



Minnesota Board of Chiropractic Examiners

APPLICATION FOR INDIVIDUAL SEMINAR APPROVAL

Sponsor Name: _____

Address: _____

City, State, Zip: _____

I HAVE / HAVE NOT BEEN AN APPROVED SPONSOR IN A PRIOR YEAR.

Contact person: _____

Address (if different than above): _____

Phone numbers (include area code): _____ Fax: _____

E-Mail Address: _____

Seminar name: _____

Seminar date (If more than one, attach separate list): _____

Location (If more than one, attach separate list): _____

~~~~~FOR MBCE USE ONLY~~~~~

The above requested continuing education seminar has been:

\_\_\_\_ **APPROVED** by the MBCE as indicated: MBCE ID# \_\_\_\_\_      \_\_\_\_ **DISAPPROVED** by the MBCE

\_\_\_\_ Regular units of instruction

\_\_\_\_ Professional Boundaries/Sexual Abuse Recognition (MBCE requires 1 unit/year)

\_\_\_\_ X-ray units of instruction (MBCE requires 3 units/year)

\_\_\_\_ Acupuncture units of instruction (MBCE requires 2 units/year ***only if DC is actively registered***)

\_\_\_\_ Animal Chiropractic Units (MBCE requires 6 units / year ***only if DC is actively registered***)

\_\_\_\_\_  
Signed & Approved by Executive Director

\_\_\_\_\_  
Date of Approval

| Form Related Information | Payment Information | Received Stamp |
|--------------------------|---------------------|----------------|
| Initials                 | Check #             |                |
| Date Re-received Form    | Amount              |                |

2829 University Avenue SE #300, Minneapolis, Minnesota 55414-3220  
Telephone 651-201-2850 • Fax 651-201-2852 • Internet [www.mn-chiroboard.state.mn.us](http://www.mn-chiroboard.state.mn.us)

This document is available in alternative formats by calling the Minnesota Relay Service at 1-800-627-3529

The Minnesota Board of Chiropractic Examiners is an affirmative action / equal opportunity employer. The Minnesota Board of Chiropractic Examiners does not discriminate in employment on the basis of race, color, creed, religion, national origin, sex, marital status, disability, public assistance, age, sexual orientation, or membership on a local human rights commission.

Program name: \_\_\_\_\_

Tuition amount: \_\_\_\_\_

Requesting \_\_\_\_\_ units of REGULAR instruction per session

Requesting \_\_\_\_\_ units of PROFESSIONAL BOUNDARIES/SEXUAL ABUSE RECOGNITION instruction per session

Requesting \_\_\_\_\_ units of X-RAY instruction per session

Requesting \_\_\_\_\_ units of ACUPUNCTURE/MERIDIAN THERAPY instruction per session

Requesting \_\_\_\_\_ units of ANIMAL CHIROPRACTIC instruction per session

If more than one session has x-ray, list session numbers that include x-ray and how many units in each session:

\_\_\_\_\_

Requesting \_\_\_\_\_ total units per session

**What best identifies the educational format: (Please circle)**

- a) lecture            b) convention        c) forum            d) workshop        e) home study
- e) video presentation    f) other: \_\_\_\_\_

**Is an examination or evaluation process part of the program? Y or N (if yes please describe)**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Summarize Program Objectives:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**List text(s) and equipment used as aids:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Are any promotional publications or advertisements being used or anticipated? (Please attach if available)**

\_\_\_\_\_  
\_\_\_\_\_

**List instructor(s) Name:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Describe the mechanism for monitoring and certifying course attendance:**

\_\_\_\_\_  
\_\_\_\_\_

**Name of Attendance Monitor(s):** \_\_\_\_\_

\_\_\_\_\_

**\*Attach a syllabus and course outline**

**\*Attach vitae of instructor(s)**

Continuing education seminars are subject to approval by the Minnesota Board of Chiropractic Examiners (MBCE) as set forth by Minnesota Rule 2500.1500.

**This application must be completed and returned to this office with the requested attachments and a \$100 filing fee, 45 days prior to the date of the program. (See Minnesota Rule 2500.1250)**

The MBCE will review each program with respect to the criteria developed for approval of continuing education seminars. The criteria are listed in Minnesota Rule 2500.1500.

**The MBCE requires that the sponsor provide a certificate of attendance to the Licensee.** This certificate will include the program ID number, the chiropractors name, address, license number, the date of the program, and the number of continuing education units obtained broken down by type of units. (NOTE: Hours may only be reported as full and half hours.) Failure of sponsor to provide certificates of attendance as required may jeopardize capacity for future approval(s). By my signature affixed below, I hereby authorize the attendance of a board representative for the purposes of monitoring, consistent with the provisions of MR 2500.1410 (C)

Submission of this application for continuing education approval acknowledges understanding and acceptance of the terms noted above as requirement for approval. Further, the undersigned states the sponsor has received and reviewed, MN Statutes 214.12, 148.01 (Subd. 1 & 3), 148.031, and MN Rules 2500.1410; 2500.1550; 2500.1600 and 2500.1710, and agrees to comply with same.

\_\_\_\_\_  
Signature of Contact Person

\_\_\_\_\_  
Date

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This information will be made available, upon request, in alternative formats (for example, large print, Braille, cassette tape, etc.)

Upon the MBCE's issuance/renewal of your sponsorship, all information which you provide on, or as an attachment to, this form is classified as public under *Minnesota Statutes 13.41, subdivision 2 and 4, except your social security number.*

The purpose and intended use of this information is to enable the MBCE to determine whether you meet statutory and rule requirements for sponsorship. You are not legally required to provide this information, but if you fail to do so, your license/registration/sponsorship will not be renewed.

Additional information is available on the board's web site at [www.mn-chiroboard.state.mn.us](http://www.mn-chiroboard.state.mn.us). Inquiries may be sent to the board by email to [chiropractic.board@state.mn.us](mailto:chiropractic.board@state.mn.us); by fax number at 651-201-2852; by calling 651-201-2850; or by US Mail addressed to: MBCE, 2829 University Ave SE, Suite 300, Minneapolis, MN 55414.

## **Continuing Education Statues & Rules**

Please retain the following pages for your records. Please do NOT return them with your application.

**RETAIN THESE STATUTE AND RULE PAGES FOR YOUR REFERENCE**

The following is a summary of the statutes and rules which guide approval for CE courses. For complete text of the statutes or rules, please consult your attorney, or the Board's web site at [www.mn-chiroboard.state.mn.us](http://www.mn-chiroboard.state.mn.us)

**MINNESOTA STATUTE: 214.12 CONTINUING EDUCATION.**

Subdivision 1. Requirements. The health-related and non-health-related licensing boards may promulgate by rule requirements for renewal of licenses designed to promote the continuing professional competence of licensees. These requirements of continuing professional education or training shall be designed solely to improve professional skills and shall not exceed an average attendance requirement of 50 clock hours per year. All requirements promulgated by the boards shall be effective commencing January 1, 1977, or at a later date as the board may determine. The 50 clock hour limitation shall not apply to the board of teaching.

**MINNESOTA STATUTE: 148.01 CHIROPRACTIC.**

Subdivision 1. For the purposes of sections 148.01 to 148.10, "chiropractic" is defined as the science of adjusting any abnormal articulations of the human body, especially those of the spinal column, for the purpose of giving freedom of action to impinged nerves that may cause pain or deranged function

Subd. 3. Chiropractic practice includes those noninvasive means of clinical, physical, and laboratory measures and analytical X-ray of the bones of the skeleton which are necessary to make a determination of the presence or absence of a chiropractic condition. The practice of chiropractic may include procedures which are used to prepare the patient for chiropractic adjustment or to complement the chiropractic adjustment. The procedures may not be used as independent therapies or separately from chiropractic adjustment.

**MINNESOTA STATUTE: 148.031 CONTINUING EDUCATION.**

The board shall adopt rules requiring continuing education for chiropractors licensed under this chapter who regularly practice in the area of workers' compensation. These rules shall include rules relating to continuing education designed to assure the coordination of treatment, rehabilitation, and other chiropractic services provided to injured employees under chapter 176. Rules relative to education under chapter 176 shall be adopted jointly with the commissioner of labor and industry. These rules shall be consistent with section 214.12.

**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.

## ***RETAIN THESE STATUTE AND RULE PAGES FOR YOUR REFERENCE***

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.

### **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.

### **2500.1550 ALTERNATIVES TO TRADITIONAL CLASSROOM PRESENTATION.**

A chiropractor may obtain the 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.

### **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.

### **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.