024 (50:26 Md. R. 1132)

[Regulation .04](#) amended effective January 8, 2024 (50:26 Md. R. 1132)

[Regulation .05](#) amended effective January 8, 2024 (50:26 Md. R. 1132)

[Regulation .06](#) adopted effective January 8, 2024 (50:26 Md. R. 1132)

Authority

Health Occupations Article, §§[3-308](#) and [3-313](#), Annotated Code of Maryland

.01 Scope.

This chapter governs continuing education for all individuals licensed to practice chiropractic or registered to practice as a chiropractic assistant in Maryland.

.02 Definitions.

A. In this chapter, the following terms have the meanings indicated.

B. Terms Defined.

(1) “Board” means the Maryland Board of Chiropractic Examiners.

(2) “Credit hour” means 1 course or program hour.

- (3) “Licensee” means a chiropractor licensed by the Board.
- (4) “Pre-approved provider” means:
 - (a) The State Chiropractic Association;
 - (b) The American Chiropractic Association;
 - (c) The International Chiropractors Association;
 - (d) Schools or colleges accredited by the Council on Chiropractic Education (CCE), the Federation of Chiropractic Licensing Boards Providers of Approved Continuing Education (FCLB PACE), and the National Board of Chiropractic Examiners (NBCE);
 - (e) Agencies approved by the Board of Physicians; or
 - (f) Schools and organizations approved by the Board.
- (5) “Provider” means an individual or group who designs and develops continuing education courses or programs.
- (6) “Registrant” means a chiropractic assistant who is registered by the Board to perform duties authorized under [COMAR 10.43.07](#).

.03 Renewal Requirements.

A. License Renewal.

- (1) A licensee shall satisfactorily complete 48 hours of continuing education in the 2-year period before each renewal and provide verification to the Board if requested.
- (2) The licensee shall:
 - (a) Obtain a minimum of:
 - (i) 3 hours in approved communicable-disease education, which includes AIDS/HIV, and sanitary procedures;

- (ii) 1 hour in diversity or cultural competency education;
 - (iii) 3 hours in risk management; and
 - (iv) 1 hour in professional ethics or jurisprudence;
- (b) Pay a renewal fee as set forth in [COMAR 10.43.06](#); and
 - (c) Submit to the Board a renewal application accompanied by a continuing education form that the Board requires.

B. Registration Renewal.

- (1) A registrant shall satisfactorily complete 10 hours of continuing education in the 2-year period before each renewal and provide verification to the Board, if requested.
- (2) The registrant shall:
 - (a) Pay a renewal fee as set forth in [COMAR 10.43.06](#); and
 - (b) Submit to the Board a renewal application accompanied by a continuing education form that the Board requires.

C. Hours may be in-person, home study, or online format.

D. Exemptions, Waivers, and Extensions.

- (1) Individuals issued initial licensure or registration within 12 months of the renewal date are exempt from the continuing education (CEU) requirements under this chapter for the first renewal cycle.
- (2) Licensees and registrants with documented hardships seeking an exemption, waiver, or extension from CEU requirements under this chapter shall petition the Board in writing at least 90 days before the renewal date.
- (3) The Board shall review the petition for an exemption, waiver, or extension, and respond in writing to the licensee or registrant within 30 days of the Board's decision.

- E. The Board may deny the license or registration renewal of any chiropractor or chiropractic assistant who fails to comply with this chapter.
- F. The Board shall conduct an audit of licensees and registrants before or during the renewal period to ensure compliance with this chapter.
- G. Continuing education hours may not be carried over from one renewal period to the next.

Cross References[10.43.10.06A](#)[10.43.10.06B](#)

.04 Accreditation and Approval of Continuing Education.

A. The Board shall:

- (1) Base accreditation and approval of continuing education courses and programs on their content and instructor qualifications; and
- (2) Ensure that continuing education courses and programs are directed toward improvement, advancement, and extension of professional skill and knowledge related to chiropractic.

B. Pre-Approved Providers.

- (1) Pre-approved providers shall submit continuing education courses or programs to the Board within 30 days before commencement of the course or program date.
- (2) A course or program conducted by a pre-approved provider is considered approved without further review, provided that the course or program meets the subject-matter requirements of [§D of this regulation](#).
- (3) The Board shall post the list of pre-approved providers on the Board's website for public view.

C. Non-Pre-Approved Providers.

- (1) Non-pre-approved providers shall submit continuing education courses or programs to the Board 60 days prior to commencement of course or program date for review.
- (2) The Board shall formally respond to submittals in a timely manner.
- (3) The process for submission for approval shall be published on the Board's website.
- (4) The Board shall post the list of approved courses or programs from non-pre-approved providers on the Board's website for public view.

D. For license renewal credit, the Board may approve a course or program consisting of one of the following subjects or a combination of these subjects:

- (1) Chiropractic principles and adjusting techniques;
- (2) Chiropractic ethics and jurisprudence;
- (3) X-ray quality assurance program;
- (4) Diagnostic imaging;
- (5) Physical diagnosis;
- (6) Clinical laboratory diagnosis;
- (7) Orthopedic diagnosis;
- (8) Neurological diagnosis;
- (9) Rehabilitative procedures;
- (10) Nutritional diagnosis;
- (11) Physical therapy;

(12) Risk management;

(13) Cultural competency or diversity awareness; or

(14) A subject with clinical application approved by the Board.

E. Term of Approval.

(1) The Board shall approve a course or program for a period of 5 years.

(2) At the expiration of the 5-year approval period, the provider:

(a) May resubmit the course or program; and

(b) Shall meet the approval requirements of this regulation.

F. A licensee may:

(1) Submit a request for review of continuing education from the Board if the:

(a) Continuing education is not already approved or disapproved by the Board; and

(b) Licensee submits a request to the Board at least 60 days prior to the commencement of the course or program containing, but not exclusive to, information set forth in this chapter; and

(2) Achieve up to 12 hours for verified participation as an instructor, volunteer, or mentor under structured, sponsored courses or programs reviewed and approved by the Board.

G. A continuing education processing review fee shall be paid in accordance with

[COMAR 10.43.06.02](#).

H. A continuing education course may not exceed 12 hours during any renewal period.

I. In addition to the required hours of continuing education set forth in this chapter, a licensee or registrant shall maintain a current CPR certification at the healthcare provider level from a Board-approved CPR provider for each renewal period.

- J. Approved credits are not transferable and are acceptable toward fulfillment of the continuing education requirement only in the renewal period in which the approved credits are earned.

.05 Substantiation of Credits.

- A. The licensee or registrant shall keep accurate records of attendance at approved continuing education courses or programs and be able to substantiate those records upon request.
- B. The Board shall conduct a random audit before or during the license or registration renewal period to ensure compliance with this chapter.
- C. The Board shall disallow the continuing education credits for a licensee or registrant who is unable to substantiate the credits and may deny the license or registration renewal if credits are disallowed.
- D. The Board may require additional verification for any information received regarding content and certification of, and attendance at, a continuing education course or program.
- E. The Board may grant an extension of time for the licensee or registrant to obtain required continuing education credits if the licensee or registrant presents evidence satisfactory to the Board that failure to comply was due to circumstances beyond the licensee's or registrant's control.
- F. The Board may not accept continuing education credits from a previous renewal period.
- G. The Board shall renew a license or registration for the first renewal period following the issuance of the original license or registration without requiring continuing education credits if the original license or registration was issued 1 year or less before the expiration date of the license or registration.
- H. A licensee or registrant shall maintain complete and accurate records of the licensee's or registrant's continuing education credits for the preceding 4 years and present them to the Board upon request.
- I. Upon licensee or registrant petition, the Board may waive the continuing education requirements when it determines that the licensee or registrant was unable to comply due to hardship.

- J. The Board may institute disciplinary action, pursuant to [Health Occupations Article, §3-313, Annotated Code of Maryland](#), against a chiropractor or chiropractic assistant who submits fraudulent information to the Board.
- K. Failure to substantiate continuing education hours if requested by the Board shall result in denial of:
- (1) License or registration renewal; or
 - (2) Reinstatement of a license or registration.

.06 Reinstatement Requirements.

- A. A licensee shall satisfactorily complete a minimum of 48 continuing education hours as set forth under [Regulation .03A\(2\)\(a\) of this chapter](#) in the 2-year period immediately preceding reinstatement.
- B. A registrant shall satisfactorily complete a minimum of 10 continuing education hours as set forth under [Regulation .03B of this chapter](#) in the 2-year period immediately preceding reinstatement.

Chapter 11 Licensure Examination

Administrative History

Effective date: March 9, 1998 (25:5 Md. R. 370)

[Regulation .02B](#) amended effective June 9, 2003 (30:11 Md. R. 735); June 13, 2011 (38:12 Md. R. 705); January 6, 2014 (40:26 Md. R. 2164)

[Regulation .03B](#) amended effective August 6, 2001 (28:15 Md. R. 1398); June 9, 2003 (30:11 Md. R. 735); October 22, 2007 (34:21 Md. R. 1915); June 13, 2011 (38:12 Md. R. 705)

[Regulation .03D](#) amended effective October 22, 2007 (34:21 Md. R. 1915)

[Regulation .03E](#) adopted effective January 6, 2014 (40:26 Md. R. 2164)

[Regulation .04](#) amended effective October 22, 2007 (34:21 Md. R. 1915)

[Regulation .04B](#) amended effective August 6, 2001 (28:15 Md. R. 1398); June 9, 2003 (30:11 Md. R. 735)

Regulation .04G amended effective June 13, 2011 (38:12 Md. R. 705)

[Regulation .04](#) repealed and new Regulation .04 adopted effective January 6, 2014 (40:26 Md. R. 2164)

[Regulation .05](#) amended effective June 13, 2011 (38:12 Md. R. 705)

Regulation .05I amended effective January 6, 2014 (40:26 Md. R. 2164)

Chapter and Subtitle renamed and recodified from [COMAR 10.43.12](#) to [COMAR 10.43.11](#), Board of Chiropractic Examiners, Licensure Examination, effective January 2, 2017 (43:26 Md. R. 1446)

[Regulation .02B](#) amended effective January 2, 2017 (43:26 Md. R. 1446)

Authority

Health Occupations Article, §§[3-202](#), [3-205](#), and [3-301](#)—[3-304](#), Annotated Code of Maryland

.01 Scope.

This chapter establishes the requirements for licensure by examination for all applicants, except applicants who qualify for licensure under [Health Occupations Article, §3-305, Annotated Code of Maryland](#).

.02 Definitions.

A. In this chapter, the following terms have the meanings indicated.

B. Terms Defined.

- (1) “Accredited college” means a chiropractic school approved by the Council on Chiropractic Education, or its successor, and approved by the Board.

- (2) “Board” means the State Board of Chiropractic Examiners.
- (3) “Letter of admission” means a document sent by the Board to the applicant approving the applicant's request to take the licensure examination.
- (4) “Maryland Board examination” means the jurisprudence examination administered by the Board to measure competency under [Health Occupations Article, Title 3, Annotated Code of Maryland](#), and [COMAR 10.43.01](#) — .19.
- (5) “National Board examination” means the written tests administered by the National Board of Chiropractic Examiners to measure competency in chiropractic.

.03 Application for Examination and Licensure.

- A. An individual is eligible to take the Maryland Board examination for licensure if the individual submits documentation, postmarked at least 45 days before the examination, verifying that the individual has:
 - (1) Been awarded a bachelor's degree from a Board-recognized, accredited college;
 - (2) Graduated from a college of chiropractic approved by the Board, pursuant to [Health Occupations Article, §3-402, Annotated Code of Maryland](#);
 - (3) Successfully completed parts one and two of the National Board examination with a passing score established by the National Board of Chiropractic Examiners, and all other parts with a passing score of at least 75 percent;
 - (4) Obtained certification in CPR at the Health Care Provider level;
 - (5) Provided two letters of reference attesting to the applicant's good moral character;
 - (6) Certified or affirmed that the individual has not practiced chiropractic without a license in the State;
 - (7) Filed an application and paid the required application fee as specified in [COMAR 10.43.06](#);
 - (8) Paid the required examination fee as specified in [COMAR 10.43.06](#); and

(9) Completed a State and national criminal history records check in accordance with [Health Occupations Article, §3](#) –302.1, Annotated Code of Maryland.

- B. The Board may not refund an application fee.
- C. The Board shall refund the examination fee to an applicant whom the Board determines is not qualified to take the examination.
- D. The Board shall send to an approved applicant a letter of admission to the examination.
- E. The Board may refund examination fees to an applicant unable to be present for the examination if the applicant submits verification of hardship and a written request for a refund.
- F. The Board may not issue a license or registration if the criminal history records information required under [§A\(9\) of this regulation](#) has not been received.

.04 Physical Therapy Privileges.

An applicant seeking physical therapy privileges shall have obtained:

- A. Clinical and didactic education in PT modalities from an accredited institution of higher education; and
- B. A minimum score of 75 percent on the National Board Physiotherapy Examination.

.05 Examination Misconduct.

After a hearing, the Board may permanently deny licensure to an applicant found to have cheated on or subverted an examination taken to qualify for Maryland licensure.

Chapter 12 Procedures for Clinical Demonstrations in Public Places

Administrative History

Effective date: November 4, 1996 (23:22 Md. R. 1497)

[Regulation .03A](#) amended effective January 6, 2014 (40:26 Md. R. 2164)

[Regulation .04](#) amended effective January 6, 2014 (40:26 Md. R. 2164)

Chapter and Subtitle renamed and recodified from [COMAR 10.43.13](#) to [COMAR 10.43.12](#), Board of Chiropractic Examiners, Procedures for Clinical Demonstrations in Public Places, effective January 2, 2017 (43:26 Md. R. 1446)

Authority

[Health Occupations Article, §3-205](#), [Annotated Code of Maryland](#)

.01 Scope.

This chapter governs all chiropractic clinical demonstrations in public places by licensed chiropractors in Maryland.

.02 Definitions.

A. In this chapter, the following terms have the meanings indicated.

B. Terms Defined.

- (1) “Chiropractic display facility” means an area where chiropractic procedures are demonstrated.
- (2) “Chiropractic procedure” means examinations, mensurations, analyses, evaluations, screenings, or clinical determinations related to the practice of chiropractic in a public place.

(3) “Cursory postural screening” means a visualization, by a licensed chiropractor, of an individual's posture to detect possible structural deviations.

(4) “Demonstration” means performing chiropractic procedures in public places.

.03 Chiropractic Demonstrations in Public Places.

A. When performing chiropractic procedures in a public place, the chiropractor shall:

- (1) Prominently display the chiropractor's current license;
- (2) Provide adequate facilities for patients to disrobe in privacy;
- (3) Ensure that the patient is properly draped for examination; and
- (4) Maintain the privacy of the patient at all times.

B. The chiropractor may perform a cursory postural screening while the patient is fully clothed.

.04 Chiropractic Display Facilities in Public Places.

For procedures that require partial or complete disrobing of the patient, the chiropractor shall ensure that the chiropractic display facility provides sufficient patient privacy.

.05 Prohibitions.

An unlicensed individual may not perform chiropractic procedures in public places.

.06 Exceptions.

This chapter does not preclude a salesperson from demonstrating chiropractic equipment during a convention or educational seminar.

.07 Penalty.

The Board may initiate disciplinary proceedings, pursuant to [Health Occupations Article, §3-313, Annotated Code of Maryland](#), against a chiropractor found in violation of this chapter.

Chapter 13 Code of Ethics

Administrative History

Effective date: January 9, 2000 (26:27 Md. R. 2015)

[Regulation .03B](#), D amended effective October 22, 2007 (34:21 Md. R. 1915)

[Regulation .03C](#) amended effective January 6, 2014 (40:26 Md. R. 2164)

[Regulation .03D](#) amended effective October 22, 2007 (34:21 Md. R. 1915); June 13, 2011 (38:12 Md. R. 705)

[Regulation .04A](#) amended effective October 22, 2007 (34:21 Md. R. 1915)

[Regulation .05B](#) amended effective January 6, 2014 (40:26 Md. R. 2164)

[Regulation .05C](#) adopted effective January 6, 2014 (40:26 Md. R. 2164)

[Regulation .06D](#) amended effective January 6, 2014 (40:26 Md. R. 2164)

[Regulation .06G](#) adopted effective October 22, 2007 (34:21 Md. R. 1915)

[Regulation .07](#) amended effective June 13, 2011 (38:12 Md. R. 705)

Chapter and Subtitle renamed and recodified from [COMAR 10.43.14](#) to [COMAR 10.43.13](#), Board of Chiropractic Examiners, Code of Ethics, effective January 2, 2017 (43:26 Md. R. 1446)

[Regulation .06B](#) amended effective December 30, 2019 (46:26 Md. R. 1165)

Authority

Health Occupations Article, §§[1-212](#), [3-205](#), and [3-313](#), Annotated Code of Maryland

.01 Scope.

This chapter applies to licensed chiropractors and registered chiropractic assistants.

.02 Definitions.

A. In this chapter, the following terms have the meanings indicated.

B. Terms Defined.

- (1) “Chiropractic assistant” means an individual who is registered by the Board to perform the duties authorized under [COMAR 10.43.07](#).
- (2) “Chiropractor” means an individual licensed by the Board:
 - (a) To practice chiropractic; or
 - (b) To practice chiropractic with the right to practice physical therapy.
- (3) “Non-bona-fide treatment” means when a chiropractor or chiropractic assistant treats or examines a patient in a way that involves sexual contact, but there is no medical reason for the procedure, or the procedure falls outside the scope of reasonable chiropractic practices.
- (4) “Sexually exploitative relationship” means when sexual contact occurs in an existing therapeutic relationship or within a period of time after formal termination of the relationship when the patient may still be vulnerable to the power imbalance that exists in the practitioner-patient relationship, even if the relationship may appear to be or is mutually consensual.
- (5) “Therapeutic deception” means when a chiropractor or chiropractic assistant misrepresents sexual conduct as a legitimate form of treatment.

.03 Standards of Practice.

- A. A chiropractor and chiropractic assistant shall concern themselves primarily with the welfare of the patient.

- B. A chiropractor or chiropractic assistant who suffers from a physical, mental, or emotional impairment, including chemical abuse, that impacts the individual's ability to practice chiropractic or provide chiropractic assistance shall seek professional treatment and refrain from the practice of chiropractic or the practice of chiropractic assistance until the impairment no longer exists or reasonable accommodations can be made.
- C. A chiropractor and chiropractic assistant shall:
- (1) Use professional discretion and integrity in relationships with a member of the health care community;
 - (2) Be professional in conduct, with honesty, integrity, self-respect, and fairness;
 - (3) Remain free from conflict of interest while fulfilling the objectives and maintaining the integrity of the chiropractic profession;
 - (4) Provide accurate fee information to the patient, the individual responsible for payment for treatment, and the insurer;
 - (5) At all times respect the patient's dignity, autonomy, and privacy;
 - (6) Practice chiropractic only as defined in the scope of practice set forth in [Health Occupations Article, §3-101\(f\)](#) and (g), Annotated Code of Maryland;
 - (7) Provide chiropractic assistance only within the parameters set forth in [Health Occupations Article, §3-404, Annotated Code of Maryland](#), and [COMAR 10.43.07](#);
 - (8) Cooperate with any lawful investigation conducted by the Board, including:
 - (a) Furnishing information requested in a timely manner as directed by the Board;
 - (b) Complying with a subpoena;
 - (c) Responding to a complaint at the request of the Board; and
 - (d) Providing meaningful and timely access to relevant patient records; and

(9) Report to the Board, or other appropriate authority, conduct in the practice of chiropractic that indicates a violation of:

(a) This chapter;

(b) [Health Occupations Article, Title 3, Annotated Code of Maryland](#); or

(c) Any other law, including but not limited to aiding or abetting the unauthorized practice of chiropractic.

D. A chiropractor or chiropractic assistant may not:

(1) Misrepresent credentials, qualifications, or affiliations and shall attempt to correct others who misrepresent the chiropractor's or the chiropractic assistant's credentials, qualifications, or affiliations;

(2) Knowingly engage in or condone behavior that is fraudulent, dishonest, or deceitful, or involves moral turpitude;

(3) Engage in a commercial activity which conflicts with the duties of a chiropractor and chiropractic assistant;

(4) Perform chiropractic on a patient if a contraindication against chiropractic treatment exists;

(5) Discriminate against a patient or a health care provider based on race, religion, age, gender, sexual orientation, national origin, or disability;

(6) Intimidate, threaten, influence, or attempt to influence any person regarding any violation of law or regulation; or

(7) Aid or abet any individual violating or attempting to violate any provision of law or regulation.

.04 Relationship with Patient.

A. A chiropractor shall:

- (1) Use professional judgment in the use of evaluation and treatment procedures;
- (2) Decline to administer treatment if the chiropractor believes that a treatment is contraindicated or unjustified;
- (3) Terminate a professional relationship with a patient in an appropriate manner, such as:
 - (a) Providing the patient with sufficient notice to permit the patient to obtain the services of another professional;
 - (b) Assisting the patient by providing referrals if appropriate; or
 - (c) Continuing to provide emergency treatment to the patient if treatment is required before a reasonable time has passed to allow the patient to obtain the services of another health care provider;
- (4) Maintain a written record of treatment of the patient under the chiropractor's care for at least:
 - (a) 5 years after the termination of treatment; and
 - (b) 5 years after the patient becomes 18 years old, if applicable;
- (5) Make the written records of treatment available to the patient upon request, in compliance with applicable laws for disclosure of medical records;
- (6) Make arrangements for another professional to provide for the needs of the patient during anticipated absences when the chiropractor is unavailable to the patient;
- (7) Make referrals only to other qualified and duly licensed health care providers;
- (8) Accurately inform the patient, other health care professionals, and the public of the limitations of the practice of chiropractic;
- (9) Adequately assess the patient to determine if contraindications against chiropractic treatment exist and refer the patient to an appropriate health care practitioner;

- (10) Exercise independent professional judgment in the treatment or evaluation of the patient regardless of whether the patient was referred by another health care provider;
- (11) Ensure clear and concise professional communications with patients regarding:
 - (a) Nature and duration of treatment;
 - (b) Diagnoses;
 - (c) Costs;
 - (d) Billing; and
 - (e) Insurance; and
- (12) Administer fair and equitable fees to patients regardless of status or insurance.

B. A chiropractor may not:

- (1) Accept a client for treatment, or continue unnecessary treatment, when the patient cannot be reasonably expected to benefit from the treatment;
- (2) Receive remuneration from, or provide remuneration to, or split a fee, for either making or accepting a referral of the patient to or from another health care provider;
- (3) Make a guarantee or promise about the efficacy of a particular treatment, the chiropractor's practice, or the result of a treatment unless supported by scientific principles accepted by the profession; or
- (4) Exploit the professional relationship by:
 - (a) Continuing treatment unnecessarily; or
 - (b) Charging for a service:
 - (i) Not provided; or

(ii) Different from those actually provided.

.05 Professional Boundaries.

A. A chiropractor and chiropractic assistant shall:

- (1) Maintain professional boundaries, even when the patient initiates crossing the boundaries of the professional relationship; and
- (2) Respect and maintain professional boundaries and respect the patient's reasonable expectation of professional conduct.

B. A chiropractor and chiropractic assistant may not:

- (1) Exploit a relationship with a patient, staff member, or student for the chiropractor's or chiropractic assistant's personal advantage including, but not limited to, a personal, sexual, romantic, or financial relationship;
- (2) Engage in a sexually intimate act with a patient; or
- (3) Engage in sexual misconduct, which includes but is not limited to:
 - (a) Therapeutic deception;
 - (b) Non-bona-fide treatment; and
 - (c) A sexually exploitative relationship.

C. A chiropractor and chiropractic assistant may not engage in inappropriate behavior with other practice staff including sexual advances, harassment, discrimination, exploitation, retaliation, and other unprofessional conduct.

.06 Records, Confidentiality, and Informed Consent.

A chiropractor shall:

A. Respect and maintain the privacy and confidentiality of the patient;

B. Disclose the patient's records or information about the patient only:

(1) In accordance with the consent to treatment form signed by the:

(a) Patient; or

(b) Parent or guardian of a minor patient or incompetent patient; or

(2) As required by law.

C. Adequately safeguard confidential patient information, including storage and disposal of records;

D. Provide sufficient information to a patient to allow the patient to make an informed decision regarding treatment, including:

(1) The purpose and nature of an evaluation or treatment regimen;

(2) Alternatives to treatment;

(3) Side effects and benefits of a treatment regimen proposed and alternatives to that treatment;

(4) The estimated cost of treatment and alternatives to treatment;

(5) The right of the patient to:

(a) Withdraw from treatment at any time, including the risks associated with withdrawing from treatment;

(b) Decline to participate in treatment if an aspect of the treatment will be recorded, documented, photographed, observed, or otherwise used in an educational program; or

(6) Terminate any treatment contract at any time, for any or no reason, with no fee or penalty incurred;

- E. Obtain the full informed consent of a patient participating in a human research program, without communicating a direct or implied penalty for the patient's refusal to participate in the program and with due regard for the patient's autonomy and dignity;
- F. Comply with applicable federal and State laws for human research programs; and
- G. Promptly and efficiently respond to any patient or Board request for records.

.07 Education and Training.

- A. A chiropractor or chiropractic assistant shall:
 - (1) Obtain additional training, information, and supervision as needed to perform a new technique or service in a new specialty area or when employing a new treatment modality; and
 - (2) Be current in the qualifications to practice, including meeting continuing education requirements established by the Board.
- B. The chiropractor or chiropractic assistant may not perform a treatment or provide a service that the chiropractor or chiropractic assistant is not qualified to perform or which is beyond the scope of the chiropractor's or chiropractic assistant's education, training, capabilities, experience, and scope of practice.

.08 Advertising.

- A. A chiropractor may advertise services subject to [COMAR 10.43.03](#).
- B. A chiropractor is accountable under this regulation if the chiropractor uses an agent, partnership, professional association, or health maintenance organization to implement an action prohibited by COMAR 10.43.03.05.

.09 Ethical, Legal, and Professional Responsibilities.

A chiropractor and chiropractic assistant may not construe any failure to specify a particular ethical, legal, or professional duty in this chapter as a denial of the existence of other ethical, legal, or

professional duties or responsibilities that are equally as important and generally recognized in the chiropractic profession.

.10 Penalties.

Violation of a regulation in this chapter may result in the Board taking action pursuant to [Health Occupations Article, §3-313, Annotated Code of Maryland](#).

Chapter 14 Record Keeping

Administrative History

Effective date: February 23, 1998 (25:4 Md. R. 244)

[Regulation .02B](#) amended effective June 13, 2011 (38:12 Md. R. 705)

[Regulation .03B](#) amended effective October 22, 2007 (34:21 Md. R. 1915)

Chapter and Subtitle renamed and recodified from [COMAR 10.43.15](#) to [COMAR 10.43.14](#), Board of Chiropractic Examiners, Record Keeping, effective January 2, 2017 (43:26 Md. R. 1446)

[Regulation .03C](#) amended effective December 30, 2019 (46:26 Md. R. 1165)

[Regulation .04A](#) amended effective December 30, 2019 (46:26 Md. R. 1165)

Authority

[Health Occupations Article, §3-205](#), [Annotated Code of Maryland](#)

.01 Scope.

This chapter establishes the minimum standards for the documentation of patient care by the chiropractor.

.02 Definitions.

A. In this chapter, the following terms have the meanings indicated.

B. Terms Defined.

- (1) "Board" means the Maryland Board of Chiropractic Examiners.
- (2) "Diagnosis" means the determination by the chiropractor of the nature and cause of a disease or injury through evaluation of patient history, examination, and review of any laboratory and radiological data.
- (3) "Examination" means varied procedures such as analysis, assessment, and evaluation performed by the chiropractor to determine a diagnosis.
- (4) "History" means the patient's account of past, present, and familial health.
- (5) "Subjective, objective, assessment, and plan (SOAP) notes" means the written record maintained by the chiropractor of:
 - (a) The patient's qualitative or quantitative description of the patient's condition;
 - (b) Findings pertaining to the patient's condition based on examination and tests;
 - (c) The chiropractor's clinical opinion of the condition; and
 - (d) Instructions given to the patient, orthopedic appliances provided to the patient with instructions for usage, and recommendations for treatment, including modalities used and areas treated.

.03 Record Keeping.

- A. The chiropractor shall maintain accurate, detailed, legible, and organized records, documenting all data collected pertaining to the patient's health status.
- B. The chiropractor may not erase, alter, or conceal patient records but shall initial and date any changes made in the corresponding margin.

C. The Patient Record.

- (1) The chiropractor shall create a record for each patient.
- (2) The chiropractor shall state the patient's name or identification number on each document contained in the patient record.
- (3) The chiropractor shall include the following information in the patient record:
 - (a) Chiropractor and clinic name identification;
 - (b) Patient history;
 - (c) Examination findings;
 - (d) Diagnoses;
 - (e) Treatment plan;
 - (f) SOAP notes;
 - (g) Financial records;
 - (h) Records of telephone conversations;
 - (i) Copies of correspondence and reports sent to other health care providers, diagnostic facilities, and legal representatives;
 - (j) Records and reports provided by other health care providers and diagnostic facilities;
and
 - (k) The signed consent to treatment form of the:
 - (i) Patient; or
 - (ii) Parent or guardian of a minor patient or incompetent patient.

D. Correspondence. The chiropractor shall identify the name of the attending chiropractor, clinic name, address, and telephone number on patient records and reports sent to another health care provider.

E. Maintenance and Release of Patient Records.

- (1) The chiropractor shall keep confidential all information contained in the patient file, in accordance with Health-General Article, Title 4, Subtitle 3, Annotated Code of Maryland.
- (2) The chiropractor shall release patient records when release is:
 - (a) Authorized by the patient in writing; or
 - (b) Compelled by law.
- (3) The chiropractor may assess fees for duplicating patient records for the patient or for another health care provider in accordance with Health-General Article, §4-304, Annotated Code of Maryland.
- (4) The chiropractor shall maintain records in accordance with Health-General Article, §4-403, Annotated Code of Maryland.

.04 Supervisory Responsibilities.

- A. The chiropractor is responsible for record keeping, consent to treatment forms, billing, and other patient-related documentation handled, maintained, or managed by the chiropractor's staff.
- B. The chiropractor shall ensure that employees involved in the preparation, organization, and filing of records adhere to the regulations of this chapter.

.05 Patient History.

The chiropractor shall include the following in the patient history:

- A. Personal data, including:

- (1) Name,
- (2) Address,
- (3) Telephone number,
- (4) Date of birth,
- (5) Race,
- (6) Sex, and
- (7) Current occupation;

B. Complaint or complaints, including:

- (1) Description of the complaint or complaints,
- (2) Quality and character of the complaint or complaints,
- (3) Intensity,
- (4) Frequency,
- (5) Location,
- (6) Radiation,
- (7) Onset,
- (8) Duration,
- (9) Palliative and provocative factors, and
- (10) History of present complaint or complaints;

C. Family health history;

D. Past health history, including:

- (1) General state of health,
- (2) Previous illnesses,
- (3) Surgical history,
- (4) Previous injuries,
- (5) Hospitalizations,
- (6) Previous treatment and diagnostic testing,
- (7) Prescribed and nonprescribed medications and supplements,
- (8) Allergies, and
- (9) Mental illness;

E. Systems review, including:

- (1) Musculoskeletal,
- (2) Cardiovascular,
- (3) Respiratory,
- (4) Gastrointestinal,
- (5) Neurological,
- (6) Ophthalmological,
- (7) Otolaryngological,
- (8) Endocrine,

(9) Peripheral vascular, and

(10) Psychiatric; and

F. Personal history, including:

(1) Occupational,

(2) Activities,

(3) Exercise, and

(4) Health habits.

.06 Penalties.

Violation of this chapter may result in disciplinary action against the chiropractor, as set forth in [Health Occupations Article, §3-313, Annotated Code of Maryland](#).

Chapter 15 Sanctioning Guidelines

Administrative History

Effective date: April 16, 2012 (39:7 Md. R. 494)

Subtitle amended and recodified from [COMAR 10.43.16](#) to [COMAR 10.43.15](#), Board of Chiropractic Examiners, Sanctioning Guidelines, effective January 2, 2017 (43:26 Md. R. 1446)

Authority

Health Occupations Article, §§[1-606](#), [3-313](#), and [3-315](#), Annotated Code of Maryland

.01 Scope.

- A. This chapter shall be used by the Board and the Maryland Office of Administrative Hearings as a framework for imposing discipline.
- B. The Board and the Maryland Office of Administrative Hearings shall take into consideration a range of activity within certain types of conduct rather than assigning particular sanctions to each specific violation.
- C. The Board shall complete a worksheet for each complaint considered by the Board that is not initially closed.
- D. The Board is aware that there may be conduct by a licensee that does not fall squarely within a particular guideline contained in [Regulation .06 of this chapter](#). In that event the Board will so indicate on the worksheet and use its best judgment to determine the appropriate sanction.
- E. The Board and the Maryland Office of Administrative Hearings shall make determinations that maximize the protection of the public's health while maintaining the rights of licensees.

.02 Definitions.

- A. In this chapter, the following terms have the meanings indicated.
- B. Terms Defined.
 - (1) "Board" means the Maryland State Board of Chiropractic Examiners.
 - (2) "Conditions" means requirements in a public or nonpublic order that a licensee is required to satisfy which include but are not limited to:
 - (a) Treatment and counseling for an emotional or physical illness;
 - (b) Submission to drug and alcohol testing;
 - (c) Abstinence from specified drugs;
 - (d) Abstinence from alcohol;
 - (e) Remedial training;

- (f) Inspection;
 - (g) Monitoring;
 - (h) Evaluation;
 - (i) Supervision;
 - (j) Testing of clinical skills;
 - (k) Submission of written reports;
 - (l) A demonstration of knowledge or competency;
 - (m) Limitation of practice;
 - (n) Limitation on the administration of specified drugs to patients;
 - (o) The provision of pro bono chiropractic to the poor, elderly, or disabled;
 - (p) Obedience of Maryland Chiropractic Act, federal, state, and local laws; and
 - (q) The payment of a civil penalty.
- (3) “Conduct” means behavior or action or a failure to behave or act that results in a violation of the Maryland Chiropractic Act or the regulations adopted by the Board.

.03 Application.

- A. This chapter shall be used by the Board as a guide for sanctioning licensees in formal and informal actions and proceedings.
- B. Except as provided in [Regulation .05 of this chapter](#), the Board shall impose a sanction not less severe than the minimum listed in [Regulation .06 of this chapter](#), nor more severe than the maximum listed in [Regulation .06 of this chapter](#).

- C. When conduct results in multiple violations of the Maryland Chiropractic Act and the regulations adopted by the Board, the Board shall consider sanctions that are greater than those imposed for a single violation.
- D. This chapter does not apply to disciplinary matters reviewed by the Board that are initially closed.
- E. Unless otherwise indicated, the period of a suspension may be stayed in whole or in part.
- F. A respondent placed on suspension or probation shall have conditions attached to the suspension or probation which focus on the conduct and steps needed to assure public protection.
- G. Consent orders shall:
 - (1) Include an acknowledgement of the violation or violations; and
 - (2) Indicate that the respondent accepts personal responsibility for the respondent's behavior.
- H. If the conduct is not described in [Regulation .06 of this chapter](#), the Board shall use its judgment to determine appropriate sanctions and shall so state in the sanctions worksheet.
- I. A departure from the sanctioning guidelines alone may not be grounds for any hearing or appeal of any Board action before the Board or the Maryland Office of Administrative Hearings.
- J. The sanctioning guidelines are not applicable to:
 - (1) Individuals seeking an initial license; or
 - (2) The summary suspension of a license under [State Government Article, §10-226, Annotated Code of Maryland](#) .
- K. Notwithstanding the sanctioning guidelines, a respondent may surrender a license.

.04 Worksheet.

- A. The Board shall complete a sanctions worksheet after considering each disciplinary matter.
- B. The sanctions worksheet shall, at a minimum:
 - (1) Briefly summarize the conduct that constituted the violation or violations meriting action;
 - (2) Identify the severity of the conduct;
 - (3) Describe other factors that the Board considered in determining the recommended sanctions imposed including but not limited to:
 - (a) Aggravating factors as outlined in [Regulation .05 of this chapter](#);
 - (b) Mitigating factors as outlined in [Regulation .05 of this chapter](#); and
 - (c) Prior disciplinary history; and
 - (4) Identify the recommended sanctions.
- C. The Board's summary of the conduct that constituted the violation or violations need not:
 - (1) Be exhaustive; or
 - (2) Include every violation meriting action by the Board.
- D. The existence of one or more aggravating or mitigating factors contained in [Regulation .05 of this chapter](#) does not impose on the Board any requirement to make findings of fact or to articulate its reasoning for not exercising its discretion to impose a sanction outside the range of sanctions.
- E. A copy of the sanctions worksheet may be obtained by the respondent or the respondent's legal representative.

.05 Aggravating and Mitigating Factors.

- A. Sanctions in a particular case may fall outside the range of the sanctioning guidelines established by the Board.

- B. If the sanctions imposed by the Board fall outside the range of the sanctioning guidelines the Board shall state its reasons on its worksheet.
- C. Depending on the facts and circumstances of each case, and to the extent that the facts and circumstances apply, the Board may consider the following aggravating and mitigating factors in determining whether the sanction in a particular case should fall outside the range of the sanctioning guidelines:
- (1) Aggravating Factors:
- (a) Previous criminal or administrative discipline history;
 - (b) Whether the offense was committed deliberately or with gross negligence or recklessness;
 - (c) Whether the offense has the potential for, or caused, serious patient harm;
 - (d) Whether the offense was part of a pattern of detrimental conduct;
 - (e) Whether the respondent pursued the respondent's financial gain over the patient's welfare;
 - (f) Whether the patient was especially vulnerable;
 - (g) Whether the respondent attempted to hide error or misconduct from patients or others;
 - (h) Whether the respondent:
 - (i) Concealed, falsified, or destroyed evidence; or
 - (ii) Presented false testimony or evidence;
 - (i) Whether the respondent willfully and without legal justification failed to cooperate with a lawful investigation conducted by the Board; and
 - (j) Whether previous attempts to rehabilitate the respondent were unsuccessful; and

(2) Mitigating Factors:

- (a) Absence of a prior disciplinary record;
- (b) The passage of time since any prior offenses;
- (c) Whether the respondent self-reported to the Board;
- (d) Cooperation with the Board's investigation;
- (e) Full disclosure to the Board;
- (f) Implementation of remedial measures to correct or mitigate harm arising from the misconduct;
- (g) Timely good-faith efforts to make restitution or to rectify consequences of misconduct;
- (h) Evidence of rehabilitation or rehabilitative potential;
- (i) Absence of premeditation to commit the offense;
- (j) Absence of potential harm to the public;
- (k) Absence of adverse impact;
- (l) Whether the offense was an isolated incident and not likely to recur;
- (m) How and when the respondent has been involved in community service and the value of the community service to the community; and
- (n) Voluntary admissions of misconduct.

Cross References

[10.43.15.03B](#)

[10.43.15.04B\(3\)\(a\)](#)

[10.43.15.04B\(3\)\(b\)](#)[10.43.15.04D](#)

.06 Disciplinary Guidelines.

The following guidelines shall be used by the Board as a guide for sanctioning licensees in formal and informal actions and proceedings:

A. Abuse — Physical and Emotional.

Severity	Tier/Conduct	Sanction Range		Duration
		Minimum	Maximum	
Least to Greatest	(1) Unnecessary or disruptive behavior which may include verbal comments, directed to a patient, resulting in minimal harm or a risk of harm	Reprimand	Suspension for up to 5 years, and probation for up to 5 years, and conditions	Reprimand to suspension and probation for up to 5 years
	(2) Physical abuse resulting in significant physical or emotional injury	Suspension for 3 years, without stay for at least 30 days and probation for 3 years, and conditions	Revocation	Suspension for 3 years, without stay for at least 30 days, and probation for 3 years to revocation

B. Criminal Convictions or Plea of Nolo Contendere.

Severity	Tier/Conduct	Sanction Range		Duration
		Minimum	Maximum	
Least to Greatest	(1) Convicted of or pleads guilty or nolo contendere to a felony or to a crime involving moral turpitude	Suspension for 1 year and probation for 1 year, and conditions	Revocation	Suspension for 1 year and probation for 1 year, to revocation
	(2) Convicted of or pleads guilty or nolo contendere to a sexual offense	Suspension for 5 years, without stay for at least 60 days, and probation for 5 years, and conditions	Revocation	Suspension for 5 years, without stay for at least 60 days, and probation for 5 years, to revocation

C. Disciplined by Another Licensing or Disciplinary Authority.

Severity	Tier/Conduct	Sanction Range		Duration
		Minimum	Maximum	
Least to Greatest	(1) Conduct resulting in no physical or psychological harm	Reprimand	Reprimand and probation for up to 3 years, and conditions	Reprimand to reprimand and probation for up to 3 years
	(2) Conduct resulting in financial injury	Reprimand	Revocation	Reprimand to Revocation
	(3) Conduct resulting in physical or psychological harm or a risk of physical or psychological harm	Suspension for 3 years, without stay for at least 10 days, and probation for 3 years, and conditions	Revocation	Suspension for 3 years, at least 10 days without stay, and probation for 3 years to revocation

Severity	Tier/Conduct	Sanction Range		Duration
		Minimum	Maximum	
	(4) Misrepresentation or fraud	Suspension for 2 years, without stay for at least 5 days, and probation for 2 years, and conditions	Revocation	Suspension for 2 years, without stay for at least 5 days, and probation for 2 years to revocation
	(5) Conduct not provided for in §C(1) — (4) of this regulation	Reprimand	Revocation	Reprimand to Revocation

D. Diversion of Controlled Substances or Prescription Drugs.

Severity	Tier/Conduct	Sanction Range		Duration
		Minimum	Maximum	
Least to Greatest	(1) Diversion without harm to self or others	Reprimand and conditions, and probation for 1 year	Suspension for up to 5 years, and probation for up to 5 years, and conditions	Reprimand and probation for 1 year to suspension for up to 5 years and probation for up to 5 years
	(2) Diversion creating risk of harm	Suspension for 3 years and probation for 3 years, and conditions	Suspension for up to 5 years and probation for up to 5 years, and conditions	Suspension for 3 years and probation for 3 years to suspension for up to 5 years and probation for up to 5 years
	(3) Diversion with harm	Suspension for 5 years, without stay for at least 90 days, and probation for 5 years, and conditions	Revocation	Suspension for 5 years, without stay for at least 90 days, and probation for 5 years, to revocation

E. Failure to Renew a License When the Licensee Has Continued to Practice.

Severity	Tier/Conduct	Sanction Range		Duration
		Minimum	Maximum	
Least to Greatest	(1) Failure to renew a license and practicing for up to 1 year	Reprimand	Revocation	Reprimand to suspension for 2 years, and probation for to 2 years
	(2) Failure to renew a license and practicing for 1 year or longer	Suspension for 2 years, and probation for 2 years, and conditions	Revocation	Suspension for 2 years, and probation for 2 years, to revocation

F. Noncompliance with Board Orders.

Severity	Tier/Conduct	Sanction Range		Duration
		Minimum	Maximum	
Least to Greatest	(1) Failure to comply with a Board order	Suspension for 3 years, without stay for at least 10 days, and probation for 3 years, and conditions	Revocation	Suspension for 3 years, without stay for at least 10 days, probation for 3 years, to revocation
	(2) Failure to comply with a Board order with additional unprofessional conduct	Suspension for 3 years, without stay for at least 30 days, and probation for 3 years, and conditions	Revocation	Suspension for 3 years, without stay for at least 30 days, and probation for 3 years, to revocation
	(3) Failure to comply with a Board order with serious physical injury or death of a patient, or the risk of significant physical injury or death	Suspension for 5 years, without stay for at least 1 year, and probation for 5 years, and conditions	Revocation	Suspension for 5 years, without stay for at least 1 year, and probation for 5 years, to revocation

G. Incompetent Practice Or Misconduct.

Severity	Tier/Conduct	Sanction Range		Duration
		Minimum	Maximum	
Least to Greatest	(1) Practice below acceptable standards with a low risk of patient harm	Reprimand and conditions	Suspension for 1 year, and probation for 1 year, and conditions	Reprimand to suspension for 1 year, and probation for 1 year
	(2) Practice below acceptable standards with patient harm or risk of patient harm	Suspension for 3 years, without stay for at least 30 days, and probation, and conditions	Revocation	Suspension for 3 years, without stay for at least 30 days, and probation, to revocation
	(3) Practice below acceptable standards with serious physical injury or death of a patient, or a risk of significant physical injury or death	Suspension for 3 years, without stay for at least 90 days, and probation for 3 years, and conditions	Revocation	Suspension for 3 years, without stay for at least 90 days, and probation for 3 years, to revocation

H. Sexual Misconduct.

Severity	Tier/Conduct	Sanction Range		Duration
		Minimum	Maximum	
Least to Greatest	(1) Unsolicited conduct of a sexual nature excluding physical contact that serves no diagnostic or treatment purpose	Reprimand and conditions	Revocation	Reprimand to suspension for 1 year, and probation for 1 year
	(2) A personal relationship that violates professional ethics	Suspension for 1 year, and probation for 1 year, and conditions	Suspension for up to 5 years, probation for up to 5 years, and conditions	Suspension for 1 year, and probation for 1 year, to suspension for up to 5 years, and probation for up to 5 years
	(3) Physical contact of a sexual nature that does not include force, intimidation, the use of drugs, or alcohol, and that serves no diagnostic or treatment purpose	Suspension for 2 years, without stay for at least 90 days, and probation for 2 years, and conditions	Revocation	Suspension for 2 years, without stay for at least 90 days, and probation for 2 years, to suspension for up to 7 years, without stay for at least 90 days, and probation for up to 7 years
	(4) Sexual conduct involving, but not limited to, force intimidation, the use of drugs, or alcohol, or multiple victims	Suspension for 5 years, without stay for at least 1 year, and probation for 5 years, and conditions	Revocation	Suspension for 5 years, without stay for at least 1 year, and probation for 5 years to revocation

I. Substance Abuse.

Severity	Tier/Conduct	Sanction Range		Duration
		Minimum	Maximum	
Least to Greatest	(1) Misuse of drugs or alcohol without harm to others	Suspension for 2 years and probation for 2 years, and conditions	Suspension for up to 5 years, and probation for up to 5 years, and conditions	Suspension for 2 years and probation for 2 years, to suspension for up to 5 years and probation for up to 5 years
	(2) Misuse of drugs or alcohol with patient harm or a risk of patient harm	Suspension for 5 years, without stay for at least 90 days, probation for 5 years, and conditions	Revocation	Suspension for 5 years, without stay for at least 90 days, and probation for 5 years to revocation

J. Unauthorized Practice.

Severity	Tier/Conduct	Sanction Range		Duration
		Minimum	Maximum	
Least to Greatest	(1) Licensee knowingly allows an unauthorized individual to practice outside their scope of practice without patient harm or minimal patient harm	Reprimand and conditions	Suspension for 2 years, and probation for 2 years, and, conditions	Reprimand to suspension for 2 years, and probation for 2 years

Severity	Tier/Conduct	Sanction Range		Duration
		Minimum	Maximum	
	(2) Licensee knowingly allows an unauthorized individual to practice outside their scope of practice with greater than minimal patient harm	Suspension for 5 years, without stay for at least 30 days, and probation for 5 years, and conditions	Revocation	Suspension for 5 years, without stay for at least 30 days, and probation for 5 years to revocation
	(3) An unauthorized individual practices outside their scope of practice without patient harm or minimal patient harm	Reprimand	Suspension for 2 years, and probation for 2 years, and, conditions	Reprimand to suspension for 2 years, and probation for 2 years
	(4) An unauthorized individual practices outside their scope of practice with greater than minimal patient harm	Suspension for 5 years, without stay for at least 30 days, and probation, and conditions	Revocation	Suspension for 5 years, without stay for at least 30 days, and probation, to revocation

K. Unethical Conduct.

Severity	Tier/Conduct	Sanction Range		Duration
		Minimum	Maximum	
Least to Greatest	(1) Unethical Conduct resulting in no physical or psychological harm	Reprimand and conditions	Suspension for up to 2 years, and probation for up to 2 years, and conditions	Reprimand to suspension for up to 2 years, and probation for up to 2 years
	(2) Unethical conduct resulting in financial injury	Suspension for 3 years, and probation for 3 years, and conditions	Revocation	Suspension for 3 years, and probation for 3 years, to revocation
	(3) Unethical conduct resulting in physical or psychological harm or a risk of physical or psychological harm	Suspension for 3 years, and probation for 3 years, and conditions	Revocation	Suspension for 3 years, and probation for 3 years, to revocation
	(4) Unethically, and without legal justification, fails to cooperate with a lawful investigation conducted by the Board	Suspension for 5 years, without stay for at least 30 days, and probation, for 5 years, and conditions	Revocation	Suspension for 5 years, without stay for at least 30 days, and probation for 5 years, to revocation
	(5) Unethical conduct resulting from misrepresentation or fraud	Suspension for 5 years, and probation for 5 years, and conditions	Revocation	Suspension for 5 years, and probation for 5 years, to revocation
	(6) Threatens, forces, intimidates, or influences a person to change or withhold evidence before the Board or the Office of Administrative Hearings.	Suspension for 5 years, without stay for at least 90 days, and probation for 5 years, and conditions	Revocation	Suspension for 5 years, without stay for at least 90 days, and probation for 5 years, to revocation
	(7) Unethical Conduct resulting from any violation not provided for in §K(1) — (6) of this regulation	Reprimand	Revocation	Reprimand to revocation

Cross References

[10.43.15.01D](#)

[10.43.15.03B](#)

[10.43.15.03H](#)

[10.43.16.03B](#)

Chapter 16 Dry Needling

Administrative History

Effective date: May 18, 2020 (47:10 Md. R. 519)

[Regulation .03A](#), C amended effective April 4, 2022 (49:7 Md. R. 467)

[Regulation .04](#) amended effective April 4, 2022 (49:7 Md. R. 467)

[Regulation .05A](#) amended effective April 4, 2022 (49:7 Md. R. 467)

Authority

Health Occupations Article, §§[3-101](#), [3-205](#)(a), [3-307](#), [3-403](#), and [13-101](#),
Annotated Code of Maryland

.01 Scope.

This chapter establishes standards for the provision of dry needling as an intervention performed by chiropractors.

.02 Definitions.

A. In this chapter, the following terms have the meanings indicated.

B. Terms Defined.

(1) “Board” means the State Board of Chiropractic Examiners.

(2) “Dry needling” means a chiropractic intervention, also known as intramuscular manual therapy, that:

(a) Is performed only by chiropractors with physical therapy privileges;

- (b) Involves the insertion of one or more solid needles, a mechanical device, into the muscle and related tissues to affect change in muscle and related tissues;
- (c) Requires ongoing evaluation, assessment, and re-evaluation of the impairments;
- (d) Is only utilized in parts of the body with neuromuscular or musculoskeletal links to the impairments; and
- (e) Is not performed for:
 - (i) The purposes of acupuncture as defined in [Health Occupations Article, §1A-101, Annotated Code of Maryland](#); or
 - (ii) Any purpose outside the scope of chiropractic.

.03 Standards of Practice.

A. A chiropractor registered to perform dry needling shall:

- (1) Fully explain dry needling to the patient in advance of treatment;
- (2) Obtain informed written consent specific to dry needling, which shall be included in the patient's medical record;
- (3) Perform dry needling in a competent manner consistent with patient health and safety; and
- (4) Document the provision and the specific location of the dry needling service in accordance with the requirements of [COMAR 10.43.14.03](#).

B. A chiropractor who performs dry needling in a manner inconsistent with the standards of practice enumerated in this regulation may be subject to discipline pursuant to [COMAR 10.43.15.06](#).

C. Dry needling is not within the scope of practice for:

- (1) A registered chiropractic assistant;

- (2) A chiropractic assistant trainee;
- (3) A preceptor; or
- (4) An extern.

.04 Minimum Education and Training Required.

- A. A chiropractor with physical therapy privileges shall be in good standing before registering to perform dry needling.
- B. The Board shall accept a dry needling course completed before May 18, 2020, if:
 - (1) The same course, in substantially similar form, is sponsored by a continuing education provider approved by the Board; and
 - (2) The chiropractor seeking to perform dry needling provides the Board with a certificate of completion of 3 hours of a recertification course in dry needling.
- C. In order to perform dry needling, a chiropractor with physical therapy privileges shall complete a minimum of 80 hours of total instruction in the following content areas, including:
 - (1) 60 hours of:
 - (a) Academic coursework obtained through completion of a college program accredited by the Council of Chiropractic Education, as part of the Doctor of Chiropractic program, including the following minimum requirements:
 - (i) Foundations;
 - (ii) Basic sciences;
 - (iii) Clinical sciences; and
 - (iv) Professional practice; or

- (b) Coursework required to sit for Part I, Part II, Part III, Physiotherapy, and Part IV of the examination administered by the National Board of Chiropractic Examiners; and
- (2) Board-approved coursework consisting of 20 hours to be done in a hands-on classroom setting, including but not limited to the following learning topics:
 - (a) Philosophy and historical perspective of dry needling;
 - (b) Indications, contra-indications, and qualifications for treatment;
 - (c) Protocols, doctor and patient safety, usage of dry needling, and dry needling as a diagnostic tool;
 - (d) Case management and jurisprudence; and
 - (e) Direct, hands-on implementation and testing for competency in dry needling of:
 - (i) Cervical, thoracic, lumbar, and pelvic regions;
 - (ii) Anterior and posterior thoracic and ribs;
 - (iii) The upper and lower extremity;
 - (iv) The face and head;
 - (v) Technique; and
 - (vi) Needle size and gauge appropriateness.

Cross References[10.43.16.05A\(1\)](#)**.05 Registration Required.**

- A. The Board shall register a chiropractor with physical therapy privileges as qualified to perform dry needling in the State, provided the chiropractor submits to the Board:
- (1) Evidence of completion of the education and training requirements outlined in [Regulation .04 of this chapter](#); and
 - (2) An application for registration on a form provided by the Board.
- B. A chiropractor with physical therapy privileges may not perform dry needling without registering with the Board.

Chapter 17 Telehealth

Administrative History

Effective date: September 18, 2023 (50:18 Md. R. 797)

Authority

Health Occupations Article, §§[1-1001](#)—[1-1006](#) and [3-205](#), Annotated Code of Maryland

.01 Scope.

- A. This chapter governs the practice of chiropractic using telehealth as an adjunct to, or replacement for, in-person patient visits.
- B. Nothing in the chapter restricts or limits reimbursement requirements pursuant to the Health-General Article and [Insurance Article, Annotated Code of Maryland](#).

.02 Definitions.

- A. In this chapter, the following terms have the meanings indicated.
- B. Terms Defined.

- (1) “Asynchronous” means not occurring in real time.

- (2) “Board” means the Maryland Board of Chiropractic Examiners.
- (3) “In-person” means within the physical presence of the patient.
- (4) “Synchronous” means occurring in real time.
- (5) “Telehealth” has the meaning stated in [Health Occupations Article, §1-1001, Annotated Code of Maryland](#).
- (6) “Telehealth practitioner” means a Maryland licensed chiropractor performing telehealth services within their respective scope of practice.

.03 Licensure.

Subject to the provisions of [Health Occupations Article, Title 3, Annotated Code of Maryland](#), a telehealth practitioner shall be licensed in Maryland when providing telehealth services to a patient located in the State.

.04 Standards of Practice for Telehealth.

- A. Before performing telehealth services, a telehealth practitioner shall develop and follow a procedure to:
 - (1) Verify the identification of the patient receiving telehealth services through use of:
 - (a) A government-issued photograph identification;
 - (b) An insurance, Medicaid, or Medicare card; or
 - (c) Documentation of the patient’s:
 - (i) Date of birth; and
 - (ii) Home address;
 - (2) For an initial patient-telehealth practitioner encounter, disclose the telehealth practitioner’s:

(a) Name;

(b) Maryland license number; and

(c) Contact information;

- (3) Obtain oral or written consent from a patient or patient's parent or guardian if State law requires the consent of a parent or guardian, including informing patients of the risks, benefits, and side effects of the recommended treatment plan;
- (4) Securely collect and transmit a patient's medical health information, clinical data, clinical images, laboratory results, and self-reported medical health and clinical history, as necessary, and prevent access to data by unauthorized persons through encryption or other means;
- (5) Notify patients in the event of a data breach;
- (6) Ensure that the telehealth practitioner provides a secure and private communication modality that complies with federal and state privacy laws; and
- (7) Establish safety protocols to be used in the case of an emergency, including contact information for emergency services at the patient's location.

B. Except when providing asynchronous telehealth services, a telehealth practitioner shall:

- (1) Obtain or confirm an alternative method of contacting the patient in case of a technological failure;
- (2) Confirm whether the patient is in Maryland and identify the specific practice setting in which the patient is located; and
- (3) Identify all individuals present at each location and confirm they are allowed to hear the patient's health information.

C. A telehealth practitioner shall be held to the same standards of practice and documentation as those applicable for in-person chiropractic practice appointments.

.05 Patient Evaluation.

A. A telehealth practitioner shall:

- (1) Perform a synchronous or asynchronous clinical patient evaluation that is appropriate for the patient and the condition with which the patient presents before providing a treatment plan through telehealth; and
- (2) If clinically appropriate for the patient, provide or refer a patient to:
 - (a) In-person treatment; or
 - (b) Another type of telehealth service.

B. A telehealth practitioner may not treat a patient based solely on an online questionnaire.

.06 Telehealth Practitioner Discipline.

- A. The Board shall use the same standards of evaluating and investigating a complaint about and in disciplining a telehealth practitioner who practices telehealth as it would use for a licensee who does not use telehealth technology in the licensee's practice.
- B. The failure of a telehealth practitioner to comply with this chapter shall constitute unprofessional conduct and may be subject to disciplinary action by the Board.

Chapter 18 Massage Therapy

— Code of Ethics [Recodified]

Administrative History

Effective date: October 16, 2000 (27:20 Md. R. 1839)

Chapter revised effective June 13, 2011 (38:12 Md. R. 705)

Regulation .02B amended effective January 6, 2014 (40:26 Md. R. 2164); April 13, 2015 (42:7 Md. R. 570)

Regulation .03 amended effective April 13, 2015 (42:7 Md. R. 570)

Regulation .04A amended effective April 13, 2015 (42:7 Md. R. 570)

Regulation .05 amended effective January 6, 2014 (40:26 Md. R. 2164)

Regulation .07A amended effective April 13, 2015 (42:7 Md. R. 570)

Chapter recodified from [COMAR 10.43.18](#) to [COMAR 10.65.03](#) under new Subtitle, Board of Massage Therapy Examiners, Code of Ethics, effective January 2, 2017 (43:26 Md. R. 1446)

Chapter 19 Massage Therapy — Advertising

Administrative History

Effective date: May 29, 2000 (27:10 Md. R. 966)

Chapter revised effective June 13, 2011 (38:12 Md. R. 705)

Regulation .02B amended effective April 13, 2015 (42:7 Md. R. 570)

Regulation .03G amended effective April 13, 2015 (42:7 Md. R. 570)

Chapter recodified from [COMAR 10.43.19](#) to [COMAR 10.65.04](#) under new Subtitle, Board of Massage Therapy Examiners, Advertising, effective January 2, 2017 (43:26 Md. R. 1446)

Chapter 20 Massage Therapy — Continuing Education Requirements [Recodified]

Administrative History

Effective date: June 24, 2002 (29:12 Md. R. 928)

Regulation .01 amended effective January 6, 2014 (40:26 Md. R. 2164)

Regulation .02 repealed and new Regulation .02 adopted effective January 6, 2014 (40:26 Md. R. 2164)

Regulation .03 amended effective January 6, 2014 (40:26 Md. R. 2164)

Regulation .04A amended effective August 18, 2003 (30:16 Md. R. 1075); April 13, 2015 (42:7 Md. R. 570)

Chapter recodified from [COMAR 10.43.20](#) to [COMAR 10.65.05](#) under new Subtitle, Board of Massage Therapy Examiners, Continuing Education Requirements, effective January 2, 2017 (43:26 Md. R. 1446)

Chapter 21 Massage Therapy — Record Keeping [Recodified]

Administrative History

Effective date: January 6, 2014 (40:26 Md. R. 2164)

Subtitle recodified from [COMAR 10.43.21](#) to [COMAR 10.65.06](#), Board of Massage Therapy Examiners,
Record Keeping, effective January 2, 2017 (43:26 Md. R. 1446)

21 NCAC 10 .0213 CERTIFIED CHIROPRACTIC ASSISTANTS

(a) Designation. The Board shall classify Certified Chiropractic Assistants as follows:

- (1) Level 1 – Clinical
- (2) Level 2 – X-ray

For purposes of this Rule, a Certified Chiropractic Assistant – Level 1 is the same as a "chiropractic clinical assistant" as defined in G.S. 90-143.4(a). For purposes of this Rule, a Certified Chiropractic Assistant – Level 2 is the same as a "diagnostic imaging technician" as defined in G.S. 90-143.2 and may be referred to as a "radiologic technologist", "X-ray tech", and "X-ray technician."

(b) Application Procedure. Anyone seeking to be certified as a Chiropractic Assistant shall submit an application found on the Board's website at <https://ncchiroboard.com>. All applicants shall:

- (1) Be at least 18 years of age;
- (2) Demonstrate that he or she graduated from high school or the equivalent;
- (3) Submit an application fee of thirty-five dollars (\$35.00); and
- (4) Submit an application containing the following information:
 - (A) the applicant's name, residential address, phone number, email address, and date of birth;
 - (B) the applicant's educational history and degree attainment;
 - (C) the applicant's employment history;
 - (D) whether the applicant now has or has ever had an addiction to, or dependency on, alcohol or other controlled substances;
 - (E) whether the applicant has ever been convicted of a felony;
 - (F) whether any criminal charges or criminal investigations, if known, are pending against the applicant;
 - (G) the email address of a person, known by but not related to the applicant, to complete character reference statements on forms prescribed by the Board; and
 - (H) a copy of the applicant's government-issued identification document, such as a driver's license or passport.

(c) New Applicants – Level 1.

- (1) Education. In addition to the requirements set forth in Paragraph (b) of this Rule, new applicants shall submit evidence of completion of a clinical assistant education program at least 24 hours in length, of which at least 6 hours shall be in-person didactic training with an instructor or instructors who, based on education and experience, are competent to teach the portion of the curriculum they have been assigned. Credit for online coursework shall not exceed 18 hours, and all online coursework shall precede didactic training. The education program shall provide instruction in the five subjects set forth in G.S. 90-143.4(c) to enable its graduates to satisfy all applicable standards of care. To obtain approval of an education program, the program sponsor shall submit to the Board, at least 60 days prior to the proposed starting date, all instructional materials to be used in the program, including a syllabus of the didactic training, and a curriculum vitae for each instructor.
- (2) Examination. The proficiency examination for new applicants shall assess both academic knowledge and practical skills acquired through education programs and shall be administered at least four times per year on dates and at locations to be announced by the Board at least 30 days in advance and published on the Board's website at <https://ncchiroboard.com>. The minimum passing score on the examination is 75 percent.

(d) New Applicants – Level 2.

- (1) Education. In addition to the requirements set forth in Paragraphs (b) and (c) of this Rule, new applicants shall complete a radiological technologist education program at least 50 hours in length, of which at least 6 hours shall be in-person didactic training with an instructor or instructors who, based on education and experience, are competent to teach the portion of the curriculum they have been assigned, and completion of the practical requirement as set forth in Subparagraph (d)(2) of this Rule. The education program shall provide instruction in the five subjects set forth in G.S. 90-143.2 to enable its graduates to satisfy all applicable standards of care governing the production of X-rays. To obtain approval of an education program, the program sponsor shall submit to the Board, at least 60 days prior to the proposed starting date, all instructional materials to be used in the program, including a syllabus of the didactic training and a curriculum vitae for each instructor. Any person registered as "active" with the American Chiropractic Registry of

Radiologic Technologists shall be deemed to have satisfied the educational requirements of this Paragraph.

- (2) Practical Requirement. Upon completion of the training set forth in Subparagraph (d)(1) of this Rule, a person desiring certification as a Certified Chiropractic Assistant – Level 2 shall undergo a Practical Examination within six months of completing the written examination required in Paragraph (c)(2) of this Rule, whereby the person is evaluated by his or her program sponsor on the following competencies while performing x-ray examinations under the in-person observation of a sponsor for four different patients:
 - (A) Image quality;
 - (B) Marking sides of the body;
 - (C) Technique input to controller;
 - (D) Tube/focal film distance;
 - (E) Bucky/tube alignment;
 - (F) Patient positioning;
 - (G) Gonad shielding;
 - (H) Ability to name additional views in the series;
 - (I) Collimation;
 - (J) Anatomy viewed; and
 - (K) Technique calculated for measurement of patient.
- (3) The person must complete and score at least 64 total points on each of the Thoracic Spine, Lumbar Spine, and Cervical Spine Practical Examinations. The person shall submit written documentation of the Practical evaluation on a form prescribed by the Board that is available on the Board's website at <https://ncchiroboard.com/certified-chiropractic-assistant-level-2-xray/>. The person completing the Practical evaluation shall provide on the form the following information:
 - (A) The name and Certified Chiropractic Assistant number of the candidate;
 - (B) The date of the evaluation;
 - (C) The sponsoring doctor's name;
 - (D) The name and address of the sponsoring doctor's office;
 - (E) The signatures of the sponsoring doctor and the candidate; and
 - (F) Scoring of the candidate's competencies for the criteria set forth in Subparagraph (d)(2)(A) through (K) of this Rule.
- (4) Examination. The competency examination shall be administered at least three times per year. The Board shall publish on its website, <https://ncchiroboard.com>, the date, time, and location of the examination at least 30 days in advance. The minimum passing score is 75 percent.

(e) Reciprocity Applicants. A "reciprocity applicant" means an applicant who is currently certified or registered as a clinical assistant or X-ray technician in another state whose requirements for certification or registration are substantially similar to or more stringent than the requirements for certification in North Carolina. A reciprocity applicant shall submit a copy of the applicant's current certification or registration as a clinical assistant in a state with which North Carolina reciprocates and shall also submit written confirmation from the state's certifying authority or registrar that the applicant is in good standing in that state. Applicants for reciprocity shall pay the application fee set forth in Rule .0803(a)(1) of this Chapter.

(f) Certification Expiration and Renewal. Starting with certifications issued or renewed on or after July 1, 2022, a certificate of competency shall expire on June 30th of the second year following the year in which it was issued unless otherwise renewed. A Level 1 certificate holder seeking to renew shall submit evidence that the applicant has completed six hours of Board-approved continuing education. A Level 2 certificate holder shall complete six hours of education applicable to a Level 1 renewal plus six hours in radiologic technology. A certificate of attendance or completion issued by the course sponsor and filed with the Board shall constitute prima facie evidence that the applicant has completed the number of hours recited in the certificate. The applicant shall pay to the Board a renewal fee in the amount of fifty dollars (\$50.00).

(g) Lapsed Certificates. If a certificate of competency has lapsed due to non-renewal and the lapse does not exceed 60 days, the certificate holder may obtain reinstatement by making up the accrued deficiency in continuing education. If the lapse is greater than 60 days, no make-up continuing education shall be required, but the certificate holder shall re-take and pass the proficiency examination for new applicants. Regardless of the length of lapse, a certificate holder seeking reinstatement shall pay the renewal fee set forth in Paragraph (f) of this Rule.

(h) Exemptions. Graduates of accredited chiropractic colleges and students enrolled in accredited chiropractic colleges who are serving college-sponsored preceptorships in North Carolina are deemed by the Board to have

satisfied all requirements imposed by this Rule and shall be deemed competent to perform the duties of a clinical assistant. Any person who qualifies for exemption and who works as a clinical assistant in this state for more than 180 days shall submit the application pursuant to this Rule and note the claim of exempt status. Exempt persons shall not be required to pay a certification fee. For the purposes of this Rule, "accredited" shall mean colleges accredited by the Council on Chiropractic Education.

(i) Displaying Certificate. The holder of a Level 1 certificate issued pursuant to this Rule shall display the certificate in the chiropractic clinic in which the holder is employed in a location where the certificate may be viewed by patients. The holder of a Level 2 certificate issued pursuant to this Rule shall display the certificate in the x-ray room of the chiropractic clinic in which the holder is employed in a location where the certificate may be viewed by patients.

*History Note: Authority G.S. 90-142; 90-143.2; 90-143.4; 90-154.3;
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Oregon Revised Statutes

Chapter 684 — Chiropractors

2025 EDITION

CHIROPRACTORS

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GENERAL PROVISIONS

684.010 Definitions. As used in this chapter:

(1) "Active senior" means a person who:

- (a) Is licensed under ORS 684.054;
- (b) Is at least 60 years of age; and
- (c) Has been in practice for 25 years or more.

(2) "Chiropractic" is defined as:

(a) That system of adjusting with the hands the articulations of the bony framework of the human body, and the employment and practice of physiotherapy, electrotherapy, hydrotherapy and minor surgery.

(b) The chiropractic diagnosis, treatment and prevention of body dysfunction; correction, maintenance of the structural and functional integrity of the neuro-musculoskeletal system and the effects thereof or interferences therewith by the utilization of all recognized and accepted chiropractic diagnostic procedures and the employment of all rational therapeutic measures as taught in approved chiropractic colleges.

(3) "Chiropractic physician" means a person licensed by ORS 677.060, 684.025, 684.100, 684.155 or 688.010 to 688.201 and this section as an attending physician.

(4) "Drugs" means all medicines and preparations and all substances, except over-the-counter nonprescription substances, food, water and nutritional supplements taken orally, used or intended to be used for the diagnosis, cure, treatment, mitigation or prevention of diseases or abnormalities of humans, which are recognized in the latest editions of the official United States Pharmacopoeia, official Homeopathic Pharmacopoeia, official National Formulary, or any supplement to any of them, or otherwise established as drugs.

(5) "Minor surgery" means the use of electrical or other methods for the surgical repair and care incident thereto of superficial lacerations and abrasions, benign superficial lesions, and the removal of foreign bodies located in the superficial structures; and the use of antiseptics and local anesthetics in connection therewith. [Amended by 1953 c.541 §2; 1975 c.492 §1; 1987 c.726 §1; 1995 c.493 §1; 1997 c.264 §4; 2005 c.627 §17; 2007 c.618 §1; 2009 c.697 §9; 2009 c.756 §49]

684.015 Prohibited practices. (1) Without first complying with the provisions of this chapter, no person shall:

- (a) Practice or attempt to practice chiropractic.
 - (b) Buy, sell or fraudulently obtain a diploma or license to practice chiropractic, whether recorded or not.
 - (c) Use the title “Chiropractic,” “D.C.,” “Chiropractor,” “Chiropractic D.C.,” or “Ph.C.,” or any word or title to induce belief that the person is engaged in the practice of chiropractic.
 - (d) Place upon any door a sign for the purpose of displaying any of the titles mentioned in paragraph (c) of this subsection.
- (2) The display of such titles or any of them fraudulently obtained is prima facie evidence that such person is fraudulently engaged in the practice of chiropractic and subject to this chapter.
- (3) No person practicing under this chapter shall administer or write prescriptions for, or dispense drugs, practice optometry or naturopathic medicine or do major surgery. [Formerly 684.110]

684.020 License required to practice chiropractic; exceptions. (1) Except as provided in ORS 684.107, it is unlawful for any person to practice chiropractic in this state unless the person first obtains and maintains an active license, as provided in this chapter.

(2) Subsection (1) of this section shall not apply to a student of chiropractic engaging in clinical studies during the period of the student’s enrollment in an institution authorized to confer a doctoral degree in chiropractic. The clinical studies may take place on the premises of the educational institution or in a clinical setting located off the premises of the institution if the facility, the institution staff and the course of study to be pursued off the premises of the educational institution meet minimum requirements for supervision and patient care prescribed by the rules of the State Board of Chiropractic Examiners and the clinical study is performed under the direct supervision of a member of the faculty of the institution. [Amended by 1991 c.892 §1; 1995 c.493 §2; 1995 c.499 §3; 2001 c.598 §1]

684.023 [1975 c.492 §11; 1985 c.354 §3; repealed by 1987 c.726 §2]

684.025 Application of chapter; rules. (1) This chapter does not prevent a person licensed under ORS 684.054 from the administration of the anesthetics or antiseptics authorized in ORS 684.010 or the use of radiopaque substances administered by mouth or rectum necessary for Roentgen diagnostic purposes.

(2) Neither this section nor ORS 684.010 authorizes the administration of any substance by the penetration of the skin or mucous membrane of the human body for a therapeutic purpose.

(3) This chapter does not prohibit a person licensed under ORS 684.054 from accepting a referral from a practitioner licensed under ORS chapter 686. The care rendered as a result of the referral must be in writing and in accordance with ORS 686.040 (4) and only as prescribed and diagnosed by a licensee under ORS chapter 686. The applicable standard of care is established under ORS chapter 686.

(4)(a) This chapter does not prevent a person licensed under ORS 684.054 from providing emergency first aid, including administering emergency oxygen.

(b) A person may not administer emergency oxygen unless the person has received training in the administration of oxygen. The State Board of Chiropractic Examiners shall adopt rules that establish training requirements.

(c) As used in this subsection, “emergency oxygen” means oxygen delivered at a minimum flow rate for a specified period of time as determined and regulated by the United States Food and Drug Administration. [Formerly 684.115; 1987 c.726 §4; 1997 c.264 §5; 2007 c.618 §2]

684.030 Application of public health laws. Chiropractic physicians shall observe and be subject to all state and municipal regulations relating to the control of contagious and infectious diseases, sign reports of live birth and death, and report all matters pertaining to public health to the proper health officers the same as other practitioners. [Amended by 2013 c.366 §78]

684.035 Chapter not applicable to other methods of healing. Nothing in this chapter shall be construed to interfere with any other method or science of healing in this state. [Formerly 684.120]

LICENSING

684.040 Application for license; qualifications; fees; rules. (1) A person applying for a license to practice chiropractic in this state shall apply to the State Board of Chiropractic Examiners on a form and in the manner prescribed by the board. The application must be accompanied by the following nonrefundable fees:

- (a) An application fee in an amount established by the board by rule; and
- (b) The fee for a criminal records check in the amount established by the board by rule under ORS

181A.195.

- (2) Each applicant shall furnish to the board:

- (a) Evidence satisfactory to the board of the applicant's good moral character.

- (b) A certificate of proficiency in the fundamental sciences (Part I, taken subsequent to January 1, 1971) issued to the applicant by the National Board of Chiropractic Examiners.

- (c) Evidence of successful completion of at least two years of liberal arts and sciences study, in any college or university accredited by either the Northwest Commission on Colleges and Universities or its successor, or a like regional association, or in any college or university in Oregon approved for granting degrees by the Higher Education Coordinating Commission.

- (d) A diploma and transcript, certified by the registrar, or other documents satisfactory to the State Board of Chiropractic Examiners evidencing graduation from a chiropractic school or college approved by the board under the board's academic standards, or from a school accredited by the Council on Chiropractic Education or its successor agency, under standards that are accepted and adopted biennially by the board in the version applied to that school by the accrediting agency.

- (e) A statement of any other health care provider license in this state held by the applicant, with identifying information required by the State Board of Chiropractic Examiners.

(3) An applicant meets the requirements of subsection (2)(c) or (d) of this section if the applicant provides the State Board of Chiropractic Examiners with documentation of military training or experience that the board determines is substantially equivalent to the education required by subsection (2)(c) or (d) of this section.

(4) The State Board of Chiropractic Examiners may waive the requirements of subsection (2)(c) of this section for any applicant for a license to practice chiropractic if the applicant is licensed in another state and practiced chiropractic in that state, but the applicant must pass the examination authorized by ORS 684.050 or by ORS 684.052. [Amended by 1953 c.432 §2; 1969 c.191 §1; 1973 c.31 §4; 1975 c.492 §2; 1985 c.354 §4; 1987 c.376 §1; 1989 c.805 §1; 1991 c.300 §1; 1991 c.892 §2; 1995 c.493 §3; 1997 c.264 §6; 1997 c.652 §41; 2005 c.730 §84; 2011 c.637 §286; 2012 c.43 §14; 2013 c.1 §87; 2013 c.514 §1; 2013 c.747 §174]

684.050 Examination; reexamination fee; rules. (1) The State Board of Chiropractic Examiners shall conduct examinations for a license to practice chiropractic in this state according to the method deemed to be the most practicable to test the applicant's qualifications.

(2) The board shall give an examination on subjects described in subsection (3) of this section. The board shall determine the passing score. The board shall give an applicant credit for all sections passed. The board may authorize an applicant to retake all or part of an examination upon payment of a fee established by the board by rule.

(3) The schedule of minimum educational requirements to enable a person to practice chiropractic in this state includes:

- (a) The basic science subjects of anatomy, physiology, chemistry, pathology and public health and hygiene;

- (b) The clinical subjects of physical diagnosis, differential diagnosis, laboratory diagnosis, theory and practice of chiropractic, nutrition and dietetics, physiotherapy, electrotherapy, hydrotherapy, chiropractic orthopedics, written and practical roentgenology, eye-ear-nose-throat, proctology, obstetrics and gynecology, minor surgery, jurisprudence, psychology and office procedure; and

- (c) Other subjects that the board may, from time to time, require, except internal medicine and major surgery.

(4) The minimum number of academic hours in an approved chiropractic college may not be less than 4,200 or the equivalent requirement in semester or quarter credits.

(5) The board may recognize a national chiropractic testing agency for grades received in both basic science and clinical subjects. [Amended by 1975 c.492 §3; 1987 c.376 §2; 1991 c.300 §2; 1995 c.493 §4; 1997 c.264 §7; 2007 c.618 §3; 2013 c.514 §2]

684.052 Use of nationally administered test. In lieu of an examination in any or all required subjects, the State Board of Chiropractic Examiners may accept a passing grade on a test administered by a national testing agency approved by the board if the test is no less strict than a test administered under ORS 684.050. [1969 c.191 §7]

684.054 Issuing license; chiropractic assistant; fees; rules; notification of address change required. (1) Upon complying with ORS 684.040, and earning a passing grade on the examination authorized by ORS 684.050 or 684.052, an applicant shall be licensed as a chiropractic physician upon payment of a fee established by the State Board of Chiropractic Examiners by rule, unless the board refuses to grant the license on grounds specified in ORS 684.100.

(2) A chiropractic physician shall promptly notify the board of any change in the professional address of the chiropractic physician.

(3) After meeting the standards of the board for a chiropractic assistant under ORS 684.155, a person shall be certified as a chiropractic assistant upon payment of an application fee, examination fee and initial certificate fee established by the board by rule. The certificate may be renewed annually upon payment of a fee established by the board by rule. [1969 c.191 §3; 1989 c.805 §2; 1991 c.300 §3; 2013 c.514 §3]

684.060 Reciprocity; fee; rules. (1) A person licensed to practice chiropractic under the laws of another state who demonstrates to the satisfaction of the State Board of Chiropractic Examiners that the person possesses qualifications at least equal to those required of persons eligible for licensing under this chapter and who meets the requirements of ORS 684.040 may be issued a license to practice chiropractic in this state without examination upon payment of a fee established by the board by rule.

(2) The board may fix the minimum number of years of practice under the laws of another state required to qualify for a license under this section. [Amended by 1969 c.191 §4; 1991 c.300 §4; 1991 c.892 §5; 2013 c.514 §4]

684.070 [Repealed by 1975 c.492 §12]

684.080 [Repealed by 1975 c.492 §12]

684.090 Annual registration; fees; rules; failure to renew license. (1) In addition to meeting the requirements of ORS 684.092, a person practicing chiropractic in this state shall, on or before the renewal date of each year after a license is issued to the person, pay to the State Board of Chiropractic Examiners an annual registration fee in an amount established by the board by rule and approved by the Oregon Department of Administrative Services.

(2) The maximum annual registration fee for an active senior may not exceed 75 percent of the annual registration fee.

(3) The board, at least 30 days prior to the renewal date, shall mail to the last-known professional address of each licensee a notice of the requirements of ORS 684.092 and that the annual registration fee will be due on or before the renewal date next following.

(4) The annual registration fee is payable only by personal, corporate or certified check, money order, credit card or other electronic method.

(5) If a person holding a license or certificate to practice under this chapter fails to pay the annual registration fee and to show compliance with or exemption from the requirement of ORS 684.092 before the renewal date, the license or certificate expires 30 days after the renewal date.

(6)(a) A license or certificate that is not renewed on time may not be renewed except:

(A) Upon written application and payment to the board of a fee established by the board by rule for the late renewal of the license or certificate; and

(B) Upon compliance with or exemption from the requirements of ORS 684.092.

(b) A licensee who pays the annual renewal fee and shows compliance or exemption within 12 months of the expiration date of the license may not be required to submit to an examination for the reissuance of a license. [Amended by 1957 c.40 §1; 1969 c.191 §8; 1971 c.14 §2; 1974 c.48 §1; 1975 c.492 §4; 1989 c.805 §3; 1991 c.300 §5; 1991 c.892 §6; 1995 c.493 §5; 1997 c.264 §8; 2001 c.598 §2; 2001 c.745 §1; 2007 c.618 §4; 2013 c.514 §5]

684.092 Completion of continuing education and pain management program required; exemptions. (1)

Except as provided in subsection (3) of this section, a chiropractic physician submitting a fee under ORS 684.090 shall, at the same time, verify with satisfactory evidence the successful completion of approved continuing chiropractic education during the preceding 12-month period as provided in subsection (2) of this section and completion, or documentation of completion within the previous 36 months, of:

(a) A one-hour pain management education program approved by the State Board of Chiropractic Examiners and developed based on recommendations of the Pain Management Commission; or

(b) An equivalent pain management education program, as determined by the board.

(2) A chiropractic physician submitting a fee under ORS 684.090 shall verify completion during the previous 12-month period of:

(a) At least 20 hours of approved continuing chiropractic education, for a person actively practicing chiropractic.

(b) At least six hours of approved continuing chiropractic education, for an active senior.

(3) The State Board of Chiropractic Examiners may exempt a chiropractic physician from the requirements of subsection (1) of this section upon an application by the chiropractic physician showing by evidence satisfactory to the board that the chiropractic physician is unable to comply with the requirements because of unusual or extenuating circumstances or because no program has been approved by the board. [1969 c.191 §5; 1995 c.79 §345; 1995 c.493 §6; 1997 c.264 §9; 2001 c.987 §16; 2007 c.618 §5; 2021 c.50 §8]

684.094 Procedure for approving continuing education courses. (1) The State Board of Chiropractic Examiners shall require a person seeking approval of a program of continuing chiropractic education to submit proof that the course complies with the continuing education requirements established by the board.

(2) The board may approve any program covering new, review, experimental, research or specialty subjects in the field of chiropractic to be presented by persons reasonably qualified to do so.

(3) Approval granted to a program under subsection (2) of this section shall be reviewed periodically and approval shall be withdrawn from a program that fails to meet the requirements of the board. [1969 c.191 §6; 1991 c.892 §15; 1995 c.493 §7; 1997 c.264 §10]

684.100 Grounds for discipline of licensee or refusal to license; restoration; suspension; competency examinations; confidential information. (1) The State Board of Chiropractic Examiners may refuse to grant a license to any applicant or may discipline a person upon any of the following grounds:

(a) Fraud or misrepresentation.

(b) The practice of chiropractic under a false or assumed name.

(c) The impersonation of another practitioner of like or different name.

(d) A conviction of a felony or misdemeanor involving moral turpitude. A copy of the record of conviction, certified to by the clerk of the court entering the conviction, is conclusive evidence of the conviction.

(e) Impairment as defined in ORS 676.303.

(f) Unprofessional or dishonorable conduct, including but not limited to:

(A) Any conduct or practice contrary to recognized standard of ethics of the chiropractic profession or any conduct or practice that does or might constitute a danger to the health or safety of a patient or the public or any conduct, practice or condition that does or might adversely affect a physician's ability safely and skillfully to practice chiropractic.

(B) Willful ordering or performance of unnecessary laboratory tests or studies; administration of unnecessary treatment; failure to obtain consultations or perform referrals when failing to do so is not consistent with the standard of care; or otherwise ordering or performing any chiropractic service, X-ray or treatment that is contrary to recognized standards of practice of the chiropractic profession.

(C) Gross malpractice or repeated malpractice.

(g) Failing to notify the board of a change in location of practice as provided in ORS 684.054.

(h) Representing to a patient that a manifestly incurable condition of sickness, disease or injury can be permanently cured.

(i) The use of any advertising making untruthful, improper, misleading or deceptive statements.

(j) The advertising of techniques or modalities to infer or imply superiority of treatment or diagnosis by the use thereof that cannot be conclusively proven to the satisfaction of the board.

(k) Knowingly permitting or allowing any person to use the license of the person in the practice of any system or mode of treating the sick.

(L) Advertising either in the name of the person or under the name of another person, clinic or concern, actual or pretended, in any newspaper, pamphlet, circular or other written or printed paper or document, professing superiority to or a greater skill than that possessed by other chiropractic physicians that cannot be conclusively proven to the satisfaction of the board.

(m) Aiding or abetting the practice of any of the healing arts by an unlicensed person.

(n) The use of the name of the person under the designation, "Doctor," "Dr.," "D.C.," "Chiropractor," "Chiropractic D.C.," "Chiropractic Physician," or "Ph.C.," or any similar designation with reference to the commercial exploitation of any goods, wares or merchandise.

(o) The advertising or holding oneself out to treat diseases or other abnormal conditions of the human body by any secret formula, method, treatment or procedure.

(p) Violation of any provision of this chapter or any rule adopted thereunder.

(q) Gross incompetency or gross negligence.

(r) The suspension or revocation by another state of a license to practice chiropractic, based upon acts by the licensee similar to acts described in this section. A certified copy of the record of suspension or revocation of the state making the suspension or revocation is conclusive evidence thereof.

(s) Failing to give prior notice to patients of the permanent or temporary closure of the physician's practice or failing to give reasonable access to the records and files of the physician's patients at any time.

(t) The suspension or revocation by another licensing board in the state of a license to practice as another type of health care provider.

(u) An act or conduct that results in a judgment of wrongdoing by a court of competent jurisdiction in any state or a finding of wrongdoing in an administrative proceeding in any state. The act or conduct must be rationally connected to the ability to practice chiropractic or chiropractic assisting.

(2) The board may, at any time two years or more after the refusal, revocation or cancellation of registration under this section, by a majority vote, issue a license restoring to or conferring on the person all the rights and privileges of the practice of chiropractic as defined and regulated by this chapter. Any person to whom those rights have been restored shall pay to the board the annual registration fee for the license category plus one-half thereof.

(3) If the board determines that a chiropractic physician's continuation in practice would constitute a serious danger to the public, the board may suspend the license of the chiropractic physician without a hearing. Simultaneously with the order of suspension, the board must institute proceedings for a hearing provided under this section and the suspension may continue unless injunctive relief is obtained from a court of competent jurisdiction showing just cause or undue burden under the circumstances existing.

(4) If a physician refuses a written request for an informal interview with the board, the board shall have grounds to suspend or revoke the license of a physician pursuant to this section.

(5) Prior to or following an informal interview as described in this section, the board may request any Oregon licensed chiropractic physician in good standing to assist the board in preparing for or conducting any professional competency examination as the board may deem appropriate.

(6) Notwithstanding any other provisions of ORS 684.010, 684.040, 684.050, 684.090, 684.100, 684.112, 684.130, 684.150 and 684.155, the board may at any time direct and order a professional competency examination limited to the area of practice out of which a specific complaint has arisen and make an investigation, including the taking of depositions or otherwise in order to fully inform itself with respect to the performance or conduct of a physician licensed under ORS 684.010, 684.040, 684.050, 684.090, 684.100, 684.112, 684.130, 684.150 and 684.155.

(7) If the board has reasonable cause to believe that any:

(a) Chiropractic physician is or may be unable to practice with reasonable skill and safety to patients, the board may:

(A) Cause a competency examination of the physician for purposes of determining the physician's fitness to practice chiropractic with reasonable skill and safety to patients; or

(B) Require the fingerprints and relevant personal history data of the physician for the purpose of requesting a state or nationwide criminal records check under ORS 181A.195.

(b) Person certified to provide physiotherapy, electrotherapy or hydrotherapy pursuant to ORS 684.155 (1)(c) is or may be unable to provide the therapies with reasonable skill and safety to patients, the board may:

(A) Cause a competency examination of the person for purposes of determining the person's fitness to provide the therapies with reasonable skill and safety to patients; or

(B) Require the fingerprints and relevant personal history data of the person for the purpose of requesting a state or nationwide criminal records check under ORS 181A.195.

(8) Refusal by any person to take or appear for a competency examination scheduled by the board or to submit fingerprints and relevant personal history data as required by the board under subsection (7) of this section shall constitute grounds for disciplinary action.

(9) In disciplining a person as authorized by subsection (1) of this section, the board may use any or all of the following methods:

(a) Suspend judgment.

(b) Place the person on probation.

(c) Suspend the license of the person to practice chiropractic in this state.

(d) Revoke the license of the person to practice chiropractic in this state.

(e) Place limitations on the license of the person to practice chiropractic in this state.

(f) Impose a civil penalty not to exceed \$10,000.

(g) Take other disciplinary action as the board in its discretion finds proper, including assessment of the costs of the disciplinary proceedings.

(10)(a) Any information that the board obtains pursuant to ORS 684.100, 684.112 and 684.155 (9) is confidential as provided under ORS 676.175.

(b) Any person who reports or provides information to the board under ORS 684.090, 684.100, 684.112, 684.150 and 684.155 and who provides information in good faith shall not be subject to an action for civil damages as a result thereof. [Amended by 1953 c.556 §2; 1971 c.734 §129; 1973 c.265 §1; 1975 c.492 §5; 1979 c.744 §56; 1985 c.354 §5; 1987 c.376 §3; 1987 c.726 §3; 1989 c.224 §135; 1989 c.565 §1; 1991 c.892 §7; 1997 c.791 §36; 2005 c.730 §45,84b; 2007 c.618 §6; 2009 c.756 §50]

684.103 [1997 c.264 §3; 2009 c.756 §51; repealed by 2009 c.697 §14]

684.105 Discipline procedure; review of board orders. (1) Where the State Board of Chiropractic Examiners proposes to refuse to issue a license, or proposes to revoke or suspend a license, opportunity for hearing shall be accorded as provided in ORS chapter 183.

(2) Judicial review of orders under subsection (1) of this section shall be in accordance with ORS chapter 183. [1971 c.734 §131]

684.107 Exemption from licensure requirement for person licensed in another state. A person licensed to practice chiropractic under the laws of another state is exempt from the licensure requirement in ORS 684.020 if that person:

(1) Is practicing in Oregon on a single, temporary assignment for a specific sporting, performing arts or educational event not to exceed 15 days; and

(2) Is actively engaged in the practice of chiropractic in the state in which the person is licensed. [1995 c.499 §2]

684.110 [Amended by 1953 c.541 §2; renumbered 684.015]

684.112 Records of chiropractor also licensed to practice other healing art; submission to board. A person licensed under this chapter, who is also licensed to practice any other healing art, shall maintain in-office and patient records and files, the services provided to the patient, diagnostic and therapeutic procedures employed, the nature of such procedures and services and whether such procedures and services were rendered as a chiropractor. Such records pertaining to a specific complaint shall be submitted to the State Board of Chiropractic Examiners for inspection at its request. [1975 c.492 §8]

684.115 [1953 c.541 §2; renumbered 684.025]

684.120 [Renumbered 684.035]

STATE BOARD

684.130 State Board of Chiropractic Examiners. (1) There is established the State Board of Chiropractic Examiners. The board consists of seven members appointed by the Governor and subject to confirmation by the Senate in the manner provided in ORS 171.562 and 171.565. All members of the board must be residents of this state. Of the members of the board:

- (a) Five must be chiropractors; and
- (b) Two must be members of the public who are not chiropractors or a spouse, domestic partner, child, parent or sibling of a chiropractor.

(2)(a) Board members required to be chiropractors may be selected by the Governor from a list of three to five nominees for each vacancy, submitted by any professional organization representing chiropractors.

(b) The chiropractor members must have practiced chiropractic in this state for five years prior to appointment.

(c) In selecting the members of the board, the Governor shall strive to balance the representation on the board according to:

- (A) Geographic areas of this state; and
- (B) Ethnic group.

(3)(a) Annually, upon the expiration of the term of any member of the board, the Governor shall appoint one or more qualified persons to the board to serve for a period of three years. A member serves at the pleasure of the Governor. The terms must be staggered so that no more than three terms end each year. If a vacancy occurs in the membership of the board for any reason, the Governor shall make an appointment to become immediately effective for the unexpired term.

(b) A board member shall be removed immediately from the board if, during the member's term, the member:

- (A) Is not a resident of this state;
- (B) Has been absent from three consecutive board meetings, unless at least one absence is excused; or
- (C) Is not a licensed chiropractor or a retired chiropractor who was a licensed chiropractor in good standing at the time of retirement, if the board member was appointed to serve on the board as a chiropractor. [Amended by 1971 c.650 §33; 1973 c.792 §39; 1975 c.492 §10; 1991 c.892 §8; 1997 c.264 §11; 2007 c.618 §7; 2009 c.535 §19; 2009 c.756 §52]

684.140 Officers of board. The State Board of Chiropractic Examiners shall annually elect a president, a vice president and a secretary-treasurer from its membership. The executive director of the board shall keep a record of the proceedings of the board which shall be open to public inspection at all times during business hours. [Amended by 1991 c.892 §9; 2009 c.756 §53]

684.150 Powers and duties of board; rules. (1) The State Board of Chiropractic Examiners shall adopt a seal which shall be affixed to all licenses issued by it. The board shall from time to time adopt such rules as it deems proper and necessary for the administration of this chapter and the performance of its work. Upon receipt of a complaint, the board has authority to make investigations, administer oaths, take affidavits, summon witnesses, and require the production of evidence, documents and records pertaining to the complaint. The board may also take testimony as to matters pertaining to its duties and for the administration of this chapter. A majority of the board constitutes a quorum.

(2) The board shall meet as a board of examiners during the months of January and July each year on such days and at such times and places as may be found necessary for the performance of its duties.

(3) The board shall adopt a schedule of minimum educational requirements, which shall be without prejudice or discrimination as to the different colleges teaching chiropractic. [Amended by 1975 c.492 §6; 1987 c.376 §4; 2001 c.598 §2a]

684.155 Additional powers of board; rules. In addition to any other powers granted by this chapter, the State Board of Chiropractic Examiners may:

- (1) Adopt necessary and proper rules:

(a) To establish standards and tests to determine the moral, intellectual, educational, scientific, technical and professional qualifications of applicants for licenses to practice in this state.

(b) To enforce the provisions of this chapter and to exercise general supervision over the practice of chiropractic within this state.

(c) To establish standards and procedures for certifying chiropractic assistants as qualified to provide physiotherapy, electrotherapy or hydrotherapy under the direction of a chiropractic physician, and to establish continuing education requirements as a condition of maintaining such certification.

(d) To establish standards for the use of ancillary personnel. As used in this paragraph, “ancillary personnel” means a chiropractic physician’s personnel who are directed or designated, by spoken or written words or other means, to follow and carry out the chiropractic physician’s orders or directions.

(2) Issue, deny, suspend and revoke licenses and limited licenses, assess costs of proceedings and place persons on probation as provided in this chapter.

(3) Without the necessity of prior administrative proceedings or hearing and entry of an order or at any time during such proceedings if they have been commenced, institute proceedings to enjoin the practice of any person operating in violation of this chapter.

(4) Make its personnel and facilities available to other regulatory agencies of this state, or other bodies interested in the development and improvement of the practice of chiropractic in this state, upon such terms and conditions for reimbursement as are agreed to by the board and the other agency or body.

(5) Determine the chiropractic schools, colleges and institutions and the training acceptable in connection with licensing under this chapter and approve residency, internship and other training programs carried on by chiropractic schools, colleges or institutions or chiropractic facilities.

(6) Prescribe the time, place, method, manner, scope and subjects of examinations under this chapter.

(7) Prescribe all forms that it considers appropriate for the purposes of this chapter, and require the submission of photographs and relevant personal history data by applicants for licenses to practice chiropractic in this state.

(8) For the purpose of requesting a state or nationwide criminal records check under ORS 181A.195 require each applicant for a license or certification, or renewal of a license or certification, to be fingerprinted.

(9) Subject to ORS 684.150, administer oaths, issue notices and subpoenas in the name of the board, enforce subpoenas in the manner authorized by ORS 183.440, hold hearings and perform such other acts as are reasonably necessary to carry out its duties under this chapter.

(10) Establish specialty certificate requirements within the practice of chiropractic, adopt rules applicable to specialty certification and require specialty certification for chiropractic physicians engaging in practices identified by the board as requiring specialty certification. [1975 c.492 §9; 1987 c.726 §11; 1989 c.805 §4; 1991 c.892 §10; 1995 c.493 §8; 1997 c.264 §12; 2001 c.598 §2b; 2005 c.730 §46; 2013 c.514 §6]

684.156 Continuing authority of board upon lapse, suspension, revocation or voluntary surrender of license. The lapse, suspension or revocation of a license issued under ORS chapter 684 by the operation of law or by order of the State Board of Chiropractic Examiners or by the decision of a court of law, or the voluntary surrender of a license by a licensee, shall not deprive the board of jurisdiction to proceed with any investigation of or any action or disciplinary proceeding against the licensee or to revise or render null and void an order of disciplinary action against the licensee. [2001 c.598 §5]

Note: 684.156 was enacted into law by the Legislative Assembly but was not added to or made a part of ORS chapter 684 or any series therein by legislative action. See Preface to Oregon Revised Statutes for further explanation.

684.157 [1997 c.264 §2; 2009 c.756 §54; repealed by 2009 c.697 §14]

684.160 Compensation and expenses of board members; rules. (1) A member of the State Board of Chiropractic Examiners is entitled to compensation and expenses as provided in ORS 292.495. The board may provide by rule for compensation to board members for the performance of official duties at a rate that is greater than the rate provided in ORS 292.495.

(2) Such per diem and mileage, and other incidental expenses necessarily connected with the board shall be paid out of the account of the State Board of Chiropractic Examiners and not otherwise. [Amended by 1967 c.10 §2; 1969 c.314 §85; 2009 c.535 §20]

684.170 [Amended by 1967 c.637 §31; repealed by 1973 c.427 §25 (684.171 enacted in lieu of 684.170)]

684.171 State Board of Chiropractic Examiners Account. All moneys received by the State Board of Chiropractic Examiners under this chapter shall be paid into the General Fund in the State Treasury and placed to the credit of the State Board of Chiropractic Examiners Account which is hereby established and such moneys are appropriated continuously and shall be used only for the administration and enforcement of this chapter and ORS 676.850 and 676.860. [1973 c.427 §26 (enacted in lieu of 684.710); 1991 c.892 §11; 2013 c.240 §13; 2017 c.511 §9]

684.180 [Repealed by 1969 c.191 §10]

684.185 Peer review committees; duties; appointment; confidentiality of information. (1) The State Board of Chiropractic Examiners shall appoint and form peer review committees. The peer review committee shall evaluate complaints against chiropractic physicians that are referred to it by the board and report to the board regarding those complaints.

(2) The members of a peer review committee shall be appointed from among those in the profession who are in active practice with five or more years of practice representing various geographic areas in this state. Members shall be representative of affiliated and nonaffiliated chiropractic physicians and representative of various aspects of the practice of chiropractic. To be appointed a member must receive at least four votes from members of the state board. Members shall serve three-year terms. No member may serve more than two consecutive terms.

(3) The peer review process shall be governed by rules of the state board adopted pursuant to ORS chapter 183. The state board shall provide appropriate training for members of peer review committees.

(4) Members of a peer review committee acting pursuant to this section are agents of the state board and are subject to provisions of ORS 30.260 to 30.300.

(5) Peer review shall not be used to replace independent medical examinations.

(6) Upon receipt of a complaint under this chapter, the peer review committee shall conduct an investigation as described under ORS 676.165.

(7) Any information provided to a peer review committee in the performance of its duties is confidential and shall not be subject to public disclosure or admissible as evidence in any judicial proceeding, except that as a part of a peer review report, this information may be disclosed to the state board and the person being reviewed who may then use the information in any disciplinary or court proceeding brought by the board. Peer review committee information that becomes part of the record of a board investigation into licensee or applicant conduct or part of a contested case proceeding, consent order or stipulated agreement involving licensee or applicant conduct is confidential as provided under ORS 676.175.

(8) Any person who reports or provides information to a peer review committee in the performance of its duties and who provides information in good faith shall not be subject to an action for civil damages as a result thereof. [1987 c.376 §5; 1991 c.892 §12; 1997 c.264 §13; 1997 c.791 §37; 2001 c.598 §3]

Note: 684.185 was enacted into law by the Legislative Assembly but was not added to or made a part of ORS chapter 684 or any series therein by legislative action. See Preface to Oregon Revised Statutes for further explanation.

ENFORCEMENT

684.190 Enforcement of chapter. (1) The district attorneys shall prosecute all persons charged with violation of any of the provisions of this chapter. The executive director of the State Board of Chiropractic Examiners, under the direction of the board, shall aid the district attorneys in the enforcement of this chapter.

(2) The justice courts of the several counties have concurrent jurisdiction with the circuit courts in the enforcement of this chapter. [Amended by 1991 c.892 §13; 1995 c.658 §113]

684.200 Report of suspected violation; confidentiality of information; liability of supplier. (1)(a) Unless state or federal laws relating to confidentiality or the protection of health information prohibit disclosure, any

licensee licensed by the State Board of Chiropractic Examiners shall report any suspected violation of this chapter or any prohibited conduct as defined in ORS 676.150 in the manner provided in ORS 676.150.

(b) Any person may report to the board any suspected violation of this chapter.

(2) Information pertaining to a report required by subsection (1) of this section shall remain confidential and is not subject to public disclosure except as considered necessary by the board in the enforcement of this chapter.

(3) Any person who reports or provides information to the board under this section in good faith is not subject to an action for civil damages as a result thereof. [1985 c.354 §7; 1991 c.892 §14; 2009 c.536 §3]

PENALTIES

684.990 Penalties. Violation of ORS 684.020 (1) is a Class A misdemeanor. [Amended by 2001 c.598 §4]

Chiropractic Examining Board
Rule Projects (updated 07/06/2026)

Clearinghouse Rule Number	Scope #	Scope Expiration	Code Chapter Affected	Relating clause	Synopsis	Current Stage	Next Step
Not Assigned Yet	081-25	06/15/2028	Chir 3	Renewal Requirements	The Board wants to clarify the requirements for late renewal and updated language to follow current standards of practice.	Drafting rule.	Clearinghouse review, EIA, and public hearing.

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

AGENDA REQUEST FORM

1) Name and title of person submitting the request: Will Johnson, Executive Director		2) Date when request submitted: 07/01/2026 Items will be considered late if submitted after 12:00 p.m. on the deadline date which is 8 business days before the meeting											
3) Name of Board, Committee, Council, Sections: Chiropractic Examining Board													
4) Meeting Date: 07/16/2026	5) Attachments: ☐ Yes ☒ No	6) How should the item be titled on the agenda page? Speaking Engagements, Travel, or Public Relation Requests, and Reports Discussion and Consideration National Board of Chiropractic Examiners Committee Meeting – Report FCLB District Meeting, September 17-20, 2026, Ft. Walton, FL - Consideration											
7) Place Item in: ☒ Open Session ☐ Closed Session		8) Is an appearance before the Board being scheduled? <i>(If yes, please complete Appearance Request for Non-DSPS Staff)</i> ☐ Yes ☐ No	9) Name of Case Advisor(s), if required:										
10) Describe the issue and action that should be addressed: Listing of courses approved in an expedited fashion since the last meeting													
<table style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="2" style="border-bottom: 1px solid black; padding-bottom: 5px;"> 11) Authorization Will Johnson 07/01/2026 </td> </tr> <tr> <td style="border-bottom: 1px solid black; padding-bottom: 5px; width: 60%;"> Signature of person making this request </td> <td style="border-bottom: 1px solid black; padding-bottom: 5px; width: 40%;"> Date </td> </tr> <tr> <td style="border-bottom: 1px solid black; padding-bottom: 5px;"> Supervisor (if required) </td> <td style="border-bottom: 1px solid black; padding-bottom: 5px;"> Date </td> </tr> <tr> <td colspan="2" style="border-bottom: 1px solid black; padding-bottom: 5px;"> Executive Director signature (indicates approval to add post agenda deadline item to agenda) </td> </tr> <tr> <td colspan="2" style="border-bottom: 1px solid black; padding-bottom: 5px;"> Date </td> </tr> </table>				11) Authorization Will Johnson 07/01/2026		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.													