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**CHIROPRACTIC PHYSICIANS' BOARD OF NEVADA**

4600 Kietzke Lane, Suite M245  
Reno, Nevada 89502-5000  
Telephone (775) 688-1921

Website: <http://chirobd.nv.gov> Fax (775) 688-1920 Email: [chirobd@chirobd.nv.gov](mailto:chirobd@chirobd.nv.gov)

**MINUTES OF THE PUBLIC WORKSHOP REGARDING PROPOSED REGULATIONS**

A Public Workshop Regarding Proposed Regulations was held at the Chiropractic Physicians' Board via teleconference on Tuesday, August 15, 2017 at Kietzke Plaza, 4600 Kietzke Lane, Suite M245, Reno, Nevada 89502.

The following were present when the Workshop was declared open at 8:05 AM:

James Overland, Sr., DC  
David Rovetti, DC  
Morgan Rovetti, DC  
Michael Handelman, DC  
Louis Ling, Esq., Board Counsel  
Julie Strandberg, Executive Director

At approximately 8:15 AM Stephanie Youngblood, DC joined.

**Agenda Item 1 Public Interest Comments - No action.**

There was no public comment.

**Agenda Item 2 Approval of agenda – For possible action.**

**Agenda Item 3 PUBLIC WORKSHOP: Discussion to consider amendments to Nevada Administrative Code 634 – For possible action.**

Louis Ling conducted the workshop. Mr. Ling gave a brief overview of the rule-making process and proceeded to address each section individually.

Section 1 Subsection 1 (a) was divided into two parts. New language was added to (ii) *An exit examination approved by the Board that is administered by a chiropractic college accredited by the Council on Chiropractic Education;*

Subsection 2 ... "*Part III and*".. was added and the phrase .. "*may be required by the Board to*"...

Dr. Overland confirmed that his correspondence was received by the Board and requested clarification of the revised language. Mr. Ling stated the intent of this language allows the Board to recognize and review an exit interview from the chiropractic college and determine if the exit interview is the equivalent to Part IV of the National Board and gives the board the discretion to waive the SPEC in the event an applicant has not taken Parts III and IV and their credentials are in good standing.

Section 2 The following language was added to Subsection 3, 4, and 5:... "*a closed-book examination or at least a score of 90 percent on an open-book examination*"...

There were no recommended changes.

Section 3 The following language was added to subsection 3: ...*“electronic devices, unless approved by the board, or any”*...

There were no recommended changes.

Section 4 Additional language was added to (f) *Include a document executed by the patient documenting:*

(1) *That the chiropractic physician has informed the patient about the benefits and risks of chiropractic treatment of the type that the chiropractic physician intends to offer to and to perform upon the patient;*

Mr. Ling stated that this revision adds an informed consent to the Boards record keeping section. Mr. Ling stated that this is an opportunity for the chiropractor to have a discussion with their patient to discuss what kind of procedure the patient will be under-going, which will be captured in writing, both for the protection of the patient, the chiropractor and ultimately if there is a complaint to the Board.

Dr. David Rovetti expressed concern with respect to the language as written, indicating that it appears that the doctor has to request the patient sign a document which indicates how the chiropractor “intends” to treat the patient, which is different than how the chiropractor “may” treat the patient. Dr. Rovetti stated that his understanding, based on the language, is that before the chiropractor begins treatment they have to write out the treatments that they will be doing and ask the patient to sign and then in the event a different therapy is needed that information would need to be added along with the risks and benefits. Mr. Ling asked Dr. Rovetti, “if his concern is that the language is prospective, meaning the chiropractor is preparing the consent at the initiation of the therapeutic relationship and if therapies change, the chiropractor would need to either add information to the informed consent or the chiropractor would be executing another consent.” Dr. Rovetti stated that is one of his concerns. Dr. Rovetti stated that it doesn’t appear that the chiropractor can ask a patient to sign a document listing all therapies offered, because it states, “what you intend to offer” not what you “may offer.”

Mr. Ling stated that his understanding is that the intent is to parallel what is happening in other branches of medicine. Mr. Ling stated that the doctor wants to be able to confirm that they explained the risks and benefits and that the patient agreed to the treatment described. Mr. Ling explained that the purpose of the informed consent is for the chiropractor to protect and defend themselves.

Dr. Overland stated that it seems that it should be up to the chiropractor to inform the patient of the treatment, because it can be difficult to document every therapy that will be done along with the risks and benefits of each treatment.

Dr. David Rovetti asked what doctor would have to mention regarding the parameters around the risk of the treatment, for example, how much of a risk, how serious, or you might be a little sore, etc.

Mr. Ling stated that it appears the consent would be between the patient and the chiropractor to decide on that patient’s treatment plan, and what the inherent risks of that treatment plan will be. Mr. Ling stated that the intent was to encourage chiropractors to include documentation in the patient’s record that indicates the chiropractor had a discussion regarding treatment with the patient.

Dr. Overland asked based on Dr. Rovetti comments, regarding high risk or low risk, what reference does the chiropractor use. Dr. Overland stated there are different statistics available.

Mr. Ling stated that the intent is not to get into the mathematical detail.

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*(2) The availability of reasonable alternate medical modes of treatment and about the benefits and risks of those treatments to the extent that a reasonable chiropractic physician would know and disclose under the circumstances inherent with the particular patient;*

Dr. Overland stated that he does not agree with the language as written. Dr. Overland stated that based on the current language chiropractors may be getting into an area which is outside of their scope with respect to discussing drug therapy or the recommendation of drugs. It appears that this language is forcing the discussion for chiropractors to suggest that the patient seek other medical treatment.

Dr. Rovetti stated that he also disagrees with the language and believes that sub-section 2 be omitted. Dr. Rovetti stated that patients know that other therapies are available. Dr. Rovetti stated that it would make sense if all healing arts were required to refer out, however chiropractic is the only profession that have to refer out by law. Chiropractic doesn't get the benefits from other medical professionals referring to DC's.

*(3) The consent of the patient to the treatment that the chiropractic physician intends to offer to and to perform upon the patient.*

Dr. Overland asked if it was possible to prepare an informed consent with a global description or if the informed consent would need to be exclusive to each patient.

Mr. Ling stated that it depends on how the language is written, however if the document is not written specifically for each patient the chiropractor may be forfeiting a useful document to defend themselves in the event of a complaint.

Dr. Overland recommended that the Board work on sections 1 and 3.

Dr. Rovetti stated that he's concerned about a proper informed consent to protect the chiropractor from Board discipline. Dr. Rovetti recommended that this entire section be removed.

**Agenda Item 4 Board Member Comments – No action.**

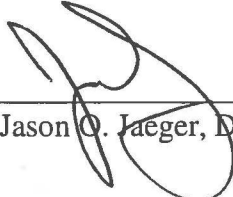
**Agenda Item 5 Public Interest Comments – No action.**

There was no public comment.

**Agenda Item 6 Adjournment – For possible action.**

Mr. Ling closed the workshop and stated that the hearing to adopt the proposed regulations will be publicly noticed for the October 12, 2017 Board meeting.

October 12, 2017

  
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Jason O. Jaeger, DC, Secretary/Treasurer