## 4734-5-01 Board approved doctor of chiropractic degree programs.

- (A) It shall be the The objective of doctor of chiropractic degree programs approved by the state chiropractic board <u>is</u> to prepare the graduate doctor of chiropractic as a primary health care provider, as a portal of entry into the health delivery system, trained to examine, diagnose, and assume responsibility for the care of patients of all ages and genders and to care for the human body in both health and disease. The graduate doctor of chiropractic shall be qualified to consult with, refer to, and/or receive referrals from, other health care providers.
- (B) The curriculum of doctor of chiropractic degree programs shall include, but not be limited to, the following subject matter: Foundations: principles, practices, philosophy and history of chiropractic. Basic sciences: anatomy; physiology; biochemistry; microbiology and pathology. Clinical sciences: physical, clinical and laboratory diagnosis; diagnostic imaging; spinal analysis; orthopedics; biomechanics; neurology; spinal adjustment/manipulation; extremities manipulation; rehabilitation and therapeutic modalities/procedures (active and passive care); toxicology/ pharmacology; patient management; nutrition; organ systems; special populations; first aid and emergency procedures; wellness and public health; and clinical decision-making. Professional practice: ethics and integrity; jurisprudence; business and practice management and professional communications.
- (C) The board adopts the "CCE Accreditation Standards; Principles, Processes & Requirements for Accreditation, January 20182025" (hereinafter "Standards") issued by the council on chiropractic education (hereinafter "CCE" or "council").
- (D) In considering whether to approve a doctor of chiropractic degree program, or to continue approval of a doctor of chiropractic degree program, the board shall utilize the "Standards" of the council in making its decision.
- (E) Doctor of chiropractic degree programs with board approval prior to the effective date of this rule shall continue to have approval for its doctor of chiropractic graduates to be eligible for licensure in Ohio. This approval continues until itapproval is removed in accordance with this chapter. Board approval of programs and institutions runs concurrently with council accreditation.

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Five Year Review (FYR) Dates: 10/8/2025

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Promulgated Under: 119.03 Statutory Authority: 4734.10 Rule Amplifies: 4734.21

Prior Effective Dates: 04/09/2004, 08/01/2007, 06/01/2013, 07/28/2014,

01/01/2019

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# 4734-5-02 **Board relationship with the council on chiropractic education.**

- (A) The board may accept the council on chiropractic education's (hereinafter "CCE") designation of "accredited doctor of chiropractic program" and grant board approval of those programs for graduates to be eligible for Ohio licensure.
- (B) The board may revoke approval from an accredited doctor of chiropractic program if the "CCE" removes accreditation for the program. Any such revocation must comply with the hearing requirements of Chapter 119. of the Revised Code.

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Replaces:	4734-5-02
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Promulgated Under: Statutory Authority: Rule Amplifies: Prior Effective Dates: 119.03 4734.10 4734.21

04/09/2004, 05/25/2014

#### TO BE RESCINDED

4734-5-02 **Board relationship with the council on chiropractic education.** 

- (A) The board shall maintain a cooperative relationship with the council on chiropractic education (hereinafter "CCE" or "council"). The board may accept the "CCE" designation of "accredited doctor of chiropractic program/institution" of a doctor of chiropractic degree program and grant board approval of those institutions or programs for graduates of a doctor of chiropractic degree program to be eligible for Ohio licensure. If the "CCE" removes accreditation from an institution or program, the board may ratify this decision by removing its approval, permitting the institution or program the due process procedures contained within Chapter 119. of the Revised Code. However, the board need only prove that the "CCE" has withdrawn its accreditation for the board to revoke its approval of the program or institution.
- (B) The board shall, in good faith, participate to the extent possible in the activities and programs of the "CCE", to the extent that the interests of the board and of the "CCE" are consistent.

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Five Year Review (FYR) Dates: 10/8/2025

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Prior Effective Dates: 04/09/2004, 05/25/2014

4734-5-03 Site visit, review, or inquiry.

- (A) The council on chiropractic education (hereinafter "CCE") is recognized as the national accrediting body for doctor of chiropractic degree programs leading to the doctor of chiropractic degree. The actions of the "CCE" in regard to program accreditation and continued approval of programs guide the board in its determinations in regard to its approval and continued approval of any doctor of chiropractic degree program (hereinafter "program").
- (B) The authority under section 4734.21 of the Revised Code authorizes the board to make on-site inspections, reviews and inquiries as it considers necessary when determining if a program should receive the board's approval or continue to be approved.
- (C) The board may appoint a team to make an on-site visit, review, or inquiry of a program to determine if the program should receive the board's approval or continue to be approved.
- (D) Once the board determines an on-site visit, review, or inquiry is necessary, a team will be appointed by the board and may consist of not more than three members, to include a chairperson appointed by the board. The team must consist of individuals with particular backgrounds and expertise to provide an on-site visit, review, or inquiry of a program.
- (E) The cost of any site visit, review or inquiry must be paid by the program directly to the team members. Such expenses may include, but not be limited to, meals, lodging, travel and per diem expenses, and the time required for preparing a report and presenting the report to the board. Receipts of expenses incurred by the team must be submitted to the board for documentation and approval prior to submission to the program for reimbursement.
- (F) Within forty-five days of completion of an on-site visit, review or inquiry, the team chairperson must provide a written report to the board. Within ten days of the board's receipt, a copy of the report must be provided to the chief administrative officer of the program. For applications for initial program approval, the report must include, but not be limited to, a detailed analysis of the program's eligibility factors contained in its application for approval and self-study documentation. For reports addressing continued approval of a program, the report must include, but not be limited to, a detailed analysis of the program's compliance with the "CCE's" current accreditation standards, principles, processes and requirements for accreditation.
- (G) The board must review a team report and notify the program of its decision within one hundred twenty days of the filing of the report. This time period may be extended for good cause at the board's discretion.

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Replaces:		4734-5-03
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04/09/2004, 05/25/2014

#### TO BE RESCINDED

## 4734-5-03 Site visitation procedures.

- (A) Purpose. For the purpose of obtaining factual information, the board may appoint a site visitation team to make an on-site visit to a doctor of chiropractic degree program and to provide the board with a written report of its findings. The site visit may occur when a program applies for board approval or at any time the board believes it is in the best interests of Ohioans to determine facts concerning the operation of a board approved institution or program.
- (B) Composition. The site visitation team shall be appointed by the board and may consist of not more than seven members, including a chairperson appointed by the board. The team shall conduct an on-site visit of the program for the purpose of evaluation. The team shall consist of members with particular backgrounds and expertise to provide a comprehensive assessment of the program.
- (C) Logistics. The entire projected cost of the team visit shall be paid by the program directly to the team members. Such expenses shall include, but not be limited to, meals, lodging, travel and per diem expenses of eight hours per day in addition to time for travel. Expenses shall also include the time required for preparing the report and presenting the report to the board. The program shall be notified at least forty-five days in advance of the visit. Receipts of expenses incurred by the site visitation team shall be submitted to the board for documentation and approval prior to submission to the program for reimbursement. Failure to pay monies due is grounds for denying or removing board approval.
- (D) Report. At the completion of the on-site visit the team shall prepare a report and present it to the board. The site visitation team chairperson shall be responsible for preparing the report of findings of the team. The team report shall include, but not be limited to, a detailed analysis of the program's eligibility factors contained in its application for approval and self-study documentation as well as other relevant information.

Copies of the report shall be filed with the board and the chief administrative officer of the program. All clerical, administrative, printing and related expenses of the team shall be paid by the program. The board shall review the report and shall notify the program of its decision within one hundred twenty days of the filing of the report. This time period may be extended for good cause at the board's discretion.

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Prior Effective Dates: 04/09/2004, 05/25/2014

### 4734-5-04 Initial approval of doctor of chiropractic degree programs.

- (A) Application. For a doctor of chiropractic degree program to seek initial approval by the board for its doctor of chiropractic graduates to obtain Ohioapply for licensure, it must first apply to the board. The chief administrative officer of the program shallmust send a letter of intent to the board and shallmust include a copy of all self-study documentation required by the council on chiropractic education (hereinafter "CCE" or "Council") in its "CCE Accreditation Standards; Principles, Processes & Requirements for Accreditation, January 20182025" (hereinafter "Standards"). This rule does not require an applicanta program to also apply to the "CCE" for accreditation, but if the applicanta program has done so, it should provide the same information to the board as it provided to the "CCE".
- (B) Review. The board may review the application and materials or appoint a committee to review the application materials os. If the applicant program has applied to the "CCE" for accreditation, the board may hold the application as pending, until the "CCE" has fully reviewed and ruled on the application. If the applicant has not applied to the "CCE", the board or committee will then review the application and materials and follow the procedures outlined in the "CCE" Standards. The board may then order a site visit, review or inquiry of the applicant program, pursuant to section 4734.21 of the Revised Code and rule 4734-5-03 of the Administrative Code.
- (C) Ruling. Once the board has considered the information submitted by the applicant program and/or its review committee and/or site visitation team report of any site visit, review or inquiry, it may propose to either approve or propose to deny the application of the program. When it is the intention of the board to deny approval of a program that has requested board-approval, the applicant program shall be is entitled to a hearing on the question of such proposed denial.

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Prior Effective Dates: 04/09/2004, 05/25/2014, 01/01/2019

4734-5-06 Revocation of approval of a doctor of chiropractic degree program.

- (A) The board may investigate allegations that a board-approved doctor of chiropractic degree program is not complying with the following:
  - (1) The "CCE Accreditation Standards; Principles, Processes & Requirements for Accreditation, January 20182025" (hereinafter "Standards") promulgated by the council on chiropractic education (hereinafter "CCE" or "Council")
  - (2) If a "CCE" accredited program, maintaining that accreditation;
  - (3) If not a "CCE" accredited program, complying with the "Standards" as interpreted by the board;
  - (4) Chapter 4734. of the Revised Code and/or agency 4734 of the Administrative Code;
  - (5) All statutes and rules governing the operation of such a program in its state of domicile;
- (B) During an investigation of a program pursuant to this rule, the program shall provide information and documentation requested by the board to complete its investigation. The board may order a site visit, review, or inquiry as described inpursuant to section 4734.21 of the Revised Code and rule 4734-5-03 of the Administrative Code.
- (C) Once the The board has considered the information obtained during its investigation as submitted by the program and/or the board's committee and/or site visitation team, it may propose to either continue to approve or revoke approval of the program. When it is the intention of the board to revoke the status of a board-approved program pursuant to this rule, the board shall issue a notice of intent to revoke approval and opportunity for hearing to the program. The program shall be entitled to a hearing on the question of such proposed revocation. Any such revocation must comply with the hearing requirements of Chapter 119. of the Revised Code.

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Prior Effective Dates: 04/09/2004, 05/25/2014

#### TO BE RESCINDED

### 4734-6-01 **Application for licensure.**

- (A) Notwithstanding endorsement applicants as outlined in rule 4734-6-02 of the Administrative Code, each applicant for licensure to practice chiropractic in the state of Ohio shall submit satisfactory evidence of his or her qualifications as prescribed by section 4734.20 of the Revised Code. A complete application, including a non-refundable application fee in the amount of two hundred fifty dollars made payable to the treasurer, state of Ohio, and all required credentials, facts, and materials as the board requires must be filed with the board. Applications and fees are valid for one year from the initial application date.
- (B) Each applicant shall submit to the board a detailed history of his or her chiropractic education to include locations, institutions and dates attended. Transcripts shall be sent directly from the institution or program.
- (C) Each applicant who graduated from a doctor of chiropractic degree program on or after June 30, 2010 shall submit a transcript reflecting that he or she possesses a bachelor, masters, or doctorate degree from an institution accredited by a national accrediting agency recognized by the secretary of the United States department of education. Foreign educated applicants shall submit proof of the equivalent education. Transcripts shall be sent directly from each educational institution.
- (D) Each applicant shall be responsible for submission of a national board of chiropractic examiners transcript as outlined in section 4734.20 of the Revised Code. The transcript shall be sent directly to the board office by the national board of chiropractic examiners.
- (E) Each applicant shall be responsible for the submission of verification of licensure and good standing from all states in which a chiropractic license was ever issued. The verification shall be issued by the licensing authority and shall be valid for one hundred eighty days after receipt.
- (F) Each applicant shall submit to a fingerprint criminal background check from the records maintained by the federal bureau of investigation and the bureau of criminal identification and investigation in accordance with sections 4734.20 and 4734.202 of the Revised Code. Applicants shall be responsible for submitting properly executed fingerprints and the appropriate fees to the bureau of criminal investigation and identification. The criminal background check shall be completed no earlier than one hundred eighty days preceding application for licensure and shall be valid for one hundred eighty days after receipt.

- (G) Each applicant shall submit with his or her application a passport type photograph taken within the preceding one hundred eighty days.
- (H) Each applicant has an ongoing obligation to update and supplement all information provided to the board in writing within ten days of any change.
- (I) Each applicant will be notified by the board as to his or her eligibility for the jurisprudence examination not later than ten days after board review.
- (J) In the event an applicant fails to achieve a minimum score of seventy-five percent on the jurisprudence examination, the applicant shall be eligible to retake the examination without additional charge providing the credentials supplied have not expired as outlined in this rule.
- (K) The board may refuse or deny an applicant for licensure if the applicant does not meet the licensure requirements as outlined in section 4734.20 of the Revised Code or has committed any act which indicates the applicant does not possess the character and fitness to practice chiropractic, including any act that would be grounds for disciplinary action as outlined in section 4734.31 of the Revised Code. The burden of proof is on the applicant to prove by clear and convincing evidence to the board that he or she meets the conditions for licensure.
- (L) Any applicant that the board proposes to refuse or deny licensure shall be entitled to a hearing on the question of such proposed refusal or denial.

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Rule Amplifies: 4734.20, 4734.22, 4734.31

Prior Effective Dates: 02/05/1993, 08/12/2002, 04/05/2009, 10/18/2010,

05/25/2014, 08/01/2019

## 4734-6-02 Application for chiropractic licensure by another state.

- (A) Each applicant must submit the following:
  - (1) A completed application on which the applicant must designate the specific state from which licensure is sought;
  - (2) Non-refundable five-hundred dollar application fee;
  - (3) A passport type photograph taken within the preceding one hundred eighty days;
  - (4) Educational transcript reflecting the applicant holds a doctor of chiropractic degree from a program approved by the board;
  - (5) National board of chiropractic examiners transcript;
  - (6) Verification of licensure from all jurisdictions in which a chiropractic license was ever issued, regardless of licensure status or date of issuance, to include evidence that the chiropractic license in the state from which licensure is sought is not restricted or limited by that licensing entity;
  - (7) Evidence that the applicant has held the out of state chiropractic license from which licensure is sought for at least one year preceding the date of application and has been actively engaged in the practice of chiropractic for at least one of the five years immediately preceding the date of application;
  - (8) Fingerprint criminal background check results completed no earlier than one hundred eighty days preceding application for licensure. Results are valid for one hundred eighty days after receipt.
- (B) Each applicant must submit all required credentials, facts and materials as the board requires. The applicant has an ongoing obligation to update and supplement all information provided to the board. All required documentation and transcripts must be sent directly from each issuing institution. Applications and fees are valid one year from the initial application date.
- (C) Each individual applying for licensure under this rule must comply with all applicable provisions of Chapter 4796 of the Revised Code.
- (D) The board may issue a license to an individual in accordance with this rule and Chapter 4796 of the Revised Code provided the requirements for licensure from the state licensure is sought are substantially equivalent to the board's requirements for licensure, as determined by the board pursuant to section 4796.03 of the Revised Code.

<u>4734-6-02</u>

(E) An individual issued a license pursuant to this rule and section 4796.03 of the Revised Code is subject to the laws and rules regulating the practice of chiropractic in this state and subject to the board's jurisdiction. The individual may only practice in this state within the scope of practice permitted under Ohio law and that does not exceed the applicant's training.

(F) Any refusal or denial of an application must comply with the hearing requirements of Chapter 119. of the Revised Code.

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Rule Amplifies:	4734.20, 4734.22, 4734.23, 4734.31, 4796.03
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Prior Effective Dates:

 $08/12/2002,\,04/05/2009,\,05/25/2014,\,08/01/2019$ 

## <u>4734-6-01</u> **Application for chiropractic licensure.**

- (A) Each applicant must submit the following:
  - (1) A completed application;
  - (2) Non-refundable two hundred fifty-dollar application fee;
  - (3) A passport type photograph taken within the preceding one hundred eighty days;
  - (4) Those applicants who graduated from a doctor of chiropractic degree program on or after June 30, 2010 must supply an educational transcript reflecting possession of a bachelor, masters, or doctorate degree;
  - (5) Educational transcript reflecting the applicant holds a doctor of chiropractic degree from a program approved by the board;
  - (6) National board of chiropractic examiners transcript;
  - (7) <u>Verification of licensure from all jurisdictions in which a chiropractic license was ever issued, regardless of licensure status or date of issuance;</u>
  - (8) Fingerprint criminal background check results completed no earlier than one hundred eighty days preceding application for licensure. Results are valid for one hundred eighty days after receipt.
- (B) Except as provided in sections 4734.23, 4734.24 and 4734.27 of the Revised Code, applicants must meet the conditions outlined in section 4734.20 of the Revised Code to receive a chiropractic license.
- (C) Each applicant must submit all required credentials, facts, and materials as the board requires. The applicant has an ongoing obligation to update and supplement all information provided to the board. All required transcripts must be sent directly from the issuing institution. Applications and fees are valid for one year from the date of initial application.
- (D) If an applicant has not actively practiced chiropractic for two years or more immediately preceding the date of application, the board may require as a condition for licensure that the applicant complete training or testing which may include passing the "Special Purposes Examination for Chiropractic" offered by the national board of chiropratic examiners.
- (E) Any refusal or denial of an application except where an applicant failed to pass all or portions of an examination of the national board of chiropractic examiners, must comply with the hearing requirements of Chapter 119. of the Revised Code.

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Replaces:	4734-6-01	
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Prior Effective Dates:

05/25/2014, 08/01/2019

 $02/05/1993,\,08/12/2002,\,04/05/2009,\,10/18/2010,\,$ 

#### TO BE RESCINDED

### 4734-6-02 Licensure by endorsement.

- (A) Each applicant for licensure to practice chiropractic in the state of Ohio by endorsement of a chiropractic license held in any other jurisdiction shall submit satisfactory evidence of his or her qualifications as prescribed by sections 4734.20 and 4734.23 of the Revised Code. Each applicant shall submit proof that he or she has held a valid unrestricted license in good standing as a chiropractic physician for five consecutive years immediately prior to the date of application.
- (B) A complete application, including a non-refundable application fee in the amount of five hundred dollars made payable to the treasurer, state of Ohio, and all required credentials, facts and materials as the board requires must be filed with the board. Applications and fees are valid one year from the initial application date.
- (C) Each applicant shall submit to the board a detailed educational history of his or her chiropractic education to include locations, institutions and dates attended. Transcripts shall be sent directly from the institution or program.
- (D) Each applicant who graduated from a doctor of chiropractic degree program on or after June 30, 2010 shall submit a transcript reflecting that he or she possesses a bachelor, masters, or doctorate degree from an institution accredited by a national accrediting agency recognized by the United States department of education. Foreign educated applicants shall submit proof of the equivalent education. Transcripts shall be sent directly from each educational institution.
- (E) Each applicant who has taken any examinations offered by the national board of chiropractic examiners shall be responsible for submission of a transcript. The transcript shall be sent directly to the board office by the national board of chiropractic examiners.
- (F) Each applicant shall be responsible for the submission of verification of licensure and good standing from all states in which a chiropractic license was ever issued. The verification shall be issued by the licensing authority and shall be valid for one hundred eighty days after receipt.
- (G) Each applicant shall submit to a fingerprint criminal background check from the records maintained by the federal bureau of investigation and the bureau of criminal identification and investigation in accordance with sections 4734.20 and 4734.202 of the Revised Code. Applicants shall be responsible for submitting properly executed fingerprints and the appropriate fees to the bureau of criminal investigation and identification. The criminal background check shall be completed no earlier than one

- hundred eighty days preceding application for licensure and shall be valid for one hundred eighty days after receipt.
- (H) Each applicant shall submit with his or her application a passport type photograph taken within the preceding one hundred eighty days.
- (I) Each applicant has an ongoing obligation to update and supplement all information provided to the board in writing within ten days of any change.
- (J) Each applicant will be notified by the board as to his or her eligibility for the jurisprudence examination not later than ten days after board review.
- (K) In the event an applicant fails to achieve a minimum score of seventy-five percent on the jurisprudence examination, the applicant shall be eligible to retake the examination without additional charge providing the credentials supplied have not expired as outlined in this rule.
- (L) The board may refuse or deny an applicant for licensure if the applicant does not meet the licensure requirements as outlined in sections 4734.20 and 4734.23 of the Revised Code or has committed any act which indicates the applicant does not possess the character and fitness to practice chiropractic, including any act that would be grounds for disciplinary action as outlined in section 4734.31 of the Revised Code. The burden of proof is on the applicant to prove by clear and convincing evidence to the board that he or she meets the conditions for licensure.
- (M) Any applicant that the board proposes to refuse or deny licensure shall be entitled to a hearing on the question of such proposed refusal or denial.

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Prior Effective Dates: 08/12/2002, 04/05/2009, 05/25/2014, 08/01/2019

## 4734-6-03 Application for chiropractic license by another country.

- (A) An individual not licensed in any state may apply for licensure by another country.
- (B) Each applicant shall submit the following:
  - (1) A completed application on which the applicant must designate the specific country from which licensure is sought;
  - (2) Non-refundable five-hundred-dollar application fee;
  - (3) Evidence that the applicant is at least twenty-one years of age;
  - (4) A passport type photograph taken within the preceding one hundred eighty days;
  - (5) Educational transcript of undergraduate education or the equivalent;
  - (6) Educational transcript reflecting the applicant holds the degree of doctor of chiropractic or its equivalent.
  - (7) International or national board of chiropractic examiners transcript, if applicable;
  - (8) Verification of licensure from all jurisdictions in which a chiropractic license was ever issued, regardless of status or date of issuance, including evidence that the chiropractic license in the country from which reciprocity is sought is not restricted or limited by that country;
  - (9) Fingerprint criminal background check results completed no earlier than one hundred eighty days preceding application for licensure. Results are valid for one hundred eighty days after receipt.
- (C) Foreign educational transcripts and credentials must be converted by the World Education Services or its equivalent to authenticate academic equivalence in the United States.
- (D) Each applicant must submit all required credentials, facts, and materials as the board requires. The applicant has an ongoing obligation to update and supplement all information provided to the board. All required documentation and transcripts must be sent directly from each issuing institution. Applications and fees are valid for one year from the date of initial application.
- (E) The board may, for good cause, waive all or part of the educational and testing requirements specified under section 4734.20 of the Revised Code if the applicant presents satisfactory proof of being licensed to practice chiropractic in another country where the requirements for receipt of the license, on the date the license was

<u>4734-6-03</u>

issued, are considered by the board to be substantially equivalent to those of chapter 4734. If the board does not waive all of the educational and testing requirements, the board may require that the applicant complete and receive a score specified by the board on one or more tests administered by the board or by the national board of chiropractic examiners or another testing entity.

(F) Any refusal or denial of an application must comply with the hearing requirements of Chapter 119. of the Revised Code.

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Rule Amplifies:	4734.20, 4734.22, 4734.23, 4734.31, 4796.03

### 4734-6-05 <u>License Application</u> for voluntary public service <u>license</u>.

- (A) An individual who previously held an unrestricted license to practice chiropractic in the state of Ohio who plans to offer gratuitous chiropractic services as a voluntary public service in this state may apply for a special limited license to practice chiropractic in accordance with section 4734.27 of the Revised Code.
- (B) Each applicant for a license for voluntary public service license shall must submit a completed application, which can be obtained by contacting the board office, and a non-refundable application fee in the amount of seventy-five dollars. The application shall include a description of the gratuitous chiropractic services to be performed and documentation verifying that current valid malpractice insurance is in place. The applicant must attest that his or her practice is to be exclusively and totally devoted to providing gratuitous chiropractic care: the following:
  - (1) A completed application that may be obtained by contacting the board office;
  - (2) Non-refundable seventy-five dollar application fee;
  - (3) A passport type photograph taken within the preceding one hundred eighty days;
  - (4) A complete description of the gratuitous chiropractic services to be performed;
  - (5) Proof of current valid malpractice insurance:
  - (6) An attestation that the applicant's practice will be solely devoted to providing gratuitous chiropractic care.
- (C) The granting of a license for voluntary public service constitutes authority to practice chiropractic in Ohio only within the scope of services as described in the application as approved.
- (D) All licenses for voluntary public service issued by the board shall bear the legend "limited to gratuitous chiropractic services."
- (E)(D) Any applicant that the board proposes to refuse or deny a special limited license shall be entitled to a hearing on the question of such proposed refusal or denial of an application must comply with the hearing requirements of Chapter 119. of the Revised Code.
- (F) If the board proposes to discipline a holder of a special limited license the licensee shall be entitled to a hearing on the question of such proposed discipline.

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Promulgated Under: 119.03 Statutory Authority: 4734.10 Rule Amplifies: 4734.27

Prior Effective Dates: 09/03/2002, 06/01/2013, 01/01/2019

4734-6-06 **Jurisprudence examination.** 

The board shall require all applicants for licensure to successfully complete a jurisprudence examination administered by the board with a minimum score of seventy-five per cent.

- (A) Every applicant for a chiropractic license must successfully complete a jurisprudence examination administered by the board with a minimum score of seventy-five percent.
- (B) In the event an applicant does not achieve a minimum score of seventy-five percent on the jurisprudence examination, the applicant may retake the examination until a score of seventy-five percent is achieved.
- (C) If an applicant does not successfully complete the jurisprudence examination within one year from the date of original application, the applicant must submit a new application, application fee and updated credentials as applicable.
- (D) Interns do not need to pass the jurisprudence examination.

4734-6-06

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Five Year Review (FYR) Dates:	10/8/2025	
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Promulgated Under: 119.03 Statutory Authority: 4734.10

Rule Amplifies: 4734.20, 4734.22, 4734.23, 4734.27, 4734.34

Prior Effective Dates: 08/12/2002, 12/01/2012, 10/01/2017

4734-6-07 **Addresses of licensees.** 

- (A) Licensees Each licensee shall is required to maintain current contact information with the board—to include Current contact information is defined as a valid email address, residence address and telephone number, and address and telephone number for all locations where activities related to the practice of chiropractic and/or acupuncture are conducted. No licensee may provide a postPost office boxboxes may not be reported as a mailing address addresses without disclosing the actual physical address of the residence or location where he or she conducts activities related to the practice of chiropractic and/or acupuncture are conducted.
- (B) <u>LicenseesEach licensee</u> <u>shallis required to</u> provide and maintain current contact information via the eLicense Ohio portal. <u>Any change to contact information must be made via the eLicense Ohio portal within thirty days of the change.</u>
- (C) Changes to contact information shall be made within thirty days of the change.
- (D) A licensee's failure to receive notification of renewal due to failing to advise the board of a change of contact information shall not constitute an error on the part of the board, nor shall it exonerate the licensee from making such renewal.

4734-6-07

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Five Year Review (FYR) Dates: 10/8/2025

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Prior Effective Dates: 03/23/1976, 07/11/1988, 07/29/2002, 11/15/2007,

01/01/2019

#### TO BE RESCINDED

### 4734-6-08 **Pre-chiropractic educational requirements.**

- (A) Applicants who enrolled in a doctor of chiropractic degree program prior to January 1, 2002 shall have earned a minimum of sixty semester hours of appropriate preprofessional education at an institution accredited by a national accrediting agency recognized by the secretary of the United States department of education.
- (B) Applicants who enrolled in a doctor of chiropractic degree program on or after January 1, 2002 and graduated on or before June 29, 2010 shall have earned a minimum of ninety semester hours of appropriate pre-professional education at an institution accredited by a national accrediting agency recognized by the secretary of the United States department of education.
- (C) Applicants who graduate from a doctor of chiropractic degree program on or after June 30, 2010 shall possess a bachelor, masters, or doctorate degree other than a doctor of chiropractic degree, from an institution accredited by a national accrediting agency recognized by the secretary of the United States department of education.
- (D) Foreign educated applicants must meet the appropriate equivalent of the above.

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Promulgated Under: 119.03

Statutory Authority: 4734.10, 4734.20

Rule Amplifies: 4734.20, 4734.23, 4734.27

Prior Effective Dates: 08/12/2002, 08/01/2007, 11/15/2007, 04/05/2009,

05/25/2014

4734-7-03 Continuing education credit for providing health care to indigent and uninsured persons as a volunteer.

- (A) So long as all of the following apply, a licensee may satisfy up to twelve hours of required continuing education by providing health care services as a volunteer:
  - (1) The licensee provides health care services to an indigent and uninsured person, as defined in section 2305.234 of the Revised Code;
  - (2) The licensee provides the health care services as a volunteer;
  - (3) The licensee satisfies the requirements of section 2305.234 of the Revised Code to qualify for the immunity from liability granted under that section;
  - (4) The health care services provided are within the scope of chiropractic practice in this state.
- (B) Documentation of CE credit for providing health care to indigent and uninsured persons as a volunteer shall be in writing from an administrative official at the organization where services were rendered, specifying at a minimum, the date(s) the activity occurred, the time devoted toward the activity, and an attestment that the individuals for which services were provided meet the requirements of paragraph (A)(1) of this rule. One credit hour is defined as sixty minutes spent providing health care services as a volunteer.
- (C) Services provided as a volunteer are not eligible for board mandated CE credit.

4734-7-03 2

Replaces:	4734-7-03
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Promulgated Under: Statutory Authority: Rule Amplifies: Prior Effective Dates: 119.03 4734.10 2305.234

10/01/2017, 01/01/2019

# 4734-7-04 **Restoration of inactive chiropractic license.**

- (A) Requirements for applications filed before the first day of the second year of the CE period:
  - (1) A completed application for restoration;
  - (2) Non-refundable five hundred dollar restoration fee;
  - (3) Evidence of earning thirty-six hours of CE in accordance with rule 4734-7-01 of the Administrative Code within the twenty-four months immediately preceding the date of application;
  - (4) Fingerprint criminal background check results completed no earlier than one hundred eighty days preceding the date of application for restoration.
- (B) Requirements for applications filed on or after the first day of the second year of the CE period:
  - (1) A completed application for restoration;
  - (2) Non-refundable two hundred fifty dollar restoration fee;
  - (3) Evidence of earning eighteen hours of CE, of which must include two hours of board mandated CE, in accordance with rule 4734-7-01 of the Administrative Code within the twenty-four months immediately preceding the date of application;
  - (4) Fingerprint criminal background check results completed no earlier than one hundred eighty days preceding the date of application for restoration.
- (C) If an individual's license has been inactive for two years or more, the board may require as a condition for restoration that the applicant complete training or testing which may include passing the "Special Purposes Examination for Chiropractic" offered by the national board of chiropractic examiners.
- (D) Any refusal or denial of an application must comply with the hearing requirements of Chapter 119. of the Revised Code.

2 4734-7-04

Replaces:	4734-7-04	
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Rule Amplifies:	4734.26, 4734.286, 4734.31	

Prior Effective Dates:

04/01/2016, 10/01/2017

01/10/2003, 11/15/2007, 04/01/2010, 12/01/2012,

### TO BE RESCINDED

4734-7-03 Continuing education credit for providing health care to indigent and uninsured persons as a volunteer.

- (A) <u>LicenseesSo long as all of the following apply, a licensee</u> may satisfy up to twelve hours of <u>CErequired continuing education</u> eredit by providing health care services as a volunteer: to an indigent and uninsured person(s) in accordance with section 4745. 04 of the Revised Code.
  - (1) The licensee provides health care services to an indigent and uninsured person, as defined in section 2305.234 of the Revised Code;
  - (2) The licensee provides the health care services as a volunteer;
  - (3) The licensee satisfies the requirements of section 2305.234 of the Revised Code to qualify for the immunity from liability granted under that section;
  - (4) The health care services provided are within the scope of chiropractic practice in this state.
- (B) Providing health care to indigent and uninsured persons as a volunteer means providing diagnosis, care, or treatment without the expectation of receiving and without receipt of any compensation or other form of remuneration from an indigent and uninsured person, another person on behalf of an indigent and uninsured person, any health care facility or location, any nonprofit health care referral organization, or any other person or government entity. Documentation of CE credit for providing health care to indigent and uninsured persons as a volunteer shall be in writing from an administrative official at the organization where services were rendered, specifying at a minimum, the date(s) the activity occurred, the time devoted toward the activity, and an attestment that the individuals for which services were provided meet the requirements of paragraph (A)(1) of this rule. One credit hour is defined as sixty minutes spent providing health care services as a volunteer.
- (C) Licensees must satisfy the requirements of section 2305.234 of the Revised Code to qualify for the immunity from liability granted under that section. Continuing education credit received in accordance with section 4745.04 of the Revised Code for providing health care services is not compensation or any other form of remuneration for purposes of section 2305.234 of the Revised Code and does not make the licensee incligible for the immunity from liability granted under that section.
- (D) As defined in section 2305.234 of the Revised Code, an indigent and uninsured shall meet both of the following requirements:

- (1) Relative to being indigent, the person's income is not greater than two hundred per cent of the federal poverty line, as defined by the United States office of management and budget and revised in accordance with section 673(2) of the "Omnibus Budget Reconciliation Act of 1981," 95 Stat. 511, 42 U.S.C. 9902, as amended, except in any case in which paragraph (D)(2)(e) of this rule includes a person whose income is greater than two hundred per cent of the federal poverty line, and;
- (2) Relative to being uninsured, one of the following applies:
  - (a) The person is not a policyholder, certificate holder, insured, contract holder, subscriber, enrollee, member, beneficiary, or other covered individual under a health insurance or health care policy, contract, or plan.
  - (b) The person is a policyholder, certificate holder, insured, contract holder, subscriber, enrollee, member, beneficiary, or other covered individual under a health insurance or health care policy, contract, or plan, but the insurer, policy, contract, or plan denies coverage or is the subject of insolvency or bankruptcy proceedings in any jurisdiction.
  - (e) Until June 30, 2019, the person is eligible for the medicaid program or is a medicaid recipient.
  - (d) Except as provided in paragraph (D)(2)(e) of this rule, the person is not eligible for or a recipient, enrollee, or beneficiary of any governmental health care program.
- (E) Documentation of CE credit for providing health care to indigent and uninsured persons as a volunteer shall be in writing in the form of a certificate or a written statement on letterhead from an administrative official at the organization where services were rendered, specifying at a minimum the date(s) the activity occurred, the time devoted toward the activity, and an attestation that the individuals for which services were provided meet the requirements of paragraphs (D)(1) and (D)(2) of this rule. One credit hour equals sixty minutes spent providing health care services as a volunteer.
- (F)(C) CE hours earned providing health care services Services provided as a volunteer to an indigent and uninsured person(s) shall not be claimed as are not eligible for board mandated CE credit.

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Promulgated Under: 119.03 Statutory Authority: 4734.10

Rule Amplifies: 2305.234, 4747.05

Prior Effective Dates: 10/01/2017, 01/01/2019

### TO BE RESCINDED

### 4734-7-04 **Restoration of inactive chiropractic license.**

- (A) A chiropractic physician holding an inactive license may apply to have the license restored in the manner prescribed by the board and shall complete the application and supply all information necessary to process the application for restoration.

  Requirements for applications filed before the first day of the second year of the CE period:
  - (1) If an application for restoration is received before the first day of the second year of the CE period, the applicant shall submit a non-refundable payment of five hundred dollars made payable to the treasurer, state of Ohio and submit evidence of thirty-six hours of CE earned in accordance with the provisions of rule 4734-7-01 of the Administrative Code within the twenty-four months immediately preceding the date of the application for restoration. A completed application for restoration;
  - (2) If an application for restoration is received on or after the first day of the second year of the CE period, the applicant shall submit a non-refundable payment of two hundred fifty dollars made payable to the treasurer, state of Ohio and submit evidence of eighteen hours of CE earned in accordance with the provisions of rule 4734-7-01 of the Administrative Code within the twenty-four months immediately preceding the date of the application for restoration. The eighteen CE hours submitted shall include two hours of board mandated CE. Non-refundable five hundred dollar restoration fee;
  - (3) Evidence of earning thirty-six hours of CE in accordance with rule 4734-7-01 of the Administrative Code within the twenty-four months immediately preceding the date of application;
  - (4) Fingerprint criminal background check results completed no earlier than one hundred eighty days preceding the date of application for restoration.
- (B) The board shall consider the length of inactivity and the moral character and activities of the applicant during the inactive license period and may impose any of the terms and conditions for restoration outlined in division (B) of section 4734.26 of the Revised Code. Said terms and conditions may include requiring the applicant to take and pass the "Special Purposes Examination for Chiropractic" offered by the national board of chiropractic examiners. Requirements for applications filed on or after the first day of the second year of the CE period:
  - (1) A completed application for restoration;

- (2) Non-refundable two hundred fifty dollar restoration fee;
- (3) Evidence of earning eighteen hours of CE, of which must include two hours of board mandated CE, in accordance with rule 4734-7-01 of the Administrative Code within the twenty-four months immediately preceding the date of application;
- (4) Fingerprint criminal background check results completed no earlier than one hundred eighty days preceding the date of application for restoration.
- (C) The board may refuse or deny an applicant for restoration of his or her inactive license if the applicant does not meet the requirements as outlined in this chapter or section 4734.26 of the Revised Code or has committed any act which indicates that the applicant does not possess the character and fitness to practice chiropractic, including any act that would be grounds for disciplinary action as outlined in section 4734.31 of the Revised Code. The burden of proof is on the applicant to prove by clear and convincing evidence to the board that he or she meets the conditions for license restoration. If an individual's license has been inactive for two years or more, the board may require as a condition for restoration that the applicant complete training or testing which may include passing the "Special Purposes Examination for Chiropractic" offered by the national board of chiropractic examiners.
- (D) Any applicant that the board proposes to refuse or deny licensure restoration shall be entitled to a hearing on the question of the proposed refusal or denial of an application must comply with the hearing requirements of Chapter 119. of the Revised Code.

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Five Year Review (FYR) Dates: 10/8/2025

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Rule Amplifies: 4734.26, 4734.286, 4734.31

Prior Effective Dates: 01/10/2003, 11/15/2007, 04/01/2010, 12/01/2012,

04/01/2016, 10/01/2017

## 4734-7-05 Reinstatement of forfeited chiropractic license.

- (A) Requirements for applications filed before the first day of the second year of the CE period:
  - (1) A completed application for reinstatement;
  - (2) Six hundred fifty dollar non-refundable fee; (five hundred dollar reinstatement fee and a one hundred fifty dollar penalty fee);
  - (3) Evidence of earning thirty-six hours of CE in accordance with rule 4734-7-01 of the Administrative Code within the twenty-four months immediately preceding the date of application:
  - (4) Fingerprint criminal background check results completed no earlier than one hundred eighty days preceding the date of application for reinstatement.
- (B) Requirements for applications filed on or after the first day of the second year of the CE period:
  - (1) A completed application for reinstatement;
  - (2) Four hundred dollar non-refundable fee; (two hundred fifty dollar reinstatement fee and a one hundred fifty dollar penalty fee):
  - (3) Evidence of earning eighteen hours of CE, of which must include two hours of board mandated CE, in accordance with rule 4734-7-01 of the Administrative Code within the twenty-four months immediately preceding the date of application;
  - (4) Fingerprint criminal background check results completed no earlier than one hundred eighty days preceding the date of application for reinstatement.
- (C) If an individual's license has been forfeited for two years or more, the board may require as a condition for reinstatement that the applicant complete training or testing which may include passing the "Special Purposes Examination for Chiropractic" offered by the national board of chiropractic examiners.
- (D) Any refusal or denial of an application must comply with the hearing requirements of Chapter 119. of the Revised Code.

4734-7-05

Replaces:	4734-7-05
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Statutory Authority:	4734.10, 4734.25

4734.25

04/01/2016, 10/01/2017

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Rule Amplifies:
Prior Effective Dates:

### TO BE RESCINDED

4734-7-05 Reinstatement of forfeited chiropractic license.

- (A) A chiropractic physician holding a forfeited license may apply to have the license reinstated in the manner prescribed by the board and shall complete the application and supply all information necessary to process the application for reinstatement.

  Requirements for applications filed before the first day of the second year of the CE period:
  - (1) If an A completed application for reinstatement; is received before the first day of the second year of the CE period, the applicant shall submit a non-refundable payment of five hundred dollars and a one hundred fifty dollar penalty fee made payable to the treasurer, state of Ohio and submit evidence of thirty-six hours of CE carned in accordance with the provisions of rule 4734-7-01 of the Administrative Code within the twenty-four months immediately preceding the date of the application for reinstatement.
  - (2) If an application for reinstatement is received on or after the first day of the second year of the CE period, the applicant shall submit a non-refundable payment of two hundred fifty dollars and a one hundred fifty dollar penalty fee made payable to the treasurer, state of Ohio and submit evidence of eighteen hours of CE carned in accordance with the provisions of rule 4734-7-01 of the Administrative Code within the twenty-four months immediately preceding the date of the application for reinstatement. The eighteen CE hours submitted shall include two hours of board mandated CE. Six hundred fifty dollar non-refundable fee; (five hundred dollar reinstatement fee and a one hundred fifty dollar penalty fee);
  - (3) Evidence of earning thirty-six hours of CE in accordance with rule 4734-7-01 of the Administrative Code within the twenty-four months immediately preceding the date of application;
  - (4) Fingerprint criminal background check results completed no earlier than one hundred eighty days preceding the date of application for reinstatement.
- (B) If an individual's license has been forfeited for two years or more, the board may require as a condition for reinstatement that the applicant complete training or testing which may include passage of the "Special Purposes Examination for Chiropraetie" offered by the national board of chiropraetic examiners. Requirements for applications filed on or after the first day of the second year of the CE period:
  - (1) A completed application for reinstatement;

- (2) Four hundred dollar non-refundable fee; (two hundred fifty dollar reinstatement fee and a one hundred fifty dollar penalty fee);
- (3) Evidence of earning eighteen hours of CE, of which must include two hours of board mandated CE, in accordance with rule 4734-7-01 of the Administrative Code within the twenty-four months immediately preceding the date of application;
- (4) Fingerprint criminal background check results completed no earlier than one hundred eighty days preceding the date of application for reinstatement.
- (C) The board may refuse or deny an applicant for reinstatement of his or her forfeited license if the applicant does not meet the requirements as outlined in this chapter or section 4734.25 of the Revised Code or has committed any act which indicates that the applicant does not possess the character and fitness to practice chiropractic, including any act that would be grounds for disciplinary action as outlined in section 4734.31 of the Revised Code. The burden of proof is on the applicant to prove by clear and convincing evidence to the board that he or she meets the conditions for license reinstatement. If an individual's license has been forfeited for two years or more, the board may require as a condition for reinstatement that the applicant complete training or testing which may include passing the "Special Purposes Examination for Chiropractic" offered by the national board of chiropractic examiners.
- (D) Any applicant that the board proposes to refuse or deny licensure reinstatement shall be entitled to a hearing on the question of such proposed refusal or denial of an application must comply with the hearing requirements of Chapter 119. of the Revised Code.

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Rule Amplifies: 4734.25

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04/01/2016, 10/01/2017

### 4734-8-01 **Dismissing a patient**from a chiropractic practice.

- (A) A doctor-patient relationship is <u>established when any relationship between</u> a <u>ehiropractic physician licensee</u> and a patient wherein the chiropractic physician provides professional services to <u>the patienta person</u>. Except as provided in paragraph (B) of this rule, <u>a chiropractic physician shall every licensee must comply with the following requirements in order to dismiss the doctor-patient relationship a patient from care or from the chiropractic practice:</u>
  - (1) Send notice to the patient that includes all of the following:
    - (a) A statement that the doctor-patient relationship is terminated;
    - (b) Except when the patient, or patient's representative, has displayed disruptive or threatening behavior toward the ehiropractic physicianlicensee, office staff, or other patients, a statement that the ehiropractic physicianlicensee will provide emergency treatment for up to thirty days from the date the letter was mailed to allow the patient an opportunity to secure care from another ehiropractic physicianlicensee;
    - (c) An offer to transfer records to a new provider upon receipt of a signed authorization.
  - (2) The notice Notice shallmust be sent in one of the following ways:
    - (a) A letter sent via certified mail, return receipt requested, to the last address for the patient on record, with a copy of the letter, the certified mail receipt, and the mail delivery receipt maintained in the patient record;
    - (b) An electronic message sent via a HIPPA compliant electronic medical record system or HIPPA compliant electronic health record system that provides a means of electronic communication to the patient and is capable of sending the patient a notification that a message is in the patient's portal and confirming can confirm the message was viewed by the patient.
    - (c) If a notice sent via an electronic message as authorized in paragraph (A)(2) (b) of this rule is not viewed within ten days of having been sent, a letter sent in accordance with paragraph (A)(2)(a) of this rule.
- (B) Retention of patient records must be held in accordance with rule 4734-8-04 of the Administrative Code.
- (B)(C) The requirements of paragraph (A) of this rule do not apply to the following:

(1) The <u>chiropractic physicianlicensee</u> rendered professional services to the person on an episodic basis or in an emergency setting and the <u>chiropractic physicianlicensee</u> should not reasonably expect that related <u>professional services</u> will be rendered to the patient in the future;

- (2) The <u>chiropractic physicianlicensee</u> formally transferred the patient's care to another <u>chiropractic physicianlicensee</u> who is not in the same practice group;
- (3) The licensee is leaving, selling, closing a practice, retiring from practice, or whose employment with the health care entity has ended;
- (3)(4) The patient terminated the relationship, either verbally or in writing, or has transferred care to another ehiropractic physician licensee. and the chiropractic physician maintains The licensee must maintain documentation in the patient record of the patient's action terminating the relationship.

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Five Year Review (FYR) Dates: 10/8/2025

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Promulgated Under: 119.03 Statutory Authority: 4734.10 Rule Amplifies: 4734.31

Prior Effective Dates: 05/25/2014, 08/01/2019

## 4734-8-02 Unlicensed supportive personnel.

- (A) A chiropractic physician is responsible for the care of his or her patients.

  Such responsibility includes ensuring that all unlicensed supportive personnel are competent and properly qualified by education, training, and/or experience to perform their assigned duties.
- (B) A chiropractic physician may delegate certain professional responsibilities to unlicensed supportive personnel who are qualified by education, training, and/or experience to perform such duties.
- (C)(A) Unlicensed supportive personnel means an individual or are individuals who are on the job trained by a chiropractic physician and who participate in chiropractic patient eare delivery. Unlicensed supportive personnel do not hold professional licensure and work under the direction of a chiropractic physician utilizing their properly qualified by education, training, and/or experience to perform designated tasks and duties related to patient care delivery in the practice of chiropractic. This does These tasks and duties do not include any activity that would require performance, clinical interpretation and/or treatment by a licensed professional.
- (D)(B) A licensed chiropractic physician must properly supervise all unlicensed supportive personnel to whom responsibilities are delegated. Properly supervise within the meaning of this rule is defined as on-site initial and ongoing direction, procedural guidance, observation, and evaluation by an Ohio licensed chiropractic physician.
- (C) It is the licensee's responsibility to ensure that unlicensed supportive personnel are competent and properly qualified by education, training, and/or experience to perform their assigned tasks and duties.
- (E)(D) Professional responsibilities shall The following professional tasks and duties can only be delegated by the order of conducted when an Ohio licensed chiropractic physician is on site and delegated by the order of the licensee: Professional responsibilities within the meaning of this rule include:
  - (1) Taking measurements for height, weight, blood pressure, respiration, pulse, and temperature;
  - (2) Recording observable signs and symptoms;
  - (3) Collecting bodily fluids for diagnostic purposes, not including blood draws or other invasive measures;
  - (4) Applying hot and/or cold packsheat and cold therapy;
  - (5) Applying mechanical traction and/or computerized decompression;

- (6) Applying electrical stimulation;
- (7) Applying vasopneumatic devices;
- (8) Applying diathermy;
- (9) Applying therapeutic ultrasound;
- (10) Instruction and supervision of therapeutic exercises;
- (11) Instruction and supervision of therapeutic procedures and activities, not including manual therapy or massage therapy techniques;
- (12) Instruction and supervision of neuromuscular reeducation;
- (13) Low level laser therapy up to and including class IV lasers;
- (14) Assist patients to safely perform activities related to the development of strength. <u>flexibility</u> and endurance;
- (15) Applying shock wave therapy;
- (16) Applying radial pulse therapy:
- (17) Applying percussion or vibration therapy;
- (15)(18) Other services or procedures as deemed appropriate by the board.
- (F) A chiropractic physician shall not delegate duties to unlicensed supportive personnel in a negligent manner.

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Five Year Review (FYR) Dates: 10/8/2025

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Prior Effective Dates: 08/01/2007, 06/01/2013, 01/01/2019

## <u>4734-8-03</u> **Quality intervention program.**

- (A) The board may offer an educational and assessment program to improve the practice and communication skills of a licensee, pursuant to an investigation.
- (B) Providers of educational and assessment services must be qualified to provide specific education and assessment related to the practice of chiropractic. The board, in consultation with at least one case reviewer, must identify the specific education and/or assessment a licensee must complete. Case reviewers must be chiropractic physicians. Cases pertaining to acupuncture must include at least one reviewer licensed to practice acupuncture.
- (C) The Board must specify the time frame during which the licensee must complete any education and/or assessment. Providers of educational and assessment must submit regular progress reports, as determined by the board, of each individual undertaking a recommended individual education program.
- (D) Upon successful completion of an individual education program the board may require further monitoring of the individual or other action the board determines to be appropriate.
- (E) The licensee is responsible for all expenses related to education and/or assessment.

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4734.42
05/02/2003, 08/01/2007, 11/15/2007, 06/01/2013

01/01/2019

## 4734-9-04 **Ownership of chiropractic practices.**

- (A) A <u>chiropractic physicianlicensee</u> may practice chiropractic as an agent, employee, associate, owner, contractor, officer, shareholder, director, member or manager of a sole proprietorship, partnership, limited partnership, limited liability company, corporation, professional corporation, not for profit corporation, unincorporated association, or any other form of business legal in the state of Ohio. Without
- (B) Without regard to what form of business in which a chiropractic practice is organized, all chiropractic practices shall-must have an Ohio licensed chiropractic physician who is responsible for any facet of the practice that deals with patient care, patient billing or advertising. Any unlicensed person with an ownership interest in a chiropractic practice may have access to financial data about the practice. However, the unlicensed owner shallmust keep any patient information confidential in accordance with and as required by law.
- (B)(C) Trusts: Any trust that owns or operates a chiropractic practice(s) must be operated by a trustee who is an Ohio licensed chiropractic physician.

4734-9-04

Effective:

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Promulgated Under: 119.03 Statutory Authority: 4734.10 Rule Amplifies: 4734.17 Prior Effective Dates: 05/02/2003

## <u>4734-8-07</u> <u>Notice of leaving, selling or retiring from practice.</u>

- (A) Except as provided for in paragraph (F) of this rule, a licensee who is an independent contractor or who has an ownership interest in a chiropractic practice shall provide notice when leaving, selling, closing the practice, or retiring from practice.

  Notification shall be sent to all patients who received services from the licensee within the six months immediately preceding the licensee's last date for seeing patients and shall be sent no later than thirty days prior to the last date the licensee will see patients.
- (B) Notification may be provided in one of the following ways:
  - (1) A letter sent via regular mail to the last known address on record for the patient with the date of mailing of the letter documented;
  - (2) An electronic message sent via a HIPPA compliant electronic medical record system or HIPPA compliant electronic health record system that provides a means of electronic communication to the patient and is capable of sending the patient a notification that a message is in the patient's portal.
- (C) Notification must include the following:
  - (1) The effective date the licensee will cease to provide services;
  - (2) Offer to transfer records to a new provider with a signed authorization;
  - (3) Contact information that enables the patient to obtain a copy of their records.
- (D) Licensees unable to comply with this rule within the required thirty days due to acute illness or unforeseen emergency must comply with this rule no later than thirty days after it is determined that the licensee is leaving, selling, closing the practice, or retiring from practice.
- (E) <u>Licensees employed by non-Ohio licensed chiropractic physicians must comply with</u> the notice required by paragraph (A) of this rule.
- (F) If a licensee is the employee of another Ohio licensee, the patient records belong to the employer and the employee licensee is not required to comply with this rule. It is the Ohio licensee employer's responsibility to maintain continuity of care, or to comply with this rule if patient care will be terminated upon a licensee employee's leaving employment or retiring.
- (G) In the event a licensee dies and there is no other licensee in the practice, the deceased licensee's executor, guardian, administrator, conservator, next of kin, or other legal

<u>4734-8-07</u>

representative shall endeavor to comply with the notice required by paragraph (A) of this rule.

(H) Retention of patient records must be held in accordance with rule 4734-8-04 of the Administrative Code.

Replaces:	4734-8-07
Effective:	
Five Year Review (FYR) Date	es:
Certification	
Date	
Promulgated Under:	119.03
Statutory Authority:	4734.10
Rule Amplifies:	4734.31
Prior Effective Dates:	11/15/2007, 04/05/2009, 05/25/2014, 08/01/2019

4734-9-01 Fine schedules.

The board shallmust consider the factors in rule 4734-8-06 of the Administrative Code when imposing a civil fine in accordance with the following schedule of fines:

- (A) For a first offense, a minimum fine of five hundred dollars and a maximum fine of three thousand dollars.
- (B) For a second offense, a minimum fine of one thousand five hundred dollars and a maximum fine of five thousand dollars.
- (C) For a third or subsequent offense, a minimum fine of three thousand dollars and a maximum fine of five thousand dollars.

4734-9-01

Five Year Review (FYR) Dates: 10/8/2025

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Promulgated Under: 119.03

Statutory Authority: 4734.10, 4734.31

Rule Amplifies: 4734.31

Prior Effective Dates: 05/02/2003, 01/01/2019

### 4734-8-06 **Board consideration of sanctions.**

- (A) Each disciplinary case involves unique facts and circumstances. In striving for fair disciplinary standards, consideration will be given to the specific professional misconduct and to the existence of aggravating or mitigating factors. In determining the appropriate sanction, the board shallmust consider all relevant factors; which mayto include precedent established by the board and the following:
  - (1) Aggravating factors. The following shall not control the board's discretion, but may be considered in favor of recommending a more severe sanction:
    - (a) Disciplinary action(s) or admonishments taken by any regulatory agency, including those in Ohio;
    - (b) Failure to implement remedial measures to correct conduct resulting from any discipline or admonishment from any regulatory agency, including those in Ohio;
    - (c) Dishonest or selfish motive;
    - (d) A pattern of misconduct and the cumulative effect of the conduct;
    - (e) Multiple offenses;
    - (f) Lack of cooperation in the disciplinary process;
    - (g) Solicitation or submission of false evidence, false statements, or other obstructive or deceptive conduct during the disciplinary process;
    - (h) Refusal to acknowledge wrongful nature of conduct;
    - (i) Vulnerability of and resulting harm to any victims of the misconduct;
    - (i) Negative public perception of the chiropractic profession;
    - (k) Economic harm to any individual or entity and the severity of such harm;
    - (1) Failure to make restitution or other appropriate amends.
    - (m) Any other factors the board believes to be aggravating.
  - (2) Mitigating factors. The following shall not control the board's discretion, but may be considered in favor of recommending a less severe sanction:
    - (a) Absence of a prior disciplinary record or admonishments, by any regulatory agency, including those in Ohio;

- (b) Absence of a dishonest or selfish motive;
- (c) Timely good faith effort to make restitution or to rectify consequences of misconduct;
- (d) Self-reporting of any violation(s) and full disclosure to the board and/or cooperative attitude toward proceedings;
- (e) Character, reputation and positive social contributions of the chiropractic physician;
- (f) Imposition of other penalties, sanctions or liability;
- (g) Evidence of rehabilitation;
- (h) Chemical dependency and/or mental illness, where there has been:
  - (i) A diagnosis of a chemical dependency or mental illness by a qualified health care professional or alcohol/substance abuse counselor;
  - (ii) A determination that the chemical dependency and/or mental illness contributed to cause the misconduct;
  - (iii) A certification of successful completion of an approved treatment program or course of treatment; and
  - (iv) A prognosis from a qualified health care professional or alcohol/ substance abuse counselor that the chiropractic physician will be able to return to safe, competent, and ethical professional practice under specified conditions, restrictions or limitations.
- (i) Any other factors the board believes to be mitigating.
- (3) Compliance programs. Operation or participation in a bona fide compliance program may be considered by the board as a mitigating factor. Bona fide compliance programs shall contain the following elements:
  - (a) Auditing and monitoring the practice for deficiencies and violations;
  - (b) Written compliance standards and procedures for the practice;
  - (c) A designated compliance officer to monitor compliance and practice standards;
  - (d) Employee training and education;

(e) Appropriate response to detected violations, including self reporting and correction action plans;

- (f) Developing open lines of communication;
- (g) Enforcing disciplinary standards through guidelines;
- (B) Alternative sanctions. In accordance with its statutory authority, the board may issue letters of admonition, letters of caution, warnings or similar notices to chiropractic physicians in appropriate cases. The board may use the factors listed in this rule in making itsa determination to issue an alternative sanction in lieu orof initiating formal charges through the process of Chapter 119. of the Revised Code.

Effective:

Five Year Review (FYR) Dates: 10/8/2025

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Date

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Rule Amplifies: 4734.31, 4734.36, 4734.37, 4734.38, 4734.39, 4734.50

Prior Effective Dates: 05/02/2003, 01/01/2019

### TO BE RESCINDED

4734-8-03 **Quality intervention program.** 

- (A) Description. The "Quality Intervention Program" (hereinafter "QIP") is a voluntary program designed to address practice and communication complaints which do not appear to warrant intervention by formal disciplinary action, but may indicate that the licensee involved has developed poor practice patterns or has failed to keep up with eurrent standards of chiropractic and/or acupuncture practice. The primary candidates for referral are those licensees who appear to demonstrate a practice deficiency and who do not demonstrate any physical, mental, or chemical impairment problems which would render educational intervention ineffective or dangerous to the public. As long as there is no identifiable impairment issue, an educational intervention may be all that is needed to bring the licensee up to current standards of practice. The key component of this program is the "Quality Intervention Panel," a panel of experts whose responsibility and purpose are to assess each licensee referred to the program and make recommendations to a designated board member and the executive director based upon their peer assessment The board may offer an educational and assessment program to improve the practice and communication skills of a licensee, pursuant to an investigation.
- (B) Program referral. Only a designated board member and the executive director of the board jointly have the authority to refer a licensee to the QIPProviders of educational and assessment services must be qualified to provide specific education and assessment related to the practice of chiropractic. The board, in consultation with at least one case reviewer, must identify the specific education and/or assessment a licensee must complete. Case reviewers must be chiropractic physicians. Cases pertaining to acupuncture must include at least one reviewer licensed to practice acupuncture.
- (C) Panel. A panel of experts will be selected and contracted with upon advice and approval of the board. The panel shall be comprised of a minimum of three experts, at least two of whom shall be Ohio licensed chiropractic physicians. The experts shall be chosen based on their experience, diversity, and communication skills. Panel members must have a practice history of a minimum of fifteen years, with no disciplinary or malpractice record. QIP panel members shall sign a panel member agreement that outlines their duties and obligations to the panel and the board The Board must specify the time frame during which the licensee must complete any education and/or assessment. Providers of educational and assessment must submit regular progress reports, as determined by the board, of each individual undertaking a recommended individual education program.
- (D) Identifying a communication or practice deficiency. A board designate and the executive director shall review the evidence obtained from the board's initial

investigation to determine whether a licensee should be referred to the QIP panel for possible participation in the QIP. Criteria to be used when making the determination may include, but are not limited to, the following: Upon successful completion of an individual education program the board may require further monitoring of the individual or other action the board determines to be appropriate.

- (1) Whether the public will be adequately protected if the licensec enters the QIP;
- (2) Whether the licensee's conduct resulted in harm or other problematic outcome for the patient;
- (3) The likelihood that the deficiency at issue is a deficiency that can be corrected through education and/or remediation;
- (4) The extent of the licensee's cooperation with the board during its investigation;
- (5) Whether the licensee's deficiency represents an intentional or willful commission or omission by the licensee;
- (6) The frequency of the occurrence of the identified deficiency.
- (E) Assessment. It is the panel's responsibility to assess a licensee in order to affirm a practice deficiency, define the deficiency, determine if the defined deficiency can be corrected through a course of reeducation, and identify specific education and/ or remediation to correct the identified deficiency. When the QIP panel is initially presented a referral, the panel members shall be provided with all relevant documents included in the investigative file of the licensee under review. Each panel member shall review the documents. If upon review, the panel believes that the documents demonstrate a practice deficiency on the part of the licensee, it may request that the licensee be called in for a meeting. At this meeting, the panel members may conduct a simulated ease review and discuss with the licensee the minimal standards concerns that the documents revealed. By engaging in peer-based discussions, the panel is seeking to determine whether or not the licensee demonstrates a deficiency, to further identify that deficiency, and to determine whether educational intervention would be beneficial. In certain cases, the panel may refer the licensee to an educational institution for further in-depth evaluation. The licensee is responsible for all expenses related to education and/or assessment.
- (F) The QIP panel may determine the following after the assessment:
  - (1) The licensee has no practice deficiency;

- (2) The licensee has an identified practice deficiency that can be corrected through educational intervention. The panel shall recommend a specific education program(s) to correct the deficiency;
- (3) The board should conduct further investigation into the matter;
- (4) The problem identified is too severe to be corrected through educational intervention.
- (G) Eligibility. A licensee may participate in the QIP if all of the following apply:
  - (1) The public will be adequately protected if the licensee enters into the QIP;
  - (2) The licensee has not been the subject of formal disciplinary action by any regulatory board or entity in Ohio or any other jurisdiction, unless it is determined that the disciplinary action was for a violation which should not preclude participation in the QIP;
  - (3) The licensee is not concurrently under investigation by the board for a violation of Chapter 4734. of the Revised Code or the rules of the board which does not constitute a communication or practice deficiency;
  - (4) It is determined that the nature of the licensee's identified deficiency is such that it may be corrected through education and/or remediation;
  - (5) The licensee holds a current valid chiropractic license and is eligible to renew said license:
  - (6) The licensee does not have any identified impairment that would significantly affect learning abilities or the ability of the licensee to incorporate learned knowledge and skills into the licensee's practice;
  - (7) The licensee agrees in writing to be considered for participation in the QIP.
- (H) Participation agreement. When the QIP panel determines that a licensee has an identified practice deficiency, the licensee shall be invited to participate in the QIP. Prior to acceptance into the QIP, the licensee shall execute a participation agreement with the board for the QIP which includes, but is not limited to, provisions which:
  - (1) Set forth the identified deficiency;
  - (2) Identify the specific education and/or remediation the licensee must complete, including identification of educational provider(s) that will provide the prescribed educational intervention;

- (3) Specify the time frame during which the licensee must agree to abide by the recommendations set forth by the educational provider(s) that will provide the prescribed educational intervention;
- (4) Require the licensee to pay all expenses incurred as a result of the required education and/or remediation;
- (5) Require the licensee to cooperate with any QIP related entity, including, but not limited to, the educational provider(s) prescribed by the panel;
- (6) Require the licensee to direct any educational provider(s) to send written progress reports regarding the licensee's progress in education and/or remediation to the QIP at specified intervals;
- (7) Require the licensee to sign any and all waivers necessary to secure all reports required by the QIP;
- (8) Specify that the prescribed education and/or remediation intervention may not be used to satisfy any continuing education requirements for license renewal;
- (9) Specify the terms and conditions the participant must meet to successfully complete the education and/or remediation;
- (10) Specify that the board may monitor the licensee's practice for a specific time period to ensure the licensee has corrected their practice deficiency;
- (11) Specify that the board may consider termination from the QIP as an aggravating factor if the board proceeds with disciplinary action;
- (12) Set forth the grounds for termination from the QIP.
- (I) Educational intervention/remediation. The board shall approve individual programs and/ or select providers of education and assessment services for QIP utilization. Panel members may review the content of and recommend programs for board approval.
- (J) A licensee determined by the board to be eligible for the QIP who refuses to enter into the participation agreement as set forth in this rule within the time frame specified by the QIP may be subject to disciplinary action for the identified deficiency in accordance with section 4734.31 of the Revised Code.
- (K) Termination. A licensee determined by the panel to have a deficiency that may be corrected through participation in the QIP may be terminated from the QIP for any of the following reasons:

- (1) Failure to comply with any term of the participation agreement entered into by the licensee;
- (2) Receipt of evidence from the educational provider indicating that the licensee has failed to progress through or to successfully complete the education and/or remediation in the manner and during the time frame prescribed by the panel;
- (3) Committing or showing to have another deficiency that falls within the parameters of the QIP during an existing intervention;
- (4) Failure to complete the education and/or remediation; or
- (5) Failure to maintain eligibility for the QIP.
- (L) If a licensee is terminated from the QIP, the board may continue with disciplinary proceedings in accordance with section 4734.31 of the Revised Code. The board may consider a licensee's termination from the QIP when determining discipline to be imposed.
- (M) Completion of the QIP. A licensee who participates in the QIP shall comply with all the terms and conditions set forth in the agreement and shall provide or direct to be provided to the QIP a written report or transcript from the educational provider(s) verifying that the participant has successfully completed the educational intervention.
- (N) Upon completion of all participation requirements, the QIP panel shall review all information relevant to the licensee's education and/or remediation to make a recommendation to the board designate as to whether the licensee's practice as a chiropractic physician meets the accepted standards for the profession.
- (O) When the board or its designee determines that the licensee's identified deficiency has been sufficiently corrected so as to conform to the accepted standards for the profession, the licensee shall be notified in writing that the education and/or remediation has been successfully completed and participation in the QIP is concluded.
- (P) Legal representation. The QIP is meant to be a peer to peer interaction. The licensee may have an attorney present for any meeting with the QIP panel.
- (Q) Confidentiality. The case review and assessment conducted by the QIP is part of the investigatory process pursuant to section 4734.45 of the Revised Code and is confidential and not subject to discovery in any civil proceeding. Accordingly, records of discussions held by the panel and/or board members or staff are confidential investigatory material and not subject to public disclosure. Regular reports to the board shall be made detailing the general activities of the QIP. The

identity of the licensee under review and the patients whose records were reviewed shall not be provided to the board or disclosed to the public.

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Five Year Review (FYR) Dates: 10/8/2025

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Prior Effective Dates: 05/02/2003, 08/01/2007, 11/15/2007, 06/01/2013,

01/01/2019

#### TO BE RESCINDED

#### 4734-8-04 **Documentation and record keeping.**

- (A) Chiropractic physicians shall Every licensee must maintain proper, accurate, and legible records in the English language documenting each patient's care. If non-standard codes or abbreviations are used, a key for interpreting this information shall interpretation must be included in the file. All documentation must be in the English language.
- (B) Each patient's health care record shall include documentation of all services performed in the chiropractic physician's officerendered including but not limited to:
  - (1) Date(s) of treatment;
  - (2) Examinations;
  - (3) X-ray reports:
  - (4) Referrals;
  - (5) <u>Diagnostic studies performed and/or ordered accompanied by a report of the results of each procedure performed or ordered;</u>
  - (6) Diagnosis or clinical impression and clinical treatment plan provided to the patient.
- (C) All diagnostic studies performed or ordered by a chiropractic physician shall be documented in the patient's health care record. A report shall accompany each diagnostic procedure performed or ordered by the chiropractic physician.
- (D)(C) Records Health care records, including x-ray films shall must be maintained on site for current patients and may be stored off-site for former patients. Records shall be maintained in a safe, confidential, and secure location. Patient records shall be destroyed in a confidential manner, such as shredding or burning, and retained as follows:
  - (1) Five years from the last date of clinical encounter when a patient either terminates eare or is dismissed from eare by the chiropractic physician;
  - (2) Records pertaining to minors shall be maintained for two years beyond the minor's eighteenth birthday, or five years from the last date of clinical encounter, whichever is longer;

- (3) Records containing information pertinent to contemplated or ongoing legal proceedings which the chiropractic physician has knowledge or notice of shall be kept for two years beyond the conclusion of the legal proceedings, or five years from the last date of clinical encounter, whichever is longer;
- (D) Health care records must be maintained in a safe, confidential, and secure location.
- (E) Health care records must be destroyed in a confidential manner, such as shredding or burning.
- (F) Health care records must be retained for five years from the last date of clinical encounter, termination of care, or dismissal from care.
- (G) Health care records pertaining to minors must be maintained for two years beyond the minor's eighteenth birthday, or five years from the last date of clinical encounter, whichever is longer.
- (H) Health care records containing information pertinent to contemplated or ongoing legal proceedings which the licensee has knowledge or notice of must be kept for two years beyond the conclusion of the legal proceedings, or five years from the last date of clinical encounter, whichever is longer.
- (E)(I) Chiropraetic physicians shall release patientHealth care records must be released pursuant to sections 3701.74 to 3701.742 of the Revised Code.

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Five Year Review (FYR) Dates: 10/8/2025

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Prior Effective Dates: 05/02/2003, 08/01/2007, 04/05/2009, 05/25/2014

## <u>4734-8-04</u> **Documentation and record keeping.**

- (A) Every licensee must maintain proper, accurate, and legible records documenting each patient's care. If non-standard codes or abbreviations are used, a key for interpretation must be included in the file. All documentation must be in the English language.
- (B) Each patient's health care record shall include all services rendered including but not limited to:
  - (1) Date(s) of treatment;
  - (2) Examinations;
  - (3) X-ray reports:
  - (4) Referrals;
  - (5) <u>Diagnostic studies performed and/or ordered accompanied by a report of the results of each procedure performed or ordered;</u>
  - (6) <u>Diagnosis or clinical impression and clinical treatment plan provided to the patient.</u>
- (C) Health care records, including x-ray films must be maintained on site for current patients and may be stored off-site for former patients.
- (D) Health care records must be maintained in a safe, confidential, and secure location.
- (E) Health care records must be destroyed in a confidential manner, such as shredding or burning.
- (F) Health care records must be retained for five years from the last date of clinical encounter, termination of care, or dismissal from care.
- (G) Health care records pertaining to minors must be maintained for two years beyond the minor's eighteenth birthday, or five years from the last date of clinical encounter, whichever is longer.
- (H) Health care records containing information pertinent to contemplated or ongoing legal proceedings which the licensee has knowledge or notice of must be kept for two years beyond the conclusion of the legal proceedings, or five years from the last date of clinical encounter, whichever is longer.
- (I) Health care records must be released pursuant to sections 3701.74 to 3701.742 of the Revised Code.

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## 4734-8-05 **Examination and prescription protocols.**

- (A) A chiropractic physician Every licensee shall must conduct an appropriate evaluation of aeach patient prior to initiating treatment. Such evaluation shall must include at a minimum the following elements:
  - (1) History;
  - (2) Examination and findings;
  - (3) Diagnosis(es);
- (B) The history, examination, findings, and diagnosis(es) shall must be documented in the patient's paper or electronic file or in another readily accessible medium. Further evaluation and management shall must be conducted as needed, based on each patient's condition in accordance with prevailing standards of care.
- (C) Once a <u>ehiropractic physician licensee</u> prescribes care for the management of any condition, <u>the ehiropractic physician shall record thea</u> treatment plan; <u>must be documented which shallto</u> include <u>documentation of</u> the frequency, duration, and procedures recommended for management of the diagnosed condition(s).

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Prior Effective Dates: 05/02/2003, 08/01/2007, 06/01/2013, 01/01/2019

#### TO BE RESCINDED

4734-8-07 **Notice of leaving, selling or retiring from practice.** 

- (A) Except as provided for in paragraph (D) of this rule, a chiropractic physician who is an independent contractor or who has an ownership interest in a chiropractic practice shall provide notice when leaving, selling, or retiring from the chiropractic office where the chiropractic physician has provided chiropractic services. Notification shall be sent to all patients who received services from the chiropractic physician within the six months immediately preceding the chiropractic physician's last date for seeing patients and shall be sent no later than thirty days prior to the last date the chiropractic physician will see patients.
  - (1) The notice shall include all of the following:
    - (a) A statement that the chiropractic physician will no longer be practicing chiropractic at the practice;
    - (b) The date on which the chiropractic physician will cease to provide services;
    - (c) Contact information that enables the patient to obtain the patient's records.
  - (2) The notice shall be sent in one of the following ways:
    - (a) A letter sent via regular mail to the last address on record for the patient with the date of the mailing of the letter documented;
    - (b) An electronic message sent via a HIPPA compliant electronic medical record system or HIPPA compliant electronic health record system that provides a means of electronic communication to the patient and is capable of sending the patient a notification that a message is in the patient's portal.
- (B) A chiropractic physician who because of acute illness or unforeseen emergency is unable to provide notice thirty days prior to the last date of seeing patients shall provide the notice required by paragraph (A) of this rule no later than thirty days after it is determined that the physician will not be returning to practice.
- (C) Chiropractic physicians employed by non-Ohio licensed chiropractic physicians shall comply with the notice required by paragraph (A) of this rule.
- (D) If a chiropractic physician is the employee of another Ohio licensed chiropractic physician, the patient records belong to the employer and the employee chiropractic physician is not required to comply with this rule. It is the licensed Ohio chiropractic physician employer's responsibility to maintain continuity of care, or to comply with

- this rule if patient care will be terminated upon a chiropractic physician employee's leaving employment or retiring.
- (E) In the event a chiropractic physician dies and there is no other chiropractic physician in the practice, the deceased chiropractic physician's executor, guardian, administrator, conservator, next of kin, or other legal representative shall endeavor to comply with the notice required by paragraph (A) of this rule. The chiropractic physician, executor, guardian, administrator, conservator, next of kin, other legal representative, or probate court shall notify the board of the location of the patient files.

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Prior Effective Dates: 11/15/2007, 04/05/2009, 05/25/2014, 08/01/2019

## 4734-8-08 Universal precautions and hand washing.

- (A) Licensees who perform or participate in invasive procedures <u>are required to shall</u> be familiar with, observe and adhere to the acceptable and prevailing standards for universal blood and body fluid precautions to minimize the risk of being exposed to or exposing others to the hepatitis B virus (HBV), the hepatitis C virus (HCV), and the human immunodeficiency virus (HIV).
- (B) When performing or participating in invasive procedures licensees shall include at least the following must:
  - (1) Appropriate use of hand washing Wear disposable gloves. Hands must be washed when gloves are removed. Before performing or participating in invasive procedures on another patient, the licensee must wash hands and reglove with another pair of disposable gloves. If a glove is torn or a needle stick or other injury occurs, the glove must be removed and a new glove used as promptly as patient safety permits. The needle or instrument involved in the incident must be removed from the sterile field. Disposable gloves may not be washed or reused for any purpose.;
  - (2) Effective Effectively disinfection disinfect and sterilization of sterilize equipment;
  - (3) Safe handling and disposal of needles and other sharp instruments Utilize aseptic techniques and only sterile, disposable needles.; and
  - (4) Appropriate barrier techniques including wearing and disposal of gloves and other protective garments and devices Hands and other skin surfaces must be washed immediately and thoroughly if contaminated with blood or other body fluids.
  - (5) Safely handle and dispose of needles and other sharp instruments in a puncture-resistant container for disposal. The container must be located as close as practicable to the use area. Needles or other sharp instruments may not be recapped or purposely bent or broken by hand. All sharp items and contaminated waste must be disposed of according to requirements established by federal, local and state environmental or regulatory agencies.
- (C) A licensee who performs any procedure that requires the use of needles shall utilize aseptic techniques and only sterile, disposable needles.
- (D) Infectious waste such as laboratory, pathological, blood and sharps waste shall be disposed of according to requirements established by federal, local, and state environmental regulatory agencies Glove use is required for acupuncture and dry needling when needling areas of non-intact skin, areas of or in proximity to mucus membranes or when there is a risk of blood or other potential infectious material

4734-8-08

as defined by the occupational health and safety administration in 29 C.F.R. 1910. 1030(b) .

(E) Glove use is required for any procedure that requires examining or touching a patient's pelvic area, genitals, rectum, prostate or breast.

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Rule Amplifies: 4734.15, 4734.28

Prior Effective Dates: 11/15/2007, 06/01/2013, 01/01/2019

4734-9-05 **Confidentiality.** 

- (A) Except when a release has been properly executed by a patient, every ehiropractic physician licensee shall must maintain the confidentiality of patient information, except when otherwise required by law.
- (B) Every <u>ehiropractic physicianlicensee</u> <u>shallmust</u> ensure that there is a system in place to protect the confidentiality of patient records and information, including instructing staff members and vendors on their legal obligations to safeguard confidential information.
- (C) Every <u>chiropractic physicianlicensee</u> <u>shallmust</u> comply with other applicable state and federal laws concerning the confidentiality of patient information.

Effective:		

Five Year Review (FYR) Dates: 10/8/2025

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Promulgated Under: 119.03 Statutory Authority: 4734.10 Rule Amplifies: 2317.02,

Rule Amplifies: 2317.02, 4734.31 Prior Effective Dates: 01/10/2003

## 4734-9-03 Signage and display of license and certificate.

- (A) Chiropractic physicians Licensees may not utilize signs which include any false, fraudulent, deceptive or misleading information.
- (B) One of the following terms must be included on all signs utilized in connection with the practice of chiropractic or otherwise prominently displayed unless the chiropractic physicianlicensee practices under a trade or fictitious name and complies with paragraph (C) of this rule:
  - (1) Chiropractic,
  - (2) Chiropractor,
  - (3) Doctor of chiropractic,
  - (4) Chiropractic physician,
  - (5) Or the initials "D.C." with the use of the chiropractic physician's name.
- (C) If a <u>ehiropractic physician licensee</u> practices under a trade or fictitious (DBA) name, he or she shallthey must display his or hertheir first and last name with one of the exact terms: chiropractic, chiropractor, doctor of chiropractic, chiropractic physician, or the initials "D.C." at the public entrance of each practice location. Any trade or fictitious name utilized <u>shallmust</u> be registered with the Ohio secretary of state.
- (D) Every licensee practicing in the state of Ohio shallmust publicly and prominently display his or hertheir license to practice chiropractic in the state of Ohio or a copy thereof in all facilities in which the licensee practices and/or provides health related services.
- (E) If a <u>ehiropractic physician licensee</u> holds an active certificate to practice acupuncture issued under Chapter 4734. of the Revised Code, the licensee <u>shallmust</u> publicly and prominently display <u>his or hertheir</u> certificate to practice acupuncture or a copy thereof in all facilities in which the licensee practices and/or provides acupuncture services.
- (F) No <u>ehiropractic physicianlicensee</u> who holds a certificate to practice acupuncture issued under Chapter 4734. of the Revised Code shall utilize any title, initials or abbreviations contained in section 4762.08 of the Revised Code on any sign.

Effective:	
Five Year Review (FYR) Dates:	10/8/2025

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Promulgated Under: 119.03 Statutory Authority: 4734.10

Rule Amplifies: 4734.285, 4734.31

Prior Effective Dates: 05/02/2003, 08/01/2007, 11/15/2007, 10/06/2013

4734-9-06 **Sexual misconduct.** 

- (A) A patient is any person who is the recipient of a professional service rendered by a licensee. A doctor-patient relationship is any relationship between a licensee and a patient wherein the licensee provides professional services to the patient. An individual is considered a patient until thirty days have elapsed from the date the doctor-patient relationship was formally terminated in accordance with rule 4734-8-01 of the Administrative Code. An individual remains a patient until the doctor-patient relationship is terminated regardless if the individual is not actively receiving professional services from the licensee. Sexual contact between a licensee and a former patient after termination of the doctor-patient relationship may still constitute sexual misconduct if the contact is the result of the exploitation of trust, knowledge, or influence of emotions derived from the doctor-patient relationship.
- (B) The doctor-patient relationship requires the licensee to exercise the utmost care that they will do nothing to exploit the trust and dependency of the patient. Licensees shall make every effort to avoid other types of relationships that impair their professional judgment or risk the possibility of exploiting the confidence placed in them by a patient.
- (C) Sexual misconduct is <u>any verbal or conduct that exploits the licensee-patient relationship</u> in a sexual way, whether verbal or physical, and may include the <u>action or behavior</u>, or expression of thoughts or feelings, or gestures that are sexual or that reasonably may be constured by a patient as sexual or conduct that exploits the doctor-patient relationship in a sexual manner, regardless of consent of the patient.
- (D) Sexual misconduct includes, but is not limited to:
  - (1) Conduct by the licensee that is seductive, sexually suggestive, disrespectful of patient privacy, or sexually demeaning to a patient;
  - (2) <u>Performing any procedure that involves exposure or contact with the pelvic area, genitals, rectum, prostate, or breast without clinical justification;</u>
  - (3) The creation, receipt, exchange, saving, or sending of images or communications, whether verbal or written, via a telecommunications device;
  - (1)(4) Failure to provide privacy for disrobing and/or failure to provide proper gowns;
  - (2)(5) Failure to explain the necessity of performing any procedure that involves exposure or contact with the pelvic area, genitals, rectum, prostate, or breast. In the event the patient is a minor, the explanation shall be given to the parent or legal guardian. The licensee must ensure that the patient comprehends the necessity for such examination prior to performing the procedure;

(3)(6) Failure to have a third party present while performing any examination that involves exposure or contact with the pelvic area, genitals, rectum, prostate or breast without the patient's signed consent;

- (4)(7) Subjecting a patient to exposure or contact with the pelvic area, genitals, rectum, prostate or breast in the presence of a third party without the patient's consent;
- (5)(8) Examining or touching a patient's pelvic area, genitals, rectum, prostate or breast without gloves;
- (6)(9) Conduct that may reasonably be interpreted as intended for the sexual arousal or gratification of the licensee, patient, or both;
- (7)(10) Making comments that are not clinically relevant about or to the patient, including, but not limited to, sexual comments about the patient's body, underclothing, or sexual orientation; <u>making sexualized or sexually demeaning comments</u>; or comments about potential sexual performance;
- (8)(11) Solicitating a date or romantic relationship with a patient;
- (9)(12) Initiating or participating in a conversation with a patient regarding the licensee's own sexuality, including sexual problems, <u>sexual</u> preferences, or <u>sexual</u> fantasies;
- (10)(13) Initiating conversation with, or requesting details of, a patient's sexuality, including history, sexual problems, sexual fantasies or sexual preferences when not clinically indicated for the type of health care services rendered;
- (11)(14) Participation in acts of sexual nature that is recorded on film, in print, or in an electronic medium;
- $\frac{(12)}{(15)}$  Kissing or fondling of a sexual nature;
- (13)(16) Touching any body part that has sexual connotation for the licensee or the patient for any purpose other than for the patient's legitimate health care need or where the patient has refused consent;
- (14)(17) Encouraging a patient to masturbate in the presence of the licensee or masturbation by the licensee in the presence of a patient;
- (15)(18) Sexual acts involving kissing, genital to genital contact, vaginal or anal intercourse, oral to genital, oral to anal, and/or oral to breast contact;

(16)(19) Sexually demeaning conduct or conduct that demonstrates a lack of respect for the patient's privacy;

- (17)(20) Offering to provide or providing chiropractic, animal chiropractic, or acupuncture services in exchange for any prohibited conduct outlined in this rule.
- (E) The initiation of, consent to, or participation in sexual misconduct with a licensee by a patient does not change the nature of the conduct or negate the prohibitions contained in this rule.
- (F) Sexually intimate acts and relationships that exist between life partners or in a marriage do not preclude the licensee from providing the partner or spouse with professional services.
- (G) Conduct may be considered sexual misconduct between a licensee and a former patient after termination of the doctor-patient relationship upon consideration of the following:
  - (1) The duration of the licensee-patient relationship:
  - (2) The nature of the health care services provided;
  - (3) The lapse of time since the licensee-patient relationship ended;
  - (4) The extent to which the former patient confided personal or private information to the licensee:
  - (5) The degree of emotional dependence that the former patient has or had on the licensee and;
  - (6) The extent to which the licensee used or exploited the trust, knowledge, emotions, or influence derived from the previous licensee-patient relationship.

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Five Year Review (FYR) Dates: 10/8/2025

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Promulgated Under: 119.03 Statutory Authority: 4734.10 Rule Amplifies: 4734.31

Prior Effective Dates: 01/20/2003, 11/15/2007, 06/01/2013, 09/01/2021

## 4734-9-07 **Billing practices.**

- (A) Chiropractic physicians Licensees who function as owners, operators, members, partners, shareholders, officers, directors, and/or managers of a chiropractic clinic shall beare responsible for the policies, procedures and billings generated by the clinic.
- (B) <u>Chiropractic physiciansLicensees</u> who function only as clinical staff without any management or financial responsibilities are required to familiarize themselves with the clinic's billing practices to ensure that the services rendered are accurately reflected in the billings generated.
- (C) <u>Chiropraetie physiciansLicensees</u> have a right to review and correct all billings submitted under their name and/or identifying number(s). Signature stamps and/or automatically generated signatures <u>shallmay</u> be utilized only with the authorization of the <u>chiropraetic physicianlicensee</u> whose name or signature is designated. Such authorization may be revoked at any time in writing by that individual.
- (D) Chiropractic physicians Licensees shallmust accurately report the services rendered to a patient on all billing documents.
- (E) Chiropraetic physicians Licensees shall must release copies of billing records upon a written request from a patient or a patient's authorized representative within thirty days of said request.
- (F) Chiropractic physicians Licensees shall must not knowingly:
  - (1) Increase charges when a patient utilizes a third-party payment program;
  - (2) Report incorrect dates or types of service on any billing documents;
  - (3) Report charges for services not rendered;
  - (4) Bill for services rendered which are not documented in a patient's file.
- (G) No <u>ehiropractic physicianlicensee shallmay</u> waive the payment of all or any part of a deductible or copayment that a patient, pursuant to a health insurance or health care policy, contract, or plan that covers the <u>ehiropractor'slicensee's</u> services, otherwise would be required to pay if the waiver is used as an enticement to a patient or group of patients to receive health care services from that chiropractor, unless the waiver is made:
  - (1) In compliance with the health benefit plan that expressly allows a practice of that nature. Waiver of the deductibles or copayments shall be made only with the full knowledge and consent of the plan purchaser, payer, and third-party

- administrator. Documentation of the consent shall be made available to the board upon request, or;
- (2) For professional services rendered to any other person licensed pursuant to this chapter, to the extent allowed by this chapter and the rules of the board.
- (H) No <u>ehiropractic physicianlicensee</u> <u>shall may</u> offer cash, gift cards, gift certificates or cash equivalents to patients or potential patients as a referral fee or an inducement to enter into or to continue care.
- (I) Promotional items shallmay not be more than seventy-five dollars in retail value per year per patient. Professional services, product samples, literature, or refreshments served at events such as health fairs, open houses, educational lectures or health care orientations are not considered promotional items. Promotional items shallmay not be claimed directly or indirectly or otherwise shifted to any third party for reimbursement.
- (J) Nothing in this rule shall prevent a chiropractic physician from providing A licensee may provide a reasonable time of service discount.

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Five Year Review (FYR) Dates: 10/8/2025

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Promulgated Under: 119.03 Statutory Authority: 4734.10 Rule Amplifies: 4734.31

Prior Effective Dates: 05/02/2003, 08/01/2007, 04/05/2009, 05/25/2014

#### 4734-9-08 **Professional ethics.**

- (A) A doctor-patient relationship is any relationship between a <a href="https://ehropractie-physicianlicensee">ehropractie-physicianlicensee</a> and a patient wherein the <a href="https://ehropractie-physicianlicensee">ehropractie-physicianlicensee</a> to the patient. The doctor-patient relationship requires the <a href="https://ehropractie-physicianlicensee">ehiropractie-physicianlicensee</a> to exercise the utmost care that <a href="https://ehropractie-physicianlicensee">hether will do nothing to exploit the trust and dependency of the patient. A <a href="https://ehropractie-physicianlicensee">ehiropractie-physicianlicensee</a> shallmust make every effort to avoid other types of relationships that impair <a href="https://ehropractie-physicianlicensee">hit impair his or her</a> their professional judgement or risk the possibility of exploiting the confidence placed in <a href="https://ehropractie-physicianlicensee">hit impair his or her</a> their professional judgement or risk the possibility of exploiting the confidence placed in <a href="https://ehropractie-physicianlicensee">hit impair his or her</a> their professional judgement or risk the possibility of exploiting the confidence placed in <a href="https://ehropractie-physicianlicensee">hit impair his or her</a> their professional judgement or risk the possibility of exploiting the confidence placed in <a href="https://ehropractie-physicianlicensee">hit impair his or her</a> their professional judgement or risk the possibility of exploiting the confidence placed in <a href="https://ehropractie-physicianlicensee">hit impair his or her</a> their professional judgement or risk the possibility of exploiting the confidence placed in <a href="https://ehropractie-physicianlicensee">hit impair his or her</a> the professional judgement or risk the possibility of exploiting the confidence placed in <a href="https://ehropractie-physicianlicensee">hit impair his or her</a> the placed in <a href="https://ehropractie-physicianlicensee">hit impair his or her</a> the pla
- (B) <u>Chiropractic physicians Licensees</u> who are employees of unlicensed individuals, or who work in a multidisciplinary healthcare setting, must exercise independent professional judgment and act in the patient's best interest at all times.
- (C) Every chiropractic physician licensee shall must:
  - (1) Maintain proper standards of safety, sanitation and cleanliness in their place of practice, to include properly utilizing and maintaining all equipment used in practice;
  - (2) Remain free of conflicts of interest and shall maintain the integrity of the chiropractic profession while fulfilling his or hertheir duties and responsibilities as a chiropractic physician. If a conflict of interest does develop, the chiropractic physician licensee shall must promptly disclose such conflict of interest to the affected parties. Chiropractic physicians Licensees shall must avoid any conflicts of interest with a patient which might impair professional judgment;
  - (3) Maintain professional boundaries when interacting with patients via the internet, electronic messaging, text messaging, or any other type of social networking;
  - (4) Maintain confidentiality and protection of privacy, security, and integrity of patient information;
  - (5) Cooperate with other health care providers who concurrently treat, or who subsequently treat their patients;
  - (6) Present their professional credentials in an accurate and dignified manner;
  - (7) Promote or endorse themselves in a manner that is true and not in a false, fraudulent, deceptive, or misleading manner;

(8) Consult with other health care professionals when such consultation would benefit the patient, or when the patient requests such consultation;

- (9) Protect the public by bringing to the attention of the board any action of another chiropractic physician that appears to violate Chapter 4734. of the Revised Code and agency 4734 of the Administrative Code;
- (10) Not offer financial incentives such as cash, gift cards, gift certificates or cash equivalents to patients or potential patients;
- (11) Not receive a fee, rebate, rental payment, or any other form of remuneration for the referral of a patient to a clinic, laboratory or other health service entity;
- (12) Not misrepresent their professional credentials, or present credentials in a misleading manner. Misleading credentials and/or misrepresentation of credentials includes advertising educational degrees not recognized by a national accrediting agency recognized by the secretary of the United States department of education or the equivalent for education earned outside the United States; and/or advertising specialty certifications or diplomates not issued by a duly recognized organization;
- (13) Not guarantee a cure to any patient;
- (14) Not take physical, emotional, or financial advantage of any patient;
- (15) Not discriminate on the basis of race, ethnicity, national origin, color, sex, sexual orientation, age, marital status, political belief, veteran status, or mental or physical challenge;
- (16) Not communicate with an individual in a way that invades privacy of the individual, or interferes with an existing doctor-patient relationship;
- (17) Not make claims of professional superiority over his or hertheir fellow practitioners or other health care practitioners in an inaccurate or unidentified manner which cannot be properly substantiated;
- (18) Not identify themselves as practicing in a certain specialty or as a specialist, unless they possess the recognized credentials issued by the proper authority.

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Five Year Review (FYR) Dates: 10/8/2025

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Promulgated Under: 119.03

Statutory Authority: 4734.10, 4734.16 Rule Amplifies: 4734.16, 4734.31

Prior Effective Dates: 05/02/2003, 08/01/2007, 11/15/2007, 10/06/2013,

01/01/2019

## 4734-9-09 **Fee splitting prohibited.**

(A) A <u>ehiropractic physicianlicensee</u> shall not divide fees, charges, income, or collections or have any arrangement to share fees, charges, income, or collections with any other person, except those which reflect services performed or result from lawful ownership of a business organization, as described in RC section 4734.17.

The following situations are exceptions to the above rule:

- (1) A <u>ehiropractic physician licensee</u> may have an agreement with <u>histheir</u> clinic, firm, partner, or associate to provide for the payment of money, over a reasonable period of time after <u>his or hertheir</u> death, to the estate or to one or more specified persons;
- (2) A <u>chiropractic physicianlicensee</u> or chiropractic organization may include nonchiropractic physician employees in a retirement plan, even though the plan is based in whole or in part on a profit-sharing arrangement.
- (B) A <u>ehiropractic physicianlicensee</u> may not predicate the payment of financial consideration to any individual or entity who solicits potential patients on behalf of the licensee's practice, that is based wholly on the number of patient referrals obtained, unless that individual is a doctor of chiropractic employed by the <u>ehiropractic physicianlicensee</u>.

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Five Year Review (FYR) Dates: 10/8/2025

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Promulgated Under: 119.03 Statutory Authority: 4734.10

Rule Amplifies: 3999.22, 4734.17, 4734.31

Prior Effective Dates: 01/10/2003

## 4734-9-10 Conduct following action against a license.

- (A) Licensees subject to discipline shallmust provide a copy of the board's action to all employers and entities that contract with the licensee to provide chiropractic, animal chiropractic, and/or acupuncture services via a method that provides written confirmation of delivery within fifteen days of the action. Evidence of delivery shallmust be maintained for two years.
- (B) Licensees subject to discipline shallmust provide a copy of the board's action to the proper licensing authority of any state or jurisdiction in which the licensee has ever held a professional license, regardless of the status of the license in that state or jurisdiction.
- (C) Immediately upon the effective date of an active suspension or revocation, and for the time period specified, a licensee shallmay not:
  - (1) Display their license to practice chiropractic and acupuncture certificate, if applicable, or copies of any proof of renewal of the license or certificate;
  - (2) Occupy, share or use office space in which another licensee practices chiropractic, animal chiropractic and/or acupuncture;
  - (3) Practice chiropractic, animal chiropractic and/or acupuncture in any form either as a principal or employee or agent of another and shallmust not furnish chiropractic, animal chiropractic and/or acupuncture services. The licensee may respond to inquiries from patients, third party payors and/or health care practitioners regarding prior services provided to a patient and may provide reports regarding previous services provided to a patient;
  - (4) Hold themself forth as a licensee, chiropractor, animal chiropractor or the holder of an acupuncture certificate, if applicable, or someone who may legally practice chiropractic, animal chiropractic or acupuncture;
  - (5) Advertise or claim to be a chiropractor, doctor of chiropractic, or chiropractic physician, animal chiropractic practitioner or use the initials "DC" in connection with the person's name. The licensee <a href="shallmust">shallmust</a> notify in writing publishers of any professional advertising (including online listings) in which the licensee's name appears to remove any such listing;
- (D) If a licensee's office will be closed during an active suspension or revocation of greater than thirty days, the licensee shallmust, within fifteen days of the action, notify in writing all patients who have been under the licensee's care within the preceding six months of their inability to provide services. Notification shallmust include advising patients in writing as to the location of their files and what arrangements have been

- made to permit them to access their files, as well as a method for them to seek care elsewhere.
- (E) Licensees actively suspended or revoked for thirty days or greater shallmust deliver to the board thetheir original chiropractic license and/or acupuncture certificate within fifteen days of the effective date of the action.
- (F) If an individual's license has been actively suspended or revoked for two or more years, the board may require as a condition of reinstatement that the individual complete training or testing as specified by the board, including but not limited to, specific continuing education hours, the national board of chiropractic examiners special purposes examination for chiropractic, and/or examinations offered by ethics and boundaries assessment services, llc.
- (G) Every licensee subject to disciplinary action shallmust file with the board a detailed sworn affidavit specifying how they have, or will, comply with this rule, within thirty days of the date of the discipline.
- (H) Licensees are not prohibited from collecting accounts receivable for services rendered previously or from collecting reasonable and customary rental and equipment leases during the period of any active suspension and/or revocation.

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Five Year Review (FYR) Dates: 10/8/2025

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Promulgated Under: 119.03 Statutory Authority: 4734.10 Rule Amplifies: 4734.31

Prior Effective Dates: 02/05/1991, 02/05/1993, 07/29/2002, 11/15/2007,

12/26/2013, 01/01/2019, 09/01/2021

### 4734-9-11 **Prepayment plans.**

A chiropractic physician who offers prepayment Prepayment plans for chiropractic, animal chiropractic and/or acupuncture services shallmust:

- (A) Require the patient to sign and date a written prepayment plan that incorporates all policies, conditions and descriptions of the plan. The plan shallmust include at least the following:
  - (1) The duration of the plan;
  - (2) The proposed treatment plan, the diagnosis and condition being treated;
  - (3) A list of all services, goods, and appliances covered by the plan and the fees related to such services, goods and appliances;
  - (4) A list of all separate or distinct fees for services, goods or appliances not covered by the prepayment plan;
  - (5) An explanation of any policy modifying the plan in the event of a new diagnosis, new condition, or new injury, such as an auto or worker's compensation injury;
  - (6) An explanation of how any unused portion of funds are calculated or prorated should the patient complete care early or discontinue care. The explanation of the refund policy shallmust be clearly indicated in the plan and written in plain language;
  - (7) A statement of an accounting of all funds used at the time of a request from a patient shallmust be provided to the patient within fourteen days of a written request.
- (B) The patient shallmust receive a refund within fourteen business days for any unused funds upon request. The refund shallmust be calculated based on the method defined in the written prepayment policy in accordance with paragraph (A)(6) of this rule.
- (C) Upon execution of the agreement, the patient shall must be provided a copy of the signed prepayment plan.
- (D) A copy of the dated prepayment plan signed by both the patient and an employee witness shallmust be maintained in the patient's file in accordance with the retention schedule outlined in Chapter 4734-8-04 of the Administrative Code.
- (E) No prepayment plan shallmay exceed twelve months in duration.

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Five Year Review (FYR) Dates: 10/8/2025

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Promulgated Under: 119.03 Statutory Authority: 4734.10 Rule Amplifies: 4734.10

Prior Effective Dates: 10/06/2013, 01/01/2019

### 4734-10-01 Maintaining a certificate to practice acupuncture.

- (A) Each <u>ehiropractic physicianlicensee</u> issued a certificate to practice acupuncture by the board <u>shallmust</u> maintain a current license to practice chiropractic in the state of Ohio.
- (B) If at any time a chiropractic physician's licensee's license to practice chiropractic in Ohio is suspended, revoked, placed inactive, or forfeited, the certificate to practice acupuncture issued by the state chiropractic board shall will likewise be suspended, revoked, placed inactive, or forfeited without further administrative action.
- (C) At no time <u>shallmay</u> a <u>chiropractic physicianlicensee</u> hold an active certificate to practice acupuncture without simultaneously holding a valid, current license to practice chiropractic in the state of Ohio.

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Promulgated Under: 119.03 Statutory Authority: 4734.10 Rule Amplifies: 4734.281 Prior Effective Dates: 11/15/2007

### 4734-10-03 **Application for acupuncture certificate.**

- (A) Each applicant for a certificate to practice acupuncture shallmust apply in the manner prescribed by the board and submit a one hundred dollar non-refundable application fee. The application and fee shall be valid for one year from the initial application date. The applicant shall submit satisfactory evidence of his or her qualifications to receive a certificate to practice acupuncture in the state of Ohio as prescribed by section comply with the provisions of section 4734.282 of the Revised Code. All required transcripts and credentials must be sent directly from the issuing entity.
- (B) The board may refuse or deny an applicant for a certificate to practice acupuncture in this state if the applicant does not meet the licensure requirements as outlined in section 4734.282 of the Revised Code or has committed any act which indicates that the applicant does not possess the character and fitness to practice acupuncture, including any act that would be grounds for disciplinary action as outlined in section 4734.31 of the Revised Code. The burden of proof is on the applicant to prove by clear and convincing evidence to the board that he or she meets the conditions for receipt of a certificate to practice acupuncture must pay a non-refundable one hundred dollar application fee.
- (C) Each applicant must submit all required credentials, facts, and materials as the board requires. The applicant has an ongoing obligation to update and supplement all information provided to the board. Applications and fees are valid for one year from the date of initial application.
- (D) If an applicant has not actively practiced acupuncture for two years or more immediately preceding the date of application, the board may require as a condition for certification that the applicant complete training or testing which may include re-taking and passing the "Acupuncture" examination offered by the national board of chiropractic examiners.
- (C)(E) Any applicant that the board proposes to refuse or deny a certificate to practice acupuncture shall be entitled to a hearing on the question of such proposed refusal or denial of an application must comply with the hearing requirements of Chapter 119. of the Revised Code.

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Promulgated Under: 119.03 Statutory Authority: 4734.282 Rule Amplifies: 4734.282

Prior Effective Dates: 11/15/2007, 06/01/2013, 01/01/2019

#### 4734-10-02 **Acupuncture course of study approval.**

- (A) It shall be the objective of each board-approved acupuncture educational provider to prepare each chiropractic physician to demonstrate professional competence to become an acupuncture provider.
- (B)(A) Each educational provider that seeks board approval of an acupuncture course of study shallmust file a request for approval with the board. The request shallmust include:
  - (1) Evidence that the program meets the requirements outlined in section 4734.211 of the Revised Code:
  - (2) An outline for the entire course of study;
  - (3) Accreditation held by the educational provider, to include programs that are accredited;
  - (4) Evidence that the course of study will prepare students to become a competent acupuncture provider;
  - (5)(3) A vitae of each instructor, to include the instructors' faculty status with the educational provider seeking approval;
  - (6)(4) Evidence that the course of study is accepted by the national board of chiropractic examiners to allow students to sit for the acupuncture examination;
  - (7)(5) Other information as deemed appropriate by the board.
- (C)(B) The board may review the request and supporting documentation and/or appoint a committee to review the materials.
- (D)(C) Board-approved acupuncture educational providers may accept transfer hours towards the required threetwo hundred hours of acupuncture education for those chiropractic physicianslicensees who have previously earned acupuncture education. The educational provider shall ensure that any accepted transferred hours are appropriate and acceptable to utilize towards the threetwo hundred hour course requirement as outlined in section 4734.211 of the Revised Code. The board-approved acupuncture educational provider shall reflect all transferred coursework on the chiropractic physician's licensee's final transcript.
- (E)(D) The educational institution shall ensure appropriate attendance and monitoring procedures for the course of study.

(F)(E) The board may withdraw approval of an acupuncture course of study at any time if such program is not in compliance with the provisions of this rule. If, in the opinion of the board, there is evidence that an entity having status of board-approved acupuncture educational provider is not in compliance with this rule, the board shall issue a warning letter to the program stating that board-approved status may be withdrawn and the reasons for the action. Such letter shall be sent at least thirty days prior to such contemplated action by the board. Reinstatement of board-approved status may be granted by the board if the educational provider furnishes proof of compliance with this rule. Consistent with the hearing requirements in section 119. of the Revised Code, the board may take one or more of the following actions against an acupuncture course of study:

- (1) Refuse to issue:
- (2) Refuse to reinstate;
- (3) Revoke;
- (4) Permanently revoke;
- (5) Suspend for a limited or indefinite period;
- (6) Place on probation;
- (7) Reprimand;
- (8) Censure or
- (9) <u>Issue any fines authorized by statute.</u>

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Five Year Review (FYR) Dates: 10/8/2025

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Promulgated Under: 119.03 Statutory Authority: 4734.10 Rule Amplifies: 4734.211

Prior Effective Dates: 11/15/2007, 10/01/2017

### 4734-10-04 **Application for acupuncture certificate by reciprocity.**

- (A) Each applicant must submit the following:
  - (1) A completed application on which the applicant must designate the specific state, government certification, or private certification the applicant wishes the board to consider as the basis for acupuncture certification in this state;
  - (2) Non-refundable one hundred dollar application fee;
  - (3) Educational evidence of acupuncture training and experience;
  - (4) National board of chiropractic examiners transcript, if applicable;
  - (5) Evidence of out-of-state licensure, government certification, or private certification;
    - (a) For an application based upon substantially similar out-of-state licensure, evidence that the applicant has held the out-of-state license to practice acupuncture from which certification is sought for at least one year immediately preceding the date of application and has been actively engaged in the practice of acupuncture for at least one of the five years immediately preceding the date of application;
    - (b) For an application based upon government certification, evidence that the applicant has held the government certification to practice acupuncture from which certification is sought from one of the uniformed services or a state that does not issue an out-of-state license to practice acupuncture, for at least one year immediately preceding the date of application and has been actively engaged in the practice of acupuncture for at least one of the five years immediately preceding the date of application;
    - (c) For an application based upon private certification, evidence that the applicant has held a private certification to practice acupuncture for at least two years immediately preceding the date of application and the applicant has been actively engaged in the practice of acupuncture in a state that does not issue an out-of-state license or government certification for the practice of acupuncture for at least two of the five years immediately preceding the date of application.
- (B) For an application based upon adequate work experience, the applicant must meet the requirements of chapter 4796.05 of the Revised Code.
- (C) Each individual applying for an acupuncture certificate under this rule must comply with all applicable provisions of chapter 4796 of the Revised Code.

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(D) Each applicant must submit all required credentials, facts, and materials as the board requires. The applicant has an ongoing obligation to update and supplement all information provided to the board. All required documentation and transcripts shall be sent directly from each issuing institution. Applications and fees are valid for one year from the date of initial application.

- (E) An individual issued an acupuncture certificate pursuant to this rule and chapter 4796 of the Revised Code is subject to the laws and rules regulating the practice of acupuncture in this state and subject to the board's jurisdiction. The individual may only practice in this state within the scope of practice permitted under Ohio law and that does not exceed the applicant's training.
- (F) Any refusal or denial of an application must comply with the hearing requirements of Chapter 119. of the Revised Code.

Effective:
Five Year Review (FYR) Dates:
Certification
Dota
Date

Promulgated Under: Statutory Authority: Rule Amplifies: 119.03 4734.10

4734.283, 4734.31