



Oregon

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Regarding Additional CE for Oregon Chiropractic Physicians

According to OAR 811-015-0025(4) "The Board may require specific courses as part of a chiropractic physician's annual relicensure hours. Except as provided in sections (5), (6) and (7), the Board must determine which courses shall be required by May of the year prior to the relicensure year in which the course will be required."

NEW REQUIREMENT (established 2005): (UPDATED November 15, 2007)

Two (2) CE hours related to Evidence-based outcomes management. All chiropractic physicians licensed at the time this policy was established are/were to have the hours completed by January 1, 2008. (UPDATE 11/15/07) New licensees are to complete these two hours at their first license renewal (in addition to the current requirement for four hours of over-the-counter medications).

Continuing Education courses that meet the general criteria for "Evidence-Based Outcomes Management" for the 2 hour requirement should:

- Identify "outcomes management" tools appropriate for curative chiropractic treatment. This should include both subjective or patient-driven information as well as objective or provider-driven information.
- Identify and present the evidence that supports use of these tools, and comment on the strength of this evidence.
- Present methods or protocols for use of these outcomes management tools, including documentation that carries substance, offers specific treatment approaches, and proves or not the need for ongoing care.

This should not be an advanced course on record keeping & chart noting.

Examples of patient driven outcome management tools include "*Self Reporting Psychometric Questionnaires*"; such as the Revised Oswestry Low Back Questionnaire, Rolland-Morris, and Neck Disability Index, etc. These patient-driven tools provide a quantitative assessment of the patient's activity intolerance or disabilities. The Pain Drawing provides a qualitative assessment, the Visual Analog Scale, and the Numerical Pain Rating Box examples of patient driven tools that provide a quantitative assessment of the patient's current level of pain.

Examples of objective provider driven outcome management tools include physical examination procedures and physical performance testing. Physical examination procedures may include static and/or dynamic palpatory findings, ranges of motion via inclinometers and/or goniometers, functional radiology, various functional chiropractic signs tests and maneuvers, and instrumentation such as the tissue compliance meter or algometer. Physical performance testing may include measuring of specific muscle groups for strength and flexibility and comparing the results with normative data tables.