

Continuing Education and Licensing

by Kelly Edmundson, Administrative Assistant

This article is all about continuing education for chiropractic physicians. I hope you find it helpful.

Issue 1: During the recent OBCE CE audit it seemed that many licensees did not understand the timeframe within which continuing education is to be completed, especially in relation to Oregon’s birth month license renewal. The best way to say it is, ALL of a chiropractor’s CE hours for renewal MUST BE completed from birth month to birth month. If your birth month is May, then you must complete your CE hours between June 1 of the previous year and May 31. By keeping a folder of all your CE documentation with the appropriate date period on it you should be able to keep track of your hours.

Issue 2: The chiropractic License Renewal Notice is also an Affidavit, a legal document. If you read the Notice/ Affidavit, you will notice that it says, “I swear and affirm that during the previous license year (birth month to birth month), I have completed the required number of CE credits” ... If you sign your Renewal Notice/ Affidavit and you HAVE NOT completed your CE, you are risking disciplinary action and a heavy penalty from the OBCE.

Please DO NOT sign your Renewal Notice Affidavit until you have completed your CE hours. While there is no grace period for CE, there is a 30 day “grace” period after the renewal deadline in which the chiropractic license is still active until the license fee is received, however on the first day of the 30-day grace period a \$100 per week late penalty accrues up to a maximum of \$500.

Issue 3: Periodically, check the number of CE credits that you have completed during your license year. Some licensees were caught off guard when they received the CE Audit Request Letter from the Board. They lost track of the number of hours they had completed by their renewal date. They then needed to take the balance of hours at the last minute, plus expect a Board penalty. In addition, it is likely that the licensee had already signed their renewal notice that the hours were complete (a violation).

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New OBCE Board Member

Douglas Dick from Nehalem joined the OBCE as a public member in July 2008. He is a self employed building inspector and building official with extensive background in the building code process. In his application he stated, “I have used chiropractic care for almost 30 years. I believe I could be very objective and professional concerning this important business. As a small business owner I know that time to devote to this endeavor is a benefit to many people.”



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President's Report

Michael Vissers, DC
OBCE Board President

I first want to thank Dr. Guerrero for her service on the board this past five plus years and as Board President for the last three. Her skill as an encourager and communicator is second only to her compassion and willingness to hear both sides of each issue. Her wisdom, leadership, and dedication to our profession are sincerely appreciated by the entire board. She is leaving behind some (figuratively speaking) big shoes to fill!

It's an honor to serve as the new OBCE Board President for the coming year. Dr. Joyce McClure is our Vice-President, and Dr. Michael Megehee is our board Secretary. Dr. Megehee is our national FCLB Delegate and Dr. McClure is our NBCE Delegate (and the alternates respectively). Dr. Steve Koc has the lead on CE issues and is our liaison to the Rules Advisory Committee. Dr. Guerrero will continue with the ETSDP Committee.

As the new OBCE Board President I'll be reviewing our strategic plan to ensure progress on our key goals. The good news is that complaints received dropped 24% in 2008 down to a level last seen in 2002. More good news is there are fewer boundary complaints too and the ones we did see are less egregious than some of our previous cases.

In 2009 we will be revamping our Ethics and Jurisprudence state examination to make it an interactive learning experience in how to read and interpret our chiropractic laws and administrative rules. The Minnesota chiropractic board did this and believes it was a proactive measure that helped reduce complaints.

The 2009 Oregon Legislature will keep us busy as we face numerous changes to our existing authority. One group of lawyers wants to take away the Board's final decision making on complaints and delegate that to

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The mission of the Oregon Board of Chiropractic Examiners is to serve the public, regulate the practice of chiropractic, promote quality, and ensure competent ethical health care.

BackTalk is the official newsletter of the Oregon Board of Chiropractic Examiners. The Board's next meeting is March 19, 2009 at the OBCE office in Salem. For information go to the OBCE web site at www.oregon.gov/obce or call the Board office.

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President, Canby

Joyce McClure DC
Vice-President, Portland

Michael Megehee DC
Secretary, Pendleton

Minga Guerrero DC
Gresham

Steven Koc DC
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Meeting coordinator
License verifications



**Joyce McClure
DC, OBCE
Vice-President,
NBCE Delegate**



**Michael Megehee
DC, OBCE
Secretary,
FCLB Delegate**

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President's Report

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an Administrative Law Judge (who doesn't have medical or chiropractic expertise). Then the OBCE would have to pay for an expensive appeal to the Oregon Court of Appeals if we believed that didn't adequately protect the public.

There's a long list of other practice and policy issues to address such as:

- Is CE compliance becoming a problem?
- Should chiropractic assistant licensing and education requirements be increased? (We've heard this may be necessary for insurance reimbursement in the future.)
- How do we achieve greater diversity on our OBCE committees and in the profession as mandated by Oregon law?
- What kind of a guide or matrix would ensure consistency with OBCE disciplinary actions?

We welcome the views of our licensees and other stakeholders. As a State of Oregon public agency we are directly accountable to the Governor and Legislature and through them the Oregon public. Our public meetings are advertised on the OBCE website (www.oregon.gov/OBCE) along with our meeting minutes and a wealth of practice and policy information.



Outgoing President's Message

Minga Guerrero, DC

My service on the OBCE has been an amazing journey. I had no idea the professional education I'd receive when I submitted my application more than 6 yrs ago! Today, I believe we are more unified as a profession than ever before.

I hope I've helped to demystify the board and made it more accessible to the profession when practice and scope questions arise. I've looked for issues where the OBCE's public protection mission also supports and elevates the profession. It's been my constant goal to combine justice with compassion.

A few of our recent accomplishments have been:

- Improving the timeliness of our investigations and complaint resolution with a focus on consistency in our public protection actions.
- Adopted an administrative rule listing the health professionals that may work as part of a chiropractic clinic's services. This partially addressed the challenge of getting paid for chiropractic massage therapy services.
- Continued and improved our New Doctor meetings (with board and peer review members) to address issues for new practices such as billing and advertising.

(We'd like to think this has contributed to the 24% drop in complaints received in 2008.)

- Evaluated laser therapy and other devices and techniques to provide guidance to the profession.

Billing and coding issues is one area where our profession needs better support. When doctors informed us of a lack in billing and coding seminars, I researched, set up seminars and had links added to the state board website to include information on Medicare coding and billing seminars. However, this really needs to be addressed by the new Oregon Chiropractic Association as it affects not only the profession's bottom line but our ability to serve patients.

As the Oregon delegate to the Federation of Chiropractic Licensing Boards I've worked with chiropractic leaders from across our country and the world to address scope, politics and chiropractic philosophy. The energy I've felt from these exchanges has been food for my soul and energized my love of the profession.

Last and most important for my fellow doctors, please consider participating to help your profession and patients. It'll inspire you to a greater love of this profession. Your new unified state association needs your support and help, as does the OBCE. The association's role is to represent and promote the profession, while the OBCE's role is public protection. Both need to be done well for the benefit of all patients. ■

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Continuing Education and Licensing

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Action the board has been taking for failing to complete required CE hours:

- Licensees are assessed a flat penalty of \$250 for signing a false Renewal Notice Affidavit
- Licensees are assessed a penalty at \$50 per credit for each hour NOT completed within their licensure year.
- Licensees are automatically scheduled for audits for 1-5 years.

Bottom line: The OBCE is serious about the annual CE requirement. We want you to meet this requirement, we do NOT want to assess these fines. However, if you fail to comply, a penalty will be assessed.

Also, the CE audit is changing in two ways. First, the audit will be conducted throughout the year in conjunction with the birth month licensing

cycle. Second, the percentage of those audited is going to increase from the current 10% to a higher percentage for a period of time.

Some other CE facts to remember:

- If the OBCE receives a complaint about a CE course (quality or otherwise) we will make the appropriate inquiries and the issues will be brought to the attention of the board.
- There is a short list of courses/activities that do not qualify for CE on our Web page (i.e. Emotional Freedom Technique, Basic Spiritual Response Therapy, attending an exercise class, traveling to another country, and reading a textbook by itself).

- A CE hardship waiver may be requested if truly needed. The request should be made as soon as the hardship is identified, and before the expiration of your current license.

Please note that CAs also have renewals due each July 31st. Failure to renew in a timely fashion will require the CA to begin the process all over again, with \$110 application and examination, etc. There is no grace period.

If you have questions about CE, first check the information on the OBCE's Web page http://www.oregon.gov/OBCE/cont_ed.shtml, if you still have questions either call my direct line (503) 373-1573 or send me an email Kelly.edmundson@state.or.us ■

Bone Densitometry Alert

Recently an Oregon Health Division x-ray inspection found a chiropractic assistant was operating a bone densitometry device without the required permit to do so. This was reported to the Oregon Board of Radiologic Technology who levied a \$1,000 civil penalty against the chiropractic assistant. Subsequent discussions between the OBCE and the

“Rad Tech” board highlighted a need to share information about this requirement.

Despite the ease of use of a densitometry device, an operator other than a chiropractic physician is required to obtain a limited permit from the Oregon Board of Radiologic Technology. (A bone density test uses special X-rays to measure how many

grams of calcium and other bone minerals are packed into a segment of bone.)

To apply one must first complete an approved course (OHSU has an accelerated weekend course). Then a Temporary Initial Limited Permit to practice Bone Densitometry is available for \$24 for six months and may be renewed once.

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Bone Densitometry Alert

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The Temporary Permit holder is expected to take and pass the Limited Scope Bone Densitometry Equipment Operator Examination (cost is \$120). An applicant is then eligible to apply for a "Permanent Initial Limited Permit in Bone Densitometry" within a one-year timeframe which begins on the date they completed their course in Bone Densitometry from an approved school. The

Permanent Initial Limited Permit is based on a two year license and it is prorated at \$4 per month from the first day of their birth month and where it falls in the licensing cycle. Two year renewals are currently \$96.00.

The process is similar for other anatomical areas however the educational courses are much longer and there are specific examinations in the "Core Module" and various

extremities that applicants must take and pass depending on what type of permit. Those examinations cost more to take as well.

For complete information go to the Oregon Board of Radiologic Technology web page at: www.oregon.gov/RadTech, check on "Licensing Information" and then "Limited Permit Licensing Process." Their phone number is 971-673-0215. ■

Administrative Rule Changes

Continuing Education, OAR 811-015-0025. The OBCE did not adopt the proposal for 50% in person live courses or seminars.

They did adopt two modest but important changes at their September 2008 meeting. First, the OBCE can now establish a specific course requirement at any time (for an upcoming year) as opposed to being limited to May. This fits with the recent changeover to birth month licensing. Second, the CE compliance audit may now be anywhere up to 100%, (most likely be less) and will be done as licensees renew each month. The most recent CE audit and other anecdotal reports

informed the OBCE that increased compliance checks are needed, at least for a while.

Minor Surgery CE Rule (OAR 811-015-0030).

Currently, minor surgery / proctology certified chiropractors are required to complete 12 related CE hours every three years. At their January 2009 meeting, the OBCE added an additional option. Now, in lieu of eight hours of the continuing education requirement, a chiropractic physician may document performance or observation of twelve minor surgery / proctology procedures every three years. They will also be given credit for instruction hours.

Chiropractic Assistant Unprofessional Conduct Rules (OAR 811-010-0110).

The Board received legal advice that the existing unprofessional conduct rules for chiropractic physicians may not apply to chiropractic assistants. After much debate, the OBCE amended the CA rule (OAR 811-010-0110) to be very similar. (See Chiropractic Assistant Corner on Page 9).

To stay current with existing proposed chiropractic administrative rules go to the OBCE's Web page at <http://www.oregon.gov/OBCE> ■

OBCE Public Protection Update

Final and Proposed actions May 22, 2008 to January 30, 2009

Final Actions

Richard Crokin DC. Stipulated Final Order. Nine month suspension (Three of which were stayed, he re-entered practice on Feb. 1, 2009), \$7,500 Civil Penalty, five year probation, 10 hours of continuing education on billing and coding, prohibition on telemarketing to traffic crash victims. Violations: for taking an x-ray of a pregnant patient (ORS 684.100(1)(g)(A) and (B) and OAR 811-015-0010); misleading telemarketing advertising (OAR 811-015-0045(1), (2) and (3)), hiring telemarketers and paying them a fee per patient (ORS 684.100(1)(g)(A) and OAR 811-035-0015(24)); billing an insurance company for cervical x-rays that were not taken (ORS 684.100(1)(g)(A) and OAR 811-015-0005(1) and 811-035-0015(5) and (7)); failure to document sufficient clinical justification for treatment (OAR 811-015-0010(1)); inaccurate or insufficient documentation of examination procedures (OAR 811-015-0005(1)); Evaluation and Management code levels billed to the insurer that are not substantiated by the records (ORS 684.100(1)(g)(A) and OAR 811-035-0015 (12)). (8/1/2008)

Thomas Bolera DC. Six month suspension, two year probation, \$1,000 civil penalty. Violations of ORS 684.100 (1)(d), OAR 811-035-0015 and

pursuant to ORS 684.100 (1)(s) for federal felony conviction for securities fraud and subsequent disciplinary action against his Ohio chiropractic license. (7/25/2008)

Leslie Rutherford CA. Conditions on Chiropractic Assistant license to inform current and prospective chiropractic employers of his felony conviction for transporting quantities of marijuana over state lines and random UAs for two years. (6/25/2008)

Jorge Torres CA. Letter of Reprimand for inappropriate comments to and kissing a patient. Violations of ORS 684.100(1)(g)(A); and OAR 811-035-0015(1)(b)-(e) and OAR 811-010-0110(14)(a). His certificate has since lapsed. (6/30/2008)

Nelda Perez CA. Indefinite Suspension of CA certificate. Violations of ORS 684.100(1)(g)(A) and (1)(d) for theft from her chiropractic employer and failure to cooperate with the board's investigation.. OAR 811-010-0110(14)(a), 811-035-0015(20), and ORS 684.100(1)(g)(A), (1)(d). Her certificate has since lapsed. (7/7/2008)

Dirk Friedt. CA applicant. Denial of CA application. Violations of OAR 811-010-0100 (14) allows the Board to refuse to grant a license to any applicant upon a finding of

unprofessional or dishonorable conduct. In addition, OAR 811-010-0110 (14) also allows for refusal of a license for fraud or misrepresentation in applying for or procuring a certification. The Board found intentional misrepresentations in the application for the certification in terms of applicant's arrest and conviction history. Applicant was convicted of driving while suspended in November 2006 and June 2007. Applicant had been arrested for assault 4 and harassment in March 1987 and pled guilty on April 24, 1987 to harassment in Washington County case No.: M 70681, and in March 1998, Applicant was arrested for resisting arrest and harassment and was convicted on August 18, 2003 for harassment in Washington County Court Case No.: D9801164M. Applicant is a former licensed acupuncturist who was placed on indefinite suspension by the Oregon Medical Board. (10/3/2008)

Larry Fleetwood DC. Suspension and \$2,000 Civil Penalty. Failure to cooperate with an investigation, failure to give prior notice to patients with the permanent or temporary closure of his practice, and failure to give reasonable access to records. Violations of OAR 811-035-0015 (19), ORS 684.100(1)(g)); OAR 811-035-0015 (20),

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OBCE Public Protection Update

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OAR 811-015-0006 (1), ORS 684.100(1)(q); ORS 684.100 (1) (t). Failure to comply with CE requirements and signing a false affidavit attesting to completion of 20 hours CE, and failure to cooperate with an investigation. (\$250 for signing a false affidavit and \$750-\$50 per hour not completed and \$750 for failure to cooperate with an investigation.) Violations of OAR 811-015-0025 and ORS 684.092, OAR 811-035-0015(16) and OAR 811-035-0015 (20). (1/6/2009)

Jonathan Hansel DC ND.

Temporary suspension of chiropractic license (Interim Stipulated Order) for habitual or excessive use of controlled substances, intoxicants or drugs in violation of ORS 684.100(1)(f) pending further investigation and evaluation. This follows similar action by the Naturopathic Board. (1/26/2009)

Deborah Hildebrandt DC.

Stipulated Final Order. \$250 Civil Penalty (\$125 stayed) for signing a false affidavit attesting to completion of 20 hours CE. Licensee was also granted a CE hardship waiver and license status changed to Inactive. Violations of OAR 811-015-0025. (1/30/2009)

Proposed Actions

Tuan Ahn Tran, proposed \$226,500 Civil Penalty for extensive unlicensed practice, and ownership of Chiropractic Clinics at two locations; forging another doctor's signature on chart notes, HCFA and insurance forms, making false referrals for x-rays; and not identifying one clinic as a chiropractic clinic. Violations of ORS 684.015 and OAR 811-010-0120, ORS 676.110 and OAR 811-015-0045, ORS 684.100 (1) (a) fraud or misrepresentation, (c) the impersonation of another practitioner of like or different name, and OAR 811-035-0015(12) perpetrating fraud upon patients or third party payors relating to the practice of chiropractic. (12/1/2008)

Case # 2008-5021. Proposed \$650 for failure to complete 8 hours of the 20 hour CE requirement during licensure year and signing a false affidavit. Violations of OAR 811-015-0025 and ORS 684.092, OAR 811-035-0015(16). (1/23/2009)

Case # 2008-5022. Proposed \$450 for failure to complete 4 hours of the 20 hour CE requirement during licensure year, signing a false affidavit, and failure to complete the Pain Management and Evidence-Based Outcomes

Management CE prior to the January 1, 2008 deadline. Violations of OAR 811-015-0025 and ORS 684.092, OAR 811-035-0015(16). (1/23/2009)

Case # 2009-5001. Proposed \$850 for failure to complete 12 hours of the 20 hour CE requirement during licensure year and signing a false affidavit. Violations of OAR 811-015-0025 and ORS 684.092, OAR 811-035-0015(16). (1/26/2009)

Dismissed Complaints

For this reporting period there were findings of 10 No Statutory Violation (N.S.V.), 20 Case Closed, 6 Letters of Concern, and 2 Insufficient Evidence (I.E.) all of which included Letters of Concern. There was one Consent Agreement where the chiropractor accepted a Board appointed observer and agreed to a follow up evaluation to monitor his recovery from a series of minor strokes. A total of 54 cases were closed during this period. ■

Child Abuse Reporting Elder Abuse Reporting

(persons 65-years of age or older)

Chiropractors observe and treat children on a regular basis. A chiropractor, having reasonable cause to believe any child with whom the chiropractor comes in contact has suffered abuse or any person with whom the chiropractor comes in contact has abused a child, is required by Oregon Law (ORS 419b.010) to report by telephone or otherwise to the local office of the State Office for Services to Children and Families (SCF) or to a law enforcement agency. Any report made is confidential and the person making the report may not be sued.

Abuse can be classified into four basic categories:

- physical abuse;
- neglect;
- mental injury or emotional maltreatment;
- sexual abuse.

ORS 419B.005 defines child abuse as:

“Any assault, as defined in ORS chapter 163, of a child and any physical injury to a child which has been caused by other than accidental means, including any injury which appears to be at variance with the explanation given of the injury.” This does not include reasonable discipline. ■

Abuse in its various forms affects our society from children to the elderly. It is estimated that approximately 2.5 million older people are abused each year; however, only about 10% of the cases are reported. Elderly victims of abuse “often have low self-esteem, blame themselves for the abuse, and do not want to admit their vulnerabilities or betray their families,” and are usually abused by those with whom they live. Neglect of, or ridicule toward, an elderly person can frequently be an indicator of elder abuse.

Comparatively, the definitions of abuse for older people are very similar to those for children. As with child abuse, chiropractors have a legal and ethical obligation to report any suspected elder abuse with confidentiality to the local office of the Senior and Disabled Services Division or to a law enforcement agency. They may not be sued for such reporting. ■



Don Ferrante DC, Oregon Chiropractic Association Co-President addresses CE issues at the OBCE's September meeting.



Dr. Steve Koc reads the OBCE's Mission Statement at the beginning of every board meeting.

Digitized X-rays

Recently, the OBCE has received numerous questions regarding the use of digitized x-rays. The board investigated the process of creating digitized films, pricing and the diagnostic information produced by this product. We offer the following comment to the profession and other stakeholders following this review:

1. Doctors would be wise to inform their patients of the cost differential when ordering digitized films. Because the cost far exceeds plain film reads, the patient may have to bear the burden of any payment not covered by insurance reimbursement.
2. Doctors should be aware that the number one complaint filed by patients falls in the category of billing and treatment.
3. According to the American Chiropractic College of Radiology, current literature shows no difference in "digitized" computer analysis vs. plain film reads by trained practitioners.

Despite their higher cost, many digitized reads do not contain any information regarding gross osseous pathologies or other evident pathology, such as cancer, metabolic disease or fracture. If the read is a singularly biomechanical report, the responsibility remains with the ordering practitioner to rule out pathology visible on these films. ■

Chiropractic Assistant Corner

Nationally, there is a discussion as to whether there is sufficient mandated training for chiropractic assistants. This is driven in part by the possibility that third party payers will refuse to reimburse for CAs who lack a specified level of training. This is on the OBCE's strategic planning list of issues for further discussion.

Iontophoresis and phonophoresis. Chiropractic assistants may perform iontophoresis or phonophoresis under the doctor's supervision as a form of physiotherapy. (11/20/2008)

Chiropractic Assistant terminology. The OBCE reviewed a case of a chiropractic clinic referring to their chiropractic assistants as "massage therapists" or just "therapist." The Board determined this is misleading advertising and may not be used (unless of course the CA is also a licensed massage therapist). Also, the CA rule was changed and the term "Certified" has now been dropped. The designation "CA" is also acceptable. (11/20/2008)

Unprofessional Conduct Rules Adopted. The Board received legal advice that the existing unprofessional conduct rules for chiropractic physicians may not apply to chiropractic assistants. After much debate, the OBCE amended the CA rule (OAR 811-010-0110) to be very similar.

In particular, there was spirited debate under what conditions a CA could establish a personal relationship with a patient. Many felt the CA-patient relationship was different from the doctor's. Ultimately, the OBCE found that a significant fiduciary relationship does exist.

The OBCE also discussed that a CA (with the supervising DC's consent) may be allowed to terminate the treating relationship and access to a patient's personal information, thus in some cases allowing the CA to be free of this restraint. A close reading of the rule's parameters (see definition of "current patient") would be necessary in this situation. ■

Policy & Practice Questions

Question (from a DC): *I type each day's notes at the time of service into my computer. When I finish out a chart note each day, I initial them with a computer generated note. This is not an actual written signature, but they are my initials and signify who made the note. Would this satisfy the requirement to sign each chart note entry?*

Answer: Yes. You can use typed initials or signatures for computer generated chart notes.

Question: *Is treatment of migraine headaches within the Oregon chiropractic scope of practice?*

Answer: Yes, absolutely.

Question: *May a chiropractor write a prescription/referral for colonic therapy?*

Answer: Yes, this used to be taught at WSCC and is still considered within the Oregon DC scope of practice

Question (from a medical testing service): *May Oregon chiropractors order, collect and receive medical laboratory test results for pap smears?*

Answer: Yes. DCs in Oregon have a very broad scope of practice in the area of diagnostics. They were also trained in ob-gyn and female health issues in chiropractic college.

Question (from a DC): *May chiropractic assistants do postural screenings at an event without the chiropractor present?*

Answer: No. The doctor must be present when the CA is providing this service.

Question (from a chiropractic clinic manager): *We have been approached by a Naturopath who would like to work for us in our clinic. Is it possible to bill under our tax ID # for a Naturopath?*

Answer: In 2006 the OBCE adopted the following rule: OAR 811-010-0130, Other Licensed Health Care Providers. A chiropractic business entity or chiropractic physician, in accordance with decades long accepted scope of practice, may employ or contract for the services of other health care providers as part of their chiropractic practice for the purpose of providing care to patients, to the extent this does not conflict with other applicable state or federal laws. Other health care providers may include, but are not limited to, licensed massage therapists, physical therapists, athletic trainers, nurses, acupuncturists, naturopathic physicians, and physicians licensed under ORS 677.

So the OBCE has no issue with this, but we don't claim to be the authoritative source for all billing issues.

Question (from an East Coast DC): *The doctor is coming to Oregon with a Trailblazer player who is his patient. Can he treat his patient while in Oregon?*

Answer: Yes, under the Travel to Treat law for up to 15 days for a specific cultural, educational or sporting event.

Question: *May a chiropractor tell a patient with diffuse muscular pain to stop taking Lipitor?*

Answer: It could be interpreted to be out of scope to do so that bluntly. It could be considered the practice of medicine. It would be appropriate to share information and concerns with the patient (which the DC did) and/or the DC should share his concerns with the prescribing doctor since they are co-treating this patient.

ORS 684.015 specifically prohibits DCs from administering or writing prescriptions for medications. ORS 684.035 Chapter not applicable to other methods of healing, says,

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Policy & Practice Questions

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“Nothing in this chapter shall be construed to interfere with any other method or science of healing in this state.”

Question: *A chiropractor is purchasing another clinic. Is it necessary for him to get a written consent for the seller to pass on the patient file and information to me, the buyer, from the seller's patients? In other words, do the existing patients need to give permission to transfer their health information to me?*

Answer: Not in this case. This situation is covered in the OBCE Records rule (OAR 811-015-0005 (5), which states, “The responsibility for maintaining original patient records may be transferred to another chiropractic business entity or to another chiropractic physician as part of a business ownership transfer transaction.”

Question: *Is there a requirement to obtain and keep a patient's specific date of birth and their social security number? The concern is about possible identity theft if the information was stolen.*

Answer: There is no specific OBCE rule or policy which requires this. ■

Dr. Koc (seated) and Dr. Vissers (standing) talked with 50 new DC at the October New Doctors Meeting with board and peer review members.

OBCE January 2009 meeting in WSCC's Hampton Hall. Left to right: public member Cookie Parker-Kent, Drs. Michael Megehee, Joyce McClure, Steve Koc, Michael Vissers, Minga Guerrero, Kelly Edmundson, Donna Dougan, Michael Summers, Assistant Attorney General Lori Lindley; and public member Douglas Dick.



OBCE Policy Updates

Blood pressure checks. Can any trained person perform blood pressure checks? The Board determined they can. The Board approved the following policy change:

Any Trained Person (including CAs) may perform the following: Clarify initial patient intake history, which includes recording or performing height, weight, blood pressure, temperature, and pulse rate. (11/20/2008)

Oxygen Concentration The Oregon Board of Pharmacy considers USP (medical) Oxygen (100%) a prescription drug. However oxygen concentrated at a lower percentage (90 to 95%) does not require a prescription. With that understanding, the OBCE does not prohibit oxygen concentration or the devices which produce this by chiropractic physicians. However, it would be inaccurate for anyone to represent that the Board has “approved” the use of oxygen concentration. Similar precautions as indicated for emergency medical oxygen must be observed. (11/20/2008) ■



BackTalk

New Licensees

May 21, 2008 to January 26, 2009

Andrew E. Alvis
John P. Archer
Venessa C. Bartholomew
Kenneth S. Bishop
Timothy R. Bradford
Christina M. Brogna
Jason M. Bussanich
Brenton T. Cheng
Neal A. Craig
Jerome G. Craig
Michael A. Crampton
Brent A. Dixon
John Doucette
Brad P. Farra
Jeffrey A. Finnigan
Michelle M. Gerbi
Jeffrey S. Hembree
Matthew Hemsley
Michael B. Herb

Margaret L. Hoecker
Drew A. Hohensee
Ben A. Hokenson
Bronwyn L. Illingworth
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