



STATE OF ARIZONA BOARD OF CHIROPRACTIC EXAMINERS  
1740 West Adams Street, Suite 2430 • Phoenix, Arizona 85007  
Telephone 602.864.5088 | [www.chiroboard.az.gov](http://www.chiroboard.az.gov)

### **Continuing Education Course Approval** Eligibility & Requirements

The State of Arizona Board of Chiropractic Examiners welcomes your interest in providing continuing education for Arizona licensees. Please read the following forms, laws and rules carefully before submitting your application, as the Board cannot refund application fees, even if you do not qualify for approval.

Not all continuing education courses require Board approval. The following providers and courses are predetermined to meet the continuing education requirements. They do not require, nor should they expect, Board approval. The Board will return all applications submitted for courses that meet the following criteria without review.

- In-person courses provided by accredited colleges and universities, with qualified instructors, on topics allowed by statute and rule. (This does not include sponsored or co-sponsored courses or those taught by an adjunct faculty member of an accredited college or university.)
- In-person courses provided by the American Chiropractic Association and the International Chiropractors Association, with qualified instructors, on topics allowed by statute and rule.
- In-person CPR training provided or sponsored by the American Heart Association (AHA), the American Red Cross or an entity that meets the equivalent standards of the AHA and the Red Cross as determined by the Board.
- Participation in the development or proctoring of the NBCE examinations.

Approval is required for providers not listed above and for all online courses.

#### **Subject Eligibility:**

To qualify for Board approval, a continuing education course must meet the subject requirements set forth in A.A.C. R4-7-801 (D), (J) or (K). Qualifying subjects include:

- Adjusting techniques
- Spinal analysis
- Physical medicine modalities and therapeutic procedures
- Record keeping and documentation
- Ethics
- CPR (via Red Cross or AHA)
- Public health
- Communicable diseases
- Sexual boundaries
- Emergency procedures
- Acupuncture
- Nutrition
- Examination
- Assessment and diagnostic procedures to include physical, orthopedic, and neurological procedures
- Radiographic technique
- Diagnostic imaging and interpretation
- Laser as permitted by law
- Clinical laboratory procedures limited to urine collection, fingerpicks and venipuncture (not to be confused with evaluation of lab reports)
- Anatomy
- Physiology

- Bacteriology
- Chiropractic orthopedics and neurology
- Chemistry
- Pathology
- Patient management
- Evidence-based clinical intervention models
- Symptomatology
- Arizona jurisprudence
- Billing & Coding
- Substance Abuse
- Percutaneous Therapy

In addition, courses provided for the purpose of recognizing, assessing and determining appropriate referral or collaborative treatment of complex conditions, including but not limited to cancer, autism, multiple sclerosis, diabetes, and developmental disorders qualify for continuing education credit.

Please note that the Board will NOT approve courses in which the primary focus is the promotion of a product or service or courses that require participants to purchase a product or service. The course must have a significant relationship to the assessment, diagnosis or treatment of patients within the scope of practice of chiropractic, as defined in A.R.S. § 32-925 and 32-922.02. Course subjects that do NOT qualify for continuing education credit are listed in A.A.C. R4-7-801 (L). Please read this list carefully before submitting your application.

#### **Instructor Eligibility:**

Instructors must be qualified by education and/or experience to provide instruction in the course subject matter.

Qualifying instructors must:

- Be faculty of an accredited college or university or demonstrate equivalent qualifications through postgraduate study and experience teaching postgraduate coursework.
- Hold an applicable license in good standing.

Qualifying instructors must not:

- Have had a license placed on probation for unprofessional conduct within the past 5 years.
- Have had a license suspended, surrendered or revoked.
- Have had an initial license or renewal application denied for unprofessional conduct.
- Have been convicted of a felony.

#### **Online Courses:**

To qualify for approval, an online course must be provided or sponsored by an accredited college or university that meets the requirements of A.R.S. § 32-931(B). Online courses that are sponsored by, but not provided directly through, an accredited college or university must complete the Online Continuing Education Addendum in addition to the Continuing Education Course Application.

### **Application Requirements:**

- A completed Continuing Education Course Application. (You must complete one application for each course, whether individual or included in a program of multiple courses.)
- A check or money order for \$50.00 in payment of the initial course application fee. Please make the check or money order payable to the Arizona Chiropractic Board. (You must submit an application fee for each course application).
- A resume or curriculum vitae for each course instructor.
- One letter of reference for each course instructor from a person familiar with the instructor's qualifications as an instructor, his or her education or his or her experience in the course subject.
- Verification of licensure in good standing from each jurisdiction in which each instructor holds or has held a license sent directly from the issuing agency.
- A course description that includes the course content, explicit written objectives identifying expected learner outcomes for each section of the course and the teaching method employed.
- A detailed, hour-by-hour, syllabus identifying the subject of instruction and the instructor for each hour. If less than an hour is dedicated to a subject, the syllabus shall identify the number of minutes dedicated to instruction on that subject.

You must submit your complete application at least 75 days prior to the anticipated initial offering of the course if you submit the application by U.S. Mail. You must submit your complete application 60 days prior to the anticipated initial offering of the course if you submit the application by email. Email submissions should be sent to the attention of the CE Course Application Reviewer at [CECourse@chiroboard.az.gov](mailto:CECourse@chiroboard.az.gov). Please indicate that you are submitting a continuing education application in the subject line. Please note that if you submit your application by email, the Board must receive a check or money order in payment of the application fees within 10 days of submission. Staff will discard your application should you fail to submit your payment.

Staff will review and respond to your submission in writing. If your application is deemed incomplete, you will have ten days to supply the missing information.

### **Compliance:**

If the Board approves your course, you will receive a letter providing you with your approval code. To maintain your approval, you must reapply every two years, no later than the first day of the month in which the course was initially approved. You must also reapply every time the course subject or instructors change. Failure to reapply will result in the disqualification of your course.

After a licensee has completed your course, you must provide them with a certificate confirming course participation. The certificate must provide the name and license number of the attending chiropractor, the name of the course provider, the course approval code, the subject matter of the course, the course title (if different from the subject matter listed), the date and location of the course and the number of hours of continuing education the chiropractor completed.

As the provider of a Board-approved continuing education course, you are under continuing obligation to report to the Board. You must notify the Board immediately of concerns or problems that arise

regarding your course, including any disciplinary action imposed on the license of an instructor or an instructor being convicted of a criminal offense.

In accordance with A.A.C. R4-7-801 (H)(2) and (3), you must maintain a list of all course attendees for a minimum of five years after each date the course is held and provide a copy of the list to the Board within 10 days of a written request to do so. You must also maintain a copy of the course syllabus with stated learning objects, a list of instructors and documentation of the name, location and date of each course held for at least five years and shall provide a copy of these materials to the Board within 10 days of a written request to do so.

A Board representative may attend your continuing education course to verify its content and ensure its compliance with statute and rule at no charge. The Board may withdraw its approval if they find that the course provider is not compliant with statute or rule, has misrepresented the course content or has failed to obtain approval after a change to the course content or its instructors. By making application to the Board, you agree to comply with these provisions.



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### Continuing Education Course Application

Type or print in blue or black ink. You must provide a response to each question. You may answer "None" or "N/A" if it is the correct response.

#### Applicant Information:

1. Applicant (Organization Presenting the Course): \_\_\_\_\_  
Contact Person: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Telephone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_  
Email Address: \_\_\_\_\_

#### Course Information:

2. Course Title: \_\_\_\_\_  
\_\_\_\_\_
3. Course Length: \_\_\_\_\_
4. Number of Hours Requested for Approval: \_\_\_\_\_
5. How will the course be delivered?  Online  In-person
6. If the course will be delivered online, provide the web address. \_\_\_\_\_  
\_\_\_\_\_
7. Does each course hour consist of at least 50 minutes of continuous instruction?  Yes  No
8. Is credit provided for breaks?  Yes  No
9. If the course will be delivered online, provide an explanation of the method used to confirm that the participant was engaged in 50 minutes of continuous instruction for each credit hour awarded. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

10. If the course will be delivered in-person, please indicate the method by which attendance will be monitored, confirmed and documented. \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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\_\_\_\_\_

11. Name of Attendance Certifying Officer (Individual Responsible for Certifying Attendance): \_\_\_\_\_

\_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

12. Please provide the dates and locations of each of the planned course offerings for the next two years in the boxes below. If you run out of space, please continue your list on a separate sheet and attach it to your application.

Date:	Location:

**Course Subject Matter:**

13. Please review R4-7-801 (J) and (K) and then review the subjects of the course using the subject names listed in those rules in the space provided. Please also list the specific time of instruction in each of the subjects.

Subject:	Instruction Time:
Adjusting techniques	
Spinal analysis	
Physical medicine modalities and therapeutic procedures	
Record keeping and documentation	
Ethics	
Communicable diseases	
Public health	
Sexual boundaries	
Emergency procedures	
Acupuncture	
Nutrition	
Examination	
Assessment and diagnostic procedures to include physical, orthopedic, and neurological procedures	
Radiographic Imaging technique	
Diagnostic imaging and interpretation	
Laser as permitted by law	
Clinical laboratory procedures	
Anatomy	
Physiology	
Bacteriology	
Chiropractic orthopedics and neurology	
Chemistry	
Pathology	
Patient management	
Evidence-based clinical intervention models	
Symptomatology	
Arizona jurisprudence	
Billing & Coding	
Substance Abuse Recognition	
Percutaneous Therapy	

14. Attach a course description that includes the content, explicit objectives, and expected learner outcomes for the course. Please also include the teaching method (e.g. lecture, discussion, webinar).

15. Attach a detailed syllabus, broken down by hour, identifying the subject of instruction and instructor for each section identified. If a subject will be taught for less than one hour, please indicate the number of minutes dedicated to instruction on that subject.
16. Does the content of any portion of this course refute generally accepted medical care and treatment and/or instruct participants to encourage patients to stop taking medication and/or stop participating in generally accepted medical care?  Yes  No

**Instructors:**

17. Please list all course instructors, their degree, the jurisdictions in which they hold or have held a license and their topics of instruction below. If you run out of space, you may continue your list on a separate sheet and attach it to your application.

Name	Degree Held	Type of License & State Issued	Topic of Instruction

- a. You must attach a resume or curriculum vitae and one letter of reference, for each instructor listed above.
- b. You must have verification of licensure in good standing sent directly from the jurisdiction(s) in which each of the above-referenced instructors is or has ever been licensed.
18. Are all of the above-referenced instructors currently in good standing with each licensing jurisdiction in which they hold or have held a license? If no, attach an explanation identifying the instructor, licensing entity and reason the instructor is not in good standing.  Yes  No
19. Are any of the above-referenced instructors under investigation by a regulatory agency? If yes, attach an explanation identifying the instructor, the licensing entity and the nature and status of the investigation.  Yes  No
20. Have any of the above-referenced instructors had a license placed on probation or restricted within the past five years in this or any other jurisdiction? If yes, attach an explanation



identifying the instructor, the licensing entity, and the date and nature of the sanction.

Yes  No

21. Have any of the above-referenced instructors had a license suspended, surrendered or revoked in this or any other jurisdiction. If yes, attach an explanation identifying the instructor, the licensing entity and the date and nature of the sanction.  Yes  No

22. Have any of the above-referenced instructors had an initial or renewal license application denied for unprofessional conduct? If yes, attach an explanation identifying the instructor, the licensing entity and the date of and reason for the denial.  Yes  No

23. Are any of the above-referenced instructors under investigation for or been charged with a criminal offense? If yes, attach an explanation identifying the instructor, the nature and status of the investigation and all relevant police records.  Yes  No

24. Have any of the above-referenced instructors been convicted of a misdemeanor involving moral turpitude or a felony in this or any other jurisdiction? If yes, attach an explanation identifying the instructor, the nature of the crime, the dates of arrest and conviction, the law enforcement agency and court having jurisdiction and all relevant police and court documents.  Yes  No

**Sponsorship:**

25. Will another entity sponsor or co-sponsor this course?  Yes  No  
If Yes, please attach a copy of a completed sponsor/program provider agreement signed and notarized by a responsible party.

26. If yes, please indicate the name of the sponsor or co-sponsor: \_\_\_\_\_

27. If yes, does the sponsor have a commercial relationship or provide financial support to the course?  Yes  No

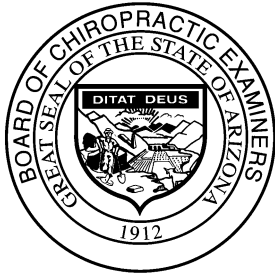
28. If yes, please provide a brief explanation of the commercial relationship or financial support. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

29. Will participants be required to purchase a product or service?  Yes  No

I, the undersigned, do hereby swear and affirm that the foregoing statements contained in this application are true and correct.

\_\_\_\_\_  
Signature of Authorized Agent

\_\_\_\_\_  
Date



# State of Arizona Board of Chiropractic Examiners

1951 West Camelback Road, Suite 330 • Phoenix, Arizona 85015  
Telephone 602.864.5088 • Fax 602.864.5099

## Online Continuing Education Addendum

Please read the enclosed forms and Board policy carefully before submitting your application, as the Board cannot refund application fees, even if you are not eligible for approval.

This form is for approval of an online continuing education course **sponsored** by an accredited college or university. It must be completed and submitted with a completed continuing education course application and the appropriate fee.

To be eligible for consideration, the course provider must attest to their compliance with the enclosed Board-approved parameters by initialing the attestations below and cause the course sponsor to submit documentation to the Board regarding their review and approval of the standards set by the provider for online learning.

Applicant (Organization Presenting the Course): \_\_\_\_\_

Applicant's Authorized Agent (Name and Title of the Person Completing this Form): \_\_\_\_\_

\_\_\_\_\_

Course Title: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

Please initial the following to indicate your compliance:

### Provider

1. This course is sponsored by an accredited college or university and the sponsorship contract is included with this application. \_\_\_\_\_
2. The course sponsor has been asked to submit documentation of their review of the standards set by this institution for online learning. \_\_\_\_\_

### Security

3. All courses and users are ID and password protected. \_\_\_\_\_
4. Our website and network are protected by firewalls and security systems. \_\_\_\_\_

5. All courses establish the learners' ethical responsibilities when earning continuing education credit online.
- 

**Monitoring**

6. Our monitoring mechanism clocks learners' time by the minute.
  7. Our monitoring mechanism confirms ongoing learner participation with an online timer and with completed work and tracks learners' time within each unit of the course in real time.
  8. This course includes rotating question and answer examinations for each course hour.
  9. Successful completion of assessments are required for course completion and for certificate issuance.
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**Examination Questions**

10. Educational instructors review examination questions prior to upload.
  11. A statistical analysis of questions is performed on a reasonable schedule and frequently missed questions are analyzed against course content to improve content or questions.
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- 

**Instructor Interaction**

12. Learners can interact with instructors via email or other communication and do not wait more than 48 hours for a response to questions or requests for assistance.
- 

**Continuing Education Credit Approval**

13. Learners can only earn credit for the time and work completed as supported by the monitoring mechanism. If a learner spends 2 hours on a 4 hour course, the learner is only awarded 2 hours of credit.
- 

**Course Completion Certificates**

14. Certificates of course completion are not issued until the learners' work and attendance have been verified.
  15. The certificates of course completion provided to learners include all of the information required by A.A.C. R4-7-801 (H)(1) and are sent to the learners' physical addresses by the affiliated accredited college or university.
- 
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**Board Testing**

16. We authorize a Board or staff member of the Arizona State Board of Chiropractic Examiners to take part in this course online and have attached a user identification number and password for the Board or staff member to use to test the above parameters.

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I, the undersigned, hereby affirm that the foregoing attestations contained in this Addendum are true and correct, and that all requirements of the Board-approved parameters for online continuing education are met by this course. I fully understand that any false statement in this Addendum shall be grounds for denial , revocation or refusal to renew approval of this course.

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Signature of Authorized Agent

---

Date

## **Board Approved Online Continuing Education Parameters**

An online continuing education course must meet all of the parameters listed below.

### **A. Provider**

The course must be provided directly through an accredited college or university or sponsored by an accredited college or university. If a college or university sponsors the course, the contract with the sponsor must be included with the application.

### **B. Security Parameters**

1. All courses and users are ID and Password protected.
2. The provider utilizes firewalls and security systems in its management.
3. Every course establishes the ethical responsibility required from each learner when taking CE credit through an online resource.

### **C. Monitoring Mechanism**

1. The course must have a mechanism by which the learner's time can be clocked by the minute.
2. The mechanism must be capable of confirming ongoing learner participation with an on-line timer and with completed work. The on-line monitoring tool must be able to track each learner's physical time within each unit of the course, in real time minutes/hours.
3. The course must include, at the least, rotating question and answer examinations for each course hour.
4. Assessments are a necessary component for completion and certificates are not issued until those elements are complete.

### **D. Examination questions**

1. Examination questions are reviewed by educational instructors prior to upload.
2. A statistical analysis of questions must be performed on a reasonable schedule and frequently missed questions are analyzed against course content to improve the content or questions.

### **E. Instructor Interaction**

1. Learners can readily interact with instructors via email or other communication resources.

2. Learners do not wait more than 48 hours for a response to a question or request for assistance.

#### **F. Credit Approval**

Learners can only earn CE credit for the time and work completed as supported by the monitoring mechanism. If a learner spends 2 hours on a 4-hour course, the learner is only awarded 2 hours of credit.

#### **G. Course Certificates**

1. A certificate of course completion is not issued until the provider checks the learner's work and verifies attendance.
2. The course certification provided to the learner must include all of the information required by A.A.C. R4-7-801(H)(1).
3. A certification for course completion is sent from the affiliated accredited college or university to the learner's physical address rather than issued electronically.

#### **H. Board Access to On-Line Courses**

Applicants for on-line courses are required to provide Board staff access to an on-line course for its review as part of the application process and will need to continue to provide the Board and its staff access to on-line courses for continued monitoring.