

CHAPTER 2500
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. MR 1997 [Obsolete, MS s 14.47, subd. 6, paragraph (b)]

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 or 2500.1550 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.

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.

Subp. 5a. [Renumbered subp. 5b]

Subp. 5a. **Extern.** "Extern" means a graduate of a board-approved chiropractic college who does not hold a current Minnesota license, and who assists in the care of patients under the authority of the graduate preceptorship program. This definition does not apply to a person providing appropriately supervised care provided during a course of training provided by an accredited chiropractic college or care provided pursuant to the exceptions granted in Minnesota Statutes, section 148.105, subdivision 2.

Subp. 5b. **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. MR 1997 [Obsolete, MS s 14.47, subd. 6, paragraph (b)]

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. [Renumbered subp. 5a]

Subp. 9. **Invasive.** "Invasive" means instrumental penetration of the viscera or nonsuperficial 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" includes the examination, diagnosis, prognosis, and treatment by chiropractic methods, or the rendering of opinions pertaining to those methods, for the purposes of determining a course of action in the best interests of the patient, such as a treatment plan or appropriate referral, or both. The methods may include those procedures preparatory or complementary to a chiropractic adjustment or other normal chiropractic regimen and rehabilitation of the patient as taught in accredited chiropractic schools or programs, pursuant to Minnesota Statutes, section 148.06.

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 14.23; 14.47; 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; 25 SR 779; 25 SR 1717; 25 SR 1863; 27 SR 1102*

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.

The terms "cure" or "guarantee to cure" or similar terms in advertisements are 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 prohibited.

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

History: *17 SR 1711; 25 SR 1862*

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 described in items A to C for any single administration of the examination.

Statutory Authority: *MS s 148.08*

History: *15 SR 2734; 19 SR 734; 25 SR 1862*

2500.0710 CONTINUING EDUCATION UNITS FOR EXAMINERS.

Minnesota licensed chiropractors will receive up to six units of credit for continuing education for participation in the development of an examination, the administration of an examination, or the post-examination audit when the units are verified in writing by the chief examiner or other designee of the board. Units must be calculated according to part 2500.0100, subpart 4a. No chiropractor may receive more than 12 units per calendar year.

Statutory Authority: *MS s 14.23; 148.08*

History: *15 SR 2734; 25 SR 1862; 27 SR 1102*

2500.0720 APPLICATION AND LICENSURE PREREQUISITES.

A. Subject to parts 2500.0700 to 2500.1000 and Minnesota Statutes, section 148.06, evidence of qualification for licensure, which must include passing the National Board of Chiropractic Examiners' tests: Part I, Part II, the Written Clinical Competency Examination, and the Physiotherapy Examination, or other approved licensing examination, must be received by the board before an applicant may sit for the examination. With the exception of those examinations, an applicant may not take examinations approved by the board more than six months before the applicant's expected date of graduation from an approved college of chiropractic.

B. No applicant is eligible for licensure until:

- (1) the prerequisites in item A have been completed;
- (2) the applicant has successfully completed the National Board of Chiropractic Examiners Part IV Practical or other approved examination; and
- (3) the applicant has successfully completed all prerequisites, according to Minnesota Statutes, section 148.06, subdivision 1, clause (c), and taken the board's jurisprudence/ethics examination.

Statutory Authority: *MS s 148.08*

History: *15 SR 2734; 25 SR 1862*

2500.0730 [Repealed, 25 SR 1862]

2500.0740 [Repealed, 25 SR 1862]

2500.0750 RETAKING EXAMINATION.

Applicants who fail the jurisprudence/ethics examination may retake this examination.

If within one year from submission of the original application fee the applicant fails to successfully complete all requirements for licensure, the applicant must

resubmit an application, pay the required application fee, and retake the jurisprudence/ethics examination.

Statutory Authority: *MS s 148.08*

History: *15 SR 2734; 19 SR 734; 25 SR 1862*

2500.0800 APPROVAL OF EXAMINATION FROM ANOTHER STATE OR JURISDICTION.

A practitioner who can demonstrate a cumulative active practice record in another state or jurisdiction for at least five years prior to this application may request that the examination resulting in the practitioner's licensure in that state or jurisdiction be approved for Minnesota licensure. The board shall consider requests according to the requirements in items A to M.

A. The applicant must submit the required license application and all appropriate fees established in part 2500.1000.

B. The applicant must be actively licensed in the other state or jurisdiction at the time of application.

C. The applicant must not be the subject of current disciplinary action in the other state or jurisdiction.

D. The applicant must not have been found guilty of any actions which could have resulted in discipline pursuant to Minnesota Statutes, section 148.10, at any time within the five years immediately preceding the application.

E. The applicant must remain in good standing in the other state or jurisdiction until the applicant is licensed in Minnesota.

F. The applicant must have all other states or jurisdictions in which the applicant has held a license to practice supply letters of good standing as part of the application.

G. The applicant must have all other states or jurisdictions in which the applicant has held a license to practice forward any and all available information pertaining to the examination taken by the applicant which resulted in licensure in the other state or jurisdiction.

H. If the licensing examination of the other state or jurisdiction is inadequate to meet the requirements of the Minnesota board, or if after initial licensure the applicant has failed a licensing examination administered by any chiropractic licensing board, the applicant may be required to take other exams, including the National Board of Chiropractic Examiners Practical Examination or the National Board of Chiropractic Examiners Special Purposes Examination in Chiropractic.

I. The applicant must be current with continuing education requirements of the state or jurisdiction in which the applicant currently resides.

J. The applicant must submit an affidavit that contains the statements described in subitems (1) to (3).

(1) The applicant is not the subject of any current complaints or investigations in any other state or jurisdiction in which the applicant has held a license to practice. Alternatively, if the applicant is the subject of a complaint against the applicant's license in any other state or jurisdiction in which the applicant has held a license to practice, the applicant must provide all details regarding the complaint. The board may withhold approval on an application until it has completed its review of any such complaint.

(2) The applicant has not been subject to disciplinary action in any other state or jurisdiction. If the applicant has been subject to disciplinary action that precedes the application by a period of five years or more, the applicant must attach a copy of the order to the application.

(3) The applicant has remained in continual practice for the two-year period immediately preceding the application.

K. If disciplinary action described in item J exists, the applicant must, prior to licensure, cooperate with any necessary investigation or inquiry initiated by the board, according to Minnesota Statutes, section 148.104.

L. The board may assess reasonable costs of the investigation or inquiry, which must be remitted prior to the granting of a license.

M. An applicant whose application is denied may, within 30 days of receipt of the denial, request a contested case hearing. In accordance with Minnesota Statutes, section 148.06, subdivision 1, the burden of proof is on the applicant to demonstrate eligibility for licensure. An applicant whose application is denied under this item may not reapply for a period of one year from the date of the denial.

Statutory Authority: *MS s 14.23; 148.08*

History: *25 SR 1718; 28 SR 907*

2500.1000 LICENSE APPLICATION FEE.

Applications for examination and 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; 25 SR 1862*

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, or for which the licensee is unable to provide documentation of continuing education compliance. In no event shall the penalty exceed \$900.

Statutory Authority: *MS s 14.23; 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; 27 SR 1102*

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.** A license expires if it is not renewed by midnight of December 31 of any calendar year for any of the following reasons:

- A. failure to pay required fees;
- B. failure to submit a completed application; or
- C. failure to complete all continuing education requirements.

An expired license is not considered a disciplined license solely as a result of the expiration.

An expired license which continues to remain expired as a result of item A, B, or C must be terminated according to this part. A terminated license is not considered a disciplined license solely as a result of the termination.

Subp. 2. **Notice.** Within 30 days of a licensee's failure to comply with any provisions of subpart 1, the board shall send a notice to the licensee at the address on file with the board. The notice must 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 licensee has failed to comply with the continuing education requirements in part 2500.1110, subpart 1, or 2500.1200;
- 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 verifying continuing education units, 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 verifying continuing education, annual fees, late fees, or notice of voluntary retirement is not received by the board by the date specified in the notice, the license must be terminated. The termination is not 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 expires at the end of the extension unless the licensee submits evidence of having accumulated the required units of continuing education. Any continuing education units accumulated during the extension period do not count toward the meeting of requirements of the next year's renewal requirements.

Subp. 5. [Repealed, 27 SR 1102]

Statutory Authority: *MS s 14.23; 148.08*

History: *15 SR 2265; 21 SR 196; 25 SR 1207; 27 SR 1102*

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 continuing 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 chiropractic continuing education is to advance the chiropractor's professional skills and knowledge.

Subp. 2. MR 1997 [Omitted in part, MS s 14.47, subd. 6, paragraph (b)]

Subp. 2. **Annual requirement.** Except as otherwise provided in this part, every person licensed to practice chiropractic in this state shall obtain a minimum of 20 continuing education units during the calendar year preceding the renewal. At least three of the continuing education units must be devoted to radiographic or advanced imaging safety, technique, or interpretation, and at least one unit must be devoted to professional boundaries in the clinical setting. The continuing education courses must be recognized and approved by the board or a board-approved sponsor.

Subp. 3. [Repealed, 17 SR 1711]

Subp. 4. **Schedule of required continuing education units.** Chiropractors must obtain 20 continuing education units by December 31 of each calendar year.

A chiropractor is not required to obtain any continuing education units during the calendar year in which the chiropractor is initially licensed.

Subp. 5. [Repealed, 25 SR 1916]

Subp. 6. **Full-time faculty.** Full-time faculty of a chiropractic college accredited by the Council on Chiropractic Education may have up to six units of continuing education credit applied to each annual requirement. Full-time faculty shall be defined as such by the chiropractic college by which they are employed. The faculty must have been employed as full-time faculty by the college for at least eight months during the calendar year for which credit is requested. Licensees applying for this credit shall have the college submit written verification of faculty status before any credit may be

applied. This credit may not be applied to the requirements for professional boundaries or radiographic/advanced imaging safety, technique, or interpretation.

Statutory Authority: *MS s 14.23; 14.47; 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; 25 SR 1916; 26 SR 31; 27 SR 1102*

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 during the year, or a fee of \$100 for each program given during the year.

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 parts 2500.1500 and 2500.1550, and criteria for unapproved programs listed in part 2500.1600; and

(4) a signed statement which indicates that the sponsor agrees to provide original receipts of participation to each Minnesota licensed chiropractor whose participation obligations are met indicating:

- (a) the attending chiropractor's name and address;
- (b) the attending chiropractor's Minnesota chiropractic license number;
- (c) the name of the program and the program identification number;
- (d) the date on which the program was attended;
- (e) the number of continuing education units obtained;
- (f) the type of continuing education units obtained; and
- (g) whether the units were obtained through traditional classroom participation, or whether the units were acquired through alternative formats in accordance with part 2500.1550.

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 to be awarded continuing education units for attending the program.

When granting approval to individual sponsors or instructors providing continuing education programs for credit, the board must consider whether the providers or instructors are qualified by training, experience, or licensure to provide such education. The board must also deny approval to individual sponsors or instructors who are the subject of current discipline by their licensing boards, or whose licensing boards have issued any notice of contested case hearing in which the allegations, if proven, would directly reflect on the provider's qualifications to provide such programs.

Within 15 business days, the sponsor must report to the board any changes in an instructor's eligibility to provide continuing education programs in accordance with the requirements in item C.

Statutory Authority: *MS s 14.23; 148.08*

History: *17 SR 1711; 25 SR 1863; 27 SR 1102*

2500.1420 REPORTS TO BOARD.

Subpart 1. **Maintenance of records by chiropractor.** The chiropractor shall affirm compliance with continuing education requirements and provide copies of such records when requested by the board. For this purpose the chiropractor shall:

A. maintain all continuing education records described in part 2500.1410, item B, subitem (4), or 2500.1720;

B. maintain the records until requested and verified for compliance by the board, but not for a period exceeding five calendar years; and

C. provide legible copies of records to the board within 21 calendar days of the board's request.

Subp. 2. **Board notification.** The board shall notify the chiropractor:

A. of the receipt of the submitted records; and

B. whether the records indicate compliance or noncompliance with requirements.

If the records indicate compliance, the board shall notify the licensee that the licensee is no longer obligated to maintain such records up to and including the period of the audit.

If the records indicate noncompliance, the board shall notify the licensee of the licensee's obligation to comply with part 2500.1800.

Statutory Authority: *MS s 14.23; 148.08*

History: *17 SR 1711; 19 SR 734; 27 SR 1102*

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, and those persons preparing 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, or under suitable conditions, that are considered by the board to be 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; 26 SR 31*

2500.1550 ALTERNATIVES TO TRADITIONAL CLASSROOM PRESENTATION.

A chiropractor may obtain up to six units of the 20-unit annual requirement through alternatives to traditional classroom presentations. The programs must be approved by the board or a board-approved sponsor according to parts 2500.1200 to 2500.2000. The programs approved for continuing education credit under this part must include a written assessment instrument, designed to ensure that the chiropractor actively participated in the presentation of material and derived a measurable benefit from participation. For the purposes of this part, an instrument that provides a minimum of two questions from each unit of instruction, and of which 75 percent or more are correctly answered, satisfies this requirement.

Statutory Authority: *MS s 14.23; 148.08*

History: *26 SR 31; 27 SR 1102*

2500.1600 UNAPPROVED PROGRAMS.

Courses dealing with administrative and economic aspects of practice shall not be approved for continuing education credit by the board. Courses dealing with administrative and economic aspects of practice include those designed to increase practice income, but do not include those dealing with risk management, appropriate coding procedures, or contemporary health care issues affecting the health care industry as a whole.

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

History: *25 SR 1863*

2500.1700 [Repealed, 17 SR 1711]**2500.1710 SPONSORSHIP REVOKED.**

The following 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. making any false representation to the board or to the chiropractors who attend a program; and
- C. failure to comply with any of the provisions in parts 2500.1200 to 2500.2000.

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 14.23; 148.08*

History: *17 SR 1711; 27 SR 1102*

2500.1720 PROGRAMS DEVELOPED.

Doctors of chiropractic licensed in Minnesota may report continuing education units for the development of a program which meets the standards in part 2500.1500.

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No more than six continuing education units may be reported for each year. For the purposes of a compliance review the chiropractor must submit a letter describing:

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

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

Statutory Authority: *MS s 14.23; 148.08*

History: *17 SR 1711; 21 SR 196; 27 SR 1102*

2500.1800 FAILURE TO COMPLY WITH CONTINUING EDUCATION REQUIREMENTS.

In accordance with part 2500.1110, the board shall provide written notice to any licensee who fails to comply with continuing education requirements. The licensee has 90 days from the date of the notice to:

- A. acquire the continuing education which would have been necessary for renewal;
- B. pay penalty fees established in part 2500.1100; and
- C. verify attendance at an additional ten units of continuing education for each year the licensee is unable to verify compliance.

Only courses taken after the date of the notice may be used to satisfy this requirement. Courses taken to satisfy the requirements in part 2500.1800 may not be applied to current or future continuing education requirements. Failure to comply with this part shall cause the board to initiate termination proceedings under part 2500.1110.

Statutory Authority: *MS s 14.23; 148.03; 148.05; 148.07; 148.08; 148.10 214.06; 214.12*

History: *27 SR 1102*

2500.1900 LICENSE REINSTATEMENT.

A license which is terminated by reason of the licensee's failure to comply with the continuing education requirements of parts 2500.1200 to 2500.2000, or failure to submit a completed application for license renewal as prescribed by the board, 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 of proof of the makeup of all continuing education requirements which would have been necessary for continuous licensure from the date of the person's last license renewal or initial licensure, whichever is more recent, and proof of attendance at an additional ten units of board recognized and approved continuing education courses for each intervening renewal year; or
- B. reexamination approved by the board.

A license which is terminated by reason of the licensee's failure to submit fees or comply with continuing education reporting requirements may be reinstated subject to the procedures in this part, provided that the appropriate renewal fees and all accrued penalty fees are also paid.

Statutory Authority: *MS s 14.23; 148.03; 148.05; 148.07; 148.08; 148.10; 214.06; 214.12*

History: *21 SR 196; 25 SR 1207; 27 SR 1102*

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 units obtained for annual license renewal.

Statutory Authority: *MS s 14.23; 148.08*

History: *15 SR 2265; 27 SR 1102*

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 units 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 units 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 14.23; 148.08*

History: *15 SR 2265; 27 SR 1102*

2500.2050 [Repealed, L 2001 c 46 s 1]

2500.2060 [Repealed, L 2001 c 46 s 1]

2500.2070 [Repealed, L 2001 c 46 s 1]

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 units obtained for annual license renewal.

Statutory Authority: *MS s 14.23; 148.08*

History: *19 SR 734; 27 SR 1102*

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 annual 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 approved by the board.

Statutory Authority: *MS s 14.23; 148.08*

History: *19 SR 734; 26 SR 31; 27 SR 1102*

2500.2115 EMERITUS REGISTRATION APPLICATION.

Any doctor of chiropractic licensed to practice in the state pursuant to Minnesota Statutes, sections 148.01 to 148.105, who declares to be retired in all jurisdictions from the active practice of chiropractic may apply to the board for doctor of chiropractic emeritus registration. The chiropractor may do so by indicating on the annual registration form or by petitioning the board if the chiropractor is completely retired and has not been the subject of disciplinary action resulting in the suspension, revocation, qualification, condition, or restriction of the chiropractor's license to practice chiropractic. There is no charge for the application, certificate, or modification of the license designation to emeritus status.

Statutory Authority: *MS s 148.08*

History: *24 SR 1798*

2500.2120 STATUS OF EMERITUS REGISTRANT.

The emeritus registration is not a license to engage in the practice of chiropractic as defined in Minnesota Statutes, chapter 148, or in the rules of the board and the registrant shall not engage in the practice of chiropractic.

Statutory Authority: *MS s 148.08*

History: *24 SR 1798*

2500.2125 EMERITUS CONTINUING EDUCATION REQUIREMENTS.

The continuing education requirements of parts 2500.1200 to 2500.2000 are not applicable to emeritus registration.

Statutory Authority: *MS s 148.08*

History: *24 SR 1798*

2500.2130 EMERITUS CHANGE TO ACTIVE STATUS.

Subpart 1. **Within three years.** A registrant who desires to change to active status, within three years from the date emeritus status was effective, may do so by doing the following, pending approval by the board based upon the information submitted:

A. completing a form prepared by the board that includes name, basic chiropractic education, chiropractic license number, duration of chiropractic licensure, date of emeritus registration, information on the applicant's physical and mental health, and information on any disciplinary action taken against the chiropractor in regards to chiropractic practice;

B. complying with the continuing chiropractic education requirements for the time period in which the chiropractor's license was in voluntarily retired status and under the emeritus registration pursuant to parts 2500.1200 to 2500.2000. This requirement must be fulfilled prior to submission of the application; and

C. surrendering the emeritus certificate to the board.

Subp. 2. **After three years.** After three years from the date emeritus status was effective, a registrant who desires to change to active status may do so, pending approval of the board, by providing the material listed in subpart 1 and passing the Special Purpose Examination in Chiropractic within the year preceding the reapplication for active status.

Statutory Authority: *MS s 148.08*

History: *24 SR 1798*

2500.2135 EMERITUS RENEWAL CYCLE FEES.

Being registered as emeritus will not subject a person to the annual renewal cycle fees.

Statutory Authority: *MS s 148.08*

History: *24 SR 1798*

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]

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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 extern 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; 25 SR 779*

2500.2505 PROGRAM ADMINISTRATOR.

The preceptorship training program is administered by the Executive Director, Minnesota Board of Chiropractic Examiners, 2829 University Avenue SE, Suite 300, Minneapolis, Minnesota 55414.

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 extern.

A. The preceptor shall meet with the extern on a regular basis, at least one hour per week, to provide valuable feedback and interaction for one another regarding the extern'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 extern 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 extern maintain patient records and convey information to the preceptor's practice; and
- (4) treatment of patients.

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

Statutory Authority: *MS s 148.08*

History: *15 SR 2138; 25 SR 779*

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 extern ratio.** The doctor to extern 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 extern ratio of one to two in any situation. An authorization for a doctor to extern ratio greater than one to one lasts only for the duration of that specified extern's preceptorship training program. Special authorization shall be given under the following circumstances:

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

B. when one extern has failed to pass the board licensing examination and that extern's preceptorship training program time overlaps into another extern'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/extern 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 extern.

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 extern 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 extern may only continue with the extern'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 extern 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 extern performing various services:

Patient care, examinations, and treatment are administered by Dr. (the name of the board-approved chiropractic extern).

Dr. is a graduate of an accredited chiropractic college but has not yet completed requirements for Minnesota licensure. 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; 25 SR 779*

2500.2520 ELIGIBILITY AND RESPONSIBILITIES OF EXTERN.

Subpart 1. **Eligibility and limitations.** Prior to approval, an extern must:

A. be a graduate of an accredited chiropractic college;

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B. if licensed elsewhere, provide evidence of good standing in all jurisdictions in which the extern is licensed; and

C. if licensed elsewhere, not currently be the subject of any discipline or complaints in any jurisdiction in which the extern is licensed.

Subp. 2. **Malpractice insurance.** Prior to approval, an extern 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 extern 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 extern's preceptorship program.

Subp. 3. **Application.** An applicant for externship must complete and file with the board an application in a form prescribed by the board.

Subp. 4. **Continuing requirements.** An extern 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; 25 SR 779; 25 SR 1863*

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 extern 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; 25 SR 779*

2500.2530 TERMINATION OF PRECEPTORSHIP PROGRAM.

A preceptorship training program must terminate no later than 12 months after inception. It must be terminated before that time if:

A. the board finds that either the extern 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 extern;

C. upon completion of the 12-month preceptorship program if the extern 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 extern. Board staff shall make every effort to place the extern with another preceptor in order for the extern to complete the preceptorship training program with little or no interruption.

Statutory Authority: *MS s 148.08*

History: *15 SR 2138; 19 SR 734; 25 SR 779; 25 SR 1142*

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 engaging in acupuncture, a licensed chiropractor must be registered with the board. Prior to initial registration, the chiropractor must complete no less than 100 hours of study, 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 2500.1200 to 2500.1600 shall be accepted by the board. The chiropractor must submit certification of completion of the approved course of study along with a \$100 registration fee. In addition, the applicant must have successfully completed either the National Board of Chiropractic Examiners Acupuncture Examination or the National Certification Commission for Acupuncture and Oriental Medicine (NCCAOM) Examination.

Doctors of chiropractic who are applying for licensure under the provisions of part 2500.0800 and who do not have proof of compliance with the requirements in the preceding paragraph, may satisfy the requirements by providing the board with an affidavit stating the following:

A. the doctor of chiropractic has obtained no less than 100 hours of acupuncture-related education from an educational institution approved by the board prior to the submission of this application; and

B. the doctor of chiropractic has performed no less than 500 acupuncture-related patient visits per year for at least three years preceding this application for registration.

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.

Subp. 6. Exemptions. Any doctor of chiropractic who is separately registered according to Minnesota Statutes, chapter 147B, is exempt from subparts 2 and 5.

Subp. 7. Renewals. Within 14 days after the due date of acupuncture registration renewal, the board shall mail notices to applicants who have not completed registration.

Any registrant who fails to renew registration for more than 30 days after the due date for renewal, and who wishes to renew registration, must reapply for registration prior to providing acupuncture services, pay the initial registration fee, and pay the penalty fees in part 2500.1150.

Any registrant who fails to renew registration for more than one year but less than five years, and who wishes to renew registration, must reapply for registration prior to providing acupuncture services, pay the initial registration fee, pay the penalty fees in part 2500.1150, and complete ten hours of acupuncture-related continuing education for each year the registration was not renewed.

Any registrant who fails to renew registration for a period of more than five years and who wishes to renew registration, must reapply for registration prior to providing acupuncture services, pay the initial registration fee, pay the penalty fees in part 2500.1150, and successfully complete either the National Board of Chiropractic Examiners Acupuncture Examination or the NCCAOM Examination.

Any person continuing to provide acupuncture services while not authorized to do so is in violation of Minnesota Statutes, section 148.10.

Statutory Authority: *MS s 14.23; 148.08*

History: *15 SR 2265; 24 SR 1210; 27 SR 1102; 28 SR 1482*

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*

RECORD KEEPING

2500.5000 RECORD KEEPING.

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*

VARIANCE

2500.5050 VARIANCE.

Subpart 1. **Right to request a variance.** A person subject to the rules of the board may request that the board grant a variance from any rule of the board.

Subp. 2. **Submission and contents of request.** A request for a variance must be submitted to the board in writing. Each request must be on a form prepared by the board, and must contain the following information:

- A. the specific rule for which the variance is requested;
- B. the reason for the request;
- C. the alternative measures that will be taken if a variance is granted;
- D. the length of time for which a variance is requested; and
- E. any other relevant information necessary to properly evaluate the request for the variance.

Subp. 3. **Decision on variance.** The board shall grant a variance if it determines that:

- A. the variance will not adversely affect, directly or indirectly, the health, safety, or well-being of the public;
- B. the alternative measures to be taken, if any, are equivalent to, or more protective of the public, than those prescribed in the rule from which the variance is requested; and
- C. compliance with the rule from which the variance is requested would impose an undue burden on the applicant.

The board shall deny, revoke, or refuse to grant or renew a variance if the board determines that either item A, B, or C has not been met. Any decision made relative to this provision shall be final.

Subp. 4. **Notification.** The board shall notify the applicant in writing within 30 days of the board's decision. If a variance is granted, the notification shall specify the period of time for which the variance will be effective and the alternative measures or conditions, if any, to be met by the applicant. All such requests, as well as the board's response to the requests, shall be public information.

Subp. 5. **Withdrawal.** The board shall have the right to withdraw the variance if the conditions for which the variance is granted become no longer applicable. The board shall mail a notification of withdrawal no less than 14 calendar days prior to the effective date of the withdrawal.

Statutory Authority: *MS s 148.08*

History: *24 SR 1210*

2500.6000 ENGAGEMENT IN THE PRACTICE OF CHIROPRACTIC.

A chiropractor is engaged in the practice of chiropractic when:

- A. the chiropractor provides examination or treatment services; and
- B. the patient, or a person authorized to act for the patient, accepts the services provided.

The chiropractor is subject to items A and B regardless of whether the patient or the patient's agent was billed or was paying for chiropractic services.

2500.6050 SEXUAL MISCONDUCT.

For the purposes of determining the presence of sexual misconduct:

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A. a person is considered to remain an active patient until no less than two years have elapsed since the last date on which the chiropractor examined or treated the patient; and

B. the conduct must occur at the time of or subsequent to the provision of an initial examination or treatment.

Consent or mutual consent may not be used by the chiropractor in the defense of an allegation of sexual misconduct by the chiropractor.