

CHAPTER 2500

STATE BOARD OF CHIROPRACTIC EXAMINERS

CHIROPRACTORS' LICENSING AND PRACTICE

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2500.0100 DEFINITIONS.

Subpart 1. **Scope.** For the purposes of this chapter, the terms defined in this part have the meanings given them.

Subp. 2. **Accredited school.** "Accredited school" means a school of chiropractic which has been approved by the Council on Chiropractic Education or fully accredited by an agency approved by the United States Office of Education or its successor as of January 1, 1988.

Subp. 3. **Acupuncture.** "Acupuncture" means a modality of treating abnormal physical conditions by stimulating various points of the body or interruption of the cutaneous integrity by needle insertion to secure a reflex relief of the symptoms by nerve stimulation as utilized as an adjunct to chiropractic adjustment.

Subp. 3a. **Blood borne diseases.** "Blood borne diseases" means diseases that are spread through the exposure to, inoculation, or injection of blood; or exposure to blood contained in body fluids, tissues, or organs. Blood borne diseases include infection caused by such agents as the human immunodeficiency virus (HIV) and hepatitis B virus (HBV).

Subp. 3b. **Board.** "Board" means the Minnesota Board of Chiropractic Examiners.

Subp. 4. **Certification of good standing.** "Certification of good standing" means the issuance of an official notice from another state certifying the licensee has no pending or final disciplinary action.

Subp. 4a. **Continuing education unit.** "Continuing education unit" means one 50-minute session that qualifies under part 2500.1500 as an approved program.

Subp. 4b. **Diagnosis.** "Diagnosis" means the physical, clinical, and laboratory examination of the patient, and the use of X-ray for diagnostic purposes within the scope of practice described in Minnesota Statutes, sections 148.01 to 148.10.

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Subp. 5. Direct patient care. "Direct patient care" means primary chiropractic care given to an individual who has sought such care from a doctor of chiropractic in a chiropractic office or clinic.

Subp. 5a. Good standing. "Good standing" means any license which is not the subject of current disciplinary action as identified in Minnesota Statutes, section 148.10, subdivisions 1, 3, and 4. The pendency of a complaint shall not cause a license to lose good standing unless and until the complaint results in disciplinary action under Minnesota Statutes, section 148.10 or pursuant to a stipulation and order. A license shall be restored to good standing upon the satisfactory completion, expiration, or other agreed upon termination of all terms of a stipulation and order. An agreement for corrective action as described under Minnesota Statutes, section 214.103, subdivision 6, shall not cause a license to lose good standing.

Subp. 6. Inactive license. "Inactive license" means a restricted license that allows the licensee to maintain a license but does not allow the licensee to actively practice in Minnesota.

Subp. 7. Independent examination. "Independent examination" means a physical examination of a patient or a review of records by a doctor of chiropractic, for the purpose of generating a report or opinion to aid a reparation obligor under Minnesota Statutes, chapter 65B, in making a determination regarding the condition or further treatment of the patient.

Subp. 7a. Infection control. "Infection control" means programs, procedures, and methods to reduce the transmission of agents of infection for the purpose of preventing or decreasing the incidence of infectious diseases.

Subp. 8. Instructor. "Instructor" means a full-time faculty member of an accredited school who is duly licensed in the state of Minnesota, and has attained a status of professor, associate professor, assistant professor, or instructor. An instructor does not include adjunct faculty, postgraduate faculty, or part-time faculty.

Subp. 8a. Intern. "Intern" means an unlicensed graduate of a board-approved chiropractic college who assists in the care of patients outside the confines of the clinic of a chiropractic college.

Subp. 9. Invasive. "Invasive" means instrumental penetration of the viscera or non-superficial tissues of the body, specifically excluding acupuncture.

Subp. 9a. License. "License" means a license issued by the board to practice chiropractic including an original license or renewal license.

Subp. 9b. Practice of chiropractic. "Practice of chiropractic" means the diagnosis, prognosis, and treatment by chiropractic methods that include those procedures preparatory to and complementary to an adjustment and the normal chiropractic regimen and rehabilitation of the patient as taught in accredited chiropractic schools and colleges.

Subp. 9c. Private practice. "Private practice" means a privately owned chiropractic business held individually or by incorporation operating without the interest of any hospital, teaching facility, or insurance company.

Subp. 10. Qualified staff. "Qualified staff" means a person who has specific training in an area of rehabilitative therapy and who will administer rehabilitative therapies to a patient.

Subp. 11. Rehabilitative therapy. "Rehabilitative therapy" means therapy that restores an ill or injured patient to the maximum functional improvement by employing within the practice of chiropractic those methods, procedures, modalities, devices, and measures which include mobilization; thermotherapy; cryotherapy; hydrotherapy; exercise therapies; nutritional therapy; meridian therapy; vibratory therapy; traction; stretching; bracing and supports; trigger point therapy; massage and the use of forces associated with low voltage myostimulation, high voltage myostimulation, ultraviolet light, diathermy, and ultrasound; and counseling on dietary regimen, sanitary measures, occupational health, lifestyle factors, posture, rest, work, and recreational activities that may enhance or complement the chiropractic adjustment.

Subp. 12. **Voluntarily retired license.** "Voluntarily retired license" means a license which has been voluntarily surrendered by a chiropractor. It relinquishes all rights to practice chiropractic in Minnesota.

Statutory Authority: *MS s 148.08; 214.12*

History: *15 SR 1407; 15 SR 2265; 15 SR 2595; 17 SR 1711; 18 SR 1222; 19 SR 734; 20 SR 1245*

ADVERTISING

2500.0200 PROFESSIONAL STANDARDS FOR ADVERTISING.

Subpart 1. **Individual advertising.** All advertisements, of any nature whatsoever, including office designation and business displays, must bear the name of the licensee or licensees. All advertisements which solicit patronage without disclosing the name or names of the practitioner or practitioners to the reader so that the public may know who is soliciting their patronage are wrongful.

Subp. 2. **Institutional advertising.** It is to be noted that so-called institutional advertisements which bring to the attention of the public the qualifications of chiropractors, generally, and the benefits to be derived from chiropractic, which are sponsored by chiropractic groups or societies, and do not solicit patronage for any particular practitioner or group of practitioners are not within the purview of this prohibition.

Subp. 3. **Testimonial advertising.** The use of testimonials, whether single or in groups; summaries of types of treatment; or examples of treatment as used in the advertiser's office carry with them an implication that the conditions described in the advertisement have been or will be helped by the practitioner. Therefore, before an advertisement is produced, distributed, or displayed, a practitioner who requests from a patient a testimonial to the treatments or modalities used by the practitioner must obtain written consent and have a signed release form from the patient to be kept in the patient's file.

The patient has the right to review the advertisements that use the patient's statements, likenesses, or case summaries before the advertisements are released for production, distribution, or displaying.

Statements made by patients that are untruthful, improbable, misleading, or impossible may not be used even if the patient made the statements.

Statutory Authority: *MS s 148.05; 148.08; 148.10*

History: *17 SR 1279; 17 SR 1711; 21 SR 196*

2500.0300 EMERGENCY ANSWERING EXCHANGE.

It is to be noted that membership in any answering exchange or other emergency service which is open to all members of the profession admitted to practice in this state on an equal basis, selects responding members on a rotating basis, and is designed as a public service rather than for the individual gain of any chiropractor, directly or indirectly, is permissible.

Statutory Authority: *MS s 148.05; 148.10 subd 1*

2500.0400 PROHIBITED ADVERTISEMENTS.

Advertisements are designed to appeal to and obtain the attention of the public and are designed, paid for, or published with a view to close analysis by the reader at whose attention they are aimed.

The law prohibits the use of the terms "cure" or "guarantee to cure" or similar terms and declares such to be fraudulent and misleading to the general public.

The advertising by any means of chiropractic practice or treatment or advice in which untruthful, improbable, misleading, or impossible statements are made is obviously contrary to the law.

Statutory Authority: *MS s 148.05; 148.08; 148.10*

History: *17 SR 1711*

2500.0500 ADVERTISING FREE SERVICES.

Free or discounted chiropractic services shall be provided to all patients during the period of time specified in the advertisements, whether or not the consumer is aware of the free

services or discounted fee, and whether or not payment is to be made by the individual or a third-party payer such as an insurance company.

Free or discounted examinations or chiropractic treatments shall be equivalent to the same examinations or chiropractic treatments as provided at a full charge and must provide sufficient information to allow for a diagnosis and initiation of treatment.

When using the word "free," or any other term with essentially the same meaning, in reference to any service, examination, or treatment, the following statement must be submitted by the doctor to the patient or guardian upon completion of the free services for signature and kept on file:

"I understand all services to this point have been free of charge. Any subsequent services will be provided for at the fees explained to me at this time."

Statutory Authority: *MS s 148.08*

History: *15 SR 2265; 19 SR 734*

2500.0510 ADVERTISING.

All advertising must use the word "chiropractor" or "chiropractic" in the name of the clinic or incorporate it into the body of the advertisement as follows:

A. all written advertisements must make the chiropractic reference in a print size or emphasis equal to the average print size or emphasis utilized in the rest of the advertisement; and

B. all verbal advertisements must make the chiropractic reference in a form as audible as the rest of the advertisement.

Statutory Authority: *MS s 148.08*

History: *19 SR 734*

2500.0550 PROFESSIONAL DESIGNATIONS.

A licensee must in all forms of professional reference include one or more of the following designations: doctor of chiropractic, D.C., chiropractor, or any other title or letters that leads the public to believe that the person who uses the title or letters is engaged in the practice of chiropractic. The designation shall be in an emphasis, whether written or verbal, equal to the emphasis of the written or verbal material which contains the designation.

Statutory Authority: *MS s 148.08*

History: *19 SR 2139*

2500.0600 BOARD CERTIFICATION ADVERTISING.

A licensee who represents in any advertisement the possession of any credential, certification, or registration shall identify the board, agency, or other body which issued the additional credential, certification, or registration.

Statutory Authority: *MS s 148.08*

History: *20 SR 1245*

LICENSING AND CONTINUING EDUCATION

2500.0700 EXAMINATION ADMINISTRATION.

The board may solicit the help of Minnesota licensed chiropractors for the purpose of:

- A. examination development;
- B. examination administration; and
- C. postexamination audit.

Each chiropractor must be in good standing with the board and must have been licensed in Minnesota three years before helping with any portion of the examination.

Other than board members, no chiropractor may participate in more than one portion of the examination process for any single administration of the examination.

Statutory Authority: *MS s 148.08*

History: *15 SR 2734; 19 SR 734*

2500.0710 CONTINUING EDUCATION HOURS FOR EXAMINERS.

Minnesota licensed chiropractors who contribute at least two hours of time in the development of an examination, the administration of the examination, or the postexamination audit shall receive two regular continuing education hours applied toward the next license renewal. No chiropractor may receive more than four hours per calendar year.

Statutory Authority: *MS s 148.08*

History: *15 SR 2734*

2500.0720 APPLICATION PREREQUISITES.

In addition to the prerequisites in Minnesota Statutes, section 148.06, evidence of passing the National Board of Chiropractic Examiners' tests: Part I, Part II, the Written Clinical Competency Examination, and the Physiotherapy Examination, is required for the applicant to be permitted to sit for the examination.

Statutory Authority: *MS s 148.08*

History: *15 SR 2734*

2500.0730 EXAMINATION DEADLINE.

Examination applications and fees must be postmarked not less than 30 days before the first day of the scheduled examination. Twenty-eight days before the examination, a notice of approval to sit for the examination, a notice of application deficiency, or a notice of denial to sit for the boards examination shall be mailed to each applicant.

If an applicant receives a notice of application deficiency, the applicant must submit the required documents to the board, postmarked no later than the 14th day before the first day of the examination.

If an application is still incomplete 14 days before the first day of the examination, the applicant shall not be allowed to sit for the examination, and the board shall mail a notice of denial to sit for the examination.

Statutory Authority: *MS s 148.08*

History: *15 SR 2734; 19 SR 734*

2500.0740 REGRADES.

Applicants who want the board to verify that the score reported to them is accurate may request a hand grading of their examinations. The board shall honor the request if the following criteria are met:

A. requests must be received by the board no later than 30 days after the examination results have been mailed by the board;

B. requests must be in writing, indicating which subjects the applicant wishes to have regraded; and

C. a money order or cashier's check must be submitted in the amount of \$30 a subject.

Payment must be received before the regrade. To protect the integrity of the examination process, applicants may not review their examinations under any circumstances.

Statutory Authority: *MS s 148.08*

History: *15 SR 2734*

2500.0750 RETAKING EXAMINATION.

Applicants who fail portions of the licensure examination may retake the failed portions once at the next scheduled examination. Failure to take the portions necessary at the next scheduled examination shall cause the applicant to forfeit the right to do so.

Applicants need not reapply to the board for reexamination of the failed portions; however, applicants must notify the board not later than 30 days before the examination of their intention to sit for the examination.

If the applicant fails to successfully complete the failed portions of the examination, the applicant must resubmit an application, pay the required examination fee, and retake the entire examination.

Statutory Authority: *MS s 148.08*

History: *15 SR 2734; 19 SR 734*

2500.1000 LICENSE APPLICATION FEE.

Applications for licensure must be accompanied by a fee of \$250.

Statutory Authority: *MS s 16A.128; 148.05; 148.06; 148.07; 148.08; 214.06*

History: *11 SR 134; 18 SR 1412*

2500.1100 INDIVIDUAL ANNUAL LICENSE RENEWAL.

Subpart 1. **Renewal notice.** Thirty or more days before January 1 each year, the state board of chiropractic examiners, hereafter board, shall mail to the last address on file with the board a license renewal fee notice to each person, hereafter licensee, licensed to practice chiropractic within this state.

Subp. 2. **Renewal fees.** The license of each licensee shall expire at midnight on December 31 each year. Subject to the terms of part 2500.1200, the board shall renew the license upon receipt from the licensee of a license renewal fee of \$200, plus any applicable penalty fee in subpart 3. Each licensee shall submit the license renewal fee and all required renewal materials, postmarked no later than December 31 in the year of license expiration, for renewal in the following calendar year.

Subp. 3. **Penalty fees.** A licensee shall submit to the board, in addition to the license renewal fee, a penalty fee of \$150 per month for each month or portion of a month for which the license renewal fee is in arrears, the penalty not to exceed \$900.

Statutory Authority: *MS s 16A.128; 148.05; 148.06; 148.07; 148.08; 214.06*

History: *11 SR 134; 15 SR 584; 17 SR 1711; 18 SR 1412; 21 SR 196*

2500.1105 CHANGE OF NAME OR ADDRESS.

Subpart 1. **Name change.** A licensee who has changed names must notify the board in writing within 30 days of the change. The name change will be reflected on the next license or registration certificate issued to the licensee. If the licensee wishes to immediately receive a certificate as changed, the licensee must pay the fee in part 2500.1150, item E.

Subp. 2. **Address change.** A licensee who has changed addresses must notify the board in writing within 30 days of the change. The address change will be reflected on the next license or registration certificate issued to the licensee. If the licensee wishes to immediately receive a certificate as changed, the licensee must pay the fee in part 2500.1150, item E.

Statutory Authority: *MS s 148.08*

History: *17 SR 1711*

2500.1110 LICENSE TERMINATION PROCEDURE.

Subpart 1. **For failure to renew license.** The procedures in this part shall be followed by the board for all licensees who have failed to submit the annual renewal application according to parts 2500.1000 to 2500.2000 including, where applicable, required information about continuing education and applicable fees, except as provided in parts 2500.1000 to 2500.2000.

Subp. 2. **Notice.** By January 31 of each year, the board shall send to the address on file with the board, a notice to each licensee who has not made application for license renewal. The notice shall state one or more of the following:

- A. the licensee has failed to make application for renewal;
- B. the amount of renewal and late fees;
- C. the information required about continuing education hours as specified in part 2500.1200 which must be submitted in order for the license to be renewed;
- D. the licensee may voluntarily retire the license by notifying the board or that the licensee may apply for an inactive license; and

E. failure to respond to the notice by the date specified, which date must be at least 33 days after the notice is sent out by the board, either by submitting the renewal application and applicable fees, or the information required about continuing education hours, or by notifying the board that the licensee has voluntarily retired the licensee's license shall result in termination of the license to practice chiropractic in Minnesota.

Subp. 3. **Date of termination.** If the application for renewal, including required information about continuing education, and the annual fees, late fees, or notice of voluntary

retirement is not received by the board by the date specified in the notice, the license shall be terminated. The termination shall not be considered a disciplinary action against the licensee.

Subp. 4. **Deferment of continuing education deadline.** If a deferment of continuing education has been granted according to part 2500.2000, the license will expire at the end of the extension granted if the licensee does not submit within that time period evidence of having accumulated the required hours of continuing education. Any continuing education hours accumulated during the extension period shall not count toward the meeting of requirements of the next year's renewal requirements.

Subp. 5. **Requests for deferment extension.** If the board grants permission, a licensee may submit a request for an extension of the first deferment period. The board shall grant the extension only in cases of extreme hardship or other compelling reasons. Financial hardship caused by loss of the license shall not meet these standards. The burden rests on the licensee to prove that an extension should be granted which in no case shall exceed an additional six months.

Statutory Authority: *MS s 148.08*

History: *15 SR 2265; 21 SR 196*

2500.1150 FEES.

The fees charged by the board are fixed at the following rates:

- A. peer review fee to be paid by a requesting doctor or by a requesting insurance company, \$100;
- B. licensing examination regrade fee, \$30;
- C. copy of a board order or stipulation fee, \$10 each;
- D. certificate of good standing or licensure verification to other states, \$10 each;
- E. duplicate of the original license or of an annual renewal, \$10;
- F. miscellaneous copying fee, 25 cents per page;
- G. independent medical examination registration fee, \$150;
- H. independent examination annual renewal fee, \$100;
- I. incorporation renewal late charge, \$5 per month;
- J. computer lists, \$100; and
- K. computer printed labels, \$150.

Statutory Authority: *MS s 148.08*

History: *15 SR 1407; 17 SR 1711; 19 SR 734*

2500.1160 INDEPENDENT EXAMINATION REGISTRATION.

Subpart 1. **Qualifications; proof.** Documentation establishing that a chiropractor meets the qualifications must be included with the application to register with the board as an independent examiner under Minnesota Statutes, section 148.09. A chiropractor must be licensed to practice in Minnesota and must have been in practice for the two years immediately preceding registration.

The chiropractor/instructor must present to the board proof of instructor status or attest to being involved in direct patient care for 50 percent of the time spent in practice during the two years immediately preceding the independent examination of a patient. An affidavit on a form as provided by the board must be filed with the board at the time of application to register.

Subp. 2. **Registration.** The chiropractor must apply for registration with the board not less than 30 days prior to the anticipated date of commencement of independent examinations. The chiropractor must pay a registration fee as established by the board in part 2500.1150, item G.

Subp. 3. **Annual renewal.** An annual renewal of registration is required by March 1 of each year after initial registration with the board. The chiropractor must pay an annual renewal fee as set by the board in part 2500.1150, item H. The chiropractor must fulfill the con-

tinuing education requirements set by the board in part 2500.1200, in addition to other continuing education requirements set by the board, before renewal is granted.

Statutory Authority: *MS s 148.08*

History: *15 SR 2265*

2500.1200 CONTINUING EDUCATION.

Subpart 1. **Purpose.** The primary purpose of continuing chiropractic education is to assure the consumer of an optimum quality of chiropractic health care by requiring doctors of chiropractic to attend educational classes or seminars designed to advance their professional skills and knowledge.

Subp. 2. **Biennial requirement.** Except as otherwise provided in this part, every person licensed to practice chiropractic in this state shall, as a prerequisite for the continued renewal of a license, attend a minimum of 40 continuing education units during the two preceding calendar years of continuing education courses recognized and approved by the board. At least six of the continuing education units shall be devoted to radiographic safety, technique, and/or interpretation. At least two of the continuing education units must be in the subject of infection control, including blood borne diseases. Continuing education in infection control is required for renewal cycles beginning on or after January 1, 1994.

Subp. 3. [Repealed, 17 SR 1711]

Subp. 4. **Schedule of required continuing education units.** Beginning January 1, 1992, all chiropractors licensed prior to January 1, 1992, must obtain 40 continuing education units by December 31, 1993, in order to receive a license to practice during the calendar year 1994, and every two calendar years thereafter.

Chiropractors who are licensed after January 1, 1992, during any even-numbered calendar year will be required to obtain at least 20 continuing education units, with at least three of those continuing education units devoted to education in radiographic safety, technique, or interpretation, by the end of the biennial continuing education requirement period in which they are licensed. Chiropractors who are licensed after January 1, 1992, during any odd-numbered calendar year will not be required to obtain any continuing education units during the biennial continuing education requirement period in which they are licensed. For example, anyone licensed between January 1, 1992, and December 31, 1992, would be required to obtain 20 continuing education units, as described in this subpart, by December 31, 1993, in order to obtain a license to practice chiropractic for the year 1994. Anyone licensed between January 1, 1993, and December 31, 1993, would not be required to obtain any continuing education units prior to receiving a license to practice chiropractic for the year 1994.

After a licensed chiropractor has gone through the biennial education cycle in which the chiropractor is licensed, that chiropractor will be required to attend 40 continuing education units of continuing education courses every two calendar years.

Subp. 5. **Professional boundaries and reporting parameters for abuse.** All chiropractors applying for licensure or for the renewal of a license on or after January 1, 1992, inclusive in the 40 hours of continuing education hours required every two calendar years, must have completed eight hours of course work or training regarding the establishment of professional boundaries in the clinical setting, and the identification and reporting of child and vulnerable adult abuse and maltreatment. The course work or training must be obtained from an institution or provider which has been approved by the board to provide such course work or training.

The course work or training must include the following:

A. boundary training as it relates to professional conduct in the clinical setting;
B. information regarding the physical and behavioral indicators of child and vulnerable adult abuse and maltreatment; and

C. the statutory reporting requirements in Minnesota Statutes, chapter 626, including, but not limited to, when and how a report must be made, what other actions a reporter is mandated or authorized to take, the legal protections afforded reporters, and their consequences for failure to report.

Each chiropractor must provide the board with documentation showing proof of attendance and successful completion of the required training.

Each chiropractor who is applying for licensure must fulfill this provision before taking the board licensure examination.

This provision must be fulfilled by licensed chiropractors by January 1, 1997, January 1, 2002, and every four years thereafter.

Subp. 6. Full-time faculty. Full-time faculty of a chiropractic college accredited by the Council on Chiropractic Education may have up to 12 units of continuing education credit applied to each biennial requirement. Full-time faculty shall be defined as such by the chiropractic college by which they are employed. Licensees applying for this credit shall have the college submit written verification of faculty status before any such credit may be applied. This credit may not be applied to the requirements for radiographic safety, technique, or interpretation; infection control; or professional boundaries.

Statutory Authority: *MS s 148.03; 148.05; 148.07; 148.08; 148.10; 214.06; 214.12*

History: *15 SR 2265; 17 SR 1279; 17 SR 1711; 18 SR 1222; 21 SR 196*

2500.1250 CONTINUING EDUCATION PROGRAM APPROVAL.

A list of all programs to be provided, including amendments or additions to said list, must be submitted by the sponsor to the board no less than 45 calendar days prior to the presentation date of the first such program. Failure to do so may result in disapproval of each program scheduled to be presented 45 days or less from the submission date.

Statutory Authority: *MS s 148.08*

History: *20 SR 1245*

2500.1300 [Repealed, 17 SR 1711]

2500.1400 [Repealed, 17 SR 1711]

2500.1410 SPONSORSHIP OF EDUCATION PROGRAMS.

The board shall register and approve organizations or individuals who wish to offer continuing education programs to individuals licensed to practice chiropractic in this state as described in items A to C.

A. The sponsor must submit an annual fee of \$500 for all programs given over the year, or a fee of \$100 for each program given over the biennium.

B. The sponsor must complete and submit to the board annually a registration form developed by the board which includes at least:

- (1) the name, address, and telephone number of the organization;
- (2) the name, address, and telephone number of the person responsible and authorized to do business with the board regarding continuing education matters;
- (3) a signed statement which indicates that the sponsor of the continuing education program knows, understands, and agrees to follow all criteria for the approval of programs as listed in part 2500.1500 and criteria for unapproved programs listed in part 2500.1600; and

(4) a signed statement which indicates that the sponsor agrees to send to the board a list of all chiropractors licensed in Minnesota who have taken courses offered by that sponsor.

C. The sponsor must sign a statement agreeing to allow any representative of the board to attend all or part of any program that the sponsor is offering. If the representative of the board is a chiropractor licensed in Minnesota, that person must pay the full registration fee in order to be awarded continuing education units for attending the program.

Statutory Authority: *MS s 148.08*

History: *17 SR 1711*

2500.1420 REPORTS TO BOARD.

The sponsor must report to the board any changes in the requirements in part 2500.1410 as soon as possible.

The sponsor must provide a list to the board within 21 days after each seminar given. The list must include the following:

- A. the attending chiropractors' names and addresses;
- B. the date on which the program was attended;
- C. the number of continuing education units obtained; and
- D. the type of continuing education units obtained.

In no event shall any report be submitted to the board later than January 15 for any seminar presented in the previous year.

Statutory Authority: *MS s 148.08*

History: *17 SR 1711; 19 SR 734*

2500.1500 PROGRAM APPROVAL CRITERIA.

The sponsor shall employ the following criteria in determining whether a continuing education program shall be approved and the number of continuing education units for which approval is granted:

- A. whether the material to be presented is likely to enhance the practitioner's knowledge and skill in the practice of chiropractic;
- B. whether the instructors or speakers presenting the program are sufficiently qualified in the field of their instruction, either by practical or academic experience or both;
- C. whether the classes will be held in a suitable setting which is conducive to the learning process; and
- D. whether the program may improve the practitioner's ability to keep records necessary to substantiate the need for chiropractic care.

Statutory Authority: *MS s 148.03; 148.05; 148.07; 148.08; 148.10; 214.06; 214.12*

History: *17 SR 1711*

2500.1600 UNAPPROVED PROGRAMS.

Courses dealing with administrative and economic aspects of practice shall not be approved for continuing education credit by the board.

Statutory Authority: *MS s 148.03; 148.05; 148.07 subd 1; 148.10 subs 1,3; 214.06; 214.12*

2500.1700 [Repealed, 17 SR 1711]

2500.1710 SPONSORSHIP REVOKED.

The following acts shall result in the termination of the sponsorship status given to an organization or to an individual:

- A. awarding continuing education units for programs which fail to meet the criteria in part 2500.1500;
- B. failure to provide timely reports to the board as required in part 2500.1420;
- C. reporting chiropractor attendance information which is false; and
- D. making any false representation to the board or to the chiropractors who may attend a program.

At least 30 days prior to the proposed date of revocation, the board shall notify the sponsor in writing of its alleged infractions. The sponsor then has 30 days to notify the board in writing of its intent to contest. The intent to contest must include the sponsor's answer to the notice of alleged infractions.

Upon receipt of an intent to contest, the executive officers of the board shall notify the sponsor of a time and place to meet to review the proposed sponsorship revocation including the sponsor's answer.

Any decision of the executive officers terminating sponsorship following such a meeting shall be final and binding without a contested case hearing and shall not be subject to judicial review or to a judicial stay pending any attempt to seek such review.

The sponsor may continue to present continuing education courses until the issuance of a final written decision of the revocation process by the executive officers of the board.

Statutory Authority: *MS s 148.08*

History: *17 SR 1711*

2500.1720 PROGRAMS DEVELOPED.

Doctors of chiropractic licensed in Minnesota may obtain continuing education units for the development of a program which meets the standards set forth in part 2500.1500. No more than 12 continuing education units may be awarded and applied to the next biennial requirement in part 2500.1200.

To obtain approval, the chiropractor must submit the following to the board:

- A. a summary of the program;
- B. a listing of at least one date on which the program was presented; and
- C. a statement of which type of continuing education units the chiropractor wants to be awarded.

Continuing education units shall be awarded under this part only once for each chiropractor for each new program developed.

Statutory Authority: *MS s 148.08*

History: *17 SR 1711; 21 SR 196*

2500.1800 FAILURE TO COMPLY WITH CONTINUING EDUCATION REQUIREMENTS.

The board may refuse to renew, or may revoke, suspend, condition, limit, restrict, or qualify the license of any licensee failing to comply with the requirements of parts 2500.1200 to 2500.2000 and/or may publicly reprimand, censure, and place such person on probation with the board.

Statutory Authority: *MS s 148.03; 148.05; 148.07 subd 1; 148.10 subds 1,3; 214.06; 214.12*

2500.1900 LICENSE REINSTATEMENT.

The license of any licensee which is not renewed or which is revoked, suspended, or reduced in status by reason of failure to comply with the continuing education requirements of parts 2500.1200 to 2500.2000 may, at the election of the licensee or former licensee, be reinstated or restored to full status by either of the following procedures:

A. submission to the board executive director of proof of the makeup of all continuing education course hour and subject matter requirements which would have been necessary for continuous licensure from the date of such person's last license renewal or initial licensure, whichever is more recent, and submission to the board's executive director of proof of attendance at an additional ten hours of board recognized and approved continuing education courses for each intervening renewal year; or

B. reexamination by the board at the time for which it next schedules license examinations. No such reexamination shall be conducted except upon a written application therefor received by the board executive director not less than 30 days prior to the examination date.

Statutory Authority: *MS s 148.03; 148.05; 148.07; 148.08; 148.10; 214.06; 214.12*

History: *21 SR 196*

2500.2000 WAIVER OR DEFERMENT OF CONTINUING EDUCATION REQUIREMENTS.

The board shall waive or defer compliance with some or all annual continuing education requirements for any licensee presenting satisfactory written evidence to the board of illness or hardship making it impossible or highly impractical for the licensee to attend or to have attended a sufficient number of approved continuing education units. No deferment will be considered unless submitted in writing prior to the deadline for license renewal. No deferment shall last more than 60 days. Any deferment granted shall not continue beyond March 31 following the date of the written request.

Statutory Authority: *MS s 148.03; 148.05; 148.07; 148.08; 148.10; 214.06; 214.12*

History: *15 SR 2265; 21 SR 196*

2500.2020 INACTIVE LICENSE.

A Minnesota licensed chiropractor may apply to the board for an inactive license according to items A to C. An inactive license is intended for those chiropractors who will be in active practice elsewhere.

A. Applicants must complete a board-approved application which must include a signed affidavit stating that the applicant will no longer be actively practicing chiropractic in the state of Minnesota.

B. Upon approval of an application, the board will modify the annual license certificate to indicate inactive licensure.

C. The board may refuse to approve an application if:

(1) a pending or final disciplinary action exists against an applicant's Minnesota license;

(2) a pending or final disciplinary action exists against an applicant's license in another state where the applicant has been licensed to practice chiropractic; or

(3) the applicant's Minnesota license is not current in fees and penalties paid, or in continuing education hours obtained for annual license renewal.

Statutory Authority: *MS s 148.08*

History: *15 SR 2265*

2500.2030 ANNUAL RENEWAL OF INACTIVE LICENSE.

The annual renewal fee for an inactive license is 75 percent of the current fee imposed by the board for license renewal.

Statutory Authority: *MS s 148.08*

History: *15 SR 2265*

2500.2040 REINSTATEMENT OF INACTIVE LICENSE.

An inactive license may be reinstated to a nonrestricted license according to items A to E:

A. completion of a board-approved application of reinstatement;

B. payment of a reinstatement fee in the amount of \$100;

C. submission of a certification of good standing from each state the doctor was granted a license;

D. submission of a notarized statement from the doctor stating:

(1) that the doctor has remained in active practice in another state or country during the period of inactive license status in Minnesota;

(2) that the doctor has met the continuing education requirements as approved by Minnesota or the states or countries in which the doctor practiced chiropractic, or has taken at least 12 hours of continuing education each year of inactive license status, whichever is greater; and

(3) the specific addresses of where the doctor has been in active practice; and

E. completion of 20 hours of continuing education as approved by the board the year prior to application for reinstatement.

If any of the requirements of items A to E are not met by the doctor, the board will deny approval of the application for reinstatement.

Statutory Authority: *MS s 148.08*

History: *15 SR 2265*

2500.2050 INACTIVE RETIRED LICENSE.

A Minnesota licensed chiropractor who intends to retire from the practice of chiropractic may apply to the board for an inactive retired license.

The licensee must apply for an inactive retired license according to items A to C.

A. Applicants must complete a board approved application which must include a signed affidavit stating that the applicant will no longer be actively practicing chiropractic in Minnesota.

B. Upon approval of an application, the board shall modify the annual license certificate to indicate inactive retired licensure.

C. The board may refuse to approve an application if:

(1) a pending or final disciplinary action exists against an applicant's Minnesota license;

(2) a pending or final disciplinary action exists against an applicant's license in another state where the applicant has been licensed to practice chiropractic; or

(3) the applicant's Minnesota license is not current in fees and penalties paid, or in continuing education hours obtained for annual license renewal.

Statutory Authority: *MS s 148.08*

History: *15 SR 2265; 19 SR 734*

2500.2060 ANNUAL RENEWAL OF INACTIVE RETIRED LICENSE.

The annual renewal fee for an inactive retired license is 75 percent of the current fee imposed by the board for license renewal.

Statutory Authority: *MS s 148.08*

History: *15 SR 2265*

2500.2070 REINSTATEMENT OF INACTIVE RETIRED LICENSE.

An inactive retired license may be reinstated to a nonrestricted license within three years from the date that inactive retired status is in effect according to items A to D.

A. The doctor must have been licensed for at least five years previous to inactive retired license status.

B. The doctor must obtain 30 hours of board-approved continuing education hours within the year before application for reinstatement.

C. The doctor must be in good standing with the board and must provide certificates of good standing from all other states in which the doctor is licensed.

D. The doctor must pay a reinstatement fee in the amount of \$100.

After three years from the date inactive retired license status is in effect, this reinstatement provision will not be an available option. Proof of 20 board-approved continuing education hours per year of inactive retired license status will be required for reinstatement. Without proof of 20 hours of continuing education, reexamination will be required to obtain full license status.

If any of the requirements of items A to D are not met by the doctor, the board shall deny approval of the application for reinstatement.

Statutory Authority: *MS s 148.08*

History: *15 SR 2265*

2500.2100 VOLUNTARILY RETIRED LICENSE.

Upon request of a Minnesota licensed chiropractor, the board may place a license in voluntary retirement unless:

A. a pending or final disciplinary action exists against an applicant's Minnesota license;

B. a pending or final disciplinary action exists against an applicant's license in another state where the applicant has been licensed to practice chiropractic; or

C. the applicant's Minnesota license is not current in fees and penalties paid or in continuing education hours obtained for annual license renewal.

Statutory Authority: *MS s 148.08*

History: *19 SR 734*

2500.2110 REINSTATEMENT OF VOLUNTARILY RETIRED LICENSE.

A licensee who has voluntarily retired a license for a period equal to or less than five years may be reinstated to a nonrestricted license after:

A. completion of a board-approved application of reinstatement;

- B. payment of a reinstatement fee in the amount of \$100;
- C. payment of license fees for each year the license was voluntarily retired; and
- D. completion of 30 units of board-approved continuing education for each year the license was voluntarily retired.

None of the continuing education units obtained for the purpose of reinstating a voluntarily retired license apply to the current biennial requirement.

A license which has been voluntarily retired for more than five years by a chiropractor who has also not been in active practice in another state or country during the period of voluntary retirement in Minnesota may only be reinstated following successful completion of the written and practical licensing examinations as administered by the board.

Statutory Authority: *MS s 148.08*

History: *19 SR 734*

GRADUATE PRECEPTORSHIP PROGRAM

2500.2500 DEFINITIONS.

Subpart 1. **Scope.** The definitions in this part apply to parts 2500.2500 to 2500.2530.

Subp. 2. [Repealed, 20 SR 1245]

Subp. 3. [Repealed, 20 SR 1245]

Subp. 4. [Repealed, 20 SR 1245]

Subp. 5. [Repealed, 20 SR 1245]

Subp. 6. [Repealed, 20 SR 1245]

Subp. 7. **Preceptor.** "Preceptor" means a supervising licensed chiropractic physician approved by the board.

Subp. 8. **Preceptorship training program.** "Preceptorship training program" means a board-approved program by which an intern may practice chiropractic under the direct supervision of a licensed chiropractic physician for one 12-month period.

Subp. 9. [Repealed, 20 SR 1245]

Statutory Authority: *MS s 148.08*

History: *15 SR 2138; 19 SR 734*

2500.2505 PROGRAM ADMINISTRATOR.

The preceptorship training program is administered by the Executive Director, Minnesota Board of Chiropractic Examiners, 2700 University Avenue West, Suite 20, St. Paul, Minnesota 55114.

Statutory Authority: *MS s 148.08*

History: *15 SR 2138*

2500.2510 ROLE OF THE PRECEPTOR.

Preceptors shall follow the procedures in items A to C when supervising an intern.

A. The preceptor shall meet with the intern on a regular basis, at least one hour per week, to provide valuable feedback and interaction for one another regarding the intern's performance as an associate doctor and the preceptor's performance as an educator. Patient care shall be discussed as outlined in item B.

B. The preceptor shall involve the intern in sharing patient care responsibilities, including:

- (1) completing the history and examination;
- (2) conducting x-ray examinations, preparing reports, and conducting laboratory tests, if applicable;
- (3) having the intern maintain patient records and convey information to the preceptor's practice; and
- (4) treatment of patients.

C. The preceptor shall approve the intern's treatment plan before implementing the treatment of a patient.

Statutory Authority: *MS s 148.08*

History: *15 SR 2138*

2500.2515 ELIGIBILITY AND RESPONSIBILITIES OF PRECEPTOR.

Subpart 1. **Eligibility.** The preceptor must:

- A. be licensed by the board;
- B. have actively practiced chiropractic continuously for the preceding five years;
- C. have actively practiced chiropractic in Minnesota for at least the last three years;
- D. be in good standing with the board; and
- E. be in private practice only.

Subp. 2. **Doctor to intern ratio.** The doctor to intern ratio shall be one to one unless special authorization is granted by the board's executive director and at least one board member. Special authorization shall not exceed a doctor to intern ratio of one to two in any situation. An authorization for a doctor to intern ratio greater than one to one lasts only for the duration of that specified intern's preceptorship training program. Special authorization shall be given under the following circumstances:

A. when a preceptor is removed from the program while an intern is under the preceptor's supervision and the intern needs to be placed with another registered preceptor; or

B. when one intern has failed to pass the board licensing examination and that intern's preceptorship training program time overlaps into another intern's expected starting date.

Subp. 3. **Fees.** If preceptor application is approved, a \$100 fee shall be assessed. In addition, the preceptor shall be assessed a \$100 annual fee for participation in the preceptorship training program.

Subp. 4. **Application.** An applicant for preceptorship must complete and file with the board a preceptor application, a sworn affidavit, and a preceptor/intern agreement on forms prescribed by the board. The affidavit must:

A. state that the applicant has been practicing continuously for the immediately preceding five years and in Minnesota for the immediately preceding three years;

B. state that the applicant has never been disciplined by the board or any state board and is not currently the subject of any professional disciplinary action in any state;

C. include the applicant's Minnesota license number and year of issuance; and

D. include the name, current mailing address, birth date, and physical description of the intern.

Subp. 5. **Continuing requirements.** A preceptor whose application has been approved must follow the requirements of items A to E.

A. The preceptor shall notify the board of any malpractice or disciplinary action that occurs subsequent to board approval of participation in the preceptorship training program.

B. The preceptor shall act as a teacher to the graduate within the practice environment.

C. The preceptor must be within the environment in which an intern is working at all times. Failure to maintain this requirement shall result in immediate dissolution of the preceptorship agreement. In the event of a vacation or illness of the preceptor, the intern may only continue with the intern's duties under the guidance of a licensed doctor of chiropractic who has been approved to serve as a preceptor.

D. The preceptor must direct the intern only in treatment care that is within the educational background and experience of the preceptor.

E. The preceptor must provide all patients with the following standard policy statement that informs them of the possibility of an intern performing various services:

Patient care, examinations, and treatment are administered by Dr. (preceptor's name or the name of the board-approved chiropractic intern).

Please notify office staff if you have any questions or concerns regarding this Office Policy Statement. If you are in agreement with this statement, please sign your name and date on the space provide below.

Patient Name: _____

Date: _____

Statutory Authority: *MS s 148.08*

History: *15 SR 2138*

2500.2520 ELIGIBILITY AND RESPONSIBILITIES OF INTERN.

Subpart 1. **Eligibility and limitations.** An intern must be a graduate of an accredited chiropractic college.

Subp. 2. **Malpractice insurance.** An intern must submit to the board proof of application and acceptance to an authorized malpractice insurance carrier for coverage during the term of the preceptorship training program.

The intern must contact the insurance carrier of the preceptor doctor and fulfill the carrier's requirements to obtain malpractice insurance coverage during the entirety of the intern's preceptorship program.

The intern should be aware that documents required may take some time to obtain. Therefore, it is suggested that the intern initiate this procedure within an appropriate amount of time before application for inclusion in the preceptorship training program.

All documents verifying malpractice coverage must be received by the board before approval of participation in the preceptorship training program will be given.

Subp. 3. **Application.** An applicant for internship must:

A. complete and file with the board an application in a form prescribed by the board; and

B. submit a certified copy of the applicant's final chiropractic college transcript showing a date of graduation within six months immediately preceding the next scheduled license examination.

Subp. 4. **Continuing requirements.** An intern whose application has been approved may only participate in treatment care that is within the educational background and experience of the preceptor.

Statutory Authority: *MS s 148.08*

History: *15 SR 2138*

2500.2525 MINIMUM REQUIREMENTS OF A PRECEPTORSHIP TRAINING PROGRAM.

The following requirements must be met for board approval of a preceptorship training program:

A. An intern shall not function in the program without written approval of the board; and

B. A licensed doctor shall not function in the program without written approval of the board.

Statutory Authority: *MS s 148.08*

History: *15 SR 2138*

2500.2530 TERMINATION OF PRECEPTORSHIP PROGRAM.

A preceptorship training program must terminate no later than 12 months after the intern's graduation from a board-approved chiropractic college. It must be terminated before that time if:

A. the board finds that either the intern or the preceptor failed to comply with Minnesota Statutes, chapter 148, or part 2500.2100;

B. a letter of termination is received by the board with either the signature of the preceptor or the intern;

C. upon completion of the 12-month preceptorship program if the intern fails to pass the board licensure examination for a second time; or

D. the preceptor is removed from the preceptorship training program because of activities that result in disciplinary action by the board that did not involve the intern. Board

staff shall make every effort to place the intern with another preceptor in order for the intern to complete the preceptorship training program with little or no interruption.

Statutory Authority: *MS s 148.08*

History: *15 SR 2138; 19 SR 734*

ACUPUNCTURE

2500.3000 ACUPUNCTURE.

Subpart 1. **Sterilization; disposal.** Where nondisposable needles are used for acupuncture, the needles must be sterilized by:

- A. autoclave;
- B. dry heat sterilization; or
- C. ethylene oxide sterilization.

Needles must be individually packaged for each patient. The individually packaged needles must either be discarded following patient treatment or sterilized according to the above methods of sterilization when nondisposable needles are used.

Needles must be disposed of according to the Infectious Waste Control Act, Minnesota Statutes, sections 116.75 to 116.83. In addition, all needles to be discarded must be sterilized and placed in a rigid puncture-resistant container before disposal. Noncorrosive needles must be used. An infectious waste disposal plan must be filed with the Department of Health.

Subp. 2. **Qualifications and fees.** Prior to any licensed chiropractor engaging in acupuncture, the chiropractor must complete 100 hours of study, exclusive of other continuing education hours, in the utilization of acupuncture. Courses or seminars offered by accredited schools, the National Acupuncturists' Association, or separately approved by the board according to parts 2500.1300 to 2500.1600 shall be accepted by the board. The chiropractor must submit certification of completion of the approved course of study in addition to a \$100 registration fee.

Doctors of chiropractic who do not have proof of 100 hours of education in the practice of acupuncture may substitute the requirements in the preceding paragraph by providing the board with an affidavit stating the following:

- A. the doctor of chiropractic has obtained 100 hours of acupuncture-related education prior to December 31, 1989;
- B. the doctor of chiropractic has performed 500 acupuncture-related patient visits per year for at least three years preceding application for registration; and
- C. the doctor of chiropractic will obtain ten hours of continuing education in acupuncture technique within six months following registration with the board and submit it to the board upon receipt.

Upon applying to the board for registration, the doctor of chiropractic must submit the affidavit in addition to a \$100 registration fee. An annual renewal fee of \$50 is required in order to maintain registered status with the board.

Subp. 3. **Continuing education.** The doctor of chiropractic is required to fulfill the continuing education requirements as set by the board in part 2500.1200 before a renewal of registration is granted.

Subp. 4. **Sanitary office or clinic.** It is unprofessional conduct to maintain unsanitary or unsafe equipment as it relates to the utilization of acupuncture.

Subp. 5. **Registration certificate.** Upon receiving a registration certificate from the board, a doctor of chiropractic may utilize acupuncture to prepare for or complement a chiropractic adjustment.

Statutory Authority: *MS s 148.08*

History: *15 SR 2265*

REHABILITATIVE TREATMENT

2500.4000 REHABILITATIVE TREATMENT.

Rehabilitative therapy, within the context of the practice of chiropractic, may be done to prepare a patient for chiropractic adjustment or to complement the chiropractic adjustment,

provided the treating chiropractor initiates the development and authorization of the rehabilitative therapy.

The administration of the rehabilitative therapy is the responsibility of the treating chiropractor.

The rehabilitative therapy must be rendered under the direct supervision of qualified staff.

Statutory Authority: *MS s 148.08*

History: *15 SR 2265*

RECORDKEEPING

2500.5000 RECORDKEEPING.

All items in this part should be contained in the patient record. However, a record to justify patient care must contain items A, B, C, E, G, and I.

A. A description of past conditions and trauma, past treatment received, current treatment being received from other health care providers, and a description of the patient's current condition including onset and description of trauma if trauma occurred.

B. Examinations performed to determine a preliminary diagnosis based on indicated diagnostic tests, with an indication of all findings of each test performed.

C. A diagnosis supported by documented subjective and objective findings or clearly qualified as an opinion.

D. A treatment plan that describes the procedures and treatment used for the conditions identified, including approximate frequency of care.

E. Daily notes documenting current subjective complaints as described by the patient, any change in objective findings if noted during that visit, a listing of all procedures provided during that visit, and all information that is exchanged and will affect that patient's treatment.

F. A description by the chiropractor or written by the patient each time an incident occurs that results in an aggravation of the patient's condition or a new developing condition.

G. Results of reexaminations that are performed to evaluate significant changes in a patient's condition, including tests that were positive or deviated from results used to indicate normal findings.

H. When symbols or abbreviations are used, a key that explains their meanings must accompany each file when requested in writing by the patient or a third party.

I. Documentation that family history has been evaluated.

Statutory Authority: *MS s 148.08*

History: *17 SR 1711; 21 SR 196*