



**NOTICE OF PROPOSED RULEMAKING**  
INCLUDING STATEMENT OF NEED & FISCAL IMPACT

CHAPTER 811

**BOARD OF CHIROPRACTIC EXAMINERS**

**FILED**

10/24/2025 1:09 PM  
ARCHIVES DIVISION  
SECRETARY OF STATE

FILING CAPTION: Updates language and requirements for clarity, consistency, and uniform application.

LAST DAY AND TIME TO OFFER COMMENT TO AGENCY: 01/28/2026 9:05 AM

*The Agency requests public comment on whether other options should be considered for achieving the rule's substantive goals while reducing negative economic impact of the rule on business.*

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Filed By:  
Christa Haskell  
Rules Coordinator

HEARING(S)

*Auxiliary aids for persons with disabilities are available upon advance request. Notify the contact listed above.*

DATE: 01/28/2026

TIME: 9:00 AM - 1:00 PM

OFFICER: Christa Haskell

REMOTE HEARING DETAILS

MEETING URL: [Click here to join the meeting](#)

PHONE NUMBER: 1-503-446-4951

SPECIAL INSTRUCTIONS:

Virtual Passcode: rp2wA67z

NEED FOR THE RULE(S)

Updating language and requirements for clarity, consistency, and uniform application.

DOCUMENTS RELIED UPON, AND WHERE THEY ARE AVAILABLE

OAR Ch. 811, [www.oregon.gov/obce](http://www.oregon.gov/obce)

STATEMENT IDENTIFYING HOW ADOPTION OF RULE(S) WILL AFFECT RACIAL EQUITY IN THIS STATE

Updating rule format and language for accuracy and consistency will likely not affect racial equity.

FISCAL AND ECONOMIC IMPACT:

Updating rule format and language for accuracy and consistency will likely not make a fiscal impact.

COST OF COMPLIANCE:

(1) Identify any state agencies, units of local government, and members of the public likely to be economically affected by the rule(s). (2) Effect on Small Businesses: (a) Estimate the number and type of small businesses subject to the rule(s); (b) Describe the

*expected reporting, recordkeeping and administrative activities and cost required to comply with the rule(s); (c) Estimate the cost of professional services, equipment supplies, labor and increased administration required to comply with the rule(s).*

There are no aspects of compliance that are changing.

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DESCRIBE HOW SMALL BUSINESSES WERE INVOLVED IN THE DEVELOPMENT OF THESE RULE(S):

5 of our board members who will be reviewing and voting on this rule are active, licensed chiropractic physicians and some either own or work for small businesses.

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WAS AN ADMINISTRATIVE RULE ADVISORY COMMITTEE CONSULTED? NO IF NOT, WHY NOT?

The OBCE is modifying an already existing rule for the purpose of clarifying rule logistics.

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RULES PROPOSED:

811-010-0021, 811-010-0112, 811-015-0025, 811-035-0015

ADOPT: 811-010-0021

RULE SUMMARY: This rule requires all licensees and certificate holders to promptly notify the Oregon Board of Chiropractic Examiners (OBCE) of any name or contact information changes. It establishes the process for reporting name changes through a Name Change Affidavit with supporting documentation and mandates written (email) notification to the Board within 30 calendar days of any change to ensure accurate and current records.

CHANGES TO RULE:

811-010-0021

Name Changes

(1) Each licensee and certificate holder shall update any name changes with the OBCE by providing a completed Name Change Affidavit and copies of necessary documentation.<sup>¶</sup>

(2) Licensees and certificate holders shall notify the OBCE in writing (email) within 30 calendar days of any change.

Statutory/Other Authority: ORS 684

Statutes/Other Implemented: ORS 684.054

ADOPT: 811-010-0112

**RULE SUMMARY:** This rule establishes the Oregon Board of Chiropractic Examiners' authority and standards for recognizing chiropractic specialty programs. It adopts by reference the Federation of Chiropractic Licensing Boards' Recognized Chiropractic Specialty Program (FCLB-RCSP) standards as part of the Board's review criteria. The rule clarifies that the Board retains sole authority to approve or deny specialty programs, sets requirements for chiropractic physicians to obtain Board approval before representing themselves as specialists, and outlines the Board's process for reviewing post-doctoral specialty programs.

**CHANGES TO RULE:**

811-010-0112

Recognized Chiropractic Specialty Program

(1) The Board adopts by reference the recognized standards of the Federation of Chiropractic Licensing Boards' Recognized Chiropractic Specialty Program (FCLB-RCSP) as part of its review criteria of board approved specialty programs.¶

(2) The Board retains sole authority to approve or deny any specialty program based on its relevance to professional development, alignment with recognized standards of chiropractic care, and the Board's responsibility to protect the public.¶

(3) A chiropractic physician may not advertise, represent, or otherwise hold themselves out to the public as a specialist in any area of chiropractic practice unless the physician is registered with the Board as having completed a Board-approved specialty program.¶

(4) The Board shall review and may approve post-doctorate specialty programs that meet standards and criteria established by the Board by rule.

Statutory/Other Authority: ORS 684.155

Statutes/Other Implemented: ORS 684.025

AMEND: 811-015-0025

RULE SUMMARY: This amendment adds a new provision under subsection (2)(e), creating paragraph (D), to specify an additional requirement for first-year Chiropractic Assistant renewal.

CHANGES TO RULE:

811-015-0025

Continuing Chiropractic Education ¶¶

(1) Continuing chiropractic education (CE) is to improve the competence and skills of Oregon chiropractic licensees, and to help assure the Oregon public of the continued competence of these licensees within the statutory scope of practice.¶¶

(2) In order to renew a license or certificate, each licensee shall complete an affidavit attesting to successful completion of education per their license or certificate status.¶¶

(a) Chiropractic physician first year initial status - 8 hours which must include the following:¶¶

(A) Over-the-counter, non-prescriptive substances - 4 hours;¶¶

(B) Evidence-based medicine - 2 hours;¶¶

(C) Cultural competency - 1 hour;¶¶

(D) Suicide intervention training - 1 hour;¶¶

(b) Chiropractic physician second year active status - 20 hours which must include the following:¶¶

(A) Pain Management Education - 7 hours (6 accredited hours in pain management, palliative care, and end of life care or a combination of both, and 1 hour of pain management module through the Pain Management Commission);¶¶

(B) Cultural competency - 2 hours;¶¶

(C) Suicide intervention training - 1 hour;¶¶

(D) Maintenance of Basic Life Support (BLS) for Healthcare Providers or its equivalent as determined by the Board - up to 6 hours accepted towards general continuing education requirement;¶¶

(E) General continuing education - 10 hours;¶¶

(c) Chiropractic physician active status - 20 hours which must include the following:¶¶

(A) Cultural competency - 2 hours;¶¶

(B) Suicide intervention training - 1 hour;¶¶

(C) Maintenance of Basic Life Support (BLS) for Healthcare Providers or its equivalent as determined by the Board - up to 6 hours accepted towards general continuing education requirement;¶¶

(D) General continuing education - 17 hours;¶¶

(d) Chiropractic physician senior active status - 6 hours which must include the following:¶¶

(A) Cultural competency - 1 hour;¶¶

(B) Suicide intervention training - 1 hour;¶¶

(C) Maintenance of Basic Life Support (BLS) for Healthcare Providers or its equivalent as determined by the Board - up to 6 hours accepted towards general continuing education requirement;¶¶

(D) General continuing education - 4 hours;¶¶

(e) Chiropractic assistant - 6 hours which must include the following:¶¶

(A) Cultural competency - 1 hour;¶¶

(B) Maintenance of Basic Life Support (BLS) for Healthcare Providers or its equivalent as determined by the Board - up to 6 hours accepted towards general continuing education requirement;¶¶

(C) General continuing education - 5 hours;¶¶

(D) First year renewal only - Vitals training with log - 2 hours¶¶

(f) The Board may require additional specific courses as part of a licensee's annual renewal hours for an upcoming license or certificate period.¶¶

(3) Continuing education course or activity hours must be completed during the preceding license or certification period. A licensee may not claim more than 20 hours of continuing education completed in one 24-hour period. Courses shall not be taken simultaneously. Each licensee shall maintain records to support the attestation of completed hours.¶¶

(4) Courses or activities determined by licensees to meet the criteria herein are presumed to be approved until or unless specifically disapproved by the Board. Licensees will be informed of any disapproved courses in a timely manner.¶¶

(5) Any chiropractic physician who is also actively licensed in a healthcare profession with prescriptive rights is exempt from the over-the-counter, non-prescriptive substances requirements.¶¶

(6) Any chiropractic physician changing license status from inactive to active or senior active shall take the required hours referenced in section (2). It shall be within the Board's discretion to determine, on a case-by-case

basis, the required continuing education based on the time away from active status.¶

(7) Approved continuing chiropractic education shall be obtained from courses or activities which meet the following criteria:¶

(a) They do not misrepresent or mislead;¶

(b) They are presented by a chiropractic physician, licensed here or in another state, other appropriate health care provider, or other qualified person;¶

(c) They exclude practice-building subjects and the primary purpose of the program may not be to sell or promote a commercial product. However, the mere mention of practice-building concepts shall not disqualify a program's eligibility for CE credit.¶

(d) The material covered shall pertain to the practice of chiropractic in Oregon or be related to the licensee's specific practice;¶

(e) Continuing education hours for Board activities must assist in assuring the competence and skills of the licensee; and¶

(f) Shall be quality courses or activities adequately supported by evidence or rationale as determined by the Board.¶

(8) The Board may accept a maximum of 6 credit hours from each of the following categories:¶

(a) Being an original author of an article, published in a peer reviewed journal, given in the year of publication;¶

(b) Participation in a formal protocol writing process associated with an accredited health care institution or state or government health care agency;¶

(c) Participation as an OBCE board member or on an OBCE committee;¶

(d) Participation in a research project, approved by the Board, related to chiropractic health care directed by an educational institution or other qualified chiropractic organization;¶

(e) Teaching courses at an accredited health care institution;¶

(f) Teaching chiropractic continuing education courses;¶

(g) Professionally licensed staff of the OBCE; and¶

(h) Professionally licensed non-board member attending public OBCE board meetings. Each meeting, the attendee will be given a maximum of 2 hours.¶

(9) The Board may accept a maximum of 12 credit hours from each of the following categories:¶

(a) Participation on a National Board of Chiropractic Examiners' (NBCE) examination; or¶

(b) NBCE test writing committee.¶

(10) The Board may accept credit hours from courses, seminars, or other activities. Completion of other activities as chiropractic continuing education is defined as follows:¶

(a) Continuing medical education (CME);¶

(b) Video or pre-recorded continuing education courses or seminars, unless specifically required by the Board to be taken in person;¶

(c) Successful completion of online or in-person college courses related to chiropractic health care taught at an educational institution; and¶

(d) BLS/CPR/AED courses.¶

(11) All licensees are required to keep full, accurate, and complete records:¶

(a) A verification of attendance for all CE courses or activities showing hours claimed for renewal credit, and or proof of completion signed by the sponsor and licensee.¶

(b) Video or pre-recorded courses shall be supported through record-keeping with a letter, memo, or on a form provided by the Board, that includes the dates and times, vendor's or presenter's name/s, total hours claimed for each course, location, and includes the following statement: "I swear or affirm that I viewed or listened to these continuing education courses in their entirety on the dates and times specified in this report."¶

(c) A copy of a published article including the date of publication;¶

(d) A written record of hours in clinical protocol development and research projects. The record shall include the names and addresses of the institutions involved, name of supervisors, and their signatures verifying hours.¶

(e) For licensees claiming CE hours under the provisions of (8)(d), for participation on a Board committee, or assisting with a National Board of Chiropractic Examiners' (NBCE) examination or NBCE test writing committee, certification from the Board or NBCE.¶

(f) For licensees claiming CE hours under the provisions of (8)(f), a record of employment by health care institutions, signed by their supervisor, a copy of the course syllabus if applicable, and verification of hours.¶

(g) For licensees claiming CE hours under the provisions of (8)(g), licensee shall obtain and keep verification of the course taught including, the dates of the course, a syllabus and the sponsoring organization.¶

(12) The Board will generate a random computer list of a minimum of 10% or up to 100% of renewing licensees, who will have their CE records audited and reviewed to ensure compliance with this rule. Licensees shall respond to this request within 30 days by supplying the Board with verification of their CE courses or activities.¶

(13) Any licensee who has submitted inadequate, insufficient, or deficient CE records or who otherwise appears to

be in noncompliance with the requirements of this rule will be given written notice by the Board and will have 30 days from the date of notice to submit additional documentation, information or written explanation to the Board establishing the licensee's compliance with this rule. The Board may issue civil citations for noncompliance of this rule.¶

(14) At its discretion, the Board may audit, by attendance, the content of any program in order to verify the content thereof. Denial of an audit is grounds for disapproval.¶

(15) Any licensee seeking a hardship waiver from their continuing education requirements shall apply to the Board, in writing, as soon as possible after the hardship is identified and prior to the close of licensure for that year. Specific details of the hardship must be included. In order to approve an application for a hardship waiver, the Board, within its discretion, must find that such hardship exists.¶

(16) The Board shall maintain and make available, through its web page and electronic communications to licensees, a list of disapproved courses, if any. The Board may disapprove a course or CE activity after giving the sponsor and/or licensees the opportunity to provide additional information of compliance with the criteria contained in this rule, and opportunity for contested case hearing under the provisions of ORS 183.341, if requested. Any CE sponsor or licensee may request the Board to review any previously disapproved course at any time.

Statutory/Other Authority: ORS 684.155

Statutes/Other Implemented: ORS 684.092

RULE SUMMARY: Adds harassment, intimidation, or abuse of Board staff or members to the definition of unprofessional conduct.

CHANGES TO RULE:

811-035-0015

Unprofessional Conduct in the Chiropractic Profession ¶¶

Unprofessional conduct means any unethical, deceptive, or deleterious conduct or practice harmful to the public; any departure from, or failure to conform to, the minimal standards of acceptable chiropractic practice; or a willful or careless disregard for the health, welfare, or safety of patients, in any of which cases proof of actual injury need not be established. Unprofessional conduct shall include, but not be limited to, the following acts of a chiropractic physician and certified chiropractic assistants:¶¶

- (1) Conduct that is prohibited as described in OAR 811-035-0019 Sexual Unprofessional or Dishonorable Conduct;¶¶
- (2) Charging fees for unnecessary services;¶¶
- (3) Failing to teach and/or directly supervise persons to whom chiropractic services have been delegated;¶¶
- (4) Practicing outside the scope of the practice of chiropractic in Oregon;¶¶
- (5) Charging a patient for services not rendered;¶¶
- (6) Intentionally causing physical or emotional injury to a patient;¶¶
- (7) Directly or indirectly engaging in threatening, dishonest, or misleading fee collection techniques;¶¶
- (8) Soliciting or borrowing money from patients;¶¶
- (9) Receiving a conviction of a crime (other than minor traffic violations) or a citation for class E violations for possessing, obtaining, attempting to obtain, furnishing, or prescribing controlled drugs to any person, including self, except as directed by a person authorized by law to prescribe drugs; illegally using or dispensing controlled drugs;¶¶
- (10) Aiding, abetting, or assisting an individual to violate any law, rule, or regulation intended to guide the conduct of chiropractic physicians or other health care providers;¶¶
- (11) Violating the rights of privacy or confidentiality of the patient unless required by law to disclose such information;¶¶
- (12) Perpetrating fraud upon patients or third party payors, relating to the practice of chiropractic or performing the duties of a certified chiropractic assistant;¶¶
- (13) Using any controlled or illegal substance or intoxicating liquor to the extent that such use impacts the ability to safely conduct the practice of chiropractic or performing the duties of a certified chiropractic assistant;¶¶
- (14) Practicing chiropractic or performing the duties of a certified chiropractic assistant without a current Oregon license or certificate;¶¶
- (15) Allowing another person to use one's chiropractic license or certificate for any purpose;¶¶
- (16) Resorting to fraud, misrepresentation, or deceit in applying for or taking the licensure or certification examination or obtaining a license/certificate or renewal thereof;¶¶
- (17) Impersonating any applicant or acting as a proxy for the applicant in any chiropractic licensure or certification examination;¶¶
- (18) Disclosing the contents of licensure or certification examinations or soliciting, accepting, distributing, or compiling information regarding the contents of the examinations before, during, or after their administration;¶¶
- (a) Notwithstanding this section, the Ethics and Jurisprudence Examination is open book but must be taken solely by the individual applicant without assistance from others; and¶¶
- (b) The Chiropractic Assistant Examination is open book but must be taken solely by the individual applicant without assistance from others.¶¶
- (19) Failing to keep complete, accurate, and minimally competent records on all patients;¶¶
- (20) Failing to provide the Board with any documents requested by the Board;¶¶
- (21) Failing to fully cooperate with the Board during the course of an investigation, including but not limited to, waiver of confidentiality privileges, except attorney-client privilege;¶¶
- (22) Failing to answer truthfully and completely any question asked by the Board on an application for licensure or certification, or during the course of an investigation, or any other question asked by the Board;¶¶
- (23) Failing to comply with state and federal laws regarding child and elderly abuse, and communicable diseases;¶¶
- (24) Failing to provide and maintain a safe and sanitary treatment environment;¶¶
- (25) Claiming any academic degree or certification, not actually conferred or awarded;¶¶
- (26) Disobeying a final order of the Board;¶¶
- (27) During a declared emergency, unprofessional conduct includes failing to comply with any applicable provision

of a Governor's Executive Order or any provision of this rule.¶¶

(a) Failing to comply as described in subsection (27) includes, but is not limited to:¶¶

(A) Operating a chiropractic entity required to be closed by a current Executive Order;¶¶

(B) Providing chiropractic services at a business required to be closed by a current Executive Order;¶¶

(C) Failing to comply with applicable Oregon Health Authority (OHA) guidance implementing a current Executive Order or OHA rules in effect; and¶¶

(D) Failing to comply with any OBCE guidance or rule implementing an Executive Order.¶¶

(b) No disciplinary action or penalty action shall be taken under this rule if the Executive Order alleged to have been violated is not in effect at the time of the alleged violation.¶¶

(28) Failing to comply with Oregon Health Authority's (OHA) applicable rules;¶¶

(29) Failing to comply with Oregon Occupational Safety and Health Administration's (OSHA) applicable rules;¶¶

(30) Fee splitting means compensation by or to a chiropractic physician or chiropractic clinic solely for referral of a patient.¶¶

(a) Chiropractic physicians may not refer patients based on whether the referring chiropractic physician has negotiated a discount for specialty services. Chiropractic physicians may not accept:¶¶

(A) Any compensation of any kind, from any source for referring a patient other than distributions of a health care organization's revenues as permitted by law.¶¶

(B) Compensation for services relating to the care of a patient from any health care facility/organization to which the physician has referred the patient.¶¶

(C) Compensation for referring a patient to a research study with the exception of remuneration for administrative costs.¶¶

(b) Compensation is defined as something given or received as payment including but not limited to: bartering, tips, money, donations, goods, or services.¶¶

(31) Making an agreement with a patient or person, or any person or entity representing patients or persons, or provide any form of consideration that would prohibit, restrict, discourage or otherwise limit a person's ability to file a complaint with the Board, to truthfully and fully answer any questions posed by an agent or representative of the Board regarding a board proceeding, or to participate as a witness in a Board proceeding;¶¶

(32) It shall be considered unprofessional conduct for a licensee to own or operate a clinic or practice as a surrogate for, or be employed by, an individual or entity who could otherwise not own and/or operate a chiropractic clinic under OAR 811-010-0120; and¶¶

(33) Chiropractic physicians holding an ownership interest as described in OAR 811-010-0120 may be held responsible, entirely or in part, for staff who provide patient services. This includes a responsibility to render adequate supervision, management, and training of staff or other persons including, but not limited to, chiropractic physicians, student interns, chiropractic assistants and/or others practicing under the licensee's supervision. Chiropractic physicians with staff may be held responsible, entirely or in part, for undue influence on staff or a restriction of an associated chiropractic physician from using their own clinical judgment.¶¶

(34) Harassment, intimidation, or abuse of board staff and board members.

Statutory/Other Authority: ORS 684

Statutes/Other Implemented: ORS 684.155