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Member
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Consumer Member
JOHN L. BERTOLDO, ESQ
Consumer Member

JULIE STRANDBERG
Executive Director

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

NOTICE OF MEETING/HEARING

DATE: Thursday, January 11, 2018 **TIME:** 8:30 a.m.

LOCATION: Public Utilities Commission, Room B, 9075 W. Diablo Drive, Suite 250,
Las Vegas, NV 89148

NOTE: ALL AGENDA ITEMS ARE FOR DISCUSSION AND FOR POSSIBLE ACTION UNLESS OTHERWISE NOTED. AGENDA ITEMS MAY BE TAKEN OUT OF ORDER, COMBINED FOR CONSIDERATION BY THE BOARD, OR PULLED OR REMOVED FROM THE AGENDA AT ANY TIME.

AGENDA

Call to order - determine quorum present.

Agenda Item 1 Public Interest Comments - No action.

- A. Public Comment will be taken at the beginning and at the end of each Board meeting;
- B. Public Comment may also be taken at other such times as requested so long as the request that Public Comment be taken will not interrupt ongoing Board business;
- C. Depending on the number of individuals wishing to address the Board, a reasonable time limit may be set. The Board will not restrict comments based upon viewpoint;
- D. No action may be taken upon a matter raised during Public Comment until the matter itself has been specifically included on an agenda as an item upon which action may be taken.
- E. Prior to the commencement and conclusion of a contested case or a quasi-judicial proceeding that may affect the due process rights of an individual the Board may refuse to consider public comment as per NRS 233B.126.

Agenda Item 2 Approval of agenda – For possible action.

The Board reserves the right to address items in a different order or combine two or more items to accomplish business in the most efficient manner. An item may be removed from the agenda or discussion may be delayed relating to an item at any time.

Agenda Item 3 Approval of the October 12, 2017 Meeting Minutes. - For possible action.

Agenda Item 4 Welcome New Board Member – No action.

Agenda Item 5 Ratification of granting of DC licenses to applicants who passed the examination from October to December 2017 – For possible action.

Agenda Item 6 Discuss/possible approval to delegate a third Board Member to meet with the Physical Therapy Examiners Board representatives – For possible action.

Agenda Item 7 Consideration/decision related to the stipulation to modify the Settlement Agreement of Dr. David Stella – For possible action. (Note: The Board may go into closed session pursuant to NRS 241 to consider the character, alleged misconduct, or professional competence of Dr. Stella)

Agenda Item 8 Consideration/decision regarding the application for DC licensure for Braheem Zaki Tolbert, DC – For possible action. (Note: The Board may go into closed session pursuant to NRS 241 to consider the character, alleged misconduct, or professional competence of Dr. Tolbert)

Agenda Item 9 Discussion/possible action regarding Mark Rubin, DC – For possible action. (Note: The Board may go into closed session pursuant to NRS 241 to consider the character alleged misconduct, or professional competence of Dr. Rubin)

Agenda Item 10 PUBLIC HEARING for the adoption of a Regulation to Nevada Administrative Code Chapter 634 – For possible action.

Agenda Item 11 Discuss the completion of the disciplinary case in the matter of Dr. Devon Luzod – For possible action.

Agenda Item 12 Legislative Matters – For possible action.

- A. Dan Musgrove Advocacy report
- B. Consideration to propose dry needling
- C. Resubmit BDR with revisions to NRS 634 to the 2019 Legislative Session

Agenda Item 13 Board Counsel Report – No action.

Agenda Item 14 Review & approval of current Investigator resumes & proposals – For possible action. (Note: The Board may go into closed session pursuant to NRS 241 to consider the character, alleged misconduct, or professional competence of the applicants.)

- A. Accept applications & schedule interviews to take place by telephone or in-person

Agenda Item 15 FCLB/NBCE Matters – For possible action.

- A. Attendance of Board Member(s) and Julie Strandberg at the FCLB Annual Conference May 2-6, 2018 in Dallas, TX
- B. Selection of Board's choice for FCLB Voting Delegate
- C. Selection of Board's choice for FCLB Alternate Delegate
- D. Selection of Board's choice for NBCE Voting Delegate
- E. Selection of Board's choice for NBCE Alternate Delegate
- F. Selection of Board Member to participate in the Spring National Board Part IV Exam - May 18-20, 2018

January 11, 2018 CPBN Meeting Agenda

- G. Selection of Board Member to participate in the Fall National Board Part IV Exam - November 9-11, 2018
- H. Selection of Board Member to participate in the National Board Part IV Test Committee meeting - June 8-9, 2018
- I. Other FCLB/NBCE matters
- J. Support Dr. Benjamin Lurie for NBCE District IV Director

Agenda Item 16 Discuss annual Board Counsel Evaluation – For possible action.

Agenda Item 17 Discuss annual staff evaluations and possible pay increase of the Executive Director & Licensing Specialist – For possible action. (Note: The Board may go into closed session pursuant to NRS 241 to consider the character, alleged misconduct, or professional competence of Ms. Canady)

Agenda Item 18 Status report regarding anonymous profiles of possible disciplinary actions. Board action will be limited to either dismissing the matter if the Board determines there is no violation, it has no jurisdiction over the subject, or providing direction to pursue the matter further – For possible action:

- A. Complaint 16-11S (Colucci)
- B. Complaint 16-13S (Lurie)
- C. Complaint 17-02S (Lurie)
- D. Complaint 17-04N (Rovetti)
- E. Complaint 17-05N (Jaeger)
- F. Complaint 17-07S (Jaeger)
- G. Complaint 17-08S (Lurie)
- H. Complaint 17-12S (Colucci)
- I. Complaint 17-13S (Rovetti)
- J. Complaint 17-18S (Jaeger)
- K. Complaint 17-20S (Lurie)
- L. Complaint 17-21S (Rovetti)
- M. Complaint 17-23S (Colucci)
- N. Complaint 17-24S (Jaeger)
- O. Complaint 17-25S (Martinez)
- P. Complaint 17-26S (Colucci)
- Q. Complaint 17-27S (Jaeger)
- R. Complaint 17-28S (Lurie)
- S. Complaint 17-30S (Colucci)
- T. Complaint 17-31S (Martinez)
- U. Complaint 17-32S (Lurie)
- V. Complaint 17-33S (Jaeger)
- W. Complaint 17-34S (Lurie)

Agenda Item 19 Committee Reports

- A. Continuing Education Committee (Dr. Martinez) – For possible action.
- B. Legislative Committee (Dr. Lurie) – For possible action.
- C. Preceptorship Committee (Dr. Rovetti) – For possible action.
- D. Test Committee (Dr. Colucci) - For possible action.
 - 1. CA Exam & CA Law Exam

Agenda Item 20 NCA Report – No action.

Agenda Item 21 NCC Report – No action.

Agenda Item 22 Executive Director Reports:

- A. Status of Pending Complaints – No action.
- B. Status of Current Disciplinary Actions – No action.
- C. Legal/Investigatory Costs – No action.

Agenda Item 23 Financial Status Reports:

- A. Current cash position & projections – No action.
- B. Accounts Receivable Summary – No action.
- C. Accounts Payable Summary – No action.
- D. Employee Accrued Compensation – No action.
- E. Income/Expense Actual to Budget Comparison as of November 30, 2017 – No action.
- F. 2017 Audit – Bertrand and Associates - For possible action

Agenda Item 24 Consideration of potential additions, deletions, and/or amendments to NRS and NAC 634 – For possible action.

- A. Mandatory Self-Inspection report
- B. Fines for not meeting deadlines. i.e. Self-Inspection
- C. Automatic suspension for late renewal
- D. Fine for untimely submission of a CA's second application

Agenda Item 25 Discuss/approve joint meeting with the State Board of Oriental Medicine – For possible action.

Agenda Item 26 Discuss/approve revisions to the Self-Inspection form – For possible action.

Agenda Item 27 Establish date for the August CA Exam – For possible action.

Agenda Item 28 Discussion regarding complaints involving marijuana – For possible action.

Agenda Item 29 Discussion regarding healthcare radiation standards – For possible action.

Agenda Item 30 Discussion/approval to carry and/or recommend CBD products - For possible action.

Agenda Item 31 Discussion regarding proposed revisions to the CCE Accreditation Standards - For possible action.

Agenda Item 32 Discussion on MSO, MD/DC practices, employment of a DC by an MD or DO or other entity in which a licensed chiropractic physician is performing chiropractic services, physiotherapy and maintaining records – For possible action

Agenda Item 33 Discuss/approve revisions to the Board travel policy – For possible action.

January 11, 2018 CPBN Meeting Agenda

Agenda Item 34 Election of Officers – For possible action.

Agenda Item 35 Reassign Committees – For possible action.

Agenda Item 36 Correspondence Report – No action.

Agenda Item 37 Board Member Comments – No action.

Agenda Item 38 Public Interest Comments – No action.

This portion of the meeting is open to the public to speak on any topic NOT on today's agenda and may be limited to 3 minutes.

Agenda Item 39 Adjournment – For possible action.

This agenda posted January 4, 2017 at the Chiropractic Physicians' Board of Nevada, 4600 Kietzke Lane, Suite M245, Reno, Nevada 89502; Office of the Attorney General, 100 North Carson Street, Carson City, Nevada 89701; Office of the Attorney General, 555, East Washington Avenue, Las Vegas, Nevada 89101; State Library and Archives, 100 North Stewart St., Carson City, Nevada 89701; CPBN Website: <http://chirobd.nv.gov>; and Notice.nv.gov.

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Julie Strandberg, Executive Director
Chiropractic Physicians' Board of Nevada
775-688-1921

by picking up the document(s), or by mailing a written request to:

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Attention: Julie Strandberg
4600 Kietzke Lane, Suite M245
Reno, Nevada 89502

by faxing a request to: Julie Strandberg at: Facsimile No.: 775-688-1920

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Note: A request for notice lapses 6 months after it is made pursuant to NRS 241.020.3(b). Mailing a copy of the Chiropractic Physicians' Board meeting agendas will not be continued unless a request for reinstatement on the mailing list is submitted in writing every 6 months.

CHIROPRACTIC PHYSICIANS' BOARD OF NEVADA

AGENDA ACTION SHEET

TITLE: **Agenda Item 1 Public Interest Comments – No action.**

- A. Public Comment will be taken at the beginning and at the end of each Board meeting;**
- B. Public Comment may also be taken at other such times as requested so long as the request that Public Comment be taken will not interrupt ongoing Board business;**
- C. Depending on the number of individuals wishing to address the Board, a reasonable time limit may be set. The Board will not restrict comments based upon viewpoint;**
- D. No action may be taken upon a matter raised during Public Comment until the matter itself has been specifically included on an agenda as an item upon which action may be taken.**
- E. Prior to the commencement and conclusion of a contested case or a quasi-judicial proceeding that may affect the due process rights of an individual the Board may refuse to consider public comment as per NRS 233B.126.**

RECOMMENDED MOTION: **Non-Action item.**

PRESENTED BY: **Ben Lurie, DC**

MEETING DATE: **January 11, 2018**

TIME REQUIRED: **3 minutes per person per topic**

BACKGROUND INFORMATION: **The public may speak to the Board about any topic not on the agenda but no action may be taken.**

REVIEWED BY: X President X Secretary X Executive Director

ACTION: Approved Approved w/Modifications Denied Continued

CHIROPRACTIC PHYSICIANS' BOARD OF NEVADA

AGENDA ACTION SHEET

TITLE: **Agenda Item 2** Approval of Agenda – For possible action.

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RECOMMENDED MOTION: **No recommendation.**

PRESENTED BY: **Ben Lurie, DC**

MEETING DATE: **January 11, 2018**

TIME REQUIRED: **5 minutes**

BACKGROUND INFORMATION: **Agenda items may be addressed out of order to accommodate those present.**

REVIEWED BY: X President X Secretary X Executive Director

ACTION: Approved Approved w/Modifications Denied Continued

CHIROPRACTIC PHYSICIANS' BOARD OF NEVADA

AGENDA ACTION SHEET

TITLE: **Agenda Item 3** Approval of the October 12, 2017 Meeting Minutes - For possible action.

RECOMMENDED MOTION: **Approve the minutes of the October 12, 2017 meeting as drafted.**

PRESENTED BY: **Ben Lurie, DC**

MEETING DATE: **January 11, 2018**

TIME REQUIRED: **5 minutes**

BACKGROUND INFORMATION:

REVIEWED BY: X President X Secretary X Executive Director

ACTION: Approved Approved w/Modifications Denied Continued

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MEETING/HEARING MINUTES

A meeting of the Chiropractic Physicians' Board was held at the Public Utilities Commission, Room B, 9075 W. Diablo Drive, Suite 250, Las Vegas, NV 89148.

The following Board Members were present at roll call:

Benjamin Lurie, DC, President
Maggie Colucci, DC, Vice President
Jason O. Jaeger, DC, Secretary/Treasurer
Xavier Martinez, DC
Morgan Rovetti, DC
Shell Mercer, Consumer Member

Also present were CPBN Counsel Louis Ling and Executive Director Julie Strandberg. Tracy DiFillippo, Consumer Member was not present.

President, Dr. Benjamin Lurie determined a quorum was present and called the meeting to order at 8:30 a.m.

Dr. Xavier Martinez led those present in the Pledge of Allegiance. Ms. Mercer stated the purpose of the Board.

Agenda Item 1 Public Interest Comments - No action.

There was no public comment.

Agenda Item 2 Approval of agenda – For possible action.

Dr. Colucci moved to approve the agenda. Dr. Martinez seconded, and the motion passed with all in favor.

Agenda Item 3 Approval of the July 14, 2017 Meeting and August 15, 2017 Workshop Minutes. - For possible action.

Dr. Colucci moved to approve the July 14, 2017 and the August 15, 2017 minutes. Ms. Mercer seconded, and the motion passed with all in favor.

Agenda Item 4 Ratification of granting of DC licenses to applicants who passed the examination from July 15 to October 5, 2017 – For possible action.

Ms. Mercer moved to approve the ratification of granting of DC licenses to those who passed the examination from July 15 to October 5, 2017. Dr. Jaeger seconded, and the motion passed with all in favor.

Agenda Item 5 Ratification of granting of CA certificates to applicants who passed the examination on August 17, 2017 – For possible action.

Ms. Mercer moved to approve the ratification of granting of CA certificates to those who passed the examination on August 17, 2017. Dr. Jaeger seconded, and the motion passed with all in favor.

Agenda Item 6 Discussion/approval to delegate two Board Members to meet with the Physical Therapy Examiners Board representatives – For possible action.

Dr. Lurie asked that the Board delegate two Board members to meet with the Physical Therapy Board members. Dr. Jaeger, Dr. Colucci, and Dr. Rovetti expressed interest. Dr. Lurie made a motion for Dr. Jaeger to represent the CPBN. Dr. Lurie also stated that the NCC, NCA, and the Boards' lobbyist, Dan Musgrove be invited to attend. Dr. Colucci seconded, and the motion passed with all in favor. Ms. Mercer moved to approve Dr. Colucci to represent the CPBN. Dr. Lurie seconded, for discussion and stated that the January 11, 2018 agenda include the addition of a third member. The motion passed with all in favor.

Agenda Item 14 Status report regarding anonymous profiles of possible disciplinary actions. Board action will be limited to either dismissing the matter if the Board determines there is no violation, it has no jurisdiction over the subject, or providing direction to pursue the matter further – For possible action:

A. Complaint 16-08S (Jaeger)

Dr. Jaeger stated that this complainant alleged that they were billed for services not rendered. Dr. Jaeger spoke to the DC who denied the allegations and spoke to the complainant who then became unresponsive to complete the investigation. Dr. Jaeger recommended that the complaint be dismissed. Dr. Lurie moved to dismiss complaint 16-08S. Ms. Mercer seconded, and the motion passed with all in favor. Dr. Jaeger recused himself as the Investigating Board Member.

B. Complaint 16-11S (Colucci)

Dr. Colucci stated that she has been working with Mr. Ling and this complaint is still under investigation.

C. Complaint 16-12S (Colucci)

Dr. Colucci stated that this complaint involved the legality of multiple corporations which appear to be set up appropriately and recommended that the complaint be dismissed. Dr. Lurie moved to dismiss complaint 16-12S. Dr. Jaeger seconded, and the motion passed with all in favor. Dr. Colucci recused herself as the Investigating Board Member.

D. Complaint 16-13S (Lurie)

Dr. Lurie stated that this complaint will be addressed today under agenda item #7.

E. Complaint 17-02S (Lurie)

Dr. Lurie stated that he will be meeting with the DC in the next couple weeks and will have a resolution at the January 11, 2018 Board meeting.

F. Complaint 17-04N (Rovetti)

Dr. Rovetti stated that this is a malpractice claim and also stated that it is alleged that the DC didn't follow standard of care. Dr. Rovetti requested feedback from the Board on how to proceed. Following discussion, Dr. Lurie recommended that additional review be completed and Dr. Rovetti agreed.

G. Complaint 17-05N (Jaeger)

Dr. Jaeger stated that this complainant alleged that they had a stroke following their treatment. Dr. Jaeger spoke to the DC who indicated that the treatment performed could not have caused a stroke. Dr. Jaeger stated that this investigation is ongoing.

H. Complaint 17-06S (Lurie)

Dr. Lurie stated that the complainant alleged that they were billed for services not rendered. Dr. Lurie reviewed the records which matched the treatments that were performed and the billings were in accordance with the records. Dr. Lurie recommended that this complaint be dismissed. Ms. Mercer made a motion to dismiss complaint 17-06S. Dr. Jaeger seconded, and the motion passed with all in favor. Dr. Lurie recused himself as the Investigating Board Member.

I. Complaint 17-07S (Jaeger)

Dr. Jaeger stated that there was a verbal altercation between a DC and another tenant in the office complex, who filed the complaint. Dr. Jaeger interviewed witnesses treated by the DC and found that there were not appropriate SOAP notes taken on certain individuals. Dr. Jaeger met with the DC, who admitted to not completing SOAP notes at all or completing notes months later on certain patients. Dr. Jaeger recommended to dismiss this complaint with a letter of instruction. Following discussion, Dr. Lurie stated that Dr. Jaeger will take the advice of the Board to continue on with the investigation of this complaint. Mr. Ling recommended that the Board move forward with a Settlement Agreement, etc.

J. Complaint 17-08S (Lurie)

Dr. Lurie stated that the complainant indicated that they were uncomfortable with procedures that the DC recommended as well as the DC's aggression to purchase equipment for home use. Dr. Lurie stated that this case is still under investigation.

K. Complaint 17-09S (Lurie)

Dr. Lurie stated that the complainant alleged that based on their records there was fraudulent billing. Dr. Lurie reviewed the patient's records and the DC's notes which matched the patients billing. Dr. Lurie recommended that this complaint be dismissed. Dr. Martinez seconded, and the motion passed with all in favor. Dr. Lurie recused himself as the Investigating Board Member.

L. Complaint 17-10S (Jaeger)

Dr. Jaeger stated that the complainant alleged that their fiancé assaulted them while on vacation out of the country. Dr. Jaeger spoke to the DC who admitted to the details

provided by the complainant. The DC signed an agreement with the Board to be monitored by a psychologist for one year. Mr. Ling stated that this complaint is not for public consumption since the DC was not charged with a crime in the other country or in the United States. Dr. Jaeger recommended to keep this complaint open for one year and continue receiving reports from the psychologist on the DC's conduct.

M. Complaint 17-11S (Colucci)

Dr. Colucci stated that the complainant alleged that their infant contracted ringworm from a DC's unsanitary practice. Dr. Colucci visited the office, which is one open treating room and observed that the DC was not cleaning instruments or treatment tables between patients. Dr. Colucci recommended that this complaint be dismissed with a letter of instruction to the DC and that a follow-up to the DC's practice occur in six months. Dr. Lurie made a motion to dismiss complaint 17-11S. Ms. Mercer seconded, and the motion passed with all in favor. Dr. Colucci recused herself as the Investigating Board Member.

N. Complaint 17-12S (Colucci)

Dr. Colucci stated that she is working with Mr. Ling and this complaint is still under investigation.

O. Complaint 17-13S (Rovetti)

Dr. Rovetti stated that this complaint is against a repeat advertising offender and would like to get the Boards' recommendation since this DC has received warning letters and continues to violate the advertising laws. Dr. Rovetti stated that she would work with Mr. Ling.

P. Complaint 17-14S (Martinez)

Dr. Martinez stated that the complainant alleged that they were injured as a result of an adjustment and their records were altered. Dr. Martinez reviewed the patient's records and was unable to substantiate a direct correlation based on the records. Dr. Martinez held a video meeting with the DC to confirm the computer system had measures in place to document the date changes were made. Dr. Martinez recommended that this complaint be dismissed. Dr. Lurie made a motion to dismiss complaint 17-14S. Dr. Jaeger seconded, and the motion passed with all in favor. Dr. Martinez recused himself as the Investigating Board Member. Dr. Martinez recommended that another complaint be opened with respect to documentation for public protection.

Q. Complaint 17-15S (Rovetti)

Dr. Rovetti stated that the complainant alleged that the DC's newspaper advertisement was misleading as well as the treatment explanation by the DC. Dr. Rovetti reviewed the advertisement, which was compliant and spoke to the DC who provided appropriate paperwork with respect to the treatment provided. Dr. Rovetti spoke to the patient who felt they were misled, because the treatment did not help their symptoms. Dr. Rovetti recommended to dismiss this complaint with a letter in the file. Dr. Jaeger made a motion to dismiss complaint 17-15S. Dr. Lurie seconded, and the motion passed with all in favor. Dr. Rovetti recused herself as the Investigating Board Member.

Agenda Item 7 Consideration/decision related to the stipulation to modify the Settlement Agreement of Dr. David Stella – For possible action. (Note: The Board may go into closed

session pursuant to NRS 241 to consider the character, alleged misconduct, or professional competence of Dr. Stella)

Dr. Lurie turned the chair over to Ms. Mercer. Ms. Mercer welcomed Dr. Stella and asked Mr. Ling to brief the Board. Mr. Ling stated that Dr. Stella entered into a Settlement Agreement and Order with the Board effective November 2013, which included his license be on probation for three years, pay a fine, obtain a practice monitor, have a female in the room while treating female patients, obey all laws, and if there were problems there could be additional discipline. Mr. Ling stated that the Board received a complaint alleging misconduct, however following the investigation it was determined that Dr. Stella treated female patients after the office was closed, so there were no staff available and there were no records made, which constitute violations of the existing probation. Mr. Ling stated that Dr. Stella has agreed to the facts with Dr. Lurie to enter into a Stipulation to Modify the Settlement Agreement and Order.

Based on the facts, Dr. Lurie recommended that Dr. Stella continue to obtain a practice monitoring, take and pass the Nevada jurisprudence exam, pay a fine, reimburse the Board its fees and costs, three more years of probation, and have a female staff present when treating female patients. Dr. Lurie opened up questioning and comments to the Board.

Dr. Stella stated that he agreed with Mr. Ling and Dr. Lurie and would comply with the Boards' recommendations. Questioning was opened to the Board.

Dr. Jaeger made a motion to accept the modified stipulation. Ms. Mercer seconded, and the motion passed with all in favor. Dr. Lurie recused himself as the Investigating Board Member.

Dr. Jaeger made a motion that Dr. Stella undergo a psychological evaluation within 30 days, reimburse the boards' fees and costs, his license be on probation for three years, obtain a practice monitor, and that the Board have the opportunity to review the recommendations from the psychologist at the next meeting for final Settlement Agreement and Order.

Ms. Long, DAG recommended that the Board either go with the recommendation or review the results of the psychologist's evaluation at the Boards' next meeting and modify the order. Dr. Jaeger withdrew his motion. Dr. Jaeger made a motion for Dr. Stella to undergo a psychological evaluation within 30 days and at the next Board meeting a decision will be made based on the results. Dr. Jaeger modified his motion for Dr. Stella to immediately impose a practice monitor, and have a female staff person in the room while treating female patients. At the Boards' next meeting the length of the practice monitor will be determined as well as additional discipline if needed, based on the results of the psychological evaluation. Dr. Martinez seconded, and the motion passed with all in favor with the exception of Dr. Rovetti, who opposed. Dr. Lurie recused himself as the Investigating Board Member.

Ms. Mercer turned the chair back over to Dr. Lurie.

Agenda Item 8 Discussion/possible action regarding the Application for Chiropractor's Assistant of Ms. Lizbeth Sarabia - For possible action. (Note: The Board may go into closed session pursuant to NRS 241 to consider the character alleged misconduct, or professional competence of Ms. Sarabia)

Dr. Lurie welcomed Ms. Sarabia and her supervisor, Dr. Hermansen. Dr. Lurie explained that Ms. Sarabia is before the Board today for not truthfully answering, questions #3 and #4 with respect to her background on the Chiropractor's Assistant application. Dr. Lurie asked Ms. Sarabia to explain why she did not truthfully answer questions #3 and #4 on her CA application. Ms. Sarabia stated that she was embarrassed. Dr. Lurie opened up questioning to the Board. Dr. Lurie made a motion to deny Ms. Sarabia's application with the condition that she re-apply and

correctly answer questions #3 and #4 and upon the Boards' receipt of Ms. Sarabia's complete and accurate application it will be approved. Dr. Jaeger seconded, and the motion passed with all in favor with exception of Dr. Martinez, who opposed.

Agenda Item 17 Legislative Matters – For possible action.

Dan Musgrove was in attendance and provided the Board with an update following the end of the 2017 legislative session.

Agenda Item 9 PUBLIC HEARING for the adoption of a Regulation to Nevada Administrative Code Chapter 634 – For possible action.

Dr. Lurie opened the public hearing at 11:08 a.m. Dr. Lurie reviewed each section, taking public comment at the end of each section of NAC 634.

There were no public or board comments with respect to Sections 1, 2, 3, 5, 8, 9, 10, 11, 12, 14, 15 and these sections were approved with all in favor.

Dr. Overland commented on Section 4, stating that the language is not clear with respect to reciprocity for those individuals with long term licenses in other states. Dr. Lurie clarified that the Board currently has proposed NAC language which will be noticed for hearing at the Boards' January 2018 meeting. Dr. Lurie made a motion to approve Section 4 and it was approved with all in favor.

Dr. Rovetti recognized a discrepancy with the language written in Sections 6 and 7. Dr. Lurie made a motion to approve section 6 as written and it was approved with all in favor. Dr. Lurie made a motion to strike 634.341 (1) (b) (1) in Section 7 and the revision was approved with all in favor.

Dr. Rovetti inquired whether the language in Section 13 was clear as to who was responsible for the content of the advertisement and following discussion Mr. Ling recommended to strike the second "of" in Section 13(3) and replace with, "that identifies." Dr. Lurie made a motion to remove the second "of" in Section 13(3) and replace with, "that identifies" and the revision was approved with all in favor.

The public hearing closed at 11:55 a.m.

Agenda Item 10 Discussion/approval regarding the use of Extracorporeal Shock Wave Therapy - For possible action.

Dr. Lurie stated that this request came from a Nevada licensee and welcomed Dr. Shana Singer. Dr. Singer introduced Ulyss Bidkaram, DC who provided an explanation of the Extracorporeal Shock Wave Therapy device. Dr. Bidkaram stated that this device is a class I modality that targets shock waves directly to the area that is experiencing pain and is FDA approved. Dr. Lurie stated that the Board will not take a position on the device, however made a motion that the device does fall under physiotherapy. The motion passed with Drs. Rovetti, Martinez, Lurie, and Colucci in favor. Dr. Jaeger abstained and Ms. Mercer stated that she did not feel qualified to comment.

R. Complaint 17-16S (Jaeger)

Dr. Jaeger stated that the complainant was referred to the DC for a shoulder/scapular condition, however received an adjustment to the lower back, which resulted in damage to the lower back which resulted in them being disabled. Dr. Jaeger met with the DC and reviewed the patient's records and all data indicated there was treatment to the neck and thoracic spine region. Based on the information received, there is no way to substantiate

either statement. Dr. Jaeger recommended that this complaint be dismissed. Dr. Lurie moved to dismiss Complaint 17-16S. Dr. Colucci seconded, and the motion passed with all in favor. Dr. Jaeger recused himself as the Investigating Board Member.

S. Complaint 17-18S (Jaeger)

Dr. Jaeger stated that the complainant alleged that the DC's staff told them that they had to prepay for their care. Dr. Jaeger stated that this complaint is still under investigation.

T. Complaint 17-20S (Lurie)

Dr. Lurie stated that this complaint was received from an insurance company and is still under investigation.

U. Complaint 17-21S (Rovetti)

Dr. Rovetti stated that this complaint is against a repeat advertising offender who does not refer to themselves as a chiropractor in radio advertisements and has received warning letters, yet continues to violate the advertising laws. Dr. Rovetti stated that she will work with Mr. Ling to finalize this complaint.

V. Complaint 17-22N (Rovetti)

Dr. Rovetti stated that the complainant alleged that the DC billed their insurance and billed the patient for the same charges. Dr. Rovetti stated that she reviewed the records and the patient signed a form indicating that insurance may not cover all charges and the patient would be responsible for the difference. Dr. Rovetti recommended to dismiss this complaint. Dr. Colucci moved to dismiss complaint 17-22N. Ms. Mercer seconded, and the motion passed with all in favor.

W. Complaint 17-23S (Colucci)

Dr. Colucci stated that this complaint is still under investigation.

X. Complaint 17-24S (Jaeger)

Dr. Jaeger stated that the complainant stated that a former employee alleged that a DC was selling and using marijuana out of the office and instructing staff to sell marijuana to patients. Dr. Jaeger had a discussion with the DC and asked that they voluntarily submit to a drug testing, which they said they would do. Dr. Jaeger stated that this complaint is ongoing.

Y. Complaint 17-25S (Martinez)

Dr. Martinez stated that this complainant states they were sold a wellness package and later denied services. Dr. Martinez stated that this complaint is still under investigation.

Z. Complaint 17-26S (Colucci)

Dr. Colucci stated that this complaint is against the same DC named in complaint 17-23S and is still under investigation.

AA. Complaint 17-27S (Jaeger)

Dr. Jaeger stated that this complainant was under the care of several doctors and alleged that the treating chiropractor was racist, prejudice, and hateful. Dr. Jaeger spoke with a witness named by the complainant and found out the complainant also filed a complaint

against them. Dr. Jaeger stated that he has attempted to reach out to the complainant with no response. Dr. Jaeger stated that this complaint is on-going.

BB. Complaint 17-28S (Lurie)

Dr. Lurie stated that the Board received notification from the National Practitioners Data Bank that a DC settled a malpractice suit, however the DC did not notify the Board. Dr. Lurie stated that this complaint is still under investigation.

CC. Complaint 17-29S (Lurie)

Dr. Lurie stated that this complaint was received from a CE provider regarding a CA who paid for their courses using a fraudulent credit card. Dr. Lurie has attempted to contact the CA, however was unable to reach them. Dr. Lurie stated that this complaint would be re-opened if the CA reinstates their certificate.

Agenda Item 12 Consideration to approve the application for Temporary Licensure for Dr. Daniel McClure – For possible action.

Dr. McClure joined via telephone to discuss why he failed to disclose information to questions #4 and #5 on the application for temporary licensure. Dr. McClure stated that it was an oversight since these incidents occurred quite some time ago. Following discussion, Dr. Jaeger made a motion to deny the current application, however Dr. McClure may submit a new application. Dr. Rovetti seconded the motion. Dr. Jaeger amended his motion to give latitude on the 30 day application period. Dr. Rovetti seconded, and the motion passed with all in favor. Dr. Colucci recused herself due to her involvement with ProSport.

Agenda Item 11 Discussion/approval regarding the use of Bio-Electro-Magnetic-Energy-Regulation (BEMER) – For possible action.

Chris Enomoto and Pamela Clark were present from BEMER to provide an explanation on how the equipment is used and what it is used for. Dr. Enomoto explained that BEMER is a Class I electro-magnetic device that enhances general blood circulation and is FDA approved. Dr. Rovetti recommended that this device be classified as physiotherapy. Following discussion, Dr. Lurie stated that the Board will not take a position on the device, however it does fall under physiotherapy.

Agenda Item 13 Consideration for the CPBN to contract or hire former Board member to assist with investigations or management of investigations – For possible action.

Dr. Lurie stated that a past Board member requested this agenda item based on the increased number of complaints before the Board and offered to provide their service for a fee. The Board discussed different options to address complaints more timely and to potentially hire an investigator. Dr. Lurie recommended obtaining proposals from outside investigators and bring them before the Board at its next meeting.

Agenda Item 18 NCA Report – No action.

Dr. Overland was in attendance and thanked Ms. Mercer for her commitment to the Board. Dr. Overland stated that the NCA donated two and half car loads of goods to those in need following the Las Vegas tragedy. Dr. Overland stated that the NCA has reached out to the President of the Physical Therapy Board and will be holding a meeting along with representatives from the CPBN to discuss their concerns. Dr. Overland stated that the State of Washington allows Physical Therapists to perform chiropractic adjustments. Dr. Overland stated that there is a new pseudo-

profession called myopractic, which consists of a massage therapist doing deep tissue, muscular rehabilitation to provide spinal realignment without the crunch and is similar to chiropractic and osteopractic. Dr. Overland asked that the CPBN reach out to the massage therapy Board regarding licensed massage therapists conducting myopractic. Dr. Overland stated that the NCA has been contacted by several DC's regarding dry needling and would like to discuss adding dry needling into the scope of a chiropractic. Dr. Overland stated that due to the number of complaints before the Board the NCA would be willing to conduct seminars to address specific issues identified by the Board. Dr. Overland stated that the NCA's lobbyist has attended the Healthcare committee meetings regarding the opioid issue and has been given assurance that chiropractic would be involved. Dr. Overland stated that the NCA has been a member of the Health Education Advocacy Leaders of Southern Nevada (HEALS) which was given \$10 Million by the Governor's Office of Economic Development to strengthen medical care and retain medical doctors. Dr. Overland stated that Senator Spearman was the guest speaker, who stated that chiropractic needs to be involved with respect to the opioid epidemic. Dr. Overland stated that the NCA received a Governors proclamation announcing that October is chiropractic health month. Dr. Overland stated that the annual NCA conference held in Reno was successful and presented the Chiropractor of the Year award to Dr. Xavier Martinez and the Presidential award was presented to Dr. Benjamin Lurie. Dr. Overland stated that the NCA would like to work closely with the Board moving forward.

Agenda Item 19 NCC Report – No action.

Andrea Waller and Dr. Nicole Harmel were in attendance on behalf of the NCC. Ms. Waller stated that the NCC will hold its 2nd annual seminar on Saturday, October 21, 2017 and announced the speakers. Dr. Harmel stated that the ACA has adopted a position that radiology is not necessary for up to six weeks following the onset of acute pain and stated that the NCC has adopted a position to consider the necessity of radiology.

Agenda Item 16 Board Counsel Report – No action.

Mr. Ling reported on the FARB conference and thanked the Board for its contribution to his trip.

Agenda Item 15 Committee Reports

A. Continuing Education Committee (Dr. Martinez) – For possible action.

Dr. Martinez stated the process is going well.

B. Legislative Committee (Dr. Lurie) – For possible action.

Dr. Lurie stated that he will be meeting with Dan Musgrove on Friday, October 13, 2017.

C. Preceptorship Committee (Dr. Rovetti) – For possible action.

Dr. Rovetti reported that there is one active preceptor in Carson City and two in Las Vegas. Dr. Rovetti stated that she would like to plan a trip to Las Vegas to visit the preceptors. Dr. Rovetti made a motion for the Board to approve her travel to Las Vegas to visit the active preceptors. Dr. Martinez moved to approve. Following discussion, Dr. Jaeger recommended that Dr. Rovetti conduct site visits in the north and a southern Board member conduct those in the south. Dr. Colucci recommended that Dr. Rovetti coordinate her preceptor visit in coordination with a Board meeting. Dr. Rovetti voted in favor of the motion. Dr. Martinez, Dr. Jaeger, Dr. Lurie, Ms. Mercer, and Dr. Colucci opposed, so the motion did not carry.

D. Test Committee (Dr. Colucci) - For possible action.

Dr. Colucci stated that the CA's continue to not do well on the exam and the Board needs to come up with a solution. Dr. Lurie stated that the CA exam be added to the next Board meeting agenda.

Agenda Item 28 Establish dates for future Board meeting(s) – For possible action.

Dr. Jaeger made a motion to set the January 2018 Board meeting for the 11th. Dr. Lurie seconded, and the motion passed with all in favor. Dr. Lurie made a motion to set the April 2018 Board meeting for the 19th. Dr. Jaeger seconded, and the motion passed with all in favor. Dr. Lurie made a motion to set the July 2018 Board meeting for the 19th. Dr. Jaeger seconded, and the motion passed with all in favor. Dr. Lurie made a motion to set the October 2018 Board meeting for the 18th, Dr. Rovetti seconded, and the motion passed with all in favor.

Agenda Item 25 Consideration to revise the Board policies to allow rental car reimbursement – For possible action.

Dr. Rovetti stated that she was not reimbursed for her rental car rented for the January 13, 2017 Board meeting and referred to the existing travel policy and stated that she feels the Board should cover the cost of transportation to and from the Board meeting. Dr. Rovetti made a motion to allow all reasonable forms of transportation be approved by the Board. Mr. Ling stated that if a rental car is needed while on state business the car must be rented through the states Fleet Services Division and recommended that the travel policy be revised.

Dr. Lurie moved to reimburse Dr. Rovetti for her rental car rented for the January 13 and October 12, 2017 Board meetings. Dr. Jaeger seconded, and the motion passed with all in favor.

Agenda Item 20 Executive Director Reports:

A. Status of Pending Complaints – No action.

B. Status of Current Disciplinary Actions – No action.

C. Legal/Investigatory Costs – No action.

Julie Strandberg gave an overview of the Executive Director reports and reported that Mr. Heriberto Soltero had satisfied his Board Order and would no longer appear on the status of current disciplinary actions report.

Agenda Item 21 Financial Status Reports:

A. Current cash position & projections – No action.

B. Accounts Receivable Summary – No action.

C. Accounts Payable Summary – No action.

D. Employee Accrued Compensation – No action.

E. Income/Expense Actual to Budget Comparison as of August 31, 2017 – No action.

F. Income/Expense Actual to Budget Comparison for Fiscal Year 2017 – No action.

Julie Strandberg gave an overview of the Executive Director reports.

Agenda Item 22 Consideration of potential additions, deletions, and/or amendments to NRS 634 and NAC 634 – For possible action.

A. Mandatory Self-Inspection report

B. Fines for not meeting deadlines. i.e. Self-Inspection

C. Automatic suspension for late renewal

D. Fine for untimely submission of a CA's second application

Dr. Lurie tabled this agenda item until the January 11, 2018 Board meeting.

Agenda Item 23 Discussion regarding healthcare radiation standards – For possible action.

Dr. Lurie tabled this agenda item until the January 11, 2018 Board meeting.

Agenda Item 24 Consideration/approval of the revised Chiropractor's Assistant Application – For possible action.

Dr. Lurie moved to approve the revisions to the CA application and recommended the same revisions be added to the DC application for licensure. Dr. Jaeger seconded, and the motion passed with all in favor.

Agenda Item 26 FCLB/NBCE Matters/Updates – For possible action.

A. Update on the FCLB Districts I and IV meeting in Portland, OR October 5-8, 2017.

B. Other FCLB/NBCE matters.

Dr. Lurie tabled this agenda item until the January 11, 2018 Board meeting.

Agenda Item 27 Attendance at the Annual FARB Forum, January 25-28, 2018 Coronado, CA – For possible action.

Dr. Lurie made a motion to allow Ms. DiFillippo attend the FARB conference if she is available. Dr. Rovetti seconded and the motion passed with all in favor.

Agenda Item 29 Discussion/approval of Nevada Deferred Compensation Program – For possible action.

Julie Strandberg asked for the Boards' approval of the contract for Board staff to enroll in the Nevada Deferred Compensation Program. Dr. Lurie made a motion to approve the contract. Dr. Jaeger seconded, and the motion passed with all in favor.

Agenda Item 30 Discussion regarding proposed revisions to the CCE Accreditation Standards - For possible action.

Dr. Lurie tabled this agenda item until the January 11, 2018 Board meeting.

Agenda Item 31 Correspondence Report – No action.

Dr. Lurie tabled this agenda item until the January 11, 2018 Board meeting.

Agenda Item 32 Board Member Comments – No action.

Dr. Lurie announced that this is Ms. Mercer's eighth year on the Board and expressed his gratitude of Ms. Mercer's service and the rest of Board concurred. The Board congratulated Dr. Martinez on his award from the NCA for Chiropractor of the Year.

Dr. Jaeger stated that he would like the Board to have a discussion regarding marijuana due to the complaints that are surfacing.

Dr. Lurie announced that John Bertoldo, Esq. has been appointed to the Board.

Agenda Item 33 Public Interest Comments – No action.

Dr. Overland recommended that the Board provide coffee or water at the meetings.

Agenda Item 34 Adjournment – For possible action.

Dr. Jaeger moved to adjourn the meeting. Ms. Mercer seconded, and the motion passed unanimously.

January 11, 2018

Jason O. Jaeger, DC, Secretary/Treasurer

CHIROPRACTIC PHYSICIANS' BOARD OF NEVADA

AGENDA ACTION SHEET

TITLE: **Agenda Item 4** Welcome New Board Member – No action

RECOMMENDED MOTION: **Non-Action item.**

PRESENTED BY: **Dr. Ben Lurie**

MEETING DATE: **January 11, 2018**

TIME REQUIRED: **5 minutes**

BACKGROUND INFORMATION: **Welcome John L. Bertoldo, Esq.**

REVIEWED BY: X President X Secretary X Executive Director

ACTION: Approved Approved w/Modifications Denied Continued

CHIROPRACTIC PHYSICIANS' BOARD OF NEVADA

AGENDA ACTION SHEET

TITLE: Agenda Item 5 Ratification of granting of DC licenses to applicants who passed the examinations from July to August 2017 – For possible action

RECOMMENDED MOTION: Ratify granting of licenses to those who passed their examinations from October to December 2017.

PRESENTED BY: Ben Lurie, DC

MEETING DATE: January 11, 2018

TIME REQUIRED: 2 minutes

BACKGROUND INFORMATION: The exams from October through December 31, 2017 were taken online.

<u>October</u>	<u>November</u>	<u>December</u>
Chris F. Koeven, DC	Sarah A. Fulco, DC	Jeffrey D. Prince, DC
Tyler A. Myrick, DC	Jesse L. Grove, DC	Eric R. Shane, DC
	Jarina M. Kong, DC	Simeon A. Siahmakoun, DC

REVIEWED BY: X President X Secretary X Executive Director

ACTION: Approved Approved w/Modifications Denied Continued

CHIROPRACTIC PHYSICIANS' BOARD OF NEVADA

AGENDA ACTION SHEET

TITLE: Agenda Item 6 Discussion/possible approval to delegate a third Board Member to meet with representatives of the Physical Therapy Examiners Board – For possible action.

RECOMMENDED MOTION: No recommendation

PRESENTED BY: Ben Lurie, DC

MEETING DATE: January 11, 2018

TIME REQUIRED: 10 minutes

BACKGROUND INFORMATION: At the October 11, 2017 Board meeting Dr. Jaeger and Dr. Colucci were delegated to meet with representatives of the PT Board. Following discussion it was determined to possibly add a third Board Member to discuss the on-going issues between the CPBN and the PT Board.

REVIEWED BY: X President X Secretary X Executive Director

ACTION: _____ Approved _____ Approved w/Modifications _____ Denied _____ Continued

CHIROPRACTIC PHYSICIANS' BOARD OF NEVADA

AGENDA ACTION SHEET

TITLE: Agenda Item 7 – Consideration/decision related to the stipulation to modify the Settlement Agreement of Dr. David Stella – For possible action. (Note: The Board may go into closed session pursuant to NRS 241 to consider the character, alleged misconduct, or professional competence of Dr. Stella)

RECOMMENDED MOTION: No recommendation

PRESENTED BY: Ben Lurie, DC

MEETING DATE: January 11, 2018

TIME REQUIRED: 10 minutes

BACKGROUND INFORMATION: At the October 11, 2017 the Board voted that Dr. Stella undergo a psychological evaluation and return before the Board at its January meeting to determine disciplinary action based on the results of the evaluation.

REVIEWED BY: X President X Secretary X Executive Director

ACTION: Approved Approved w/Modifications Denied Continued

BRIAN SANDOVAL
Governor
BENJAMIN LURIE, DC
President
MAGGIE COLUCCI, DC
Vice President
JASON O. JAEGER, DC
Secretary-Treasurer

STATE OF NEVADA



CHIROPRACTIC PHYSICIANS
BOARD OF NEVADA

DEC 26 2017

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RENO, NEVADA 89502

XAVIER MARTINEZ, DC
Member
MORGAN ROVETTI, DC
Member
TRACY DiFILLIPPO, ESQ
Consumer Member
JOHN L. BERTOLDO, ESQ
Consumer Member

JULIE STRANDBERG
Executive Director

CHIROPRACTIC PHYSICIANS' BOARD OF NEVADA

4600 Kietzke Lane, M-245
Reno, Nevada 89502-5000
Fax (775) 688-1920

Telephone (775) 688-1921
Website: <http://chirobd.nv.gov>

Email: chirobd@chirobd.nv.gov

CERTIFICATE OF SERVICE AND

WAVIER OF THE 21-DAY PERIOD

I hereby certify that I have received a copy of the foregoing letter regarding my appearance before the Board at its January 11, 2018 meeting related to my stipulation to modify the Settlement Agreement and that I understand that by signing this Certificate of Service I acknowledge that I have received valid service and notice of the same and that the Board may proceed to consider and rule upon my matter pursuant to the Nevada Open Meeting Law.

Signed this 26 day of December, 2017.

A handwritten signature in black ink, appearing to read "David A. Stella", written over a horizontal line.
DAVID A. STELLA

Fax signed form to (775) 688-1920 or e-mail to chirobd@chirobd.nv.gov.

SAID BOARD MEETING TO BE HELD at the following date, time, and place:

January 11, 2018

Hearing to be conducted at 8:45 a.m.

Public Utilities Commission

Room B

9075 W. Diablo Drive, Suite 250

Las Vegas, NV 89148

1 **BEFORE THE CHIROPRACTIC PHYSICIANS' BOARD OF NEVADA**

2
3 **IN THE MATTER OF:**)

Case No. 13-10S

4 **DAVID STELLA, D.C.,**)
5 **License No. B753,**)
6 **TO**)

SUPPLEMENTAL STIPULATION

Respondent.)

**MODIFY SETTLEMENT AGREEMENT
AND ORDER**

7
8 **I. PROCEDURAL HISTORY**

9 On November 16, 2013, the Board entered a Settlement Agreement and Order (SAO) in
10 this matter. By the SAO, the Board agreed to a resolution of a matter involving an admitted
11 sexual relationship between Dr. Stella and one of his patients from December 2010 through
12 May 2011. Dr. Stella agreed to discipline that involved three-years' probation with terms and
13 conditions and the payment of fines and fees and costs.

14 On March 5, 2015, the Board entered an Order Modifying Settlement Agreement and
15 Order by which the Board agreed to modify the SAO to allow Dr. Stella a longer period of time
16 to pay the then outstanding balance due of the fine (\$16,000.00) at the rate of \$500.00 per
17 month. To date, Dr. Stella has fully satisfied the fine ordered in the SAO.

18 **II. STIPULATED BACKGROUND FOR THE MODIFICATION SOUGHT HEREIN**

19 1. Among the terms and conditions of Dr. Stella's probation ordered in the SAO are the
20 following that are at issue in the present matter:

21 4. Dr. Stella's chiropractic license (License No. B753) shall be on
22 probation for a period of three years from the effective date of this Settlement
23 Agreement and Order subject to the following terms and conditions:

24 (a) In Room Staff Member for Female Patients. Throughout the
25 period of probation, Dr. Stella may not interview, treat, or otherwise
26 interact with a female patient without another member of Dr. Stella's staff
27 also being present in the room with Dr. Stella and the patient. At no time
28 will Dr. Stella be alone with a female patient at his practice.

(e) Obey All Laws. Dr. Stella shall obey all laws related to the
practice of chiropractic medicine, whether state or federal and whether
statutory or by regulation.

1 8. In the event the IBM is presented with information reasonably
2 indicating that Dr. Stella has failed to materially comply with any term of this
3 Settlement Agreement, the IBM shall inform Dr. Stella of what he believes to
4 constitute the non-compliance and shall give Dr. Stella no more than ten days to
5 respond to the IBM describing what actions he intends to take to remedy the
6 non-compliance. If Dr. Stella cannot or does not satisfy the IBM with his
7 response, the IBM may take such action as he deems necessary to assure
8 compliance by Dr. Stella, which may include but is not limited to negotiating a
9 resolution or amendment to this Settlement Agreement and Order, summarily
10 suspending Dr. Stella's license, commencing additional disciplinary action, or
11 taking any other administrative or legal action the IBM deems necessary to
12 effectuate compliance with this Settlement Agreement and Order. Board Staff
13 may take any and all actions it deems necessary to collect any sums ordered that
14 remain unpaid. If Board Staff is required to pursue judicial action to effect such
15 collections, it shall be entitled to recover its attorney's fees and costs incurred in
16 pursuing such judicial action.

17 2. In February 2016 – at a time when Dr. Stella was still subject to the terms and
18 conditions of the three-year probation ordered in the SAO – Dr. Stella was visited at his
19 office by a woman who will be referred to as Patient B, and Patient B had with her her
20 daughter. Dr. Stella had met Patient B a few weeks earlier at a New Year's Eve Party,
21 and they had established a friendly relationship thereafter by telephone and texts. At
22 the time that Patient B and her daughter visited Dr. Stella's office, his staff had left for
23 the evening. Dr. Stella did not have Patient B or her daughter sign in as patients and did
24 not have them fill out any of the forms routinely required of new patients. Dr. Stella
25 examined Patient B and her daughter, and based upon his examination, he
26 chiropractically adjusted Patient B and her daughter and he prescribed two supplements
27 to Patient B for stomach issues. Additionally, Dr. Stella allowed Patient B to use the
28 office's laser for "fat removal." Dr. Stella made no patient records related to Patient B or
her daughter, and there was no other member of Dr. Stella's staff present in the room
when Dr. Stella saw and treated Patient B and her daughter.

1 3. The examination and treatment of Patient B and her daughter in paragraph #2
2 was the only treatment Dr. Stella provided to Patient B and her daughter. Thereafter,
3 Dr. Stella engaged in a brief dating and sexual relationship with Patient B. Dr. Stella
4 claims that a no time after the personal relationship began with Patient B did he treat

1 4. Dr. Stella admits that his examinations and treatments of Patient B and her daughter
2 occurred at a time when none of his staff were present, and, therefore, that these
3 examinations and treatments constitute violations of paragraph 4(a) of the SAO (quoted
4 above) and, therefore, constitute violations of Nevada Revised Statutes (NRS)
5 634.140(1) and NRS 634.018(10) and NRS 634.018(17). Dr. Stella acknowledges that
6 his examination and treatment of Patient B and his examination and treatment of
7 Patient B's daughter each constitute separate bases for discipline.

8 5. Dr. Stella admits that his failure to create and maintain medical records
9 regarding his examinations and treatments of Patient B and her daughter constitute
10 violations of paragraph 4(e) of the SAO (quoted above) and, therefore, constitute
11 violations of NRS 634.140(1) and NRS 634.018(10) and NRS 634.018(17) and Nevada
12 Administrative Code (NAC) 634.435(1). Dr. Stella acknowledges that his failure to make
13 and maintain records of his examination and treatment of Patient B and his failure to
14 make and maintain records of his examination and treatment of Patient B's daughter
15 each constitute separate bases for discipline.

16 6. Dr. Stella agrees and acknowledges that the above violations occurred while he
17 was subject to the terms and conditions of the SAO and that, therefore, he is and should
18 be subject to additional discipline pursuant to the SAO and as agreed to herein.

19 **III. STIPULATED PROCESS FOR THE MODIFICATION**
20 **TO THE SETTLEMENT AGREEMENT AND ORDER**

21 THE PARTIES DO HEREBY AGREE as a result of the admissions and
22 acknowledgements contained in paragraphs 1 through 6 above that Dr. Stella should be
23 subject to additional discipline as it may be imposed by the Board. The parties agree that they
24 will present this Stipulation to the Board at its meeting in October 2017 and that both parties
25 may make presentations and arguments to the Board related to the discipline each believes to
26 be appropriate under the facts and circumstances contained in this Stipulation. Both parties
27 agree that the Board may question either party during any such presentations and arguments
28

1 and that the Board may thereafter and with due deliberation impose any additional discipline
2 available to the Board pursuant to NRS 634.190 as the Board deems just and

3 ///

4 ///

5 ///

6 ///

7 necessary. The parties acknowledge that the result of the Board's deliberation will be a written
8 modification to the Settlement Agreement and Order already governing Dr. Stella and his
9 practice.

10 Signed this 11 day of September, 2017.

11 Respondent David Stella, D.C.
12 Nevada

Chiropractic Physicians' Board of

13
14 By David A. Stella D.C.

15 David Stella, D.C., Respondent

By Benjamin S. Larie

Benjamin S. Larie, D.C.
Investigating Board Member

CHIROPRACTIC PHYSICIANS' BOARD OF NEVADA

AGENDA ACTION SHEET

TITLE: **Agenda Item 8** – Consideration/decision related to the application for DC licensure for Braheem Zaki Tolbert, DC - For possible action. (Note: The Board may go into closed session pursuant to NRS 241 to consider the character alleged misconduct, or professional competence of Dr. Tolbert.)

RECOMMENDED MOTION: **No recommendation.**

PREPARED BY: **Ben Lurie, DC**

MEETING DATE: **January 11, 2018**

TIME REQUIRED: **10 Minutes**

BACKGROUND INFORMATION: **Please see attached.**

REVIEWED BY: X President X Secretary X Executive Director

ACTION: Approved Approved w/Modifications Denied Continued

Agenda Item 8

BRIAN SANDOVAL
Governor
BENJAMIN LURIE, DC
President
MAGGIE COLUCCI, DC
Vice President
JASON O. JAEGER, DC
Secretary-Treasurer

STATE OF NEVADA



XAVIER MARTINEZ, DC
Member
MORGAN ROVETTI, DC
Member
TRACY DIFILLIPPO, ESQ
Consumer Member
JOHN BERTOLDO, ESQ
Consumer Member

JULIE STRANDBERG
Executive Director

CHIROPRACTIC PHYSICIANS' BOARD OF NEVADA

4600 Kietzke Lane, M-245
Reno, Nevada 89502-5000
Fax (775) 688-1920

Telephone (775) 688-1921
Website: <http://chirobd.nv.gov>

Email: chirobd@chirobd.nv.gov

December 11, 2017

CERTIFIED MAIL NO. 7012 3460 0001 6576 3249

Braheem Tolbert, DC
300 Addison Way #5-1A
Petersburg, VA 23805

Re: Hearing on New Application for DC License

Dear Dr. Tolbert,

On September 8, 2017 we received your application for licensure with this Board. We have reviewed your application and accompanying materials and we are notifying you that your application will be reviewed by the Board at the following date, time, and place:

January 11, 2018 at 9:30 a.m.
Public Utilities Commission, Room B
9075 W. Diablo Drive, Suite 250
Las Vegas, NV 89148

The purpose of the application review by the Board will be to determine whether the Board will grant or deny your application and whether, if the application is granted, any conditions, restrictions, or limitations on the certificate are appropriate. Please be aware that in accordance with Nevada Revised Statutes (NRS) 241.033(4), the Board may go into a closed session to discuss your application.

Our review of your application indicates that there may be grounds for denial or other action related to your application pursuant to NRS 634.090(1)(a) because you may be found to lack the requisite "good moral character" pursuant to the following specific statutes or regulations:

NRS 634.018(10) ("conduct . . . detrimental to the best interests of the public;");
NRS 634.018(17) ("violating . . . any of the provisions of this chapter or any regulation adopted pursuant thereto"); and/or

Nevada Administrative Code (NAC) 634.430(1)(h) ("giving false information to the Board").

The President of the Board requests your presence at the January 11, 2018 Board meeting at 9:30 a.m. so that the Board may consider approval of your application.

Please be aware that you **must** appear in person when the Board reviews your matter. You may be represented by counsel of your choice. The Board will have a copy of this letter and the contents of your licensure application file to review. You may submit any materials, documents, or statements in support of your application to this office, but they must be received no later than **January 1, 2018** in order to be presented to the Board for its review. Please understand that you bear the burden of proving to the Board that the issuance of a certificate to you is in the best interest of the public health, safety, and general welfare of the people of Nevada. Also, please understand that although you will receive a full, fair, and unbiased review of this matter by the Board, this is not a contested case subject to the provisions of NRS chapter 233B.

If you have any questions, please feel free to contact me at 775-688-1923.

Sincerely,

A handwritten signature in black ink, appearing to read "Julie Strandberg", with a large, stylized flourish extending from the end of the signature.

Julie Strandberg
Executive Director

BRAHEEM ZAKI TOLBERT, DC

Doctor of Chiropractic Degree

March 2014

Life University College of Chiropractic

Examination

Dr. Tolbert passed the National Board of Chiropractic Examiners Examination Parts I through IV and Physiotherapy in 2014.

History and Timeline:

July 18, 2014 to October 25, 2017: Dr. Tolbert was licensed as a Doctor of Chiropractic in Virginia until he signed a voluntary permanent surrender his license on October 25, 2017

July 20, 2017 to December 31, 2019: Dr. Tolbert is actively licensed as a Doctor of Chiropractic in Colorado.

January 24, 2017: Dr. Tolbert received a Notice of Informal Conference and Statement of Allegations.

March 8, 2017: Dr. Tolbert appeared before the Committee and they voted to place the license of Dr. Tolbert on certain terms and conditions.

April 17, 2017: Dr. Tolbert requested a formal hearing.

July 18, 2017: Dr. Tolbert received a Notice of Formal Administrative Hearing and Statement of Allegations.

August 9, 2017: The Virginia Board of Medicine sent correspondence to Dr. Tolbert stating that this matter was continued by the Board.

September 8, 2017: Dr. Tolbert was sent notification that his formal hearing would be held on Saturday, October 28, 2017

October 25, 2017: Dr. Braheem Tolbert signed a Consent Order to accept a Voluntary Permanent Surrender.

Reasons for Board Appearance

Pursuant to NAC 634.3475 (1)(u):

NAC 634.3475 “Detrimental to the best interests of the public” interpreted. ([NRS 634.030](#))

1. As used in subsection 10 of [NRS 634.018](#), the Board will interpret the phrase “detrimental to the best interests of the public” as applied to a chiropractor’s assistant to include, without limitation:

(u) The suspension or revocation of a license or certificate or other disciplinary action taken by another state against the chiropractor’s assistant based on a license or certificate issued by that state for an act that would constitute grounds for disciplinary action in this State. A certified copy of the suspension, revocation or other disciplinary action taken by another state against the chiropractor’s assistant based on a license or certificate issued by that state is conclusive evidence of that action.

Braheem Tolbert

Page 2

State Licensure

Dr. Tolbert currently holds a license in Colorado and is active and in good standing.

The Federation of Chiropractic Licensing Boards and the National Practitioner Data Bank do not reflect any derogatory information.

***Chiropractic Physicians' Board of Nevada
January 11, 2018***

Application for Activation of
License to Practice Chiropractic
in the State of Nevada

2" x 2"
PHOTO
HERE

CHIROPRACTIC PHYSICIANS' BOARD OF NEVADA
4600 KIETZKE LANE, SUITE M-245
RENO, NV 89502

CHIROPRACTIC PHYSICIANS'
BOARD OF NEVADA

**APPLICATION FOR LICENSE AS A DOCTOR OF CHIROPRACTIC
IN THE STATE OF NEVADA**

SEP 21 2017

RECEIVED
RENO, NEVADA 89502

PLEASE NOTE: FAILURE TO ANSWER ALL QUESTIONS COMPLETELY AND TRUTHFULLY WILL RESULT IN
DENIAL OF THIS APPLICATION. THE FEES ARE NOT REFUNDABLE.

PRINT OR TYPE:

1. FULL NAME Braheem Zaki Tolbert AGE 36 SEX Male
(FIRST) (MIDDLE) (LAST)
2. ALIASES _____
3. HOME ADDRESS 300 Addison Way # 5-1A
CITY Petersburg STATE VA ZIP 23805
4. MAILING ADDRESS Same as above
CITY _____ STATE _____ ZIP _____ WORK EMAIL Braheem.Tolbert@gmail.com
5. SOCIAL SECURITY NO. _____ TELEPHONE NO. 804-444-5423
6. DATE OF BIRTH _____ PLACE OF BIRTH Philadelphia, PA
7. ARE YOU A UNITED STATES CITIZEN? YES ☒ NO _____ IF YOU ANSWERED NO ARE YOU: (PLEASE CHECK ONE OF THE FOLLOWING.)
☐ A QUALIFIED ALIEN (AS DEFINED IN 8 U.S.C.A. § 1641).
☐ A NONIMMIGRANT UNDER THE IMMIGRATION AND NATIONALITY ACT (8 U.S.C.A. § 1101 et seq).
☐ AN ALIEN WHO IS PAROLED INTO THE UNITED STATES UNDER 8 U.S.C.A. § 1182(d)(5) FOR LESS THAN ONE YEAR.
☐ A FOREIGN NATIONAL NOT PHYSICALLY PRESENT IN THE UNITED STATES.
☐ OTHER - PLEASE PROVIDE DETAILED EXPLANATION.
RECEIVED
RENO, NEVADA 89502
8. RESIDENT OF THE STATE OF NEVADA? NO IF YES, HOW LONG? _____
9. DO YOU HAVE A NEVADA BUSINESS LICENSE? YES _____ NO ☒ IF YES, PROVIDE YOUR LICENSE NUMBER _____
10. HAVE YOU EVER SERVED IN THE MILITARY? YES ☒ NO _____ DATES OF SERVICE: FROM 9-1999 TO 8-2005
BRANCH(ES) OF SERVICE US Army Reserve
11. HAVE YOU EVER SERVED ON ACTIVE DUTY IN THE ARMED FORCES OF THE UNITED STATES AND SEPARATED FROM SUCH SERVICE UNDER CONDITIONS OTHER THAN DISHONORABLE? _____ YES ☒ NO
12. HAVE YOU EVER BEEN ASSIGNED TO DUTY FOR A MINIMUM OF 6 CONTINUOUS YEARS IN THE NATIONAL GUARD OR A RESERVE COMPONENT OF THE ARMED FORCES OF THE UNITED STATES AND SEPARATED FROM SUCH SERVICE UNDER CONDITIONS OTHER THAN DISHONORABLE? _____ YES ☒ NO
13. HAVE YOU EVER SERVED THE COMMISSIONED CORPS OF THE UNITED STATES PUBLIC HEALTH SERVICE OR THE COMMISSIONED CORPS OF THE NATIONAL OCEANIC AND ATMOSPHERIC ADMINISTRATION OF THE UNITED STATES IN THE CAPACITY OF A COMMISSIONED OFFICER WHILE ON ACTIVE DUTY IN DEFENSE OF THE UNITED STATES AND SEPARATED FROM SUCH SERVICE UNDER CONDITIONS OTHER THAN DISHONORABLE? _____ YES ☒ NO
14. RESIDENCE ADDRESSES FOR PAST FIVE (5) YEARS 300 Addison Way # 5-1A Petersburg, VA 23805;
15104 Lane Petersburg, VA 23805; 1601 River Rock Rd #1236 Chester, VA 23836
2727 St Augustine Trail Marietta GA, 30067
15. NAMES AND ADDRESSES OF ALL EMPLOYERS FOR PAST FIVE (5) YEARS Divine Spine Chiropractic LLC DBA
4205 Crossings Blvd Prince George VA, 23875 Tri-Cities Spine & Injury Ctr
16. HAVE YOU EVER HAD DISCIPLINARY ACTION BROUGHT AGAINST YOU BY A STATE BOARD OR ANY OTHER GOVERNMENTAL AGENCY, OR IS THERE ANY SUCH ACTION NOW PENDING? ☒ YES ☐ NO IF YES, GIVE DETAILS AND FINAL DISPOSITION:
I was investigated due to a negative interaction with an overreacting out-of-state family member. The board didn't consider all the facts in the case. I was hoping to resolve the issue without surrendering my license to practice in Virginia, but I figured that was the best solution for all involved.

17. HAVE YOU EVER BEEN ARRESTED OR CHARGED WITH ANY CRIME OTHER THAN A TRAFFIC VIOLATION (INCLUDE ANY DUI'S)? NOTE: EVEN IF YOU HAVE HAD RECORDS SEALED AND YOU HAVE BEEN TOLD THAT YOUR FILE HAS BEEN CLEARED, YOU MUST REPORT THIS INFORMATION, INCLUDING JUVENILE RECORDS. YES X NO IF YES, GIVE DETAILS AND FINAL DISPOSITION:

18. HAVE YOU EVER BEEN CONVICTED OF A CRIME OTHER THAN A TRAFFIC VIOLATION (INCLUDE ANY DUI'S)? NOTE: EVEN IF YOU HAVE HAD RECORDS SEALED AND YOU HAVE BEEN TOLD THAT YOUR FILE HAS BEEN CLEARED, YOU MUST REPORT THIS INFORMATION, INCLUDING JUVENILE RECORDS. YES X NO IF YES, GIVE DETAILS AND FINAL DISPOSITION:

19. HAVE YOU EVER DEFAULTED ON A HEAL (HEALTH EDUCATION ASSISTANCE LOAN)? YES X NO IF YES, GIVE DETAILS AND CURRENT STATUS:

20. REGARDING CHILD SUPPORT, MARK THE APPROPRIATE RESPONSE (FAILURE TO MARK ONE OF THE THREE WILL RESULT IN DENIAL OF THE APPLICATION):

- ☒ I AM NOT SUBJECT TO A COURT ORDER FOR THE SUPPORT OF A CHILD OR CHILDREN.
- ☐ I AM SUBJECT TO A COURT ORDER FOR THE SUPPORT OF ONE OR MORE CHILDREN AND AM IN COMPLIANCE WITH THE ORDER OR I AM IN COMPLIANCE WITH A PLAN APPROVED BY THE DISTRICT ATTORNEY OR OTHER PUBLIC AGENCY ENFORCING THE ORDER FOR THE REPAYMENT OF THE AMOUNT OWED PURSUANT TO THE ORDER.
- ☐ I AM SUBJECT TO A COURT ORDER FOR THE SUPPORT OF ONE OR MORE CHILDREN AND AM NOT IN COMPLIANCE WITH THE ORDER OR A PLAN APPROVED BY THE DISTRICT ATTORNEY OR OTHER PUBLIC AGENCY ENFORCING THE ORDER FOR THE REPAYMENT OF THE AMOUNT OWED PURSUANT TO THE ORDER.

21. REGARDING CHILD ABUSE, THE FOLLOWING MUST BE READ AND INITIALED:

I HAVE BEEN INFORMED THAT I AM REQUIRED BY LAW TO REPORT THE ABUSE OR NEGLECT OF A CHILD TO AN AGENCY THAT PROVIDES CHILD WELFARE SERVICES OR TO A LAW ENFORCEMENT AGENCY NO LATER THAN 24 HOURS AFTER I KNEW OR HAD REASONABLE CAUSE TO BELIEVE THE CHILD HAD BEEN ABUSED OR NEGLECTED.

Please initial here, thereby acknowledging that you have read and understood the above information: BT Date: 9-5-2017

22. HAVE YOU EVER BEEN DRUG OR ALCOHOL DEPENDENT AND/OR ENROLLED IN A DRUG OR ALCOHOL REHABILITATION PROGRAM? YES X NO IF YES, GIVE DETAILS:

23. ARE YOU CURRENTLY WORKING FOR A NEVADA LICENSED CHIROPRACTOR? YES X NO IF YES, GIVE LICENSEE'S NAME AND ADDRESS:

DATE EMPLOYED: DUTIES PERFORMED:

24. LIST ALL SCHOOLS ATTENDED (HIGH SCHOOL THROUGH CHIROPRACTIC COLLEGE):

NAME OF SCHOOL	DATES ATTENDED	DATE GRADUATED	DEGREE
<u>Sterling High School</u>	<u>1994-1998</u>	<u>1998</u>	<u>Diploma</u>
<u>Excelsior College</u>	<u>2002</u>	<u>2002</u>	<u>B.S. Liberal Arts</u>
<u>Life University</u>	<u>2010-2014</u>	<u>2014</u>	<u>Doctor of Chiropractic</u>

25. NUMBER OF CHIROPRACTIC COLLEGE HOURS 350 + 6434 DATE OF D.C. DEGREE 3-29-2014

26. HAVE YOU PASSED NATIONAL BOARD: PART I yes PART II yes PART III yes PART IV yes PT yes SPEC

27. IF YOU ANSWERED "NO" TO PART IV AND SPEC, YOU MUST GIVE DATE YOU ARE SCHEDULED FOR ONE OF THE FOLLOWING EXAMS: PART IV: or SPEC:

CHIROPRACTIC PHYSICIANS'
BOARD OF NEVADA

SEP 21 2017

RECEIVED
RENO, NEVADA 89502

Tolbert, DC

28. LIST ANY STATES IN WHICH YOU HAVE APPLIED FOR (WHETHER ISSUED OR NOT) AND IN WHICH YOU HAVE BEEN GRANTED CHIROPRACTIC LICENSURE:

STATE	DATE OF ISSUANCE	STATUS
Virginia	7-2014	active
Colorado	7-2017	active

AFFIDAVIT:

THE UNDERSIGNED, BEING DULY SWORN UNDER PENALTY OF PERJURY, DEPOSES AND SAYS THAT THE STATEMENTS CONTAINED HEREIN ARE TRUE, COMPLETE, AND CORRECT TO THE BEST OF HIS/HER KNOWLEDGE AND BELIEF; THAT HE/SHE HAS NOT SUPPRESSED ANY INFORMATION WHICH MIGHT AFFECT THIS APPLICATION; THAT HE/SHE HAS NOT OMITTED ANY INFORMATION RELEVANT TO HIS/HER CURRENT FITNESS TO PRACTICE; THAT HE/SHE IS OF GOOD MORAL CHARACTER AND WILL CONFORM TO THE ETHICAL STANDARDS AND CONDUCT OF THE PROFESSION; THAT HE/SHE WILL NOTIFY THE CPBN OF ANY AND ALL CHANGES TO THE INFORMATION IN THIS APPLICATION, INCLUDING CHANGES OF ADDRESS AND THAT HE/SHE HAS OTHERWISE MET ALL STATUTORY REQUIREMENTS AND BELIEVES HIM/HERSELF ELIGIBLE FOR LICENSURE TO PRACTICE CHIROPRACTIC, AND THAT HE/SHE HAS READ AND UNDERSTANDS THIS AFFIDAVIT.

9-5-17

(DATE)

B.B. [Signature]

_____, D.C.
(SIGNATURE OF APPLICANT)

STATE OF Virginia COUNTY OF Hopewell

SIGNED AND SWORN TO BEFORE ME ON THIS 5 DAY OF September, 2017

[Signature]
(NOTARY PUBLIC)

SHANNON ARLENE HICKS
NOTARY PUBLIC
REGISTRATION # 7513025
COMMONWEALTH OF VIRGINIA
MY COMMISSION EXPIRES

05/13/19

INFORMAL & FORMAL
HEARING

AND

STATEMENT OF
ALLEGATIONS



COMMONWEALTH of VIRGINIA

David E. Brown, D.C.
Director

Department of Health Professions
Perimeter Center
9960 Mayland Drive, Suite 300
Henrico, Virginia 23233-1463

www.dhp.virginia.gov
TEL (804) 367- 4400
FAX (804) 527- 4475

September 8, 2017

Margaret F. Hardy, Esq.
Sands Anderson
1111 East Main St.
P.O. Box 1998
Richmond, VA 23218-1998

UPS OVERNIGHT MAIL

mhardy@sandsanderson.com

CHIROPRACTIC PHYSICIANS'
BOARD OF NEVADA

SEP 19 2017

RE: Braheem Zaki Tolbert, D.C.; License No.: 0104-557187
Rescheduling of Formal Hearing; Additional Exhibit

RECEIVED
RENO, NEVADA 89502

Dear Ms. Hardy:

This letter is confirmation that Dr. Tolbert's formal hearing previously scheduled to convene on September 8, 2017, and continued by the Board, has been rescheduled on **Saturday, October 28, 2017, at 9:00 a.m., at the offices of the Department of Health Professions, Perimeter Center, 9960 Mayland Drive, 2nd Floor, Henrico, Virginia.** Please report to the 2nd floor receptionist and be seated in the waiting room. You will be called when the Board is ready to meet with you.

COMMONWEALTH'S EVIDENCE

The Commonwealth's Exhibits relating to the formal hearing were provided with the Board's Notice of Formal Hearing dated August 1, 2017. Please find enclosed an additional Commonwealth Exhibit, (#s 6-7). These exhibits represent the Commonwealth's evidence submitted in this case and will be distributed to the Formal Hearing panel.

Should you wish to file any objections to the Commonwealth's Exhibits, you must send your written objections to me, at the address on this letterhead, no later than **September 27, 2017**. If you have not filed any objections by September 27, 2017, the exhibits will be distributed to the Board members for their review prior to your hearing, and will be considered by the Board as evidence when it deliberates upon your case. If you do file objections, the Commonwealth has until **October 4, 2017**, to file a response to the objections, in writing and addressed to me at the Board office. The Chair of the proceeding will rule on the motion.

RESPONDENT'S EVIDENCE

Should you wish for the Board to consider additional information relative to this proceeding, you must submit fifteen (15) copies of any such documents to Jennie F. Wood, Discipline Case Manager, Virginia Board of Medicine, 9960 Mayland Drive, Suite 300, Henrico, Virginia, 23233, by **September 27, 2017**. You may not submit your documents by e-mail or facsimile.

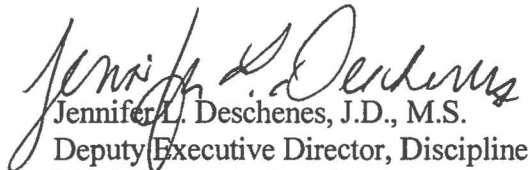
The Commonwealth must file any objections to your submissions in writing, addressed to me at the Board office, no later than **October 4, 2017**. If no objections have been received by **October 4, 2017**, the evidence will be distributed to the Board members for their review, and will be considered by the Board as evidence when it deliberates upon your case. If the Commonwealth raises objections, you have until **October 10, 2017**, to file your response to the objections, in writing and addressed to me at the Board office. The Chair of the proceeding will rule on the motion.

OTHER PRE-HEARING MOTIONS

If you or Assistant Attorney General Julia Bennett wish to make any pre-hearing motions regarding matters other than the exhibits, including offers of settlement, each of you is directed to file motions, in writing, addressed to me at the Board office by **September 27, 2017**. Responses to motions filed must be submitted by **October 4, 2017**. The Chair of the proceeding will rule on the motion.

If you have any further questions regarding this matter, please contact Julia Bennett, Assistant Attorney General, at (804) 786-9593, or by email at jbennett@oag.state.va.us.

Sincerely,


Jennifer L. Deschenes, J.D., M.S.
Deputy Executive Director, Discipline
Virginia Board of Medicine

cc: Braheem Z. Tolbert, D.C., *with enclosure*
Ramon Rodriguez, III, Esq.
Julia Bennett, Asst. Attorney General
Melanie Pagano, Adjudication Specialist, APD
Lorraine McGehee, Deputy Director, APD
Kelli Moss, Senior Investigator, Division of Enforcement (175594)
Erin Barrett, Assistant Attorney General, Board Counsel
Tamika Hines, Case Manager - FOIA



COMMONWEALTH of VIRGINIA

David E. Brown, D.C.
Director

Department of Health Professions

Perimeter Center
9960 Mayland Drive, Suite 300
Henrico, Virginia 23233-1463

www.dhp.virginia.gov
TEL (804) 367- 4400
FAX (804) 527- 4475

August 9, 2017

Margaret F. Hardy, Esq.
Sands Anderson
1111 East Main St.
P.O. Box 1998
Richmond, VA 23218-1998

Via Email and First Class Mail
mhardy@sandsanderson.com

RE: Braheem Zaki Tolbert, D.C.; License No.: 0104-557187
Continuance of Formal Hearing

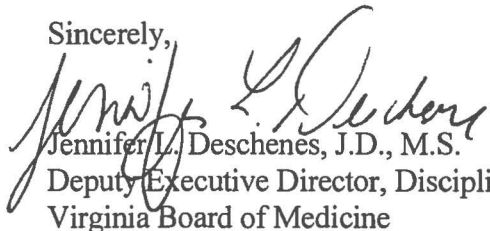
Dear Ms. Hardy:

By correspondence dated August 1, 2017, the Virginia Board of Medicine ("Board") sent notification that Dr. Tolbert had been scheduled to appear before a Formal Hearing of the Board on September 8, 2017.

This letter is notification that this matter has been continued by the Board; **therefore, the Formal Hearing scheduled to convene on September 8, 2017, has been canceled.** You and Dr. Tolbert will receive written notification at a later date regarding the rescheduling of this matter and new submission dates.

If you have any questions regarding this matter, please contact the Board office at (804) 367-4571; or Julia Bennett, Assistant Attorney General, at (804) 786-9593; or jbennett@oag.state.va.us.

Sincerely,


Jennifer L. Deschenes, J.D., M.S.
Deputy Executive Director, Discipline
Virginia Board of Medicine

cc: Braheem Zaki Tolbert, D.C.
Melanie Pagano, Adjudication Specialist, APD [175594]
Lorraine McGehee, Deputy Director, APD
Kelli Moss, Senior Investigator, Division of Enforcement
Tamika Hines, Case Manager - FOIA



COMMONWEALTH of VIRGINIA

David E. Brown, D.C.
Director

Department of Health Professions
Perimeter Center
9960 Mayland Drive, Suite 300
Henrico, Virginia 23233-1463

www.dhp.virginia.gov
TEL (804) 367- 4400
FAX (804) 527- 4475

August 1, 2017

Braheem Zaki Tolbert, D.C.
4205 Crossing Boulevard
Prince George, VA 23875

UPS OVERNIGHT MAIL

RE: Case Number 175594

Dear Dr. Tolbert:

Attached is a Notice of Formal Hearing and Statement of Allegations.

For information regarding this type of proceeding, including Frequently Asked Questions regarding Disciplinary Proceedings, directions to the Department of Health Professions Conference Center, instructions for requesting subpoenas, the Board's Sanctioning Reference Points, the text of the Administrative Process Act and other statutes and regulations cited herein, and other related information, please see www.dhp.virginia.gov/medicine/medicine_Hearings.htm. If you do not have Internet access, you may request a hard copy of any of this information by calling Jennie F. Wood, at (804) 367-4571.

If you have any questions, you may contact Melanie Pagano at (804) 367-4669 or email melanie.pagano@dhp.virginia.gov. Please notify the Board office of your intent to attend this proceeding.

Sincerely,

Jennifer Deschenes, J.D., M.S.
Deputy Executive Director, Discipline
Virginia Board of Medicine

cc: Julia K. Bennett, Assistant Attorney General
Melanie Pagano, Adjudication Specialist, Administrative Proceedings Division
Lorraine McGehee, Deputy Director, Administrative Proceedings Division
Margaret F. Hardy, Esquire
Kelli Moss, Senior Investigator, Division of Enforcement

BEFORE THE VIRGINIA BOARD OF MEDICINE

IN RE: BRAHEEM ZAKI TOLBERT, D.C.
License Number: 0104-557187
Issue Date: July 18, 2014
Expiration Date: November 30, 2018
Case Number: 175594

**NOTICE OF FORMAL ADMINISTRATIVE HEARING
AND STATEMENT OF ALLEGATIONS**

You are hereby notified that a Formal Hearing has been scheduled before the Board of Medicine ("Board") regarding your license to practice chiropractic in the Commonwealth of Virginia.

TYPE OF PROCEEDING:	This is a formal administrative hearing before a panel of the Board.
DATE AND TIME:	September 8, 2017 9:00 AM
PLACE:	Virginia Department of Health Professions Perimeter Center - 9960 Mayland Drive 2 nd Floor - Virginia Conference Center Henrico, Virginia 23233

LEGAL AUTHORITY AND JURISDICTION:

1. This formal hearing is being held pursuant to Virginia Code §§ 2.2-4020, 2.2-4024(F), and 54.1-2400(11). This proceeding will be convened as a public meeting pursuant to Virginia Code § 2.2-3700.
2. At the conclusion of the proceeding, the Board is authorized to take any of the following actions:
 - Exonerate you;
 - Reprimand you;
 - Require you to pay a monetary penalty;
 - Place you on probation and/or under terms and conditions;
 - Suspend your license;
 - Revoke your license.

ABSENCE OF RESPONDENT AND RESPONDENT'S COUNSEL:

If you fail to appear at the formal hearing, the Board may proceed to hear this matter in your absence and may take any of the actions outlined above.

RESPONDENT'S LEGAL RIGHTS:

You have the right to the information on which the Board will rely in making its decision, to be represented by counsel at this proceeding, to subpoena witnesses and/or documents, and to present relevant evidence on your behalf.

COMMONWEALTH'S EXHIBITS:

Enclosed is a copy of the documents that will be distributed to the members of the Board and will be considered by the Board when discussing any allegations with you and when deliberating on your case. **These documents are enclosed only with the notice sent by UPS overnight mail. Please bring these documents with you to the formal hearing.**

FILING DEADLINES:

1. Deadline for filing exhibits: **August 11, 2017**. Submit (15) copies of all documents you want the Board to consider to Jennie F. Wood, Discipline Case Manager, Board of Medicine, 9960 Mayland Drive, Suite 300, Henrico, Virginia 23233. Exhibits may not be sent by facsimile or e-mail. Please note that any documentation or evidence that you previously submitted for an informal conference that is not already part of the Commonwealth's evidence must be resubmitted as an exhibit if you want the Board to consider it at the hearing.

The Commonwealth must file any objections to your submissions in writing, addressed to Jennifer L. Deschenes, J.D., M.S., at the Board office, no later than **August 16, 2017**. If no objections have been received by **August 16, 2017**, the evidence will be distributed to the Board members for their review, and will be considered by the Board as evidence when it deliberates upon your case. If the Commonwealth raises objections, you have until **August 21, 2017**, to file your response to the objections, in writing and addressed to Ms. Deschenes, at the Board office. The Chair of the proceeding will rule on the motion.

2. Deadline for filing motions or offers of settlement: **August 16, 2017**, addressed to Ms. Deschenes, at the above address.

3. Deadline for filing any objections to the Commonwealth's exhibits, in writing, to Ms. Deschenes, at the above address: **August 11, 2017**. If you do not file objections by this date, the exhibits will be distributed to the Board members for their review prior to your hearing, and will be considered by the Board as evidence when it deliberates on your case. If you do file objections, the Commonwealth has until **August 16, 2017**, to file a response to the objections, in writing, and addressed to Ms. Deschenes, at the Board office. The Chair of the proceeding will rule on the motion. NOTE: failure to object to the distribution of the Commonwealth's exhibits prior to the proceeding will not affect your right to contest any information contained in those exhibits at the proceeding.

REQUEST FOR A CONTINUANCE:

Absent exigent circumstances, such as personal or family illness, a request for a continuance after **August 16, 2017** will not be considered.

STATEMENT OF ALLEGATIONS

The Board alleges that:

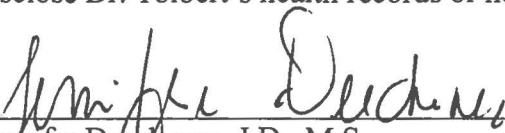
1. At all times relevant hereto, Braheem Zaki Tolbert, D.C., was licensed to practice chiropractic in the Commonwealth of Virginia.
2. Braheem Zaki Tolbert, D.C., violated Virginia Code § 54.1-2915.A(4) and (14) in that:
 - a. See Confidential Exhibit.
 - b. See Confidential Exhibit.
 - c. See Confidential Exhibit.
 - d. Dr. Tolbert stated to a Department of Health Professions' investigator ("Investigator") that he was admitted to the Veterans Administration Hospital for treatment on August 23, 2016.
 - e. See Confidential Exhibit.
 - f. In an interview with the Investigator, Dr. Tolbert reported that he is participating in individual and marriage counseling, and remains under the care of a psychiatrist who is prescribing bupropion for him. He reported that he has not consulted a neuropsychologist as was recommended following his hospitalization at the Veterans Administration Hospital.
 - g. Dr. Tolbert has been diagnosed with psychosis unspecified, rule-out ("r/o") bipolar disorder; his mental health diagnoses require ongoing treatment, medication management, and monitoring.
3. Dr. Tolbert is violated Virginia Code § 54.1-2915(A)(2), (4), and (14) in that he is unable to practice medicine with reasonable skill and safety due to substance abuse. Specifically:
 - a. By his own admission, Dr. Tolbert began using marijuana at the age of 14 and smoked marijuana within a week of his admissions to the psychiatric facility and Veterans Administration Hospital

in August 2016. In addition, Dr. Tolbert admitted he ate brownies containing marijuana two weeks prior to these August 2016 hospital admissions.

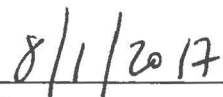
b. See Confidential Exhibit.

4. Dr. Tolbert violated Virginia Code §§ 54.1-2915(A)(18) and 54.1-111(A)(7), and 18 VAC 85-20-105 of the Regulations Governing the Practice of Medicine, Osteopathy, Podiatry, and Chiropractic in that when asked by the Investigator on or about October 25, 2016 to sign a release for his medical records from the Veterans Administration Hospital, he willfully refused to provide information as requested by the Board or its representative pursuant to an investigation.

Pursuant to Virginia Code § 54.1-2400.2(K), the Board considered whether to disclose or not disclose Dr. Tolbert's health records or health services.



Jennifer Deschenes, J.D., M.S.
Deputy Executive Director, Discipline
Virginia Board of Medicine



Date



COMMONWEALTH of VIRGINIA

David E. Brown, D.C.
Director

Department of Health Professions

Perimeter Center
9960 Mayland Drive, Suite 300
Henrico, Virginia 23233-1463

www.dhp.virginia.gov
TEL (804) 367- 4400
FAX (804) 527- 4475

April 18, 2017

Margaret F. Hardy, Esq.
1111 East Main St.
P.O. Box 1998
Richmond, VA 23218-1998

Via Email & First Class Mail
mhardy@sandsanderson.com

RE: Braheem Zaki Tolbert, D.C.; License No. 0104-557187
Request for Formal Hearing

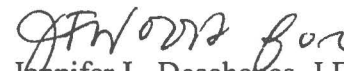
Dear Ms. Hardy:

Please be advised that the Board of Medicine ("Board") has received your letter dated April 17, 2017, regarding Dr. Tolbert's request for a formal hearing before the Board.

The Board will convene a formal hearing for this matter at a future date and Dr. Tolbert will be noticed at least thirty (30) days in advance of the scheduled date. The Order entered March 17, 2017, has been vacated and I enclose a copy for your records.

If you or Dr. Tolbert have any questions regarding this matter, please contact the Board office at 804-367-4571.

Sincerely,


Jennifer L. Deschenes, J.D., M.S.
Deputy Executive Director of Discipline
Virginia Board of Medicine

Enclosures: Vacated Order

cc: Brian Z. Tolbert, D.C., w/enclosures
Lorraine McGehee, Deputy Director, APD
Kelli Moss, Senior Investigator (175594)
Tamika Hines, Case Manager - FOIA

APPROVED

VIRGINIA BOARD OF MEDICINE SPECIAL CONFERENCE COMMITTEE MINUTES

March 8, 2017

**Department of Health Professions
Perimeter Center
9960 Mayland Drive, Suite #300**

Henrico, Virginia

CALL TO ORDER: A Special Conference Committee of the Board was called to order at 10:57 a.m.

MEMBERS PRESENT: Isaac Koziol, M.D., Chair
Kevin O'Connor, M.D.

STAFF PRESENT: Jennifer L. Deschenes, Deputy Executive Director, Discipline
Jennie F. Wood, Case Manager, Discipline
Dale Lutke, Adjudication Specialist

OTHERS PRESENT: Latasha Tolbert
Robert Tolbert

MATTER: **Braheem Zaki Tolbert, D.C.** **License No.: 0104-557187**
Case No.: 175594

DISCUSSION: Dr. Tolbert appeared before the Committee in person in accordance with a Notice of the Board dated January 24, 2017. Dr. Tolbert was represented by Margaret Hardy, Esquire.

The Committee fully discussed the allegations in the Notice with Dr. Tolbert.

CLOSED SESSION: Upon a motion by Dr. O'Connor, and duly seconded by Dr. Koziol, the Committee voted to convene a closed meeting pursuant to §2.2-3711.A (27) of the Code of Virginia, for the purpose of deliberation to reach a decision in the matter of Dr. Tolbert. Additionally, he moved that Ms. Deschenes and Ms. Wood attend the closed meeting because their presence in the closed meeting was deemed necessary and would aid the Committee in its deliberations.

RECONVENE: Having certified that the matters discussed in the preceding closed session met the requirements of §2.2-3712 of the Code,

the Committee re-convened in open session and announced its decision.

DECISION:

Upon a motion by Dr. O'Connor, and duly seconded by Dr. Koziol, the Committee made certain findings of fact and conclusions of law and voted to place the license of Dr. Tolbert on certain terms and conditions.

VOTE:

The vote was unanimous.


ADJOURNMENT:

The Committee adjourned at 12:36 p.m.

As provided by law this decision shall become a Final Order thirty (30) days after service of such Order on Dr. Tolbert, unless a written request to the Board for a formal hearing on the allegations made against him is received from Dr. Tolbert within such time. If service of the Order is made by mail three (3) additional days shall be added to that period. Upon such timely request for a formal hearing, the decision of the Special Conference Committee shall be vacated.


Isaac Koziol, M.D., Chair

4-13-17
Date


William L. Harp, M.D., Executive Director

4/18/17
Date



COMMONWEALTH of VIRGINIA

David E. Brown, D.C.
Director

Department of Health Professions

Perimeter Center
9960 Mayland Drive, Suite 300
Henrico, Virginia 23233-1463

www.dhp.virginia.gov
TEL (804) 367- 4400
FAX (804) 527- 4475

February 9, 2017

Braheem Zaki Tolbert, D.C.
4205 Crossing Boulevard
Prince George, VA 23875

UPS OVERNIGHT MAIL

RE: *Time Change for Informal Conference*

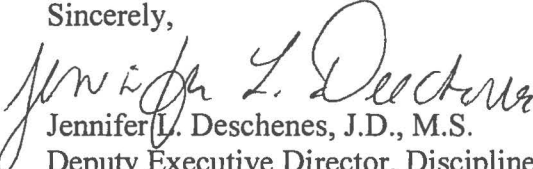
Dear Dr. Tolbert:

By letter dated January 24, 2017, the Virginia Board of Medicine ("Board") sent you notification that you had been scheduled to appear before a Special Conference Committee of the Board on Wednesday, March 8, 2017, at 9:00 a.m.

This letter is official notification that there has been a change in the time of your informal conference. You have now been scheduled to appear before the Special Conference Committee of the Board on Wednesday, March 8, 2017, at **11:00 a.m.**, at the offices of the Department of Health Professions, 9960 Mayland Drive, 2nd Floor, Henrico, Virginia. Please make a note of this time change for your informal conference. Your presence is required fifteen (15) minutes in advance of the appointed time.

Should you have any questions regarding this change, please contact Jennie F. Wood, Discipline Case Manager, at (804) 367-4571, or by email at jennie.wood@dhp.virginia.gov.

Sincerely,


Jennifer L. Deschenes, J.D., M.S.
Deputy Executive Director, Discipline
Virginia Board of Medicine

cc: Dale Lutke, Adjudication Specialist, APD [175594]
Lorraine McGehee, Deputy Director, APD
Tamika Hines, Case Manager - FOIA



COMMONWEALTH of VIRGINIA

David E. Brown, D.C.
Director

Department of Health Professions

Perimeter Center
9960 Mayland Drive, Suite 300
Henrico, Virginia 23233-1463

www.dhp.virginia.gov
TEL (804) 367- 4400
FAX (804) 527- 4475

January 24, 2017

Braheem Zaki Tolbert, D.C.
4205 Crossing Boulevard
Prince George, VA 23875

UPS OVERNIGHT MAIL

RE: Case Number 175594

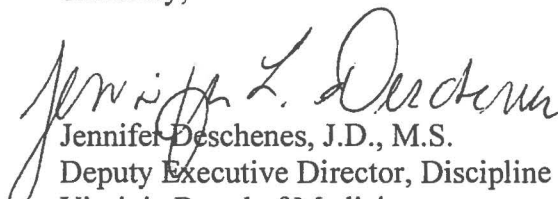
Dear Dr. Tolbert:

Attached is a Notice of Informal Conference and Statement of Allegations.

For information regarding this type of proceeding, including Frequently Asked Questions regarding Disciplinary Proceedings, directions to the Department of Health Professions Conference Center, instructions for requesting subpoenas, the Board's Sanctioning Reference Points, the text of the Administrative Process Act and other statutes and regulations cited herein, and other related information, please see www.dhp.virginia.gov/medicine/medicine_Hearings.htm. If you do not have Internet access, you may request a hard copy of any of this information by calling Jennie Wood at (804) 367-4571.

If you have any questions, you may contact Dale Lutke at (804) 367-4678 or dale.lutke@dhp.virginia.gov. Please notify the Board office of your intent to attend this proceeding.

Sincerely,


Jennifer Deschenes, J.D., M.S.
Deputy Executive Director, Discipline
Virginia Board of Medicine

cc: Dale Lutke, Adjudication Specialist, Administrative Proceedings Division
Lorraine McGehee, Deputy Director, Administrative Proceedings Division
Kelli Moss, Senior Investigator, Division of Enforcement
Matthew C. Stewart, Esquire

Board of Audiology & Speech-Language Pathology – Board of Counseling – Board of Dentistry – Board of Funeral Directors & Embalmers
Board of Long-Term Care Administrators – Board of Medicine – Board of Nursing – Board of Optometry – Board of Pharmacy
Board of Physical Therapy – Board of Psychology – Board of Social Work – Board of Veterinary Medicine
Board of Health Professions

BEFORE THE VIRGINIA BOARD OF MEDICINE

IN RE: BRAHEEM ZAKI TOLBERT, D.C.
License Number: 0104-557187
Issue Date: July 18, 2014
Expiration Date: November 30, 2018
Case Number: 175594

**NOTICE OF INFORMAL CONFERENCE
AND STATEMENT OF ALLEGATIONS**

You are hereby notified that an Informal Conference has been scheduled before the Board of Medicine ("Board") regarding your license to practice chiropractic in the Commonwealth of Virginia.

TYPE OF PROCEEDING:	This is an informal conference before a Special Conference Committee ("Committee") of the Board.
DATE AND TIME:	March 8, 2017 9:00 AM
PLACE:	Virginia Department of Health Professions Perimeter Center - 9960 Mayland Drive 2 nd Floor - Virginia Conference Center Henrico, Virginia 23233

LEGAL AUTHORITY AND JURISDICTION:

1. This informal conference is being held pursuant to Virginia Code §§ 2.2-4019 and 54.1-2400(10). This proceeding will be convened as a public meeting pursuant to Virginia Code § 2.2-3700.

2. At the conclusion of the proceeding, the Committee is authorized to take any of the following actions:

- Exonerate you;
- Reprimand you;
- Require you to pay a monetary penalty;
- Place you on probation and/or under terms and conditions;
- Refer the matter to the Board of Medicine for a formal administrative hearing.

ABSENCE OF RESPONDENT AND RESPONDENT'S COUNSEL:

If you fail to appear at the informal conference, the Committee may proceed to hear this matter in your absence and may take any of the actions outlined above.

RESPONDENT'S LEGAL RIGHTS:

You have the right to the information on which the Committee will rely in making its decision, to be represented by counsel at this proceeding, to subpoena witnesses and/or documents, and to present relevant evidence on your behalf.

INFORMAL CONFERENCE MATERIALS:

Enclosed is a copy of the documents that will be distributed to the members of the Committee and will be considered by the Committee when discussing any allegations with you and when deliberating on your case. **These documents are enclosed only with the notice sent by UPS overnight mail. Please bring these documents with you to the informal conference.**

FILING DEADLINES:

Deadline for filing materials: **February 15, 2017**. Submit (8) copies of all documents you want the Board to consider to Jennie Wood, Discipline Case Manager, Board of Medicine, 9960 Mayland Drive, Suite 300, Henrico, Virginia 23233. Materials may not be sent by facsimile or e-mail.

REQUEST FOR A CONTINUANCE

Absent exigent circumstances, such as personal or family illness, a request for a continuance after **February 6, 2017**, will not be considered.

STATEMENT OF ALLEGATIONS

The Board alleges that:

1. At all times relevant hereto, Braheem Zaki Tolbert, D.C., was licensed to practice chiropractic in the Commonwealth of Virginia.

2. Braheem Zaki Tolbert, D.C., is in violation of Virginia Code § 54.1-2915(A)(4) and (14), in that he is unable to practice chiropractic with reasonable skill and safety due to the diagnosis of psychosis unspecified, r/o bipolar disorder. Specifically:

a. See Confidential Exhibit A.

b. See Confidential Exhibit A.

c. See Confidential Exhibit A.

d. Dr. Tolbert stated to a Department of Health Professions' investigator that he was admitted to the Veteran's Administration Hospital on August 23, 2016. He provided one page of an electronic medical record from the Veteran's Administration that was undated and unsigned along with a written statement to the Board, wherein he stated that the "accusations and diagnoses" of mental illness were "categorically false."

e. See Confidential Exhibit A.

f. In an interview with a Department of Health Professions' Investigator, Dr. Tolbert denied that he had shown symptoms of mania or behaved erratically in August 2016, and denied that he had a mental health condition that justified hospitalization. Dr. Tolbert maintained that any observable symptoms were attributable to the fact that he had had minimal sleep on the evening before he was admitted to the hospital, and that he was experiencing several stressors related to opening up an additional professional practice location, testifying in a lawsuit regarding one of his patients, and family

conflicts. According to Dr. Tolbert, he is participating in individual and marriage counseling, and remains under the care of a psychiatrist who is prescribing bupropion for him. He reported that he has not consulted a neuropsychologist as was recommended following his hospitalization at the Veteran's Administration Hospital.

g. Dr. Tolbert's mental health diagnoses require ongoing treatment, medication management, and monitoring.

3. Dr. Tolbert is in violation of Virginia Code § 54.1-2915(A)(2), (4), and (14) in that he is unable to practice medicine with reasonable skill and safety due to substance abuse. Specifically:

a. By his own admission, Dr. Tolbert began using marijuana at the age of 14.

b. By his own admission, Dr. Tolbert ate brownies containing marijuana two weeks prior to the August 2016 hospital admissions, and had smoked marijuana within a week of the admissions.

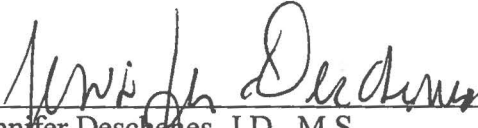
c. See Confidential Exhibit A.

d. When asked by a DHP Investigator if he had used marijuana after he was discharged from the psychiatric hospital, Dr. Tolbert declined to answer.

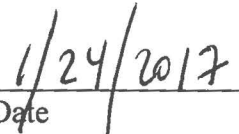
e. Dr. Tolbert reported that he had undergone a substance abuse assessment at the Veteran's Administration Hospital in September 2016, which determined that he did not need substance abuse treatment. Dr. Tolbert could not recall the name of the person who conducted the assessment.

4. Dr. Tolbert violated Virginia Code §§ 54.1-2915(A)(18) and 54.1-111(A)(7), and 18 VAC 85-20-105 of the Regulations Governing the Practice of Medicine, Osteopathy, Podiatry, and Chiropractic in that when asked to sign a release for his medical records from the Veteran's Administration Hospital, he willfully refused to provide information as requested by the Board or its representative pursuant to an investigation.

Pursuant to Virginia Code § 54.1-2400.2(K), the Board considered whether to disclose or not disclose Dr. Tolbert's health records or health services.



Jennifer Deschenes, J.D., M.S.
Deputy Executive Director, Discipline
Virginia Board of Medicine



Date

CONSENT ORDER

BEFORE THE VIRGINIA BOARD OF MEDICINE

IN RE: BRAHEEM ZAKI TOLBERT, D.C.
License Number: 0104-557187
Case Number: 175594

CONSENT ORDER

JURISDICTION AND PROCEDURAL HISTORY

The Virginia Board of Medicine ("Board") and Braheem Zaki Tolbert, D.C., as evidenced by their signatures hereto, in lieu of proceeding to a formal administrative proceeding, enter into the following Consent Order affecting Dr. Tolbert's license to practice chiropractic in the Commonwealth of Virginia.

FINDINGS OF FACT AND CONCLUSIONS OF LAW

1. Braheem Zaki Tolbert, D.C., was issued License Number 0104-557187 to practice chiropractic on July 18, 2014, which is scheduled to expire on November 30, 2018.
2. Dr. Tolbert violated Virginia Code § 54.1-2915.A(2) and (14) in that he has been diagnosed with an illness or substance use/abuse condition that interferes with his ability to safely practice chiropractic.

CONSENT

Braheem Zaki Tolbert, D.C., by affixing his signature to this Consent Order, agrees to the following:

1. I have been advised to seek advice of counsel prior to signing this document and am represented by Ramon Rodriguez III, Esq.;
2. I am fully aware that without my consent, no legal action can be taken against me or my license except pursuant to the Virginia Administrative Process Act, Virginia Code § 2.2-4000 *et seq.*;
3. I acknowledge that I have the following rights, among others: the right to a formal administrative hearing before the Board; the right to representation by counsel; and the right to cross-examine witnesses against me;
4. I waive my right to a formal hearing;
5. I admit to the Findings of Fact and Conclusions of Law contained herein and waive my right to contest such Findings of Fact and Conclusions of Law and any sanction imposed hereunder in any future judicial or administrative proceeding in which the Board is a party;
6. I consent to the entry of the following Order affecting my licensure to practice chiropractic in the Commonwealth of Virginia.

ORDER

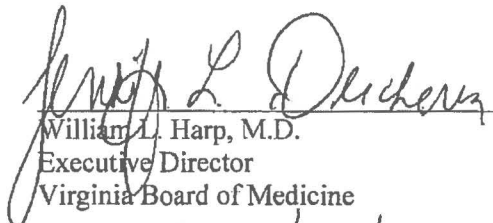
Based on the foregoing Findings of Fact and Conclusions of Law, the Virginia Board of Medicine hereby ORDERS as follows:

1. The Board accepts Dr. Tolbert's VOLUNTARY PERMANENT SURRENDER of his license to practice chiropractic in the Commonwealth.

2. Upon entry of this Consent Order, the license of Braheem Zaki Tolbert, D.C., will be recorded as SURRENDERED and no longer current. Dr. Tolbert will not be eligible for reinstatement of his license at any future date.

Pursuant to Virginia Code §§ 2.2-4023 and 54.1-2400.2, the signed original of this Order shall remain in the custody of the Department of Health Professions as a public record, and shall be made available for public inspection and copying upon request.

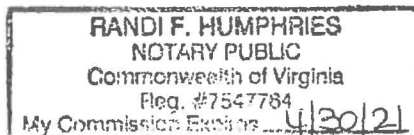
FOR THE BOARD

for 
William L. Harp, M.D.
Executive Director
Virginia Board of Medicine

ENTERED: 10/25/2017

SEEN AND AGREED TO:


Braheem Zaki Tolbert, D.C.



COMMONWEALTH OF VIRGINIA
COUNTY/CITY OF Petersburg, TO WIT:

Braheem Zaki Tolbert, D.C.
CONSENT ORDER
Page 3 of 3

Subscribed and sworn to before me, a notary public in and for the Commonwealth of Virginia at large,

on this 16th day of October, 2017.

Ramona Skypkin
Notary Public

My commission expires:

4/30/2021

Registration No.:

7547764

CHIROPRACTIC PHYSICIANS' BOARD OF NEVADA

AGENDA ACTION SHEET

TITLE: Agenda Item 9 Discussion/possible action regarding Mark Rubin, DC – For possible action. (Note: The Board may go into closed session pursuant to NRS 241 to consider the character alleged misconduct, or professional competence of Dr. Rubin)

RECOMMENDED MOTION: No recommendation

PRESENTED BY: Ben Lurie, DC

MEETING DATE: January 11, 2018

TIME REQUIRED: 15 minutes

BACKGROUND INFORMATION: See attached timeline.

On December 19, 2017 Dr. Rubin emailed the Board requesting to appear again before the Board to discuss a modification to his Settlement Agreement. Please see Dr. Rubin's request attached.

REVIEWED BY: X President X Secretary X Executive Director

ACTION: _____ Approved _____ Approved w/Modifications _____ Denied _____ Continued

Agenda Item 9

Mark Rubin, DC

Settlement Agreement & Order dated September 10, 2016

Probation September 10, 2016 through September 10, 2019

September 20, 2016

Dr. Rubin completed the following:

- *Provided confirmation that he was in compliance with the Social Security Administration*
- *Provided the location of his patient records*
- *Notified the IBM of malpractice insurance*
- *Obtained a practice monitor*
- *Maintain health care records in compliance with NAC 634.435*

September 1, 2016

- *Took and passed the Boards' jurisprudence exam.*

March 28, 2017

A certified letter was sent to Dr. Rubin explaining that as of March 10, 2017 he was not in compliance with his Board order with respect to not completing the EBAS by March 10, 2017 and not following through with his payment arrangements. This letter indicated that if he was unable to satisfy these terms his license would be suspended effective April 17, 2017.

April 10, 2017

Dr. Rubin emailed a request to be heard before the Board to discuss modifying his Board order due to a financial hardship.

April 17, 2016

A certified letter was sent to Dr. Rubin for failure to comply with the Settlement Agreement & Order. Dr. Rubin failed to take and pass the EBAS by March 10, 2017. Dr. Rubin also discontinued making payments of \$100.00 per month towards the Board's fee and costs and his fine. Dr. Rubin made payments from October 2016 through February 2017 for a total of \$500.00 to date.

April 21, 2017

- *Dr. Rubin appeared before the Board and requested that the Board relieve him of the remainder of his Settlement Agreement due to financial hardship.*
- *The Board voted to deny Dr. Rubin's request until he is in compliance with the Board Order at which time he could return before the Board.*

October 24, 2017

Dr. Rubin emailed a request for the Board hold a special meeting pursuant to NRS 634.042 due to a financial hardship.

November 1, 2017

- *Dr. Rubin withdrew his request for a special meeting.*

December 19, 2017

- *Dr. Rubin emailed a request to come before the Board to discuss modifying his Board order.*

Julie Strandberg

From: Dr Mark Rubin <drrubindc@gmail.com>
Sent: Tuesday, December 19, 2017 10:32 AM
To: Julie Strandberg
Subject: Jan 11th board meeting

Dear Julie,

I would like to request to appear before the board January 11th to discuss modifying my board order.
Thank you again for your help.

Warm Regards, Dr Mark Rubin

BEFORE THE CHIROPRACTIC PHYSICIANS' BOARD OF NEVADA

CHIROPRACTIC PHYSICIANS'
BOARD OF NEVADA

SEP 12 2016

IN THE MATTER OF:

MARK RUBIN D.C.
License No. B648,

Respondent.

Case Nos. 15-06S

SETTLEMENT AGREEMENT AND
ORDER

RECEIVED
RENO, NEVADA 89502

The Chiropractic Physicians' Board of Nevada (the Board), by and through its investigating board member Tracy DiFillipo, J.D., hereby enters into this Settlement Agreement with Mark Rubin, D.C. (License No. B648). Pursuant to chapter 233B and chapter 634 of the Nevada Revised Statutes (NRS) and Nevada Administrative Code (NAC), it is hereby stipulated and agreed, by and between the parties in the above-entitled matter, that this matter shall be settled and resolved upon the following terms:

BACKGROUND

1. On July 26, 2016, Board Counsel Louis Ling filed a Notice of Charges in this matter. In the Notice of Charges, certain facts were alleged and four causes of action were stated against Dr. Rubin.

2. While there remain substantial and good faith disputes regarding the facts of the matter, the parties desire and believe that it is in both their best interests to resolve this matter without a full hearing on the merits.

APPLICABLE LAW AND UNDERSTANDINGS

3. For the purposes of resolving this matter, Dr. Rubin admits to the First (Failure to Make, Maintain, and Provide Medical Records) and Second (Failure to Notify Patients of Lack of Malpractice Insurance) Causes of action, and does not contest the Fourth (Making False Statement to Investigation) Cause of Action contained in the Notice of Charges, and Dr. Rubin understands and acknowledges that the conduct set out therein constitute violations of the Nevada Chiropractic Practice Act (NRS & NAC 634) as alleged therein and that he agrees that he is subject to disciplinary action by the Board as a result of that conduct.

4. Regarding the Third Cause of Action, Dr. Rubin will not contest that the his conduct may have constituted a violation of NRS 634.018(10) as conduct unbecoming a chiropractic physician in that he did not notify SSD of his earnings as a chiropractic physician for the time period at issue in this matter

1 (March 2014 through March 2016). The parties agree that the other NRS and NAC provisions
2 contained in the Third Cause of Action are dismissed.

3 5. Dr. Rubin and Tracy DiFillipo, the Investigating Board Member in this matter, agree that it is
4 in the best interests of Dr. Rubin and the Board to resolve this matter without a full hearing on the
5 merits.

6 6. Dr. Rubin is aware of, understands, and has been advised of the effect of this Settlement
7 Agreement, which he has carefully read and fully acknowledged. Dr. Rubin acknowledges that he
8 reviewed this Settlement Agreement with and consulted with his legal counsel, Mr. Roger Croteau, before
9 entering into this Settlement Agreement.

10 7. Dr. Rubin has freely and voluntarily entered into the Settlement Agreement, and he is aware
11 of his rights to contest the charges pending against him. These rights include representation by an
12 attorney at his own expense, the right to a public hearing on any charges or allegations formally filed, the
13 right to confront and cross-examine witnesses called to testify against him, the right to present evidence
14 on his own behalf, the right to testify on his own behalf, the right to obtain any other type of formal
15 judicial review of this matter, and any other rights which may be accorded to him pursuant the provisions
16 of Chapters 233B, 622, 622A, and 634 of the NRS and the NAC. Dr. Rubin is voluntarily waiving all
17 these rights in exchange for the Board's acceptance of this Settlement Agreement.

18 8. Should the Settlement Agreement be rejected by the Board, it is agreed that presentation to
19 and consideration by the Board of such proposed Settlement Agreement or other documents or matters
20 pertaining to the consideration of this Settlement Agreement shall not unfairly or illegally prejudice the
21 Board or any of its members from further participation, consideration, adjudication, or resolution of
22 these proceedings and that no Board member shall be disqualified or challenged for bias.

23 9. Dr. Rubin acknowledges that the Settlement Agreement shall only become effective after both
24 the Board and he have duly executed it.

25 ///

26 ///

27 ///

1 AGREED DISCIPLINARY ACTION

2 THE PARTIES DO HEREBY AGREE as a result of the acknowledgements contained in
3 paragraphs 1 through 9 above that the following discipline is fair and appropriate and should be imposed
4 by the Board by way of resolution of this matter:

5 1. Dr. Rubin's license shall be on probation for a period of three years from the effective date of
6 this Settlement Agreement and Order. The terms and conditions of the probation shall be as follows:

7 (a) Reformation of Practice. Dr. Rubin agrees that he will assure that his chiropractic
8 practice conforms to the following terms, conditions, and practices:

9 (1) Medical Records. For every patient Dr. Rubin treats after the effective date of
10 this Settlement Agreement and Order, regardless of the setting within which the treatment is
11 provided, Dr. Rubin shall make and maintain health care records in compliance with NAC
12 634.435. The records shall be readily identifiable as being made in SOAP format (Subjective,
13 Objective, Assessment, Plan). Within ten days of the effective date of this Settlement Agreement
14 and Order, Dr. Rubin shall submit to the IBM a copy of his proposed form that he will use for his
15 health care records. The IBM shall review the form and shall either approve it or provide Dr.
16 Rubin with direction as to what the proposed form lacks. Once the form is approved by the IBM,
17 Dr. Rubin will use it in the treatment of all of his patients thereafter.

18 (2) Recordkeeping. Dr. Rubin shall establish a publicly accessible facility at which
19 he will store the medical records, billing records, and other records incident to his chiropractic
20 practice. Within ten days of the effective date of this Settlement Agreement and Order, Dr.
21 Rubin shall inform the IBM of the location at which he will keep his practice's records.

22 (3) Notification Regarding Malpractice Insurance. Within ten days of the effective
23 date of this Settlement Agreement and Order, Dr. Rubin shall inform the IBM in writing whether
24 he has obtained malpractice insurance or whether he intends to operate his practice without
25 malpractice insurance. If Dr. Rubin opts to operate his practice without malpractice insurance,
26 he shall prepare a notice form in compliance with NAC 634.445 that he will assure is presented
27 to and signed by each of his patients. Dr. Rubin shall keep a copy of the fully-executed notice
28 form for each patient in each patient's health care records.

1 (4) Practice Monitoring. Within 30 days of the effective date of this Settlement
2 Agreement and Order, Dr. Rubin and the IBM shall consult and determine a chiropractic
3 physician who shall serve as a practice monitor throughout the remainder of the period of
4 probation. The practice monitor shall be provided with a copy of this Settlement Agreement and
5 Order and shall be expected to visit Dr. Rubin's practice and recordkeeping facility at such times
6 and with such frequency to view and review his practice, including reviewing health care records
7 and other records made and maintained by the practice, to assure that the practice complies with
8 paragraph 1(a) of the "Agreed Disciplinary Action" section herein. Throughout the period of
9 probation, Dr. Rubin shall assure that the practice monitor has access to whatever the practice
10 monitor reasonably requests to assure that Dr. Rubin and his practice are in compliance with this
11 paragraph 1(a). If the practice monitor identifies something that is not in compliance this
12 paragraph 1(a), the practice monitor shall communicate his or her concerns with Dr. Rubin and
13 they shall address the non-compliance to get it back into compliance. The practice monitor shall
14 provide to the Board's office with quarterly reports regarding Dr. Rubin's compliance with the
15 terms of paragraph 1(a), which report shall document those things that are in compliance and
16 those things, if any, which Dr. Rubin were required to bring into compliance pursuant to this
17 subparagraph.

18 (5) Costs. Dr. Rubin shall be responsible to pay any and all costs associated with
19 compliance with paragraph 1(a). Any failure to pay such costs as they become due shall be
20 deemed a breach of this Settlement Agreement and Order.

21 (b) Notification to and Cooperation with Social Security Administration. Within ten days
22 of the effective date of this Settlement Agreement and Order, Dr. Rubin shall provide written
23 evidence to the IBM that he has contacted the appropriate authority at the Social Security
24 Administration regarding his Supplemental Security Disability (SSD) disability claim and
25 payments and that he has notified this person that he has been earning income as a chiropractor
26 for at least the period of March 2014 through the present. Dr. Rubin shall provide copies of all
27 his correspondence to and from the appropriate SSI authorities or personnel to the IBM. Within
28

1 ten days of the effective date of this Settlement Agreement and Order, Dr. Rubin shall execute
2 the forms and shall file them with the appropriate authorities or departments to allow the IBM to
3 request records from the Social Security Administration, such authorities, departments, or
4 personnel thereof regarding Dr. Rubin's SSD claim and payments so that the IBM can verify that
5 Dr. Rubin has reported his earnings and is cooperating with the Social Security Administration
6 regarding his SSD claim and any effect thereon that his earnings disclosure might have. If Dr.
7 Rubin continues or intends to continue to receive SSD payments, Dr. Rubin will learn from SSD
8 what is required of him to serve patients as a chiropractor and what he must do to comply with
9 whatever requirements the Social Security Administration might have regarding his SSD claim
10 and payments and his employment or practice as a chiropractor. The IBM shall monitor Dr.
11 Rubin's correspondence and actions under this subparagraph to assure Dr. Rubin's compliance
12 with the Social Security Administration's rules and requirements for his continued receipt of SSD
13 payments, and Dr. Rubin shall cooperate with all reasonable requests by the IBM hereunder. Dr.
14 Rubin shall be responsible to pay any and all costs associated with compliance with paragraph
15 1(b). Any failure to pay such costs as they become due shall be deemed a breach of this
16 Settlement Agreement and Order.

17 2. Dr. Rubin shall pay the fees and costs incurred by the Board in the investigation and
18 prosecution of this matter totaling \$2,500.00. The fees and costs shall be payable by cashier's or certified
19 check or money order made payable to: "Chiropractic Physicians' Board of Nevada." Dr. Rubin shall
20 contact the Executive Director within ten days of the effective date of this Settlement Agreement and
21 Order to make payment arrangements such that the fees and costs are fully paid on or before the
22 expiration of the probationary period in Paragraph #1. The probationary period shall not terminate
23 unless and until all fees and costs have been received by the Board.

24 3. For the Fourth Cause of Action, Dr. Rubin shall pay a fine of \$1,500.00. The fees and costs
25 shall be payable by cashier's or certified check or money order made payable to: "Chiropractic Physicians'
26 Board of Nevada." Dr. Rubin shall contact the Executive Director within ten days of the effective date of
27 this Settlement Agreement and Order to make payment arrangements such that the fine is fully paid on
28

1 or before the expiration of the probationary period in Paragraph #1. The probationary period shall not
2 terminate unless and until all fees and costs have been received by the Board.

3 4. The Board shall not initiate the filing of any information or complaint with any law
4 enforcement agencies regarding Dr. Rubin's actions and conduct in this matter. If any complaint or
5 action is initiated by a law enforcement agency resultant from a complaint filed by someone other than
6 the Board, the Board may cooperate with the law enforcement agency as requested by the law
7 enforcement agency, including the providing of facts and information gathered in the course of the
8 investigation and prosecution of this matter. The Board may not provide any documents to a law
9 enforcement agency except upon receipt of a subpoena from the law enforcement agency.

10 5. Dr. Rubin shall take and pass the "Fraud," "Doctor's Duties and Office Protocol," and
11 "Unprofessional Conduct" portions of the Ethics & Boundaries Examination administered by the Ethics
12 and Boundaries Assessment Services, LLC (EBAS) within six months of the effective date of this
13 Settlement Agreement and Order. Dr. Rubin shall pay the costs associated taking and passing the
14 selected portions of the EBAS Ethics & Boundaries Examination. Dr. Rubin shall provide written
15 documentation of the successful completion of the selected portions of the Ethics & Boundaries
16 Examination to the Board's office within six months of the effective date of this Settlement Agreement
17 and Order.

18 6. Dr. Rubin shall take and pass the Board's jurisprudence examination within ninety days of the
19 effective date of this Settlement Agreement and Order.

20 7. Dr. Rubin shall obey all laws related to the practice of chiropractic medicine, whether state or
21 federal and whether statutory or by regulation.

22 8. Dr. Rubin shall meet with the Board or its representatives upon request and shall cooperate
23 with such representatives in their supervision, monitoring, investigation, or auditing to assure compliance
24 with the terms and conditions of this Settlement Agreement and Order. Dr. Rubin shall pay any and all
25 reasonable and necessary costs incurred by the Board resultant from this paragraph.

26 9. In the event Dr. Rubin fails to materially comply with any term of this Settlement Agreement,
27 the Board's Executive Director shall notify Dr. Rubin in writing of the non-compliance and shall give Dr.
28

1 Rubin a time reasonable under the circumstances within which to cure the non-compliance. Should Dr.
2 Rubin fail to cure the non-compliance within the time allowed by the Executive Director, Dr. Rubin
3 agrees his chiropractor's license in the State of Nevada shall be automatically suspended without any
4 action of the Board other than the issuance of an Order of Suspension by the Executive Director. Upon
5 complying with the term, Dr. Rubin's chiropractor's license in the State of Nevada will be automatically
6 reinstated, assuming all other provisions of the Settlement Agreement are in compliance. Additionally,
7 Dr. Rubin's failure to comply with any term or condition of this Settlement Agreement may result in
8 further discipline by the Board, up to and potentially including revocation of his license. Board Staff may
9 take any and all actions it deems necessary to collect any sums ordered that remain unpaid. If Board Staff
10 is required to pursue judicial action to effect such collections, it shall be entitled to recover its attorney's
11 fees and costs incurred in pursuing such judicial action.

12 Signed this 10 day of September, 2016.

13 Respondent Mark Rubin

Chiropractic Physicians' Board of Nevada

14
15 By 
16

Mark Rubin, D.C., Respondent

By 
17

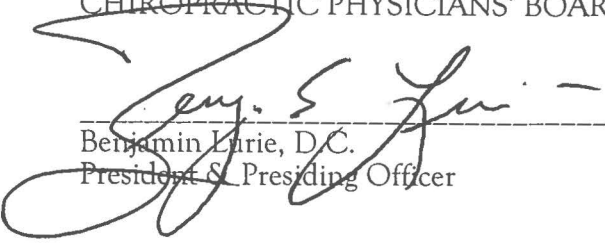
Tracy DiFillipo, J.D.
Investigating Board Member

1 ORDER

2 WHEREAS, on September 10, 2016, the Chiropractic Physicians' Board of Nevada
3 approved and adopted the terms and conditions set forth in the Agreed Settlement and Order with Mark
4 Rubin, D.C. IT IS SO ORDERED.

5 SIGNED AND EFFECTIVE this 10 day of September, 2016.

7 CHIROPRACTIC PHYSICIANS' BOARD OF NEVADA

8 
9 Benjamin Lurie, D.C.
10 President & Presiding Officer
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CHIROPRACTIC PHYSICIANS' BOARD OF NEVADA

AGENDA ACTION SHEET

TITLE: Agenda Item 10 PUBLIC HEARING: Will begin at 10:30 a.m. at the Public Utilities Commission, 9075 W. Diablo Drive, Suite 250, Room B, Las Vegas, NV 89148. Discussion to consider amendments to Nevada Administrative Code 634 – For possible action.

RECOMMENDED MOTION: Approve the recommended revisions to NAC 634.

PREPARED BY: Ben Lurie, DC

MEETING DATE: January 11, 2018

TIME REQUIRED: 45 minutes

BACKGROUND INFORMATION:

REVIEWED BY: ☒ President ☒ Secretary ☒ Executive Director

ACTION: ☐ Approved ☐ Approved w/Modifications ☐ Denied ☐ Continued

SEP 19 2017

RECEIVED
RENO, NEVADA 89502

**PROPOSED REGULATION OF THE
CHIROPRACTIC PHYSICIANS' BOARD OF NEVADA**

LCB File No. R064-17

September 18, 2017

EXPLANATION – Matter in *italics* is new; matter in brackets ~~[omitted material]~~ is material to be omitted.

AUTHORITY: §1, NRS 634.030 and 634.070; §2, 3 and 5, NRS 634.030; §4, NRS 634.030 and 634.123.

A REGULATION relating to chiropractic; authorizing the Chiropractic Physicians' Board of Nevada to require certain applicants for a license to practice chiropractic in this State to pass certain examinations; requiring an applicant for a certificate as a chiropractor's assistant to receive certain scores for closed-book and open-book examinations; prohibiting an applicant from bringing certain electronic devices into an examination facility; requiring the health care records of a patient of a chiropractic physician to contain certain documentation; and providing other matters properly relating thereto.

Legislative Counsel's Digest:

Existing law requires the Chiropractic Physicians' Board of Nevada to adopt reasonable regulations for the transaction of business and to enable the Board to carry out its duties of regulating chiropractic physicians and chiropractors' assistants. (NRS 634.030)

Existing law requires all applicants for a license to practice chiropractic in this State to pass all examinations prescribed by the Board. (NRS 634.070) Existing law requires an applicant to furnish evidence to the Board that the applicant either: (1) holds certificates which indicate that the applicant has passed Parts I, II, III and IV, and the portion relating to physiotherapy, of the examination administered by the National Board of Chiropractic Examiners; or (2) has actively practiced chiropractic in another state for not fewer than 7 of the immediately preceding 10 years without having any adverse disciplinary action taken against the applicant. (NRS 634.090) Existing regulations set forth that an applicant who has practiced chiropractic in another state for not fewer than 7 of the immediately preceding 10 years without having any adverse disciplinary action may, in lieu of passing Part IV of the examination administered by the National Board of Chiropractic Examiners, pass the Special Purposes Examination for Chiropractic prepared by the National Board of Chiropractic Examiners. (NAC 634.290) **Section 1** of this regulation authorizes the Chiropractic Physicians' Board of Nevada to require an

applicant who has practiced chiropractic in another state for not fewer than 7 of the immediately preceding 10 years without having any adverse disciplinary action to pass the Special Purposes Examination for Chiropractic prepared by the National Board of Chiropractic Examiners.

Existing law requires the Chiropractic Physicians' Board of Nevada to specify the formal training, including at least 12 months of study or the equivalent, that a properly qualified applicant to perform ancillary services relating to chiropractic must complete before the Board awards such an applicant a certificate as a chiropractor's assistant. (NRS 634.123) Existing regulations require the Board to at least once a year administer an examination to applicants for a certificate as a chiropractor's assistant. If such an applicant receives a score of at least 75 percent on the examination, he or she is entitled to a certificate as a chiropractor's assistant. If the applicant fails to receive a score of at least 75 percent on the examination the first time he or she takes the examination, the applicant may retake the examination within 1 year without paying an additional fee. If the applicant receives training and employment as a chiropractor's assistant trainee and fails to receive a score of at least 75 percent on the examination after two attempts and wishes to continue working as a chiropractor's assistant trainee, the supervising licensee must, within 30 days after the date of the notice from the Board of the results of the examination, submit a plan for additional training to the Board. (NAC 634.305) **Section 2** of this regulation requires an applicant to receive a score of at least 75 percent for a closed-book examination or a score of at least 90 percent for an open-book examination. **Section 4** of this regulation makes conforming changes.

Existing regulations prohibit an applicant for licensing as a chiropractic physician or for certification as a chiropractor's assistant from bringing any written or recorded material relating to the practice of chiropractic into the examination facility. (NAC 634.320) **Section 3** of this regulation further prohibits such an applicant from bringing any electronic device into the examination facility, unless the electronic device is approved by the Board.

Existing regulations require a chiropractic physician who is licensed by the Board to ensure that the health care records of his or her patients include documentation of certain treatment of a patient and documentation of information exchanged with a patient within 72 hours after the treatment is provided or the exchange of information occurs. (NAC 634.435) **Section 5** of this regulation requires a chiropractic physician who is licensed by the Board to ensure that the health care records of his or her patients include documentation that: (1) the chiropractic physician informed the patient of the benefits and risks of any chiropractic treatment or care the chiropractic physician intended to provide to the patient before actually providing such treatment or care; (2) the chiropractic physician informed the patient of reasonable alternate forms of treatment and about the benefits and risks of such treatments; and (3) the patient consented to the chiropractic treatment or care the chiropractic physician intended to provide to the patient before such treatment or care was provided.

Section 1. NAC 634.290 is hereby amended to read as follows:

634.290 1. ~~{Except as otherwise provided in this section and in}~~ **In** addition to the subjects of examination set forth in NRS 634.070, an applicant for a license to practice chiropractic in Nevada must pass:

(a) ~~{Part IV of the examination administered by the National Board of Chiropractic Examiners;}~~

~~—(b)}~~ An examination on the statutes and regulations of this State which are related to the practice of chiropractic, other than those set forth in this chapter and chapter 634 of NRS; and

~~{(c)}~~ **(b)** Any other subject or examination that the Board determines to be necessary. An examination required by the Board pursuant to this paragraph may include, without limitation, an examination on clinical rationale.

2. ~~{An}~~ **The Board may require an** applicant who has actively practiced chiropractic in another state in accordance with subparagraph (2) of paragraph (c) of subsection 1 of NRS 634.090 ~~{may, in lieu of passing Part IV of the examination administered by the National Board of Chiropractic Examiners,}~~ **to** pass the Special Purposes Examination for Chiropractic prepared by the National Board of Chiropractic Examiners.

3. To pass a subject or examination required pursuant to NRS 634.070 or this section, an applicant for a license to practice chiropractic in Nevada must receive a score of at least 75 percent for a closed-book examination and a score of at least 90 percent for an open-book examination.

Sec. 2. NAC 634.305 is hereby amended to read as follows:

634.305 1. At least once each year, the Board will administer an examination to applicants for a certificate as a chiropractor's assistant.

2. The examination will consist of the following subjects, including, without limitation:

- (a) Radiographic technology, protection, quality control and positioning of the patient;
- (b) Ancillary procedures and applications relating to chiropractic; and
- (c) The provisions of NRS and NAC that are related to the practice of chiropractic.

3. An applicant who receives a score of at least 75 percent ~~[on-the]~~ *for a closed-book examination or a score of at least 90 percent for an open-book examination* is entitled to a certificate as a chiropractor's assistant.

4. If an applicant fails to receive a score of at least 75 percent ~~[on-the]~~ *for a closed-book examination or a score of at least 90 percent for an open-book examination* the first time he or she takes the examination, the applicant may retake the examination within 1 year without payment of an additional fee.

5. If an applicant who receives training and employment as a chiropractor's assistant trainee pursuant to subparagraph (2) of paragraph (a) of subsection 2 of NAC 634.355 fails to receive a score of at least 75 percent ~~[on-the]~~ *for a closed-book examination or a score of at least 90 percent for an open-book examination* after two attempts and wishes to continue working as a chiropractor's assistant trainee, the supervising licensee must, within 30 days after the date of the notice from the Board of the results of the examination, submit a plan for additional training to the Board. The chair of the test committee will:

- (a) Approve or deny the plan; and
- (b) Determine whether the chiropractor's assistant trainee may continue working as a chiropractor's assistant trainee.

6. If, pursuant to paragraph (b) of subsection 5, the chair of the test committee determines that a chiropractor's assistant trainee may continue working as a chiropractor's assistant trainee, the chiropractor's assistant trainee may continue working as a chiropractor's assistant trainee if he or she:

(a) Pursuant to NAC 634.350, submits a new application for a certificate as a chiropractor's assistant and pays the required fee; and

(b) Provides the chair of the test committee with proof that the chiropractor's assistant trainee is enrolled in an educational course in a subject described in subsection 2.

7. If a chiropractor's assistant trainee who has submitted an application pursuant to paragraph (a) of subsection 6 fails to ~~pass any portion of the~~ *receive a score of at least 75 percent for a closed-book examination or a score of at least 90 percent for an open-book examination* after two attempts, the chiropractor's assistant trainee shall not work as a chiropractor's assistant trainee until the chiropractor's assistant trainee has ~~passed all the portions of the~~ *received a score of at least 75 percent for a closed-book examination [-] or a score of at least 90 percent for an open-book examination.*

8. An applicant for a certificate as a chiropractor's assistant who fails on two occasions to appear for an examination that he or she has been scheduled to take:

(a) Shall be deemed to have withdrawn his or her application;

(b) Forfeits any application fees paid to the Board; and

(c) Must, if he or she has been receiving training and employment as a chiropractor's assistant trainee pursuant to subparagraph (2) of paragraph (a) of subsection 2 of NAC 634.355, cease working as a chiropractor's assistant trainee.

↪ If the applicant applies thereafter for a certificate, the applicant must establish eligibility for the certificate in accordance with the provisions of this chapter and chapter 634 of NRS.

9. As used in this section, “chair of the test committee” means the member of the Board who is assigned by the Board to serve as the chair of the committee that is created by the Board to administer an examination to applicants for a certificate as a chiropractor’s assistant.

Sec. 3. NAC 634.320 is hereby amended to read as follows:

634.320 During the examination of applicants for licensing as chiropractic physicians or for certification as chiropractor’s assistants, only members of the Board, testing consultants, examination proctors, applicants and persons requested by the Board will be allowed in the waiting area for applicants or in the room in which the examination is given. An applicant may not:

1. Communicate with any person while he or she is in the waiting area, halls or restrooms;
2. Leave the waiting area without the permission of a member of the Board, a testing consultant or an examination proctor; or
3. Bring any *electronic device, unless the electronic device is approved by the Board, or any* written or recorded material relating to the practice of chiropractic into the examination facility.

Sec. 4. NAC 634.355 is hereby amended to read as follows:

634.355 1. An applicant for a certificate as a chiropractor’s assistant must, in addition to fulfilling the requirements of NAC 634.350, furnish evidence satisfactory to the Board that he or she:

- (a) Is 18 years of age or older; and

(b) Has received a score of at least 75 percent ~~[on an]~~ *for a closed-book* examination *or a score of at least 90 percent for an open-book examination* administered by the Board on the provisions of NRS and NAC that are related to the practice of chiropractic.

2. In addition to the requirements set forth in subsection 1 and NAC 634.350, an applicant for a certificate as a chiropractor's assistant must furnish evidence satisfactory to the Board that he or she:

(a) Satisfies one of the following:

(1) Is certified as a chiropractor's assistant by a program for chiropractor's assistants that is approved by the Board; or

(2) Has had 6 months of full-time, or 12 months of part-time, training and employment as a chiropractor's assistant trainee from a licensee.

(b) Has received a score of at least 75 percent ~~[on the]~~ *for a closed-book* examination *or a score of at least 90 percent for an open-book examination* for certification required pursuant to NAC 634.305.

3. Evidence of an applicant's completion of approved training pursuant to subparagraph (2) of paragraph (a) of subsection 2 must consist of a certification by each licensee who supervised the work and training of the applicant.

4. The Board may, at its discretion:

(a) Waive one or more of the requirements of this section for good cause shown.

(b) Upon receipt from an applicant of documentation demonstrating that the applicant has received additional formal training, education or experience, grant the applicant credit toward fulfilling the requirements of subparagraph (2) of paragraph (a) of subsection 2.

Sec. 5. NAC 634.435 is hereby amended to read as follows:

634.435 1. In addition to the requirements set forth in chapter 629 of NRS, a licensee shall ensure that the health care records of his or her patients:

(a) *Include documentation signed by the patient which shows that:*

(1) The licensee informed the patient of the benefits and risks of any chiropractic treatment or care the licensee intended to provide to the patient before actually providing such treatment or care;

(2) The licensee informed the patient of the availability of reasonable alternate forms of treatment and the benefits and risks of such treatment if a reasonable licensee would know of and disclose such forms of treatment under circumstances inherent to the patient; and

(3) The patient consented to the chiropractic treatment or care the licensee intended to provide to the patient before such treatment or care was provided.

(b) Include documentation of treatment of a patient, as specified in subparagraph (3) of paragraph ~~[(e)]~~ (f), within 72 hours after that treatment;

~~[(b)]~~ (c) Include documentation of information exchanged with a patient within 72 hours after that exchange;

~~[(e)]~~ (d) Are clear, legible, complete and accurate;

~~[(d)]~~ (e) Remain confidential, where such confidentiality is required by law;

~~[(e)]~~ (f) Contain the following information:

(1) A description of the chief complaint for which the patient sought treatment from the licensee;

(2) Documentation of any significant event that affects the chief complaint of the patient or the general history of the health of the patient; and

(3) An accurate record of the diagnostic and therapeutic procedures that the licensee has employed in providing chiropractic services to the patient, including, without limitation:

(I) Examinations and the results of those examinations;

(II) Diagnoses;

(III) Plans for treatment of the patient, including, without limitation, any changes in those plans and the reasons for those changes;

(IV) Areas of the body of the patient on which the licensee has performed chiropractic adjustments;

(V) Dates on which the licensee provided chiropractic services to the patient; and

(VI) A record of the response of the patient to treatment; and

~~{(f)}~~ (g) Are not altered without recordation of the date and time of the alteration and the identity of the person who makes the alteration, whether the records are made and maintained on paper or in a computer.

2. A licensee who obtains the records of a patient of another licensee because of a change in the ownership of a practice shall:

(a) Report to the Board the transfer of the records; and

(b) Inform the Board, in writing, of the physical location of those records within 15 days after the change in ownership of the practice.

3. A licensee who retires, moves to another state, closes his or her practice or changes the status of his or her license from active to inactive shall, within 15 days after the retirement,

move, closure or change of status, inform the Board of the location at which the records of his or her patients may be obtained.

4. The administrator of the estate of a licensee who is deceased shall inform the Board of the location at which the records of the patients of the deceased licensee will be retained.

5. As used in this section, “patient” includes:

(a) A member of the licensee’s family;

(b) A relative of the licensee; and

(c) A member of the licensee’s staff,

↳ to whom the licensee provides chiropractic services.

CHIROPRACTIC PHYSICIANS' BOARD OF NEVADA

AGENDA ACTION SHEET

TITLE: Agenda Item 11 Discuss the status/completion of the disciplinary case in the matter of Dr. Devon Luzod – For possible action.

RECOMMENDED MOTION: No recommendation

PRESENTED BY: Ben Lurie, DC

MEETING DATE: January 11, 2018

TIME REQUIRED: 15 minutes

BACKGROUND INFORMATION: Pursuant to the Settlement Agreement & Order Dr. Luzod was ordered to reimburse his patients based on the audit results and provide the Board with evidence that the amounts were paid in full within 180 days which did occur. There is a small outstanding discrepancy that is currently being addressed.

REVIEWED BY: X President X Secretary X Executive Director

ACTION: Approved Approved w/Modifications Denied Continued

CHIROPRACTIC PHYSICIANS' BOARD OF NEVADA

AGENDA ACTION SHEET

TITLE: **Agenda Item 12** Legislative Matters – For possible action

A. Dan Musgrove Advocacy report

B. Consideration to propose dry needling

C. Resubmit AB328 to the 2019 Legislative Session

RECOMMENDED MOTION: **No recommendation.**

PRESENTED BY: **Ben Lurie, DC**

MEETING DATE: **January 11, 2017**

TIME REQUIRED: **10 minutes**

BACKGROUND INFORMATION: **The Board submitted a bill draft request proposing revisions to NRS 634 to the 2017 Legislative Session, however Assembly Bill 328 did not pass.**

REVIEWED BY: X President X Secretary X Executive Director

ACTION: Approved Approved w/Modifications Denied Continued

**MOCK-UP OF BILL DRAFT LANGUAGE FOR 2017 SESSION FROM
THE CHIROPRACTIC PHYSICIANS' BOARD OF NEVADA**

Section 1. NRS 634.014 shall be amended to read as follows:

634.014 "Chiropractic adjustment" means ~~the~~ *any* application of a precisely controlled force applied by hand or mechanical device to a specific focal point of the anatomy for the sole purpose of creating a specific angular movement in skeletal articulations to eliminate or decrease interference with neural transmission ~~and~~ *, to improve health, or to* correct or attempt to correct subluxation complex.

Sec. 2. NRS 634.020 shall be amended to read as follows:

634.020 1. The Chiropractic Physicians' Board of Nevada, consisting of seven members appointed by the Governor, is hereby created.

2. The Governor shall appoint:

(a) Four members who are:

(1) Graduates of chiropractic schools or colleges giving a course of study embracing the following subjects: Anatomy, bacteriology, chiropractic theory and practice, diagnosis or analysis, elementary chemistry and toxicology, histology, hygiene and sanitation, obstetrics and gynecology, pathology, physiology and symptomatology;

(2) Licensed under this chapter; and

(3) Actually engaged in the practice of chiropractic in this State and who have been so engaged in this State for at least 3 years preceding their appointment.

(b) One member who represents the interests of persons or agencies that regularly provide health care to patients who are indigent, uninsured or unable to afford health care. This member may be licensed under the provisions of this chapter.

(c) Two members who are representatives of the general public. A member appointed pursuant to this paragraph must not be:

- (1) A chiropractor or a chiropractor's assistant; or
- (2) The spouse or the parent or child, by blood, marriage or adoption, of a chiropractor or a chiropractor's assistant.

3. At least two of the appointees must have had a course in physiotherapy in a school or college of chiropractic. ~~[Not more than two persons who are resident graduates of the same school or college of chiropractic may serve simultaneously as members of the Board.]~~

4. If a member is not licensed under the provisions of this chapter, the member shall not participate in preparing any examination required by the Board.

Sec. 3. NRS 634.080 shall be amended to read as follows:

NRS 634.080 1. ~~[An applicant for examination must file an application not less than 60 days before the date of the examination.]~~

~~2.]~~ 2. An application must be filed with the Secretary of the Board on a form to be furnished by the Secretary.

~~[3.]~~ 2. An application must be verified and must state:

(a) When and where the applicant was born, the various places of the applicant's residence during the 5 years immediately preceding the making of the application and the address to which he or she wishes the Board to mail the license.

(b) The name, age and sex of the applicant.

(c) The names and post office addresses of all persons by whom the applicant has been employed for a period of 5 years immediately preceding the making of the application.

(d) Whether or not the applicant has ever applied for a license to practice chiropractic in any other state and, if so, when and where and the results of the application.

(e) Whether the applicant is a citizen of the United States or lawfully entitled to remain and work in the United States.

(f) Whether or not the applicant has ever been admitted to the practice of chiropractic in any other state and, if so, whether any discharge, dismissal, disciplinary or other similar proceedings have ever been instituted against the applicant. Such an applicant must also attach a certificate from the chiropractic board of each state in which the applicant was licensed, certifying that the applicant is a member in good standing of the chiropractic profession in that state, and that no proceedings affecting the applicant's standing as a chiropractor are undisposed of and pending.

(g) The applicant's general and chiropractic education, including the schools attended and the time of attendance at each school, and whether the applicant is a graduate of any school or schools.

(h) The names of:

(1) Two persons who have known the applicant for at least 3 years; and

(2) A person who is a chiropractor licensed pursuant to the provisions of this chapter or a professor at a school of chiropractic.

(i) All other information required to complete the application.

[4-] 3. An application must include a copy of the applicant's official transcript from the school or college of chiropractic from which the applicant received his or her degree of doctor of chiropractic, which must be transmitted by the school or college of chiropractic directly to the Board.

4. An applicant may take the examination at any time after his or her application has been determined to be complete by the Executive Director.

Sec. 4. NRS 634.090 shall be amended to read as follows:

NRS 634.090 1. An applicant must, in addition to the requirements of NRS 634.070 and 634.080, furnish satisfactory evidence to the Board:

(a) That the applicant is of good moral character;

(b) ~~[Except as otherwise provided in subsection 2, not less than 60 days before the date of the examination, that]~~ *That* the applicant has a high school education and is a graduate from a college of chiropractic which is accredited by the Council on Chiropractic Education or which has a reciprocal agreement with the Council on Chiropractic Education or any governmental accrediting agency, whose minimum course of study leading to the degree of doctor of chiropractic consists of not less than 4,000 hours of credit which includes instruction in each of the following subjects:

- (1) Anatomy;
- (2) Bacteriology;
- (3) Chiropractic theory and practice;
- (4) Diagnosis and chiropractic analysis;
- (5) Elementary chemistry and toxicology;
- (6) Histology;
- (7) Hygiene and sanitation;
- (8) Obstetrics and gynecology;
- (9) Pathology;
- (10) Physiology; and

(11) Physiotherapy; and

(c) That the applicant:

(1) Holds certificates which indicate that he or she has passed parts I, II, III and IV, and the portion relating to physiotherapy, of the examination administered by the National Board of Chiropractic Examiners; or

(2) Has actively practiced chiropractic in another state for not fewer than 7 of the immediately preceding 10 years without having any adverse disciplinary action taken against him or her.

2. The Board may, for good cause shown, waive the requirement for a particular applicant that the college of chiropractic from which the applicant graduated must be accredited by the Council on Chiropractic Education or have a reciprocal agreement with the Council on Chiropractic Education or a governmental accrediting agency.

3. Except as otherwise provided in subsection 4, every applicant is required to submit evidence of the successful completion of not less than 60 credit hours at an accredited college or university.

4. Any applicant who has been licensed to practice in another state, and has been in practice for not less than 5 years, is not required to comply with the provisions of subsection 3.

Sec. 5. NRS 634.100 shall be amended to read as follows:

NRS 634.100 1. An applicant for a license to practice chiropractic in this State must pay the required fee to the Secretary of the Board ~~[not less than 60 days]~~ before the date of the examination.

2. Except as otherwise provided in NRS 622.090:

(a) For a written, closed-book examination which is administered in person by the Board, a score of 75 percent or higher in all subjects taken on the examination is a passing score.

(b) For a written, open-book examination which is administered in person by the Board or an examination that is taken online, a score of 90 percent or higher in all subjects taken on the examination is a passing score.

3. If an applicant fails to pass the first examination, the applicant may take a second examination within 1 year without payment of any additional fees. Except as otherwise provided in NRS 622.090, credit must be given on this examination for all subjects previously passed.

4. An applicant for a certificate as a chiropractor's assistant must pay the required fee to the Secretary of the Board before the application may be considered.

Sec. 6. NRS 634.140 shall be amended to read as follows:

1. Unprofessional conduct.

2. Conviction of:

(a) A violation of any federal or state law regulating the possession, distribution or use of any controlled substance or any dangerous drug as defined in chapter 454 of NRS;

(b) A [~~felony~~] *crime* relating to the practice of chiropractic;

(c) A violation of any of the provisions of NRS 616D.200, 616D.220, 616D.240 or 616D.300 to 616D.440, inclusive; or

(d) Any offense involving moral turpitude.

3. Suspension or revocation of the license to practice chiropractic by any other jurisdiction.

4. ~~[Gross or repeated malpractice]~~ *Incompetence or negligence in the practice of chiropractic medicine.*

5. Referring, in violation of NRS 439B.425, a patient to a health facility, medical laboratory or commercial establishment in which the licensee has a financial interest.

6. Operation of a medical facility, as defined in NRS 449.0151, at any time during which:

(a) The license of the facility is suspended or revoked; or

(b) An act or omission occurs which results in the suspension or revocation of the license pursuant to NRS 449.160.

↪ This subsection applies to an owner or other principal responsible for the operation of the facility.

Sec. 7. NRS 634.190 shall be amended to read as follows:

1. The person charged is entitled to a hearing before the Board, but the failure of the person charged to attend a hearing or to defend himself or herself does not delay or void the proceedings. The Board may, for good cause shown, continue any hearing from time to time.

2. If the Board finds the person ~~[guilty as charged]~~ *violated any or all of the charges made* in the complaint, it may by order:

(a) Place the person on probation for a specified period or until further order of the Board.

(b) Administer to the person a public reprimand.

(c) Limit the practice of the person to, or by the exclusion of, one or more specified branches of chiropractic.

(d) Suspend the license of the person to practice chiropractic for a specified period or until further order of the Board.

(e) Revoke the license of the person to practice chiropractic.

(f) Impose a fine of not more than \$5,000 for each act which constitutes a ground for disciplinary action, which must be deposited with the State Treasurer for credit to the State General Fund.

↪ The order of the Board may contain such other terms, provisions or conditions as the Board deems proper ~~[and which are not inconsistent with law]~~ *to remedy or address the facts and circumstances of the particular case.*

3. If the Board finds that a licensee has violated the provisions of NRS 439B.425, the Board shall suspend the license for a specified period or until further order of the Board.

4. The Board shall not administer a private reprimand.

5. An order that imposes discipline and the findings of fact and conclusions of law supporting that order are public records.

Sec. 8. NRS 634.015 is repealed.

TEXT OF REPEALED SECTION

NRS 634.015 “Gross malpractice” defined. “Gross malpractice” means malpractice where the failure to exercise the requisite degree of care, diligence or skill consists of ministering to a patient while the chiropractor is under the influence of alcohol or any controlled substance.

CHIROPRACTIC PHYSICIANS' BOARD OF NEVADA

AGENDA ACTION SHEET

TITLE: **Agenda Item 13** Board Counsel Report – For possible action.

RECOMMENDED MOTION: **No recommendation.**

PREPARED BY: **Louis Ling**

MEETING DATE: **January 11, 2018**

TIME REQUIRED: **20 minutes**

BACKGROUND INFORMATION:

REVIEWED BY: ☒ President ☒ Secretary ☒ Executive Director

ACTION: ☐ Approved ☐ Approved w/Modifications ☐ Denied ☐ Continued

CHIROPRACTIC PHYSICIANS' BOARD OF NEVADA

AGENDA ACTION SHEET

TITLE: **Agenda Item 14** Review & approval of current Investigator proposals– For possible action.

RECOMMENDED MOTION: **No recommendation.**

PRESENTED BY: **Ben Lurie, DC**

MEETING DATE: **January 11, 2018**

TIME REQUIRED: **10 minutes**

BACKGROUND INFORMATION: **At the Boards' October 11, 2017 meeting it was determined to request proposals to possibly fill an investigator role on an as-needed basis. Please see the attached proposals.**

REVIEWED BY: X President X Secretary X Executive Director

ACTION: Approved Approved w/Modifications Denied Continued

Investigator Position

	First	Last
A.	Heidi	Almase, Esq.
B.	Mark	Cappel
C.	Tim	Copenhefer
D.	Wayne	Fazzino
E.	Michael	Lawrence
F.	Sarai	Magallanes
G.	Dierdre	McCain
H.	Mario	Pieracci
I.	Al	Reshaw
J.	David	Rovetti, DC
K.	John	Share

A.

HEIDI ALMASE, Esq.

521 Parkway East, Las Vegas, NV 89106 • 702/580-9622

VIA EMAIL TO: CHIROBD@CHIROBD.NV.GOV

December 27, 2017

Julie Strandberg, Executive Director
Chiropractic Physicians' Board of Nevada
4600 Kietzke Lane, Ste. M245
Reno, NV 89502

Re: Vacancy Investigator

Dear Ms. Strandberg,

Please accept the enclosed documentation in support of my application for the posted position for Investigator with the Chiropractic Physicians' Board listed on the State of Nevada job website. I appreciate your consideration of my application.

I have experience as an investigator, attorney and as a judicial officer. Prior to law school, I was a state peace officer for the Nevada Division of Parole and Probation as well as an investigator for the Nevada Office of the Attorney General. In the latter capacity, I was responsible for fraud investigation as well as assisting the Nevada Missing Children's Clearinghouse with domestic and international parental abduction investigation. My experience is diverse and I consider myself flexible and able to communicate with people from all walks of life. As a judicial officer, my greatest accomplishment was the creation of the City's first Mental Health Court for which my team and I received national recognition. We were one of four courts to receive such recognition. I have a Master's Degree in Clinical Psychology and feel this background was particularly beneficial in the success of the Mental Health Court.

Prior to taking the bench, I worked as a Deputy Attorney General, practicing primarily in non-capital *habeas* litigation. As part of that practice, I argued in both the Ninth Circuit Court of Appeals and the Federal District Court for Nevada. I felt my background as an investigator was an asset in this position. Though formerly a prosecutor, I consider my background liberal and oriented towards seeking the correct result rather than a singularly punitive orientation.

Please do not hesitate to contact me if I can answer any questions or concerns.

Sincere Regards,

/s/ Heidi Almase, Esq.

Heidi Almase, Esq.

521 Parkway East, Las Vegas, Nevada 89106
Telephone: 702/580-9622

Email: Battlborn@hotmail.com

Professional Experience**Judge**

July, 2011 to July 2017

Las Vegas Municipal Court, Dept. 3
495 S. Main St., Las Vegas, NV 89101

702/229-2407

Term: July 2011 to June 2017 (6 year term, elected)

Elected to the Las Vegas Municipal Court bench in the 2011 election. Presided over criminal misdemeanors and civil matters not in excess of \$2,500. Oversaw the Habitual Offender Prevention and Education (HOPE) adult drug court in addition to the Serious Traffic Offender Program (STOP) court. Started the City's first Mental Health Court, winning a national award for creative care in 2016. Member of the Judicial Council of Southern Nevada, and the Nevada Judges of Limited Jurisdiction and Alternate Member, Nevada Commission on Judicial Discipline (Limited Jurisdiction Courts).

Partner

August, 2009 to July, 2011

The Almase Law Group LLC
520 S. Ninth St., Las Vegas, NV 89101

702/474-0404

Managing Member and attorney for a two attorney office specializing primarily in criminal defense, domestic relations, appellate law and limited personal injury. Law firm dissolved 2011.

Deputy City Attorney, Civil Division

December, 2007 to August, 2009

City of Las Vegas, City Attorney's Office
495 S. Main St., Las Vegas, NV 89101

Supervisor: Bradford Jerbic, City Attorney

702/229-6629

Assigned to the litigation team with responsibility for cases involving the City of Las Vegas and with client representation to the various City divisions including, among others, Business Licensing and Neighborhood Services. Litigation cases involved code enforcement, public and chronic nuisance, personal injury suits, collections and appellate matters.

Deputy Attorney General

August, 2004 to December, 2007

Nevada Office of the Attorney General, Criminal Division
555 E. Washington Av., Ste. 3300, Las Vegas, NV 89101
Supervisor: Conrad Hafen, Chief Deputy Attorney General

702/486-3240

Assigned to the criminal division with responsibility for both federal and state habeas litigation as well as the prosecution of misdemeanor, gross misdemeanor and felony crimes occurring within the state of Nevada. Prosecution involved all phases of case preparation including grand jury and preliminary hearing processes through appeals before both the Nevada Supreme Court and the Ninth Circuit Court of Appeals. Other activities included special assignment to the Nevada Missing Children's Clearinghouse involving the location, return and arrest of the responsible party in domestic and international child abductions.

Deputy City Attorney, Criminal Division
City of Las Vegas, City Attorney's Office
495 S. Main St., Las Vegas, NV 89101

August, 2003 to August, 2004

Supervisor: Benard Little, Assistant City Attorney (retired)

702/229-6201

Assigned as a Deputy City Attorney responsible for the prosecution of misdemeanor crimes occurring within the City of Las Vegas' municipal jurisdiction. Prosecution of cases involved all aspects of case preparation including, but not limited to, witness preparation, issuance of subpoenas, motion practice, screening, negotiation and litigation of misdemeanor crimes and misdemeanor appeals to the Clark County Eighth Judicial District Court as well as appeals and writs to the Nevada Supreme Court.

Judicial Law Clerk
Nevada Supreme Court
408 E. Clark Ave., Las Vegas, NV 89101
Supervisor: Justice Nancy A. Becker

August, 2001 to August, 2003

702/486-9300

Judicial law clerk assigned to the Las Vegas office of the Nevada Supreme Court with primary responsibility for briefing civil and criminal cases for the judicial panels or court *en banc*. Additional responsibilities included initial drafting of orders and opinions as directed by the Court.

Education

Juris Doctor of Law, William S. Boyd School of Law, University of Nevada, Las Vegas – May, 2001
Managing Editor, Nevada Law Journal

Master of Arts, Clinical Psychology, University of Nevada, Las Vegas – May, 1996
Honors Intern, Federal Bureau of Investigation, Behavioral Science Services Unit, Quantico, VA

Bachelor of Arts, General Psychology, University of Nevada, Las Vegas – May, 1992
Honors Program, *Summa cum laude*

Additional Professional Experience and Associations

Former Nevada Peace Officer, Category I, Nevada Law Enforcement Academy – 1995 to 1998
Nevada Division of Parole and Probation
Nevada Office of the Attorney General

Member in Good Standing, State Bar of Nevada

Pro Bono volunteer, Legal Aid Center of Southern Nevada
Domestic Relations/Child Abuse and Neglect

Pro Bono Attorney, Women In Need (WIN) Program, Las Vegas Municipal Court, Department 1
A diversionary specialty court program for women with substance abuse related crimes

B.
December 18, 2017

Mark Cappel
4830 Rose Rock Lane
Reno, NV 89511
(415) 425-7414

Julie Strandberg
Executive Director
Chiropractic Physicians' Board of Nevada
4600 Kietzke Lane, Suite M245
Reno, NV 89502

Dear Ms. Strandberg,

I wish to interview for the Investigator position with the Chiropractic Physicians' Board. As requested, attached is my resume. I found at the hr.nv.gov Web site. I am not including a "cost proposal" because I do not know what that means in an employment-related context.

I have what may be an unusual background and training for this position, though I believe I am well qualified. I have been an assistant editor, editor-in-chief, and web editor for a variety of publishers. In the mid-2000s, I earned a juris doctorate degree. I used my JD to write and edit several hundred law-related Web pages targeted at a lay audience.

Ten years ago, I started volunteering for the Perimeter department at Burning Man. This department is akin to border patrol. Here, I learned techniques to interrogate people who enter the event closure area to determine their intent. Thanks to my legal training and experience as a journalist, I became skilled in listening to answers and reading non-verbal body language. The purpose of our contemporaneous investigation, which involves collecting suspects and witness statements plus analyzing radar and other electronic evidence, is to create a determination for BLM Rangers whether the suspect should be cited for trespass.

I am now a seasonal employee of the event (two weeks per year) and an assistant manager of Perimeter where one of my duties is to train staff and volunteers in interrogation techniques and evidence gathering.

Through my legal training, I know how to read the NRS and determine the evidence required to build a viable case. My non-traditional law enforcement experience has taught me how to handle a variety of personality types in an adversarial setting.

I hope we can meet to discuss this position and opportunity.

Best regards,

Mark Cappel

enc.

Mark Cappel
4830 Rose Rock Ln.
Reno, NV 89511
(415) 425-7414 cell
markcappel@gmail.com

Experience

Freelance Writer

October 2016 to present

Ghostwrite articles for personal finance Web site. Also, conduct marketing and lead research for telecommunications and ISP provider using public databases.

Installer and Electrician's Assistant Black Rock Solar, Reno NV

Nov 2016 to March 2017

Temporary employment installing solar panels on commercial buildings operated by non-profit and charitable organizations in Reno area. Assisted electrician by bending and installing conduit, wiring trunk cables, and pulling wire. BRS shut down due to change in financial incentives in solar market.

Senior Editor

May 2015 to October 2016

ABUV Media, MoneyGeek.com and LetsGoSolar.com

Created technical content for Web sites devoted to helping consumers make large financial choices. Created tools to help people decide if refinancing a mortgage, or buying or leasing a solar system is a smart decision.

Editor

May 2009 to May 2015

Bills.com

Researched, wrote, edited, assigned articles for a personal finance Web site. Wrote advice blog and responded to approximately 1,000 reader questions and 5,000 reader comments. Most questions and comments were of a legal nature, and required researching state collections, mortgage, and debt laws. Occasionally answered reader questions on the telephone. Conducted SEO testing and site analytics.

Acquisitions editor

January 2005 to December 2008

Open source zone, IBM developerWorks, <http://www.ibm.com/developerworks>

Researched, assigned, and edited articles and tutorials for IBM developerWorks, a site for developers interested in Eclipse, PHP, and Apache Geronimo. Doubled zone's pageviews. Created weekly newsletter for 10,000 subscribers. Managed zone's manuscript budget and relationships with freelance and IBM authors. Marked-up content using XML tags. Represented developerWorks at events and trade shows.

Executive editor

January 2004 to January 2005

Windows Server System Magazine, Fawcette Technical Publications, San Mateo

Responsible for editorial planning, assigning stories to freelancers, development and content editing of stories, creating cover concepts, writing editorials, writing headlines and coverlines, and represented magazine at trade shows. Supervised managing editor. Put publication back on production schedule, and smoothed ruffled feathers of authors who had not been paid for more than 12 months.

Various positions, including editor-in-chief

June 1990 to July 2003

LinuxWorld, IDG.net, Sunworld, Advanced Systems magazine, IDG, San Francisco

Worked on print and online periodicals, including launching IDG's portal to its 290 Web sites around the world. Wrote news, managed reviews lab, assigned and edited feature stories, managed editors and reporters, created editorial calendars and budgets, started newsletters, and grew readership and pageviews in online properties.

Education

- Juris Doctor, Golden Gate University, San Francisco, May 2006.
- Bachelor of Science, University of Wisconsin-Madison School of Journalism and Mass Comm., May 1984.

Personal

- Producer, stage manager, actor, and videographer, Crystal Springs Players, San Mateo, CA
- Perimeter Assistant Manager and Shift lead, Black Rock City LLC, Black Rock City, NV
- Co-founder, Black Rock Astronomical Society and current board member of Reno Core Group

C.

Dear Ms. Strandberg:

Upon learning of your need for an experienced Investigator to come on board with the Chiropractic Physician's Board of Nevada, I quickly decided to submit the enclosed resume detailing my experience and credentials. I became aware of this position on the State of Nevada job board. With comprehensive expertise in a variety of techniques and tools to run covert domestic, corporate, and criminal investigations, I believe I would quickly exceed your expectations for this role.

Throughout my career, I have amassed a breadth of expertise in performing high profile investigations and analyses, leading motivated and productive teams, and generating detailed and accurate reports while maintaining a dedicated focus on preventing potential future criminal activity. My background includes successful experience assembling and examining evidence for lawyers, insurance companies, and private citizens. From obtaining covert surveillance and securing sworn statements to testifying in court and preparing concise reports, my experience has continually resulted in completion of cases.

Consider the following highlights of my experience:

- More than 14 years of investigation, risk assessment and management expertise gained during my tenure as an Investigator; managed case assignments, gathered and verified evidence, interviewed sources and witnesses, analyzed records, and communicated with local law enforcement agencies to achieve documented results.
- Determined the scope, timing, momentum, and direction of investigations to drive decision-making and meet time-sensitive needs/requirements.
- Achieved a reputation for thoroughness, efficiency, and the ability to quickly build rapport with individuals from diverse backgrounds and situations.

With my deep expertise in performing all facets of internal and external case investigation, complemented by my inherent interpersonal, analytical and problem-solving skills, I am ready to provide outstanding service on your team. I look forward to discussing the position with you in further detail.

Thank you for your consideration.

Sincerely,
Tim Copenhefer

TIM JAMES COPENHEFER

7604 Capstick Ave | Las Vegas, NV 89129 | 702 279-4428 | copenhefertim@yahoo.com

OBJECTIVE

- To secure a position with a well established organization with a stable environment that will lead to a lasting relationship in the field of risk management, investigations and security.

SKILLS PROFILE

- Certified Forensic Interviewer (CFI)
- Wicklander & Zulwaski Interrogation Certified
- Wicklander & Zulwaski Premier Investigator Certified
- Risk Management Certified
- High Risk Internal & ORC Investigation experience.
- International Risk Assessment & Safety Consulting

EMPLOYMENT HISTORY

Division Asset Protection Manager, EZCORP

5/2015-Current

Las Vegas, NV

- Review internal controls, and adherence to policies and procedures that affect company assets.
- Conduct training when and where necessary.
- Reduces inventory shrinkage through partnerships with all levels of operations in the development and execution of Asset Protection initiatives.
- Investigate and resolve incidents discovered or reported, identifying causes and vulnerabilities.
- Execute Company initiatives, policies, and procedures to mitigate losses and maximize company performance.
- Report and analyzes robberies, burglaries, and high impact crime. Recommend improvements and procedures to Senior Management to mitigate impact from high risk crime.
- International Risk Management auditing, completing investigations, and risk assessment.

Loss Prevention/Risk, Clark County Credit Union

6/2014-5/2015

Las Vegas, NV

- Collection and filing of information for the BSA.
- Conduct research, investigations, account review and monitor identify theft.
- Monitor identity trends and patterns of money laundering and report to the BSA and AML
- Ensure compliance with state and federal regulatory mandates.

Project Manager/Risk, Construction Ahead Inc.

1/2013-4/2014

Kennewick, WA

- Perform a key role in project planning, budgeting, risk, and identification of resources needed.
- Project accounting functions including managing the budget, tracking of team expenses and minimizing exposure of risk in the project.
- Coordinate team schedules and efforts of all parties involved with multiple projects across multiple states.
- Identify the elements of project design and construction likely to give rise to disputes and claims;

- Monitor compliance to state and federal regulations of project impact.
- Investigation all violations of policies or regulations and report to the correct agencies in a timely manner.

District Loss Prevention Manager, Sears Holding Inc.

4/2007-12/2013

Kennewick, WA

- Controls shrink for multiple units and lower costs for safety and customer claims.
- Investigate and interview high risk employees for possible theft.
- Independently analyze store data to identify associate behaviors and/or operational issues which may cause shrink.
- Execute key initiatives relating to operational accountability and environmental compliance.
- Multiple state coverage supervising seventy three employees.
- Manage multiple loss prevention teams and coordinate security and safety.

Asset Protection Investigator, Home Depot

6/2003-6/2007

Kennewick, WA

- Build internal cases for District Manager for interview and interrogation.
- Teach, coach, and train associates on proper operational processes as well as store safety compliance standards.

Education

Highline Community College, Des Moines, WA

Administration of Justice, A.A

Dean's List

Cost Proposal

The hourly rate for surveillance is billed at \$ 50 per hour/per investigator with a (3) three-hour minimum. The hourly rate for Telephone and/or Personal Interviews, Inquiries, Background, On-Line Investigations, Internet, Computer Database Research, Business/Corporate Record Searches, report writing, and CLIENT conferences shall be billed at \$50 per hour.

CLIENT agrees to compensate the agreed upon rates for any court appearances or depositions prior to or subsequent to the completion of the investigation, whether under order of subpoena or not and regardless of the party requesting the appearance. If courtroom testimony or deposition regarding this matter or any matter related to this investigation is required the fee will be \$50 per hour per investigator plus expenses.


**WAYNE A. FAZZINO, D.MIN.
1344 BRIDLE WAY
MINDEN, NEVADA 89423
(775) 450-6284**

December 29, 2017

**Ms. Julie Strandberg, Executive Director
Chiropractic Physicians' Board of Nevada
4600 Kietzke Lane, M-245
Reno, Nevada 89502-5000**

Dear Director Strandberg:

I have attached my resume for the Investigator position that is being advertised by the Chiropractic Physicians' Board of Nevada. I initially viewed your advertisement on the unclassified State of Nevada job board.

I am currently serving as the part time investigator/inspector with the Nevada Funeral and Cemetery Services Board. I retired from the Attorney General's Office in January 2017 having worked complex fraud and public integrity cases as a general crimes special investigator. I also had the opportunity to serve as chair for the Funeral Board where I received greatly appreciated direction from Senior Deputy Attorney General Henna Rasul who is legal counsel.

The Nevada Funeral and Cemetery Services Board currently compensates me at \$ 32.00 an hour. I usually work 16 to 20 hours a week unless conducting physical inspections throughout the state at funeral establishments. Salary considerations are negotiable.

Thank you for the opportunity to provide my application and cover letter with the Chiropractic Physicians' Board of Nevada. Happy New Year.

Sincerely,

Wayne A. Fazzino

WAYNE A. FAZZINO
1344 BRIDLE WAY
MINDEN, NEVADA 89423
(775) 450-6284
waynefazzino@yahoo.com

PROFESSIONAL EXPERIENCE

Nevada Funeral & Cemetery Services Board Inspector/Investigator Part-time	2017-Present
Nevada Funeral & Cemetery Services Board Chairman of the Board	2013-2016
Office of the Attorney General, Carson City, NV. Special Investigator/General Crimes/Public Integrity Division	2000-2017
Santa Cruz County District Attorney, Santa Cruz, CA. Inspector II	1984-2000
Douglas County District Attorney, Minden, NV. Special Investigator	1980-1984
J.C. Penney Company, Inc., Reno, NV. Director-Loss Prevention	1979-1980
City of Reno Police Department, Reno, NV. Police Officer	1978-1979
City of Los Angeles, Los Angeles, CA. Reserve and Regular Police Officer	1975-1978

EDUCATION:

Palo Alto High School, Palo Alto, CA. Diploma
Foothill College, Los Altos, CA. Associate of Arts
University of California Los Angeles, CA. Bachelor of Arts
Christian Bible College and Seminary, M.Th.; D.Min.

PROFESSIONAL CERTIFICATIONS:

- Nevada Peace Officer Standards and Training Category 1 Certification.
- California Peace Officer Standards and Training; Basic, Intermediate, and Advanced Certification.
- State of California Private Investigator's License
- Toastmasters International-Competent Toastmaster Award (ATM-B)
- Nevada Attorney General's Top Cop of the Year Award
- Doctor of Ministry Degree
- Licensed Chaplain

PROFESSIONAL AFFILIATIONS:

- Chair, Nevada Funeral and Cemetery Services Board 2013-2016
- Calvary Chapel Carson City, Board of Directors
- Sertoma Club of Carson City, Past President and Board Chairman
- Toastmasters; Past President and Vice President
- Carson City Senior Citizen Advisory Board, Past Board Member
- California District Attorney's Investigators Association, Past Board Member
- Child Quest International, Past Board Member

REFERENCES:

Judge Michael P. Gibbons
Nevada Court of Appeals
Supreme Court Building
201 S Carson St
Carson City, Nevada 89701
(775) 691-7492

Chief Bernard W. Curtis, Retired
Nevada Department of Parole and Probation
P.O. Box 2551
Minden, Nevada 89423
(775) 720-5010

Jennifer Kandt, Executive Director
Nevada Funeral & Cemetery Services Board
3740 Lakeside Drive, Suite 201
Reno, Nevada 89509
775-825-5535

E.

From: Michael E. Lawrence
11129 Rossi Avenue,
Las Vegas, Nevada, 89144
Tel: (702) 910-7237
E-mail: lawme@icloud.com

Date: December 13, 2017

To: Executive Director Julie Strandberg
Chiropractic Physicians' Board of Nevada
4600 Kietzke Lane, M-245
Reno, Nevada 89502-5000
Re: Investigator vacancy

Dear Ms. Strandberg,

This letter expresses my interest in applying for the Chiropractic Physicians' Board Investigator vacancy announcement as outlined on State of Nevada NEATS.

First, allow me to thank you for taking the time and clarifying my question. If I may, I would like to divide my letter into 3 different parts: I.) Introduction including my academic and professional background as it relates to investigations. II.) Cost Proposal. III.) Writing sample with an explanation (attached as a separate document).

Finally, in another separate document, attached is my resume along with professional references familiar with my work.

I. Introduction to my investigative and academic background.

For 6 years, I have worked as the Senior ("Chief") Investigator for the State of Nevada Commission on Ethics, leading investigations into various allegation of misconduct committed by public officers and public employees as it relates to Nevada Ethics in Government under NRS 281A.

Admittedly, the last two entries in my resume may not appear as impressive; however, it is simply due to a lack of employment opportunities in my area of interest. Regardless, I have an extensive experience in conducting complex investigations into various subject matters, including allegations of use of government position for securing/granting unwarranted benefits, privileges and/or exemptions, personnel issues, unfair hiring practices, unfair RFP/bidding process, allegations of fraud, financial crimes and many other types of violations.

As the Chief Investigator, I successfully managed the caseload of complaints and successfully completed 250-300 investigations. I have prepared 250-300 investigative reports ranging from simple, few page reports to complex reports containing over 3,000 pages. As a part of the investigations, I have conducted over 1,000 interviews with subjects, attorneys, witnesses, and complainants from various ethnic and socio-economic backgrounds, with individuals ranging from entry level employees to public officers in executive positions e.g. Governor, Attorney General, Secretary of State, Sheriff, mayors of numerous cities and police chiefs in nearly every county in the State of NV. Furthermore, I was honored with the opportunity to work on a case that ultimately ended up before the Supreme Court of the United States (*Commission on Ethics v. Carrigan*).

I provided numerous testimonies during public hearings, where the subject matter was often complex and technical in nature, including conducting presentations using video/audio files, graphs, and charts. Such

presentations were held before government boards where the general public was present and at times, it included news reporters and TV crews. Additionally, I have created numerous brochures, training manuals and other documents intended to improve agency efficiency.

I am able to clearly read and interpret the Nevada Revised Statutes and other pertinent federal and state laws; I am familiar with procedures applicable to Nevada court system as well as experienced in legal writing.

Aside from my academic achievements (AAS, BA, MPA and nearly completed Ph.D. - short of few seminars and dissertation, Diploma in Forensic Science and graduating from the Coroner Investigator Academy), my experience as the chief investigator for the State of Nevada, I spent several years in coroner/medical examiner's office, mostly working on "cold cases" involving unsolved homicides, suicides, accidents and other types of deaths. As such, I am familiar with medical terminology.

Due to the fact that I solved more "cold cases" than any other person involved, I have received an award from Clark County Manager and commendation from Clark County Coroner.

In addition, I spent several years working in an intelligence agency, first working on target analysis, later progressing into a position of a counterintelligence operative working as a part of a small unit tasked with locating and capturing individuals regarded as a threat to the national security e.g. weapons traffickers and terrorism suspects.

I am a highly organized, analytical and detail-oriented individual, capable of working independently, handling a voluminous caseload of complaints while adhering to the statutory deadlines, producing unbiased investigative reports, and always possessing unquestionable integrity. During my tenure, I have never missed a statutory deadline or a deadline set by the agency.

In addition, I have a solid understanding of various aspects of I.T. and I am always knowledgeable of the latest software and emerging trends in technology. Aside from being an investigator, I also served as the agency webmaster and I.T. technician. I have designed, developed and maintained agency website and created all electronic forms for the use by the general public (complaint forms) and also helped other agencies (e.g. Department of Administration) with creating forms for their use. In addition, I was tasked with selecting, ordering and negotiating contracts with suppliers for the agency IT needs including computers, printers, and servers.

While our agency did not generally receive complaints alleging sexual harassment, I am very familiar with the applicable laws including NRS Chapter 613 (Employment Practices), NRS Chapter 200 (Crimes Against the Person), Governor's Policy on Sexual Harassment under NAC 284, State of Nevada Employee Handbook and of course, Title VII of the 1964 CRA. (42 U.S.C. CH 21).

II. The Cost of Investigations.

In general, most State of NV agencies pay contracted investigators a minimum of \$20 - \$25 per hour depending on experience. Considering my experience, I find \$25 per hour at a very reasonable cost. However, the cost clearly requires a detailed discussion to ensure both sides have a clear understanding and the working relationship is beneficial to both sides. For example, it has to be clear from the start what would be the maximum allowed limit of hours for each case (which may vary from case to case by the complexity), travel expenses, the cost associated with obtaining hearing transcripts, printing, etc. Of course, I am open to any reasonable suggestions e.g. "trial period" for 90 days or first 2-3 cases, whatever comes first with the option of starting at the lower rate (\$20) before you feel comfortable with my work. If so, the full contracted cost of \$25 per hour will apply afterward. Again, these are just initial suggestions since I am not familiar with the caseload and the different budget categories.

That being said, it is without a doubt that you can contract investigator for less than my proposed cost. However, and perhaps for a lack of better terms, let me use an analogy: There is a reason why Ferrari cost more than GEO Metro.

III. Writing sample (Investigator's Report).

Attached are two separate documents. First, there is an investigator's report. While not required as a part of the application process, I think it is essential to show my writing, analytical and organizational skills. The other separately attached document is a sample of first few pages of the "Investigation Book" just to show how I organized my work. While I am open to sharing the entire book with you, I thought a sample would be sufficient as the entire book consists of nearly 600 pages.

While many investigative reports include a conclusion on the end, you might notice a lack thereof in my report. However, this is for a very specific reason rather than omission, it was specifically designed as such to ensure all subjects receive a fair hearing.

Over the years, I developed a great degree of trust with the Commission, which may sound flattering on one hand. However, on the other hand, the great degree of trust literally created complacency on the part of the Commissioners and on many cases, the Commissioners agreed with everything I noted in my report without even reading it in its full length. For that reason, after discussion with the agency's attorney, we decided not to include the conclusion in my reports. The job of an investigator is to collect fact (not opinions) and present them to the public body (Commission) for examination. By including the conclusion, it essentially made me the investigator, the prosecutor, the judge and the jury in one person, which is clearly unfair to the subject of the complaint.

However, because your agency is structured differently and the investigator is on an as-needed basis contract rather than a full-time employee, including conclusion in reports would not be an issue.

I am confident that my strong work ethics, positive team-player attitude, dependability, ability to read, understand and interpret the law and my extensive government-related investigatory experience will allow me to exceed any expectations for this position.

I welcome the opportunity to further discuss this position with you. The attached resume outlines my work history and provides contact information for professional references familiar with my work and my personal qualities.

Please feel free to contact me should you require any additional information. I am happy to provide any additional documents as needed.

Thank you for the consideration,
Respectfully,

Michael E. Lawrence

A handwritten signature in black ink that reads "Michael E. Lawrence". The signature is written in a cursive style with a large, stylized initial "M".

MICHAEL E. LAWRENCE

11129 Rossi Avenue, Las Vegas, NV 89144 Tel: (702) 910-7237 E-mail: lawme@icloud.com

EDUCATION

- M.P.A. - Master of Public Administration - *National University, La Jolla, CA* July 2007
- B.A. - Criminal Justice - *University of Nevada Las Vegas, Las Vegas, NV* May 2005
- A.A.S. - Criminal Justice - *College of Southern Nevada, Las Vegas, NV* May 2002
- Diploma - Forensic Science - *American Institute of Applied Science, Youngsville, NC* February 2000
- Ph.D. - Applied Management and Decision Sciences - *Walden Univesrity, Minneapolis, MN. Completed approximately 70% towards Ph.D. program* On hiatus
- M.D. - School of Medicine - *Universitas Carolina (Charles University) Prague, CZ* Dropped out

EXPERIENCE

BLS Llmousine Inc.

October 2016 - present

Driver

- Transporting passengers within the community

American Casino & Entertainment Properties LLC.

February 2016 to August 2016

Security Officer

- Protecting company assets and resort guests

Stable Development

February 2015 to November 2015

Front Desk Associate

- Various clerical duties, operating building surveillance

State of Nevada

August 2008 to April 2014

Senior (Chief) Investigator

- Investigating allegations of violations of Ethics in Government Laws as provided by NRS 281A. Analyzing investigative information for potential violations of the state law. Solely responsible for the management the entire case load of complaints received by the agency while adhering to the statutory deadlines, administrative procedures under NRS 233B and statutes pertaining to the agency i.e. NRS 281A. The investigation included a broad scale of issues relevant to an unwarranted use of government position and/or property for personal benefit such as (but not limited to) various degrees of conflict of interest, misuse of RFP's and/or competitive contract bidding, various financial crimes including issues involving tax, zoning/property issues, or various personnel/human resources issues.
- Successfully completed 250-300 investigations and over 1,000 interviews of complainants, subjects and witnesses including many high profile cases.
- Collecting and analyzing evidence related to the alleged violations, preparing investigative reports including relevant evidence and combining such into investigative "books".
- Preparing materials for administrative hearings, providing testimony, conducting public presentations using graphs, charts, video and audio recording in order to familiarize the commission with the specifics of the case.
- Designing and developing public forms used by agency/public. Assisting other agencies with developing forms and training their staff on its use.
- Drafting reports and recommendations regarding just and sufficient cause.
- Preparing materials for investigatory panel proceedings, performing a variety of clerical tasks.
- Preparing witness lists, exhibits, subpoenas, and other materials necessary for Commission hearings regarding third-party requests for opinions (complaints).
- Conducting legal research including research into relevant legislative history, case law and other research related to ethics complaints at hand.
- Responsible for all IT matters, website design development and maintenance. Responding to public inquiries related to website content.
- Proposing purchases of new technologies and software when needed, selecting and negotiating purchases of pc's, laptops, printers and other technology with approved vendors.
- Training staff on use of new technologies and software.

Station Casinos

May 2006 to July 2008

Security Officer

- Protecting company assets and resort guests.

Clark County Coroner/Medical Examiner

January 2003 to January 2005

Reserve Coroner Investigator

- Investigating cause and manner of death in homicides, suicides, accidental and natural deaths.
- Responding to the scene of death; securing or assisting in securing the scene and protecting evidence; ensuring identification of the decedent and arranging for transport.
- Interviewing individuals at the scene to obtain relevant information; reporting any unusual or suspicious circumstances to the appropriate law enforcement agency and providing appropriate information to their personnel.
- Documenting, impounding, examining, and identifying all medications and/or drugs, governing custody of the demised body while maintaining chain of evidence. Locating and securing medical and dental information to be used in the forensic process.
- Primarily working on John/Jane Doe Cold Cases Task Force - a project established to solve unresolved "cold" cases.
- Providing support and explanations of procedures and findings to family; makes referrals to appropriate community agencies.

RELEVANT SKILLS

- MS Office 2003-2013, Office 365, (Word, Excel, PowerPoint, Outlook, OneNote, Publisher). Creating tables, graphs and charts.
- MS Visio, MS Expression Web, Dreamweaver, Xara Web Designer,
- Adobe Acrobat Pro (Converting daily .docx, xlxs, to .pdf, creating electronic forms, digital signatures), Adobe CS, Illustrator, Photoshop.
- Apple iOS, iCloud, retrieving deleted content from iOS devices. Cryptographic functions, encrypting/decrypting documents/files, HASH.
- Wireless LAN, PC hardware, Java Script, HTML5, audio/video recording/editing.
- Complex report writing, public presentations, testimony, conducting interviews of subjects.
- Investigation into a broad scale of subjects e.g. financial crimes, RFP/competitive bid process, human resource issues, zoning/land use, conflict of interest issues as relevant to public officers, human resource issues, zoning/land use etc.
- Forensic science e.g. fingerprints, firearms, questioned documents examination, modus operandi, police photography.
- Experienced in management and supervision of small-sized entity including interviewing, hiring, termination and all aspect of payroll.

LANGUAGES

- English - Native Level
- Czech - Native Level
- Slovak - Native Level
- Russian - Limited working knowledge
- French - Limited working knowledge

RELEVANT TRAINING

- Forensic Science - *American Institute of Applied Science, Youngsville, NC.*
- Medico-legal Death Investigations - *Coroner Investigator Academy - Clark County Coroner/Medical Examiner, Las Vegas, NV.*
- Counterfeit detection, identity crimes, and credit card fraud - *Clark County Coroner and US Secret Service, Las Vegas, NV.*
- Medico-legal mass fatality investigation - *Clark County Coroner, Las Vegas, NV.*
- Traumatic/explosive injuries, *Clark County Coroner, Las Vegas, NV, and University Medical Center Level I Trauma Unit.*
- Senior Operative. Counter intelligence and special operations 1986-1992.

AWARDS AND COMMENDATIONS

- Commendation from Clark County Coroner for *"Personal contribution to Jane/John Doe Cold Case Task Force."*
- Award from Clark County Manager for *"Demonstrating exceptional commitment to Clark County guiding values and principles and inspiring all others to perform at their best." (Both received for work on Jane/John Doe Cold Case Task Force and successfully solving numerous cold cases from 1980's -2000's.)*

REFERENCES

Valerie Carter	Executive Assistant, Nevada Commission on Ethics	(775) 997-9946
Thomas Finn	Former Chief of Police, Boulder City, NV	(702) 994-9355
Adriana Fralick, Esq.	Counsel, Nevada Gaming Control	(775) 233-2982

F.

12/14/17

Dear, Julie Strandberg Executive Director

My cost proposal for this job opening as a investigator position would be starting as \$15 per hour. I think that is fair pay, but also I would think maybe if you're happy with my job you would advice more or that would be a great pay start.

Sincerly,

Sarai V. Magallanes

Sarai V. Magallanes
(702)281-2697
sarai_rivas@yahoo.com

12/11/17

Julie Strandberg, Executive director

chirobd@chirobd.nv.gov

Chiropractic Physicians' of Nevada

4600 Kietze Lane Suite #M245

Reno, NV 89502

Dear, Julie Strandberg

First of all I want to take a moment to appreciate you for taking the time on accepting and reviewing my resume and information. The reason I was aware of this position opening is when i was renewing my CA certificate. I have been a CA for 13 years. I Been in the Chiropractic business long to know what's right and wrong.

I myself will provide the knowledge and skills and will be able to conduct the objective and the responsibility being expected for this position. and analyze it efficiently in a timely manner. I am a very responsible and fast learner.

Julie, I would really appreciate it if I was considered for this job and also the cost proposal I say should be up to your staff to decide.

Sincerely,

Yours Sarai

SARAI MAGALLANES

Cell: (702)281-2697

EDUCATION:

***2000-2004**
Rancho High School
(High School Diploma)

***2004-2005**
Academy of Healing Arts
(Massage Therapist)

*** 2006-current**
continue's hours online education(yearly)
medical terminology/pathology/laws
(chiropractic assistant)

WORK HISTORY:

***2001-2003**
Burger King
(Bonanza & eastern)
Cashier

***2004-2005**
Flaming Hotel & Casino
(731-3111 Mason Hiru)
Retail sales associate, cashier

***June 2005-April 2006**
Sahara Chiropractic
(Dr. Webb, Dr. Strickland 457-4727)
Chiropractic assistant, front desk

***April 2006-October 2006**
Accelerated Rehabilitation & Pain Center
(Janet Zak 254-447-9400)
Front Desk, Receptionist

***October 2006-Present**
Rancho Chiropractic
(Karla Cheney 499-0243)
Front Desk, Receptionist, Chiropractic assistant

***3 years ago**
amazon.com
warehouse

***2015**
The Golden Gate Casino
cage cashier(2-3months job)

VOLUNTEER EXPERIENCE:

***2000-2002**
Lake Mead Hospital
(Radiology Department)

***National Junior Honor Society**
(in middle school)

***Academy of Healing Arts**
(clinical hours, massage events)

CERTIFICATES:

***Chiropractic Assistant Certified**
(#CA0855)

***Massage Therapist Certificate**
(2006)

*** High School Diploma**
(2004)

***PCA CERTIFICATE**
10HOURS TRAINING(@VIDA)

SKILLS/QUALIFICATIONS:

***Bilingual (Spanish & English)**

***14 years medical field experience** front and back office, working with doctors hand on experience on patients, medical terminology , pathology, insurance verification, collecting co-pays, sending patients to collections, billing insurances, computer literate, Microsoft/windows 7 and 10, office experience/managing office, common laws experience, administrative assistant, office assistant , clerical

G

DIERDRE MCCAIN

CHIROPRACTIC PHYSICIANS' BOARD OF NEVADA

**Julie Strandberg, Executive Director | 4600 Kietzke Lane,
M-245 | Reno, NV 89502-5000**

MY CONTACT INFORMATION

**P.O. Box 19213
Reno, NV 89511
Dierdre13@gmail.com**

December 22, 2017

Dear Chiropractic Physicians' Board of Nevada,

Enclosed please find my resume and cost proposal for the position of Investigator which I found posted to the Nevada Employee Action and Timekeeping System (NEATS).

Sincerely,

Dierdre McCain

DIERDRE MCCAIN

P.O. Box 19213, Reno, NV 89511

775-750-1372

Dierdre13@gmail.com

My objective is to continue working as an investigator conducting independent investigations into formal complaints of discrimination as an independent consultant for the Chiropractic Physicians' Board of Nevada.

EXPERIENCE

JANUARY 2017-PRESENT

MANAGEMENT ANALYST 2, STATE OF NEVADA, DEPARTMENT OF HEALTH AND HUMAN SERVICES

I have conducted over 40 independent investigations of formal complaints of all types of Discrimination and produced a report of findings for the Director and the Deputy Attorney General for each.

JANUARY 2013 – DECEMBER 2016

COMPLIANCE INVESTIGATOR 2, STATE OF NEVADA, DEPARTMENT OF ADMINISTRATION

I have independently conducted over 100 investigations of formal complaints of discrimination for many agencies in the Executive Branch, and produced a report of finding for each Director or Board Chairperson and the Deputy Attorney General for each. I have also delivered classroom training for the Prevention of Sexual Harassment and Discrimination.

DECEMBER 1981 – DECEMBER 2011

SENIOR PROGRAM ANALYST (5 YEARS), AND SUPERVISORY REVENUE OFFICER (15 YEARS), AND REVENUE OFFICER (10 YEARS), AND EEO INVESTIGATOR, (30 YEARS AS A COLLATERAL DUTY) U.S. DEPARTMENT OF THE TREASURY, INTERNAL REVENUE SERVICE (IRS)

I have independently conducted investigations of formal complaints of discrimination throughout the federal government nationwide as a collateral duty while working in three professional level positions for the IRS. These investigations were independent, conducted on-site, and completed with a written report of findings for the Agency Head, Agency Counsel, and/or Administrative Hearing Officer which included findings and recommendations; sworn testimony; appropriate documentary evidence, etc. I have also managed caseloads of these types of investigations as well as caseloads of complex tax or financial investigations for myself or my employees for over twenty years. During this time I also served as an adjunct faculty instructor for the Leadership Institute and taught national, cross-functional groups of managers in many leadership areas in addition to teaching separate classes for EEO Investigators and new employees in the subject of preventing discrimination and/or conducting investigations.

DECEMBER 2016 - PRESENT

DIERDRE MCCAIN, CONSULTANT

LICENSED IN THE STATE OF NEVADA

I renewed my business license as a consultant when I resigned from State Service after learning that the Department of Administration intended to eliminate the Sexual Harassment and Discrimination Complaint Investigation Unit which I had been promoted to manage due to lack of funding. However, the Department of Health and Human Services (DHHS) hired me almost as soon as I resigned, so I have not yet begun to work independently. I am approved for outside employment by DHHS so that I may work as a Consultant conducting investigations. I am also a licensed Notary Public.

SKILLS

- Proven ability to work independently
- Strong communication skills
- Great organizational skills
- Proven interview skills with a wide diversity of individuals, including Doctors and medical professionals
- Proven ability to write concise, and accurate reports
- Ability to plan and conduct investigations
- Ability to determine what evidence is appropriate
- Ability to coordinate with Agency Heads, Personnel Liaisons, Deputy Attorneys General, etc.
- Ability to research State and Federal laws and regulations and apply them to facts
- Excellent Typing Skills
- Adept at Word, Excel and PowerPoint
- Experienced Classroom Instructor
- Experienced Public Speaker

COST PROPOSAL

I propose either \$2,500 per completed investigation plus travel expenses, and \$50.00 per hour plus travel expenses for those cases which do not result in a full investigation, such as a withdrawn complaint or mutually resolved complaint, or a complaint that has no nexus to the civil rights act of 1964 and should not be investigated.



Dear Ms. Strandberg,

I am interested in the Investigator position with the Chiropractic Physicians' Board of Nevada. I became aware of this position while looking at the Jobs section of NEATS.

I have over 13 years of investigative experience in the private as well as public sector. In that time, I have worked on thousands of claims that required timely, thorough investigations as well as written recommendations. I have expertise in researching legal issues as well as interpreting Nevada's Revised Statutes. As a Claims Investigator, it is not uncommon to actively work between 25 and 50 claims at a time which requires outstanding case load management skills.

My current State pay classification is a Grade 36, Step 7 (\$66,000.00). My salary expectations would be at least equal to that. I appreciate your consideration.

Mario Pieracci

Objective

Goal directed, results oriented professional seeking to join a world class organization.

Experience

6/16-present Nevada Attorney General Carson City, NV

Tort Claims Investigator

Responsible for investigating, evaluating liability, determining claim value and negotiating settlements with claimants, insurance companies and attorneys related to claims for all State agencies.
Developed and presented training seminars for State personnel in State tort liability.
Supervision of Administrative Assistant.
Produced and maintained investigative files as well as aided in the defense of lawsuits.
Proficient in reading and deciphering medical records with knowledge in medical terminology.
Expertise in reading, researching and understanding Nevada's Revised Statutes.

1/15-8/15 IGT Reno, NV

Risk Analyst 3

Responsible for all auto, bodily injury, cargo, property, and workers compensation claims.
Administered company MVR and Claims Management System.
Participated in company safety assessments and improvements.

6/04-2/14 NV Energy Reno, NV

Senior Claims Investigator

Case Manager for over 5,000 claims responsible for investigating, determining liability, assigning reserves and negotiating settlements with attorneys, claimants and insurance companies.
Auto, bodily injury, general liability and property damage claims expertise.
Extensive training in investigative principles and procedures.
Constructed and maintained a file as well as followed proper chain of custody procedures.
Participated in the litigation process as case manager by working with Attorney's in depositions as well as the voir dire process. Hired outside experts after formulating a strategy.
Supervision of administrative staff.

12/92 – 6/04 NV Energy Reno, NV

Accounting and Financial Analyst

Responsible for applying regulatory treatment to the income statement.
Calculated and set all company overhead rates on a monthly basis.
Assisted in 10k reporting, account reconciliations, as well as numerous other annual reports.
Responded to data requests from the Public Utilities Commission of Nevada.
Responsible for analyzing and reporting budget variances for over 35 departments.

Education

B.S. - Management Northern Illinois University Dekalb, IL.

I.

**Al Reshaw
1130 Montecito Drive
Minden, Nevada 89423**

December 31, 2017

Executive Director
State of Nevada
Chiropractic Physicians' Board

Director Strandberg:

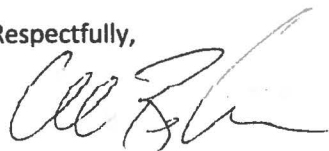
I first learned of this opportunity while searching full-time, State of Nevada Investigator positions located on the State of Nevada Human Resource Management web site (hr.nv.gov/). Having been treated by a licensed Chiropractor for many, many years, I was especially excited about this opportunity.

I have attached my resume toward consideration as an Investigator for the State of Nevada Chiropractic Physicians' Board. I possess a Bachelor's degree in Business, a Master's degree in Project Management, and over 20 years of investigative experience. As a tenured sworn California law enforcement officer and naval reserve Intelligence Officer, I have a uniquely diverse background with varied investigations, including compliance, fraud, sexual misconduct, and business Internal Affairs inquiries, and investigations. I enjoy the challenge of communicating with a diverse environment, to determine facts that support administrative, criminal or civil prosecution, all of which culminated in my need to document by comprehensive analysis and conclusion based report writing. Conducting these various types of investigations allowed me to create an extensive network of informants, while developing trusted professional relationships within law enforcement and business organizations that have been maintained for years, providing invaluable facts and raw data for many of my future investigations and assignments.

During my Naval Reserve Intelligence career within the Special Operation Forces, a high security clearance and understanding of confidentiality provided me a unique opportunity to utilize my law enforcement and investigative skills while conducting investigations using principles of link-analysis, combined with trend analysis, communications patterns, and witness interviews. As a trusted operative, the Commanding General assigned me leading positions enabling me to lead and conduct highly sensitive and complex internal covert operations and investigations, several of which advanced Congressional Delegation inspections.

My proudest management accomplishment involved creating an investigations division within the newly established Cathedral City, California Police Department. This and other team and individual endeavors, along with a profile of dedicated work experience has earned a personal reputation as an investigator who excels in diverse and challenging environments while achieving assigned objectives and high quality results. Consideration of my application, further documentation and any interview would be appreciated.

Respectfully,



Al Reshaw

Albert Joseph Reshaw

1130 Montecito Dr ♦ Minden, NV 89423
Mobile: (760) 464-1764 ♦ al.reshaw@gmail.com

INVESTIGATION PROFESSIONAL / EXECUTIVE MANAGER / TEACHER AND MENTOR

Tenured and experienced Law Enforcement Investigator ♦ Seasoned Military and Public Safety Professional ♦ Current DoD Top Secret/SBI Security Clearance ♦ Senior Naval Intelligence Officer with Counterterrorism & Special Operations Experience ♦ Multinational and Interagency Experience ♦ Tenured Instructor and Mentor

Extensive experience in complex and diverse investigations during a 28 year civilian California law enforcement career, additionally, holding both California and Nevada State Private Investigators licenses. Directed law enforcement and naval combat operations in training, administration, curriculum development, and managed real world emergencies and disasters within the United States and overseas. Significant interagency collaboration and decision-making experience in Law Enforcement and Naval Intelligence Combat Operations in balancing International, Congressional Delegations, and National Security Priorities.

CORE COMPETENCIES & SKILLS

- | | |
|--|---|
| • Created Police Investigation Division | • Intelligence Research & Analytical Skills |
| • Adjunct Professor and College Instructor | • Director of Naval Training Center |
| • Team Building/Motivational Capabilities | • Court Qualified Expert in Investigations |
| • Dynamic Leadership | • Adaptability to Changing Environments |

PROFESSIONAL EXPERIENCE

California Law Enforcement Career

1976 - 2013

Chief of Police for the Fontana Unified School District Police Department in Fontana California, and at the federal level, created and established a police department for the U.S. Marine Corps Mountain Warfare Training Center in Bridgeport California, serving as the Chief of Police and Provost Marshall. Most notable investigative experience was creating the Investigation Division of a newly established police department in Cathedral City Ca. Possess over eight years of full time investigative experience specifically as an Investigator, or Investigative Supervisor handling investigative caseloads dealing with property crimes, including fraud, bribery, embezzlement, identify theft, forgery, and money laundering investigations. Extensive experience in investigating crimes against persons, such as child molestation, aggravated assaults, rape, sexual assault and homicide, and suspicious death investigations. Extensive experience in managing and prioritizing large investigative caseloads, while documenting facts, and recording interviews and interrogations in concise, precise and accurate reports for the filing of criminal charges. Unique interpersonal and communication skills and analytic abilities, earning an outstanding reputation as a thorough and detailed fact finder. Court qualified expert in criminal investigations and Adjunct Professor at College of the Desert in Criminal Law and Firearm courses. Possess California P.O.S.T Basic, Intermediate, Advanced, Supervisor, and Management Certificates.

Reshaw Security and Forensic Investigative Services

1988 - 2008

Owner and operator of security and Investigative firm in Murrieta California from 1988 – 2008, specializing in residential and business security systems, controlled access, intrusion, and video surveillance systems. Conduct and supervise private investigations dealing with background checks, criminal, civil, administrative, and insurance fraud investigations. Licensed through the California State Department of Consumer Affairs, Bureau of Security and Investigative Services, Private Investigator (PI Lic#21377), and State of Nevada Private Investigator license (PI Lic 2285A) – DBA Reshaw Forensic Investigations.

EDUCATION

Masters of Science in Project Management – Walden University, Baltimore, MD
Diploma in Military Strategic Studies – United States Navy War College, Newport, RI
Bachelor of Science in Business – Redlands University, Redlands, CA
Units equal to Associate of Arts in Criminal Justice - Chaffey College, Alta Loma, CA

State of Nevada Chiropractic Physicians' Board Cost Proposal

December 31, 2017

Investigation Hourly rates

- Investigator rate - \$50.00 per hour
- Transcription of recorded Interviews - \$30.0 per hour

Travel Expenses

- Travel rate per hour - \$25.00
- Mileage rate - \$0.45 per mile
- Lodging expenses billed at actual cost
- Airfare expenses billed at actual cost
- Taxi / Rental Car expenses billed at actual cost

Administrative Expenses

- Completed Investigative Report with CD of recorded Interviews – No Charge
- Additional copies of reports - \$0.20 per page
- Additional copies of recorded interviews - \$10.00 per CD-R

**** Rates and fees are negotiable.**

David G. Rovetti, DC

5365 Mae Anne Avenue · Suite B-2

Reno, Nevada 89523

Phone: (775) 324-3700

Toll free: (800) 324-3750

Fax: (775) 324-2370

12/11/17

TO: CPBN

RE: INVESTIGATOR POSITION

CHIROPRACTIC PHYSICIANS'
BOARD OF NEVADA

DEC 12 2017

RECEIVED
RENO, NEVADA 89502

Dear Board,

I would like to apply for the Investigator position mentioned on your website.

As you know, I have served on the Board for 14 years and have been the IBM of hundreds of cases. I know NRS and NAC 634 extremely well, I know what to look for when investigating, I am familiar with the attitude of the Board regarding most infractions, and I am good at negotiating settlement agreements.

Should I be granted this position, my goal to assist in resolving cases is to investigate thoroughly and in a timely manner, recommend a fair settlement, and go to hearing only after all reasonable settlement offers have been declined. I also believe that it is important to make sure the complainant knows the Board has taken their complaint seriously and has investigated it thoroughly.

I became aware of the position officially when I saw it on the Board's website. However, when I noticed your list of unresolved complaints was getting rather large, I offered to the Board President my assistance.

For my help on this matter, I would need:

1. Access to Mr. Ling
2. Access to Ms. Strandberg
3. Authorization to use the Board Badge if necessary
4. Given the title of "Board Investigator"
5. Permission from each Board Member to follow-up with them fairly often if needed.

I charge \$75/hour billed in 5-minute increments plus expenses. I travel to LV approximately every two months doing impairment ratings. Unless I need to physically be in LV for an investigation at a time when I am not scheduled to go there already, no flight travel expenses will be submitted.

-David Rovetti, DC
(775) 233-9543

K.

John C. Share

Carson City NV 89701
(775) 430-3933 Share5000@charter.net

01/16 – Present	Correctional Officer	Carson City, NV
	<ul style="list-style-type: none">■ Maintain security and order among inmates as well as staff■ Supervise inmates and provide necessary tools for work assignments■ Interview inmates and prepare incident reports■ Escort non-custody staff as well as volunteers while on the yard	
11/09 – 01/16 Bureau of Disability Adjudication	Disability Hearing Officer	Carson City, NV
	<ul style="list-style-type: none">■ Conduct face to face hearings Social Security claimants■ Question claimants and witnesses■ Analyze all evidence and prepare a legally defensible decision■ Formal training in all areas of the disability adjudication process■ Extensive knowledge of medical, vocational and administrative issues■ Effective oral and written communication skills■ Extensive travel to southern Nevada and use of teleconference video equipment■ Excellent organizational skills, decisiveness and independence■ Computer skills and working knowledge of software packages <p>As the sole hearing officer for the State of Nevada from 2010 through 2011, I helped streamline the Disability Hearing Unit. The hearings process was shortened and video hearings were implemented. This allowed the claimants to have quicker access to a hearing as well as a determination. Notification letters were consolidated and evidence was made more easily obtainable to claimants prior to the hearing.</p>	
08/94 – 11/09 Bureau of Disability Adjudication	Disability Adjudicator	Carson City, NV
	<ul style="list-style-type: none">■ Reviewed reconsideration and continuing disability review claims■ Requested medical, vocational and educational information■ Analyzed data including diagnostic and assessment tests for program applicability■ Contacted doctors, psychologists and other health care professionals■ Composed technical explanations and personalized notices for claimants	

TRAINING PROGRAMS COMPLETED

- Defensive Driving
- Purchasing
- Residual Functional Capacity
- Computer Security
- Sexual Harassment
- Decision Writing

EDUCATION

- **University of North Carolina, Greensboro**
Joseph M. Bryan School of Business and Economics
Bachelor of Science in Management with minor in Marketing

I completed the Hearing Officer training program at The University of the Pacific, McGeorge School of Law.

CHIROPRACTIC PHYSICIANS' BOARD OF NEVADA

AGENDA ACTION SHEET

TITLE: Agenda Item 15 FCLB/NBCE Matters – For possible action.

- A. Attendance of Board Member(s) and Julie Strandberg at the FCLB Annual Conference May 2-6, 2018 in Dallas, TX
- B. Selection of Board's choice for FCLB Voting Delegate
- C. Selection of Board's choice for FCLB Alternate Delegate
- D. Selection of Board's choice for NBCE Voting Delegate
- E. Selection of Board's choice for NBCE Alternate Delegate
- F. Selection of Board Member to participate in the Spring National Board Part IV Exam – May 18-20, 2018
- G. Selection of Board Member to participate in the Fall National Board Part IV Exam - November 9-11, 2018
- H. Selection of Board Member to participate in the National Board Part IV Test Committee meeting - June 8-9, 2018
- I. Other FCLB/NBCE matters
- J. Support Dr. Benjamin Lurie for NBCE District IV Director

RECOMMENDED MOTION: **No recommendation.**

PREPARED BY: **Ben Lurie, DC**

MEETING DATE: **January 11, 2018**

TIME REQUIRED: **20 minutes**

BACKGROUND INFORMATION:

REVIEWED BY: ☒ President ☒ Secretary ☒ Executive Director

ACTION: ☐ Approved ☐ Approved w/Modifications ☐ Denied ☐ Continued

CHIROPRACTIC PHYSICIANS' BOARD OF NEVADA

AGENDA ACTION SHEET

TITLE: **Agenda Item 16** Annual Board Counsel Evaluations – For possible action

RECOMMENDED MOTION: **Action item**

PREPARED BY: **Jason Jaeger, DC**

MEETING DATE: **January 11, 2018**

TIME REQUIRED: **10 minutes**

BACKGROUND INFORMATION:

REVIEWED BY: ☒ President ☒ Secretary ☒ Executive Director

ACTION: ☐ Approved ☐ Approved w/Modifications ☐ Denied ☐ Continued

Agenda Item 16

CHIROPRACTIC PHYSICIANS' BOARD OF NEVADA

AGENDA ACTION SHEET

TITLE: Agenda Item 17 Discuss annual staff evaluations & possible pay increase of the Executive Director & Licensing Specialist– For possible action. (Note: The Board may go into closed session pursuant to NRS 241 to consider the character, alleged misconduct, or professional competence of Ms. Canady)

RECOMMENDED MOTION: Action item

PREPARED BY: Jason Jaeger, DC

MEETING DATE: January 11, 2018

TIME REQUIRED: 10 minutes

BACKGROUND INFORMATION: Pursuant to the Board's policies an annual evaluation is provided to the Executive Director and Licensing Specialist.

REVIEWED BY: __X__ President __X__ Secretary __X__ Executive Director

ACTION: ____ Approved ____ Approved w/Modifications ____ Denied ____ Continued

CHIROPRACTIC PHYSICIANS' BOARD OF NEVADA

AGENDA ACTION SHEET

TITLE: **Agenda Item 18** Status report regarding anonymous profiles of possible disciplinary actions. Board action will be limited to either dismissing the matter if the Board determines there is no violation, it has no jurisdiction over the subject, or providing direction to pursue the matter further – For possible action.

RECOMMENDED MOTION: **No recommendation**

PRESENTED BY: **Ben Lurie, DC**

MEETING DATE: **January 11, 2018**

TIME REQUIRED: **45 minutes**

BACKGROUND INFORMATION:

- A. Complaint 16-11S (Colucci)
- B. Complaint 16-13S (Lurie)
- C. Complaint 17-02S (Lurie)
- D. Complaint 17-04N (Rovetti)
- E. Complaint 17-05N (Jaeger)
- F. Complaint 17-07S (Jaeger)
- G. Complaint 17-08S (Lurie)
- H. Complaint 17-12S (Colucci)
- I. Complaint 17-13S (Rovetti)
- J. Complaint 17-18S (Jaeger)
- K. Complaint 17-20S (Lurie)
- L. Complaint 17-21S (Rovetti)
- M. Complaint 17-23S (Colucci)
- N. Complaint 17-24S (Jaeger)
- O. Complaint 17-25S (Martinez)
- P. Complaint 17-26S (Colucci)
- Q. Complaint 17-27S (Jaeger)
- R. Complaint 17-28S (Lurie)
- S. Complaint 17-30S (Colucci)
- T. Complaint 17-31S (Martinez)
- U. Complaint 17-32S (Lurie)
- V. Complaint 17-33S (Jaeger)
- W. Complaint 17-34S (Lurie)
- X. Complaint 18-01S (Lurie)

REVIEWED BY: X President X Secretary X Executive Director

ACTION: Approved Approved w/Modifications Denied Continued

CHIROPRACTIC PHYSICIANS' BOARD OF NEVADA

AGENDA ACTION SHEET

TITLE: Agenda Item 18A Status report regarding anonymous profiles of possible disciplinary actions. Board action will be limited to either dismissing the matter if the Board determines there is no violation, it has no jurisdiction over the subject, or providing direction to pursue the matter further – For possible action:

A. Complaint 16-11S (Dr. Colucci)

RECOMMENDED MOTION: No recommendation.

PREPARED BY: Maggie Colucci, DC

MEETING DATE: January 11, 2018

TIME REQUIRED: 5 minutes

BACKGROUND INFORMATION: The Board received copies of two depositions involving an Associate DC who, under the direction of another DC allegedly utilized a template for all patients which identified the same treatment codes, x-rays, etc. for all patients.

REVIEWED BY: X President X Secretary X Executive Director

ACTION: Approved Approved w/Modifications Denied Continued

Agenda Item 18A

CHIROPRACTIC PHYSICIANS' BOARD OF NEVADA

AGENDA ACTION SHEET

TITLE: Agenda Item 18B Status report regarding anonymous profiles of possible disciplinary actions. Board action will be limited to either dismissing the matter if the Board determines there is no violation, it has no jurisdiction over the subject, or providing direction to pursue the matter further – For possible action:

B. Complaint 16-13S (Dr. Lurie)

RECOMMENDED MOTION: No recommendation.

PREPARED BY: Ben Lurie, DC

MEETING DATE: January 11, 2018

TIME REQUIRED: 5 minutes

BACKGROUND INFORMATION: The complainant alleged that the DC conducted inappropriate sexual behavior during their exam.

REVIEWED BY: X President X Secretary X Executive Director

ACTION: Approved Approved w/Modifications Denied Continued

Agenda Item 18B

CHIROPRACTIC PHYSICIANS' BOARD OF NEVADA

AGENDA ACTION SHEET

TITLE: Agenda Item 18C Status report regarding anonymous profiles of possible disciplinary actions. Board action will be limited to either dismissing the matter if the Board determines there is no violation, it has no jurisdiction over the subject, or providing direction to pursue the matter further – For possible action:

C. Complaint 17-02S (Dr. Lurie)

RECOMMENDED MOTION: No recommendation.

PREPARED BY: Ben Lurie, DC

MEETING DATE: January 11, 2018

TIME REQUIRED: 5 minutes

BACKGROUND INFORMATION: The supervising DC allegedly allowed an applicant to perform chiropractic adjustments prior to having an approved DC application on file with the Board.

REVIEWED BY: ___X___ President ___X___ Secretary ___X___ Executive Director

ACTION: _____ Approved _____ Approved w/Modifications _____ Denied _____ Continued

Agenda Item 18C

CHIROPRACTIC PHYSICIANS' BOARD OF NEVADA

AGENDA ACTION SHEET

TITLE: Agenda Item 18D Status report regarding anonymous profiles of possible disciplinary actions. Board action will be limited to either dismissing the matter if the Board determines there is no violation, it has no jurisdiction over the subject, or providing direction to pursue the matter further – For possible action:

D. Complaint 17-04N (Dr. Rovetti)

RECOMMENDED MOTION: No recommendation.

PREPARED BY: Morgan Rovetti, DC

MEETING DATE: January 11, 2018

TIME REQUIRED: 5 minutes

BACKGROUND INFORMATION: The Board was notified by the National Practitioner Data Bank that a DC settled a malpractice claim, which is to be reported to the Board by the DC within 15 days pursuant to NAC 634.018.

REVIEWED BY: X President X Secretary X Executive Director

ACTION: Approved Approved w/Modifications Denied Continued

Agenda Item 18D

CHIROPRACTIC PHYSICIANS' BOARD OF NEVADA

AGENDA ACTION SHEET

TITLE: Agenda Item 18E Status report regarding anonymous profiles of possible disciplinary actions. Board action will be limited to either dismissing the matter if the Board determines there is no violation, it has no jurisdiction over the subject, or providing direction to pursue the matter further – For possible action:

E. Complaint 17-05N (Dr. Jaeger)

RECOMMENDED MOTION: No recommendation.

PREPARED BY: Jason O. Jaeger, DC

MEETING DATE: January 11, 2018

TIME REQUIRED: 5 minutes

BACKGROUND INFORMATION: The complainant alleged that the DC caused her to have a stroke following treatment.

REVIEWED BY: X President X Secretary X Executive Director

ACTION: Approved Approved w/Modifications Denied Continued

Agenda Item 18E

CHIROPRACTIC PHYSICIANS' BOARD OF NEVADA

AGENDA ACTION SHEET

TITLE: Agenda Item 18F Status report regarding anonymous profiles of possible disciplinary actions. Board action will be limited to either dismissing the matter if the Board determines there is no violation, it has no jurisdiction over the subject, or providing direction to pursue the matter further – For possible action:

F. Complaint 17-07S (Dr. Jaeger)

RECOMMENDED MOTION: No recommendation.

PREPARED BY: Jason O. Jaeger, DC

MEETING DATE: January 11, 2018

TIME REQUIRED: 5 minutes

BACKGROUND INFORMATION: Complainant stated that a DC conducted unprofessional behavior.

REVIEWED BY: X President X Secretary X Executive Director

ACTION: Approved Approved w/Modifications Denied Continued

Agenda Item 18F

CHIROPRACTIC PHYSICIANS' BOARD OF NEVADA

AGENDA ACTION SHEET

TITLE: Agenda Item 18G Status report regarding anonymous profiles of possible disciplinary actions. Board action will be limited to either dismissing the matter if the Board determines there is no violation, it has no jurisdiction over the subject, or providing direction to pursue the matter further – For possible action:

G. Complaint 17-08S (Dr. Lurie)

RECOMMENDED MOTION: No recommendation.

PREPARED BY: Ben Lurie, DC

MEETING DATE: January 11, 2018

TIME REQUIRED: 5 minutes

BACKGROUND INFORMATION: The complainant stated that they were becoming uncomfortable with the DC's aggressive behavior of pushing expensive procedures, without consideration of the individual's health or the benefits to their recovery.

REVIEWED BY: X President X Secretary X Executive Director

ACTION: Approved Approved w/Modifications Denied Continued

Agenda Item 18G

CHIROPRACTIC PHYSICIANS' BOARD OF NEVADA

AGENDA ACTION SHEET

TITLE: Agenda Item 18H Status report regarding anonymous profiles of possible disciplinary actions. Board action will be limited to either dismissing the matter if the Board determines there is no violation, it has no jurisdiction over the subject, or providing direction to pursue the matter further – For possible action:

H. Complaint 17-12S (Dr. Colucci)

RECOMMENDED MOTION: Recommend dismissal.

PREPARED BY: Maggie Colucci, DC

MEETING DATE: January 11, 2018

TIME REQUIRED: 5 minutes

BACKGROUND INFORMATION: The complainant alleged that two DC's are practicing outside the scope of chiropractic and embezzled from the business.

REVIEWED BY: X President X Secretary X Executive Director

ACTION: Approved Approved w/Modifications Denied Continued

Agenda Item 18H

CHIROPRACTIC PHYSICIANS' BOARD OF NEVADA

AGENDA ACTION SHEET

TITLE: Agenda Item 18I Status report regarding anonymous profiles of possible disciplinary actions. Board action will be limited to either dismissing the matter if the Board determines there is no violation, it has no jurisdiction over the subject, or providing direction to pursue the matter further – For possible action:

I. Complaint 17-13S (Dr. Rovetti)

RECOMMENDED MOTION: Citation.

PREPARED BY: Morgan Rovetti, DC

MEETING DATE: January 11, 2018

TIME REQUIRED: 5 minutes

BACKGROUND INFORMATION: This is an advertising complaint that failed to identify the chiropractor and allegedly provided misleading information.

REVIEWED BY: ___X___ President ___X___ Secretary ___X___ Executive Director

ACTION: _____ Approved _____ Approved w/Modifications _____ Denied _____ Continued

Agenda Item 18I

CHIROPRACTIC PHYSICIANS' BOARD OF NEVADA

AGENDA ACTION SHEET

TITLE: **Agenda Item 18J** Status report regarding anonymous profiles of possible disciplinary actions. Board action will be limited to either dismissing the matter if the Board determines there is no violation, it has no jurisdiction over the subject, or providing direction to pursue the matter further – For possible action:

J. Complaint 17-18S (Dr. Jaeger)

RECOMMENDED MOTION: **No recommendation**

PREPARED BY: **Jason O. Jaeger, DC**

MEETING DATE: **January 11, 2018**

TIME REQUIRED: **5 minutes**

BACKGROUND INFORMATION: **The complainant alleged unprofessional conduct and possible over-billing.**

REVIEWED BY: X President X Secretary X Executive Director

ACTION: Approved Approved w/Modifications Denied Continued

Agenda Item 18J

CHIROPRACTIC PHYSICIANS' BOARD OF NEVADA

AGENDA ACTION SHEET

TITLE: Agenda Item 18K Status report regarding anonymous profiles of possible disciplinary actions. Board action will be limited to either dismissing the matter if the Board determines there is no violation, it has no jurisdiction over the subject, or providing direction to pursue the matter further – For possible action:

K. Complaint 17-20S (Dr. Lurie)

RECOMMENDED MOTION: No recommendation.

PREPARED BY: Ben Lurie, DC

MEETING DATE: January 11, 2018

TIME REQUIRED: 5 minutes

BACKGROUND INFORMATION: The complainant is questioning the billing practices and business operations of the DC.

REVIEWED BY: X President X Secretary X Executive Director

ACTION: Approved Approved w/Modifications Denied Continued

Agenda Item 18K

CHIROPRACTIC PHYSICIANS' BOARD OF NEVADA

AGENDA ACTION SHEET

TITLE: Agenda Item 18L Status report regarding anonymous profiles of possible disciplinary actions. Board action will be limited to either dismissing the matter if the Board determines there is no violation, it has no jurisdiction over the subject, or providing direction to pursue the matter further – For possible action:

L. Complaint 17-21S (Dr. Rovetti)

RECOMMENDED MOTION: **Citation**

PREPARED BY: **Morgan Rovetti, DC**

MEETING DATE: **January 11, 2018**

TIME REQUIRED: **5 minutes**

BACKGROUND INFORMATION:

The Board received a complaint that a chiropractor's radio ads do not identify him/herself as a chiropractor. The recorded ads from the radio station were confirmed as stated.

Usually, this would be dismissed with the advertising violation letter. However, the following is his/her complaint history (all of which were dismissed):

5/28/15 – Failing to identify him/herself as a chiropractor (radio ad)

8/11/08 – Letter of Instruction: Untimely registration of CA's

2/18/04 – Failing to identify him/herself as a chiropractor –Social Register of Las Vegas

5/18/95 – Failing to release medical records in a timely fashion

5/10/93 – Failing to identify him/herself as a chiropractor in a printed advertisement

REVIEWED BY: X President X Secretary X Executive Director

ACTION: Approved Approved w/Modifications Denied Continued

CHIROPRACTIC PHYSICIANS' BOARD OF NEVADA

AGENDA ACTION SHEET

TITLE: Agenda Item 18M Status report regarding anonymous profiles of possible disciplinary actions. Board action will be limited to either dismissing the matter if the Board determines there is no violation, it has no jurisdiction over the subject, or providing direction to pursue the matter further – For possible action:

M. Complaint 17-23S (Dr. Colucci)

RECOMMENDED MOTION: No recommendation.

PREPARED BY: Maggie Colucci, DC

MEETING DATE: January 11, 2018

TIME REQUIRED: 5 minutes

BACKGROUND INFORMATION: The complainant alleged the DC is fee splitting.

REVIEWED BY: ___X___ President ___X___ Secretary ___X___ Executive Director

ACTION: ___ Approved ___ Approved w/Modifications ___ Denied ___ Continued

Agenda Item 18M

CHIROPRACTIC PHYSICIANS' BOARD OF NEVADA

AGENDA ACTION SHEET

TITLE: Agenda Item 18N Status report regarding anonymous profiles of possible disciplinary actions. Board action will be limited to either dismissing the matter if the Board determines there is no violation, it has no jurisdiction over the subject, or providing direction to pursue the matter further – For possible action:

N. Complaint 17-24S (Dr. Jaeger)

RECOMMENDED MOTION: No recommendation.

PREPARED BY: Jason O. Jaeger, DC

MEETING DATE: January 11, 2018

TIME REQUIRED: 5 minutes

BACKGROUND INFORMATION: The complainant alleges that the DC conducted chiropractic outside the hours of operation of the clinic to which the services have not been documented in the point of sale system or patient record system, so there is no evidence that payment was made. In addition, the DC is allegedly solicited patients under a no compete clause to visit another practice which the DC has a vested interest.

REVIEWED BY: X President X Secretary X Executive Director

ACTION: Approved Approved w/Modifications Denied Continued

CHIROPRACTIC PHYSICIANS' BOARD OF NEVADA

AGENDA ACTION SHEET

TITLE: Agenda Item 18O Status report regarding anonymous profiles of possible disciplinary actions. Board action will be limited to either dismissing the matter if the Board determines there is no violation, it has no jurisdiction over the subject, or providing direction to pursue the matter further – For possible action:

O. Complaint 17-25S (Dr. Martinez)

RECOMMENDED MOTION: No recommendation.

PREPARED BY: Xavier Martinez, DC

MEETING DATE: January 11, 2018

TIME REQUIRED: 5 minutes

BACKGROUND INFORMATION: The complainant alleged that they were sold a package and treated by the DC in January 2017, however upon this visit they were told by the DC that they could not treat them and referred them to another DC.

REVIEWED BY: X President X Secretary X Executive Director

ACTION: Approved Approved w/Modifications Denied Continued

Agenda Item 18O

CHIROPRACTIC PHYSICIANS' BOARD OF NEVADA

AGENDA ACTION SHEET

TITLE: Agenda Item 18P Status report regarding anonymous profiles of possible disciplinary actions. Board action will be limited to either dismissing the matter if the Board determines there is no violation, it has no jurisdiction over the subject, or providing direction to pursue the matter further – For possible action:

P. Complaint 17-26S (Dr. Colucci)

RECOMMENDED MOTION: No recommendation.

PREPARED BY: Maggie Colucci, DC

MEETING DATE: January 11, 2018

TIME REQUIRED: 5 minutes

BACKGROUND INFORMATION: The complainant is questioning the billing practices and business operations of the DC.

REVIEWED BY: ___X___ President ___X___ Secretary ___X___ Executive Director

ACTION: _____ Approved _____ Approved w/Modifications _____ Denied _____ Continued

Agenda Item 18P

CHIROPRACTIC PHYSICIANS' BOARD OF NEVADA

AGENDA ACTION SHEET

TITLE: Agenda Item 18Q Status report regarding anonymous profiles of possible disciplinary actions. Board action will be limited to either dismissing the matter if the Board determines there is no violation, it has no jurisdiction over the subject, or providing direction to pursue the matter further – For possible action:

Q. Complaint 17-27S (Dr. Jaeger)

RECOMMENDED MOTION: No recommendation.

PREPARED BY: Jason O. Jaeger, DC

MEETING DATE: January 11, 2018

TIME REQUIRED: 5 minutes

BACKGROUND INFORMATION: The complainant alleged that the DC showed unprofessional conduct.

REVIEWED BY: X President X Secretary X Executive Director

ACTION: Approved Approved w/Modifications Denied Continued

Agenda Item 18Q

CHIROPRACTIC PHYSICIANS' BOARD OF NEVADA

AGENDA ACTION SHEET

TITLE: Agenda Item 18R Status report regarding anonymous profiles of possible disciplinary actions. Board action will be limited to either dismissing the matter if the Board determines there is no violation, it has no jurisdiction over the subject, or providing direction to pursue the matter further – For possible action:

R. Complaint 17-28S (Dr. Lurie)

RECOMMENDED MOTION: No recommendation.

PREPARED BY: Ben Lurie, DC

MEETING DATE: January 11, 2018

TIME REQUIRED: 5 minutes

BACKGROUND INFORMATION: The Board was notified by the National Practitioners Data Bank that a DC settled a malpractice claim, which is to be reported to the Board by the DC within 15 days pursuant to NAC 634.425. To date the DC has not notified the Board of this action.

REVIEWED BY: X President X Secretary X Executive Director

ACTION: Approved Approved w/Modifications Denied Continued

CHIROPRACTIC PHYSICIANS' BOARD OF NEVADA

AGENDA ACTION SHEET

TITLE: Agenda Item 18S Status report regarding anonymous profiles of possible disciplinary actions. Board action will be limited to either dismissing the matter if the Board determines there is no violation, it has no jurisdiction over the subject, or providing direction to pursue the matter further – For possible action:

S. Complaint 17-30S (Dr. Colucci)

RECOMMENDED MOTION: No recommendation.

PREPARED BY: Maggie Colucci, DC

MEETING DATE: January 11, 2018

TIME REQUIRED: 5 minutes

BACKGROUND INFORMATION: The complainant alleged fraudulent billing and invoices reflect an address of a UPS Store.

REVIEWED BY: ___X___ President ___X___ Secretary ___X___ Executive Director

ACTION: _____ Approved _____ Approved w/Modifications _____ Denied _____ Continued

Agenda Item 18S

CHIROPRACTIC PHYSICIANS' BOARD OF NEVADA

AGENDA ACTION SHEET

TITLE: Agenda Item 18T Status report regarding anonymous profiles of possible disciplinary actions. Board action will be limited to either dismissing the matter if the Board determines there is no violation, it has no jurisdiction over the subject, or providing direction to pursue the matter further – For possible action:

T. Complaint 17-31S (Dr. Martinez)

RECOMMENDED MOTION: No recommendation.

PREPARED BY: Xavier Martinez, DC

MEETING DATE: January 11, 2018

TIME REQUIRED: 5 minutes

BACKGROUND INFORMATION: This complaint was recommended by the Board to review the business structure of a chiropractic practice.

REVIEWED BY: X President X Secretary X Executive Director

ACTION: Approved Approved w/Modifications Denied Continued

CHIROPRACTIC PHYSICIANS' BOARD OF NEVADA

AGENDA ACTION SHEET

TITLE: Agenda Item 18U Status report regarding anonymous profiles of possible disciplinary actions. Board action will be limited to either dismissing the matter if the Board determines there is no violation, it has no jurisdiction over the subject, or providing direction to pursue the matter further – For possible action:

U. Complaint 17-32S (Dr. Lurie)

RECOMMENDED MOTION: Dismiss.

PREPARED BY: Ben Lurie, DC

MEETING DATE: January 11, 2018

TIME REQUIRED: 5 minutes

BACKGROUND INFORMATION: This complaint was received from the NICB, which alleged that a patient was billed for services not rendered.

REVIEWED BY: ___X___ President ___X___ Secretary ___X___ Executive Director

ACTION: ___ Approved ___ Approved w/Modifications ___ Denied ___ Continued

Agenda Item 18U

CHIROPRACTIC PHYSICIANS' BOARD OF NEVADA

AGENDA ACTION SHEET

TITLE: Agenda Item 18V Status report regarding anonymous profiles of possible disciplinary actions. Board action will be limited to either dismissing the matter if the Board determines there is no violation, it has no jurisdiction over the subject, or providing direction to pursue the matter further – For possible action:

V. Complaint 17-27S (Dr. Jaeger)

RECOMMENDED MOTION: No recommendation.

PREPARED BY: Jason O. Jaeger, DC

MEETING DATE: January 11, 2018

TIME REQUIRED: 5 minutes

BACKGROUND INFORMATION: The complainant alleged that the DC showed unprofessional conduct.

REVIEWED BY: X President X Secretary X Executive Director

ACTION: Approved Approved w/Modifications Denied Continued

Agenda Item 18V

CHIROPRACTIC PHYSICIANS' BOARD OF NEVADA

AGENDA ACTION SHEET

TITLE: Agenda Item 18W Status report regarding anonymous profiles of possible disciplinary actions. Board action will be limited to either dismissing the matter if the Board determines there is no violation, it has no jurisdiction over the subject, or providing direction to pursue the matter further – For possible action:

W. Complaint 17-34S (Dr. Lurie)

RECOMMENDED MOTION: No recommendation.

PREPARED BY: Ben Lurie, DC

MEETING DATE: January 11, 2018

TIME REQUIRED: 5 minutes

BACKGROUND INFORMATION: The complainant alleged that the DC was not releasing their patient records.

REVIEWED BY: ___X___ President ___X___ Secretary ___X___ Executive Director

ACTION: _____ Approved _____ Approved w/Modifications _____ Denied _____ Continued

Agenda Item 18W

CHIROPRACTIC PHYSICIANS' BOARD OF NEVADA

AGENDA ACTION SHEET

TITLE: Agenda Item 18X Status report regarding anonymous profiles of possible disciplinary actions. Board action will be limited to either dismissing the matter if the Board determines there is no violation, it has no jurisdiction over the subject, or providing direction to pursue the matter further – For possible action:

X. Complaint 18-01S (Dr. Lurie)

RECOMMENDED MOTION: No recommendation.

PREPARED BY: Ben Lurie, DC

MEETING DATE: January 11, 2018

TIME REQUIRED: 5 minutes

BACKGROUND INFORMATION: The complainant is questioning the billing practices and business operation of the DC.

REVIEWED BY: ___X___ President ___X___ Secretary ___X___ Executive Director

ACTION: ___ Approved ___ Approved w/Modifications ___ Denied ___ Continued

Agenda Item 18X

CHIROPRACTIC PHYSICIANS' BOARD OF NEVADA

AGENDA ACTION SHEET

TITLE: **Agenda Item 19** Committee Reports - For possible action

- A. Continuing Education Committee (Dr. Martinez) – No action**
- B. Legislative Committee (Dr. Lurie) – No action**
- C. Preceptorship Committee (Dr. Rovetti) – No action**
- D. Test Committee (Dr. Colucci) – For possible action**

RECOMMENDED MOTION: **No recommendation**

PRESENTED BY: **Ben Lurie, DC**

MEETING DATE: **January 11, 2018**

TIME REQUIRED: **10 minutes**

BACKGROUND INFORMATION: **The Committee Chairs will report on their committee's activities since the last meeting.**

REVIEWED BY: X President X Secretary X Executive Director

ACTION: Approved Approved w/Modifications Denied Continued

Agenda Item 19

CHIROPRACTIC PHYSICIANS' BOARD OF NEVADA

AGENDA ACTION SHEET

TITLE: **Agenda Item 20** NCA Report – No action

RECOMMENDED MOTION: **Non-Action item.**

PRESENTED BY: **James Overland, DC**

MEETING DATE: **January 11, 2018**

TIME REQUIRED: **10 minutes**

BACKGROUND INFORMATION:

REVIEWED BY: X President X Secretary X Executive Director

ACTION: Approved Approved w/Modifications Denied Continued

CHIROPRACTIC PHYSICIANS' BOARD OF NEVADA

AGENDA ACTION SHEET

TITLE: **Agenda Item 21** NCC Report – No action

RECOMMENDED MOTION: **Non-Action item.**

PRESENTED BY: **To Be Determined**

MEETING DATE: **January 11, 2018**

TIME REQUIRED: **10 minutes**

BACKGROUND INFORMATION:

REVIEWED BY: X President X Secretary X Executive Director

ACTION: Approved Approved w/Modifications Denied Continued

CHIROPRACTIC PHYSICIANS' BOARD OF NEVADA

AGENDA ACTION SHEET

TITLE: **Agenda Item 22** – Executive Director Reports:

- A. Status of Pending Complaints – No action**
- B. Status of Current Disciplinary Actions – No action**
- C. Legal/Investigatory Costs – No action**
- D. DC Self-Inspection – No action**

RECOMMENDED MOTION: **Non-Action item.**

PRESENTED BY: **Julie Strandberg**

MEETING DATE: **January 11, 2017**

TIME REQUIRED: **5 minutes**

BACKGROUND INFORMATION:

REVIEWED BY: __X__ President __X__ Secretary __X__ Executive Director

ACTION: ____ Approved ____ Approved w/Modifications ____ Denied ____ Continued

STATUS OF PENDING COMPLAINTS – January 11, 2018

Complaint No.	Date Received	Investigator	Nature of Complaint	Current Status	Costs To Date
16-11S	9/7/2016	Colucci	Erroneous records and billings	Under investigation	\$707.84
16-13S	10/20/2016	Lurie	Possible sexual misconduct	Pending Settlement Agreement	\$1,380.00
17-02S	1/13/2017	Lurie	634.227-Treating without a license	Under investigation	
17-04N	2/22/2017	Rovetti	Failure to report malpractice claim	Under investigation	\$60.94
17-05N	2/22/2017	Jaeger	Alleged malpractice	Under investigation	
17-07S	2/27/2017	Jaeger	Alleged misconduct and employing any person as a CA unless issued a certificate or has applied for a certificate	Under investigation	\$738.40
17-08S	3/3/2017	Lurie	Alleged misconduct	Under investigation	
17-12S	4/27/2017	Jaeger	Alleged unprofessional conduct	Under investigation	
17-13S	4/25/2017	Rovetti	Advertising complaint	Citation	\$46.88
17-18S	6/21/2017	Jaeger	Alleged unprofessional conduct and over-billing	Under investigation	
17-20S	7/28/2017	Lurie	Alleged fraudulent billing	Under investigation	
17-21S	7/28/2017	Rovetti	Allegedly failing to identify yourself as a chiropractor.	Citation	\$164.06
17-23S	8/1/2017	Colucci	Alleged unprofessional conduct-fee splitting	Under investigation	\$255.00
17-24S	8/9/2017	Jaeger	Alleged unprofessional conduct	Under investigation	\$250.00
17-25S	8/10/2017	Martinez	Alleged unprofessional conduct	Under investigation	
17-26S	8/10/2017	Colucci	Alleged unprofessional conduct	Under investigation	
17-27S	9/5/2017	Jaeger	Alleged unprofessional conduct	Under investigation	

<u>Complaint No.</u>	<u>Date Received</u>	<u>Investigator</u>	<u>Nature of Complaint</u>	<u>Current Status</u>	<u>Costs To Date</u>
17-28S	9/12/2017	Lurie	Failure to report malpractice claim	Under investigation	
17-30S	10/16/2017	Colucci	Alleged fraudulent billing	Under investigation	
17-31S	10/19/2017	Martinez	Business structure	Under investigation	
17-32S	11/15/2017	Lurie	Alleged billing for services not rendered	Under investigation	
17-33S	11/15/2017	Jaeger	Allegedly not keeping patient records	Under investigation	
17-34S	12/26/2017	Lurie	DC is allegedly not releasing patient records	Under investigation	
18-01S	1/2/2018	Lurie	Alleged fraudulent billing	Under investigation	
DORMANT COMPLAINTS:					
11-23S	11/7/2011	Rovetti	Unredeemable "nsf" check written on Doctor's business account	To be held in abeyance; to be addressed if the licensee requests reinstatement in the future	
13-23N	9/30/2013	Rovetti	Possible malpractice	To be held in abeyance; to be addressed if the licensee requests reinstatement in the future	

STATUS OF CURRENT DISCIPLINARY ACTIONS at November 30, 2017**Disciplinary Action with Probation****1. Alan Bader, DC, License No. 567**

On April 21, 2017 Dr. Bader entered into a Settlement Agreement and Order with the Board. Dr. Bader will be on probation for two years with a practice monitor who will assure compliance with the terms and conditions of the settlement agreement. Dr. Bader shall take and pass the Ethics and Boundaries exam as well as the Nevada jurisprudence examination. Dr. Bader shall take and pass four hours of continuing education relating to ethics and boundaries and four hours related to the making and keeping of patient records. Dr. Bader was ordered to pay a fine in the amount of \$5,000.00 and the Boards' costs in the amount of \$1,629.80, which was satisfied on May 17, 2017. Dr. Bader is in compliance with the Board Order.

2. Daniel Brady, DC, License No. B1391

By Settlement Agreement, Dr. Brady shall comply with all terms and conditions of the California Board's Decision and Order dated April 24, 2012 (eff. May 24, 2012) which placed him on probation for five years with certain terms and conditions. He reimbursed the Board's \$325.00 costs on November 12, 2012 and passed the Board's jurisprudence examination with a score of 81%. **Dr. Brady returned to Active status and is no longer tolling as of February 2015. He is currently in compliance with the requirements of his probation.**

3. Timothy Francis, DC, License No. B309

Pursuant to the Board Order Dr. Francis is on probation for three years effective August 21, 2015 and shall pay the costs incurred in the investigation and prosecution within the three years in the amount of **\$60,484.16**. Dr. Francis passed the Ethics and Boundaries Assessment Services (EBAS) Essay Examination on October 22, 2015 and passed the Board's jurisprudence exam on October 9, 2015. Dr. Francis submitted the written correction plan to address policies, procedures, and steps he intends to take regarding teaching and chiropractic practices to assure that he maintains proper and distinct professional boundaries between his students, his mentees, his personal friends, his paramours, and his patients, which is in the process of review and approval. The IBM may speak to Dr. Francis at his discretion to ensure Dr. Francis is following the correction plan that was agreed to.

4. Casey D. Robinson, DC, License No. B1263

Dr. Robinson was granted a license on September 14, 2007 under the condition that he comply with all of the terms and conditions of his Agreement on Conditions for Licensure with California and monitoring of his practice by Board-appointed Compliance Monitor, Dr. Jeff Andrews. Dr. Robinson's 5-year probation with California commenced on February 14, 2006. He was required to reimburse the California Board's costs of \$3,103.75 and serve 4 hours per month of community service for 2-1/2 years of his probation. It was subsequently determined that Dr. Robinson did not comply with the terms and conditions of his agreement with California. This was addressed at the June 4, 2011 meeting and a new Agreed Settlement was approved that extends his probation for another five years concurrent with and under the same terms and conditions as his settlement agreement with California. **Dr. Robinson was placed in tolling status effective November 18, 2015 and has a five year tolling limit. Dr. Robinson is current and in compliance with the terms and conditions of his California probation per the California Board.**

5. Paul Rovetti, DC, License No. B328

On April 7, 2016 the Board ordered Dr. Rovetti's license be suspended for three months, but the suspension shall be stayed pending successful completion of the following terms: The term of probation

shall be from the effective date of this Order until December 31, 2018. Take and pass the Board's jurisprudence exam and the EBAS within 90 days of the effective date of this Order. Provide written evidence of completion of at least 4.5 hours of continuing education every 90 days throughout the period of probation. Pay the Boards' fees and costs totaling \$1,718.90 and pay a fine of \$1,000.00. Dr. Rovetti's failure to comply with the Board's order within 90 days has resulted in suspension of his license effective July 28, 2016.

6. Mark Rubin, DC, License No. B753

On September 10, 2016 Dr. Rubin entered into a Settlement Agreement and Order with the Board. Dr. Rubin will be on probation for three years with a practice monitor who will assure compliance with the terms and conditions of the settlement agreement. Dr. Rubin shall provide documentation as noted in the Settlement Agreement and Order to the Investigating Board Member within the time frames identified. Dr. Rubin was ordered to pay a fine and the Boards' costs in the amount of \$4,000.00. Dr. Rubin's failure to comply with the Boards' order has resulted in suspension of his license effective April 17, 2017.

Disciplinary Actions with No Probation

7. Francis Raines, DC, License No. B0187

Under the March 12, 2013 Board Order, Dr. Raines shall be monitored by the Investigating Board Member, a chiropractic physician, and a mental health monitor for 24 months from the date he begins practicing, which occurred on December 8, 2015. Dr. Raines' wife is serving as the business and financial manager and is currently the only employee. Dr. Raines was ordered to pay a fine in the amount of \$20,000.00 and has been making monthly payments of \$75.00 per month since May 30, 2013 and continues to do so. **The current balance is \$16,471.00.** Dr. Raines is in compliance with the terms of the Order.

Probation Only

1. Bret Brown, DC, License No. B01639

The Board approved Dr. Brown's application for DC licensure at the January 13, 2017 meeting subject to the following conditions: #1 Take and pass the Ethics & Boundaries Examination and #2 pay a fine in the amount of \$1,500.00. Upon successfully completing #1 and #2 Dr. Brown shall take and pass the Nevada jurisprudence exam, which have been completed. Dr. Brown was granted his license on February 28, 2017 under the condition that his license be on probation and he will have a practice monitor for three years effective February 28, 2017. Dr. Brown must submit twelve hours of continuing education related to chiropractic ethics and boundary issues by December 1, 2017. Dr. Brown may be asked to provide lab testing and must provide the requested sample within four hours of any such request. Failure to comply with any term of this probation shall result in the automatic suspension of Dr. Brown's license. Upon complying his license will automatically be reinstated. Dr. Brown is in compliance with this order.

IAN YAMANE, D.C.
2851 N. TENAYA WAY, STE. 103
LAS VEGAS, NEVADA 89128
(702) 309-4878
(702)309-4879 fax

QUARTERLY REPORT

December 9, 2017

Ben Lurie, D.C.
Chiropractic Physician's Board of Nevada
4600 Kietzke Lane, M-245
Reno, NV 89502

RE: Brett Brown, D.C.

Probationary Period: 4/2017-4/2020

Dear Dr. Lurie:

Facility Inspection

On December 5th of 2017 I conducted a quarterly inspection at Dr. Brown's place of employment. He is employed by Dr. Albert Simoncelli with Mountainwest Chiropractic. Since my last visit, Dr. Brown has made no changes to his office layout.

Record Keeping

I reviewed a random selection of patient charts (YP, LV, TF, JA, KV, DF) to assure their compliance with NAC 634.435. Reevaluations were performed in a timely manner. The results were documented on paper and then transcribed into the EMR system. Dr. Brown's initials were found on the hard copy. Initial diagnosis' from the initial evaluation continue to show no updates after each re-evaluation. Back office therapies were performed by chiropractic assistants where they did indicate who applied which therapy

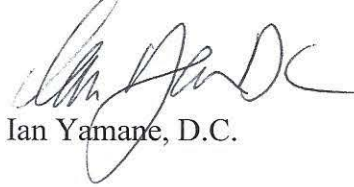
in an appropriate section within the EMR system. The layout of the objective findings section has improved due to clarifying which findings were from the past compared to the current findings. Each note did contain the brand of laser and therapeutic frequency utilized on each patient. Chart KG that was reviewed previously had billing discrepancies. This has been resolved.

Conclusion

Dr. Brown was able to address most of the issues discussed from my previous compliance visit with him. The issue of updating the diagnosis codes as the patient improves is still in question. He will continue to utilize the word "Pending" on all diagnosis' until the patient has completed care. This will remain as a working diagnosis until the patient concludes the treatments. At that point a final and concluding diagnosis will be determined.

My next visit will be in February of 2018.

Sincerely,

A handwritten signature in black ink, appearing to read 'Ian Yamane, D.C.', with a stylized flourish at the end.

Cc: Brett Brown, D.C.
CPBN Office

January 4, 2018

Monitor Report

Dr. Alan Bader, License B567

Purpose of monitoring : Health Care Records Review and compliance with disciplinary actions.

- 1. Board Costs of 1929.80 paid May 17th 2017**
- 2. Fine of \$5000 paid May 17th 2017**
- 3. CPBN Jurisprudence Exam Passed July 12th 2017**
- 4. EBAS Passed July 26th 2017**
- 5. 4 Hours of CE in Ethics and Boundaries Completed Sept 6th 2017**
- 6. 4 Hours of CE in Patient Record Keeping Completed Sept 7th 2017**
- 7. Review of Patient Records showed complete SOAP notes in compliance with record keeping requirements.**

Respectfully Submitted,

Dr. Lawrence Davis

CHIROPRACTIC PHYSICIANS' BOARD

Legal/Investigatory Costs

Costs Incurred	Since Last Report		Year-To-Date	
	August 2017		Fiscal Year 2017/2018	
Advantage Group	82.50		2,478.10	
Attorney General	-		370.45	
Sub-Total	82.50		2,848.55	
Staff Attorney	806.00		11,607.00	
Total	\$	888.50	\$ -	\$ 14,455.55
Costs Reimbursed				
Alan Bader, DC	\$	1,629.80	\$	1,629.80
Timothy Francis, DC		-0-	\$	-
Paul Rovetti, DC		-0-	\$	-
Mark Rubin, DC		-0-	\$	500.00
Totals	\$	1,629.80	\$	2,129.80
No Activity				
Corazon Murillo, DC		-0-	\$	10,024.21
Obteen Nassiri, DC		-0-	\$	114,614.24
	\$	-	\$	124,638.45

CHIROPRACTIC PHYSICIANS' BOARD OF NEVADA

AGENDA ACTION SHEET

TITLE: **Agenda Item 23** Financial Status Reports– No action

- A. Current cash position & projections**
- B. Accounts Receivable Summary**
- C. Accounts Payable Summary**
- D. Employee Accrued Compensation**
- E. Income/Expense Actual to Budget Comparison as of November 30, 2017**

RECOMMENDED MOTION: **Non-Action item.**

PRESENTED BY: **Julie Strandberg**

MEETING DATE: **January 11, 2017**

TIME REQUIRED: **10 minutes**

BACKGROUND INFORMATION:

REVIEWED BY: X President X Secretary X Executive Director

ACTION: Approved Approved w/Modifications Denied Continued

CHIROPRACTIC PHYSICIANS' BOARD
BANK BALANCE REPORT
As of November 30, 2017

CHECKING ACCOUNT	30,926.08
SAVINGS ACCOUNT(S)	260,362.32
Paypal	16.06
Total Cash Balance @ 05/31/17	<u><u>\$291,304.46</u></u>

ACCOUNTS RECEIVABLE SUMMARY AS OF November 30, 2017

A/R	0.00
Fines	63,970.55
Cost Reimbursements	181,177.30
Total A/R	<u><u>\$245,147.85</u></u>

ACCOUNTS PAYABLE SUMMARY
As of November 30, 2017

State Treasurer - Fines collected/payable	4,029.00
---	----------

Total Accounts Payable	<u><u>\$ 4,029.00</u></u>
------------------------	---------------------------

Extraordinary Items

***Employee Accrued Compensation as of 11/30/17**

	Vacation Hours	Sick-Leave Hours	Comp-Time Hours
Julie Standberg	79.32	871.97	-
Brett Canady	14.50	6.50	-

**Chiropractic Physicians' Board of Nevada
Income/Expense Report To Budget - CASH BASIS
For the Period Ending November 30, 2017**

AGENDA ITEM 23E

	Actual July 1, 2017 thru November 30, 2017	Budget FY 06/30/18
Revenue		
License & Fees	13,396.25	270,250.00
Application & Fees	10,347.50	26,450.00
Interest/Gain Loss on Invest	689.12	1,000.00
Exam Fees	6,017.12	9,375.00
Reinstatement Fees	(500.00)	7,500.00
Miscellaneous	6,954.50	21,875.00
Reimbursement Income	195.55	34,018.00
TOTAL REVENUE	\$ 37,100.04	\$ 370,468.00
Expenses		
Background Checks	3,169.50	7,000.00
Banking Expenses	2,067.02	7,720.00
Dues & Registration	1,752.45	4,000.00
Equipment Repair	-	-
COMPUTER: Equipment/Software/Websites	7,487.18	12,500.00
Insurance	964.31	1,500.00
Legal & Professional	18,817.34	81,800.00
Operating Supplies	618.42	4,000.00
Printing & Copying	1,163.43	3,500.00
Postage	1,630.49	5,000.00
Casual Labor - Clerical	-	5,000.00
Personnel	-	-
Office Salaries	48,105.80	126,000.00
Board Salaries	2,231.26	10,000.00
Workman's Compensation	(1,015.57)	5,750.00
Retirement - PERS	8,315.91	31,857.00
Employee Insurance - PEBP	10,112.71	21,000.00
Unemployment	508.24	2,275.00
Medicare & Social Security	855.51	4,965.00
Payroll Processing	418.00	450.00
Rent	6,241.77	14,205.00
Telephone	943.97	4,000.00
Travel	-	-
In State	1,655.98	10,000.00
Out State	3,456.55	10,000.00
TOTAL EXPENSES	\$ 119,500.27	\$ 372,522.00
NET RESULT	\$ (82,400.23)	\$ (2,054.00)
BEGINNING CASH BALANCE 07/01/17	374,958.53	
NET OPERATING RESULT	292,558.30	

Chiropractic Physicians' Board of Nevada
Income/Expense Report - CASH BASIS
For the Period July 1, 2017 thru November 30, 2017

AGENDA ITEM 23E

	Actual July 1, 2017 thru November 30, 2017	Actual July 1, 2016 thru November 30, 2016
Revenue		
License & Fees	13,396.25	143,950.00
Application & Fees	10,347.50	11,528.75
Interest/Gain Loss on Invest	689.12	368.71
Exam Fees	6,017.12	5,517.00
Reinstatement Fees	(500.00)	1,525.00
Miscellaneous	6,954.50	9,391.50
Reimbursement Income	195.55	600.00
TOTAL REVENUE	\$ 37,100.04	\$ 172,880.96
Expenses		
Background Checks	3,169.50	2,769.00
Banking Expenses	2,067.02	2,944.13
Dues & Registration	1,752.45	1,810.00
Equipment Repair	3,169.50	-
COMPUTER: Equipment/Software/Websites	7,487.18	7,086.52
Insurance	964.31	1,041.03
Legal & Professional	18,817.34	16,080.00
Operating Supplies	618.42	1,275.24
Printing & Copying	1,163.43	1,416.63
Postage	1,630.49	2,520.09
Casual Labor - Clerical	3,169.50	-
Personnel	3,169.50	-
Office Salaries	48,105.80	53,234.48
Board Salaries	2,231.26	1,050.00
Workman's Compensation	(1,015.57)	214.66
Retirement - PERS	8,315.91	8,414.25
Employee Insurance - PEBP	10,112.71	9,703.87
Unemployment	508.24	592.75
Medicare & Social Security	855.51	1,226.08
Payroll Processing	418.00	418.93
Rent	6,241.77	6,811.24
Telephone	943.97	827.27
Travel	3,169.50	
In State	1,655.98	2,877.47
Out State	3,456.55	1,197.69
TOTAL EXPENSES	\$ 119,500.27	\$ 123,511.33
NET RESULT	\$ (82,400.23)	\$ 49,369.63
BEGINNING CASH BALANCE 07/01/17	374,958.53	
NET OPERATING RESULT	292,558.30	

777 E. William St. Suite 206
Carson City, NV 89701
Tel 775.882.8892
Fax 775.562.2667
Email: Michael@bertrandcpa.com

October 24, 2017

To the Board of Directors
Chiropractic Physicians Board of Nevada
4600 Kietzke Lane, Suite M245
Reno, NV 89502

Dear Board Members,

We have audited the financial statements of the business-type activities of Chiropractic Physicians Board of Nevada (Board) for the year ended June 30, 2017. Professional standards require that we provide you with information about our responsibilities under generally accepted auditing standards as well as certain information related to the planned scope and timing of our audit. Professional standards also require that we provide you with the following information related to our audit which is divided into two following sections:

Section I – Required Communications with those Charged with Governance

Section II – Other Recommendations and Related Information

Section I includes information that current auditing standards require independent auditors to communicate to those individuals charged with governance. We will report this information annually to the Board in our Audit Committee Letter.

Section II presents recommendations related to internal controls, procedures, and other matters during our current audit year. These comments are offered in the interest of helping the Board in its efforts toward continuous improvement, not just in the areas of internal controls and accounting procedures, but also in operations, administrative efficiency and effectiveness.

Section I – Communications Required under AU 260

Our Responsibility under U.S. Generally Accepted Auditing Standards

As stated in our engagement letter dated October 22, 2014, our responsibility, as described by professional standards, is to express opinions about whether the financial statements prepared by management with your oversight are fairly presented, in all material respects, in conformity with U.S. generally accepted accounting principles. Our audit of the financial statements does not relieve you or management of your responsibilities.

Our responsibility for the supplementary information accompanying the financial statements, as described by professional standards, is to evaluate the presentation of the supplementary information in relation to the financial statements as a whole and to report on whether the supplementary information is fairly stated, in all material respects, in relation to the financial statements as a whole.

Planned Scope and Timing of the Audit

We performed the audit according to the planned scope and timing previously communicated to you in our letter regarding planning matters dated October 22, 2014.

Significant Audit Findings

Qualitative Aspects of Accounting Practices

Management is responsible for the selection and use of appropriate accounting policies. The significant accounting policies used by the Board are described in Note 1 to the financial statements. No new accounting policies were adopted and the application of existing policies was not changed during the fiscal year audited.

We noted no transactions entered into by the governmental unit during the year for which there is a lack of authoritative guidance or consensus. All significant transactions have been recognized in the financial statements in the proper period.

The most sensitive estimates affecting the financial statements were:

Accounting estimates are an integral part of the financial statements prepared by management and are based on management's knowledge and experience about past and current events and assumptions about future events. Certain accounting estimates are particularly sensitive because of their significance to the financial statements and because of the possibility that future events affecting them may differ significantly from those expected. The most sensitive estimates affecting the Board's financial statements were for accounts receivable, allowance for doubtful accounts and compensated absences.

Management's estimate of the accounts receivable is based on their judgment on what they believe is collectible derived from known facts. Its estimate for compensated absences is based on accrued time valued at their current pay rate as of yearend. The value of that balance will change dependent upon the pay rate at the time it is used.

We evaluated the key factors and assumptions used to develop the accounts receivable balance and compensated absences balance in determining that they are reasonable in relation to the financial statements taken as a whole.

The financial statement disclosures are neutral, consistent, and clear.

Difficulties Encountered in Performing the Audit

We encountered no significant difficulties in dealing with management in performing and completing our audit.

Corrected and Uncorrected Misstatement

Professional standards require us to accumulate all known and likely misstatements identified during the audit, other than those that are clearly trivial, and communicate them to the appropriate level of management. Management has corrected all such misstatements. In addition, none of the misstatements detected as a result of audit procedures and corrected by management were material individually and in the aggregate the adjustments were just below material to the financial statements taken as a whole.

Disagreements with Management

For purposes of this letter, a disagreement with management is a financial accounting, reporting, or auditing matter, whether or not resolved to our satisfaction, that could be significant to the financial statements or the Auditor's Report. We are pleased to report that no such disagreements arose during the course of our audit.

Management Representations

We have requested certain representations from management that are included in the Management Representation Letter dated October 24, 2017.

Management Consultations with Other Independent Accountants

In some cases, management may decide to consult with other accountants about auditing and accounting matters, similar to obtaining a "second opinion" on certain situations. If a consultation involves application of an accounting principle to the governmental unit's financial statements or a determination of the type of auditor's opinion that may be expressed on those statements, our professional standards require the consulting accountant to check with us to determine that the consultant has all the relevant facts. To our knowledge, there were no such consultations with other accountants.

Other Audit Findings

We generally discuss a variety of matters, including the application of accounting principles and auditing standards, with management each year prior to retention as the governmental unit's auditors. However, these discussions occurred in the normal course of our professional relationship and our responses were not a condition to our retention.

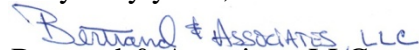
Section II – Other Recommendations and Related Information**Other Matters**

With respect to the supplementary information accompanying the financial statements, we made certain inquiries of management and evaluated the form, content, and methods of preparing the information to determine that the information complies with accounting principles generally accepted in the United States of America, the method of preparing it has not changed from the prior period, and the information is appropriate and complete in relation to our audit of the financial statements. We compared and reconciled the supplementary information to the underlying accounting records used to prepare the financial statements or to the financial statements themselves.

We provided audit committee recommendations in a letter dated October 23, 2017 to the Executive Director. In this letter we identified exceptions noted and recommendations.

This information is intended solely for the use of the board of directors charged with governance and management and is not intended to be, and should not be, used by anyone other than these specified parties.

Very truly yours,


Bertrand & Associates LLC

BERTRAND & ASSOCIATES, LLC
CERTIFIED PUBLIC ACCOUNTANTS
Members American Institute of Certified Public Accountants

777 E. William St Suite 206
Carson City, NV 89701
Tel 775.882.8892
Fax 775.562.2667

October 23, 2017

Julie Strandberg, Executive Director & Board of Directors
Chiropractic Physicians' Board of Nevada
4600 Kietzke Lane, Suite M245
Reno, NV 89502

RE: Management recommendations

Dear Ms. Strandberg and Board Members:

The following summarizes our audit findings, and provides recommendations resulting from the audit of Chiropractic Physicians Board of Nevada (Board) for the year ended June 30, 2017.

It is our responsibility to report on the fair presentation of the financial statements in all material respects. Any adjustments we discovered below this threshold may not have been proposed to, and therefore recorded by, management.

Management is responsible for developing and maintaining an effective system of internal accounting controls, keeping the accounting records in good order, and for all amounts including the estimates that are presented in the financial statements. Our responsibility as the auditor is to examine, on a test basis, evidence supporting the amounts and disclosures in the financial statements. Therefore, our audit involves judgment about the number of transactions to be examined and tested. Because of the concept of reasonable assurance, and because we will not perform a detailed examination of all transactions, there is a risk material errors, fraud, or other illegal acts may exist and not be detected by us.

1 - Communication of control deficiencies or material weakness. - Statement on Auditing Standards (SAS) 112.

Our consideration of internal controls was for the limited purpose of conducting our audit and these limited procedures would not necessarily identify all deficiencies in internal controls that might be significant or material weaknesses.

A control deficiency exists when the design or operation of a control does not allow management or employees in the normal course of performing their assigned duties to prevent or detect misstatements on a timely basis. A *significant deficiency* is a control deficiency or combination of control deficiencies that adversely affects the entity's ability to initiate, authorize, record, process or report financial data reliably in accordance with accounting principles such that there is more than a remote likelihood a misstatement of the entity's financial statements, that is more than inconsequential, will not be prevented or detected by the entity's internal controls.

A *material weakness* is a significant deficiency or combination of significant deficiencies that results in more than a remote likelihood a material misstatement of the financial statements will not be detected by the entity's internal controls.

It is important to note control deficiencies are not necessarily problems you will choose to address. However, they do represent potential risks. Our job as your auditor is to ensure you understand where deficiencies or weaknesses exist so that you can make informed business decisions on how best to respond to these risks. We did identify certain deficiencies in internal controls we consider to be significant, though not material, and discussed below.

2 – Prior year recommendations

The following prior year recommendations where practical were implemented by management.

3 - Disbursement testing

As part of our procedures, we performed various tests on the expense accounts. As part of our detailed transaction testing, we verified the amounts posted as cancelled checks to the financial statements are in agreement with the cancelled checks. We also verified documentation and the appropriateness of charges to the general ledger accounts. Analytical procedures were also performed on expense accounts to determine if balances were reasonably stated.

Test results:

No exceptions were noted.

4 – Bank reconciliations

It was noted bank reconciliations are prepared quarterly. If there was an error or fraudulent charge the Board would most likely not have any recourse.

We recommend that bank reconciliations be prepared and reviewed monthly.

5 – Depreciation schedule

We noted that depreciation was not recorded for the year and that a depreciation schedule is not maintained. Though the amounts are immaterial, we recommend that an asset and depreciation schedule be maintained and that depreciation be recorded at least annually.

6 – Proposed Adjustments

Several adjustments were proposed to management as a result of our audit. Those adjustments were as follows:

1. Depreciation expense was recommended for \$782
2. Remove assets that were capitalized under capitalization threshold \$2,000.
3. Amounts due to State Treasurer were decreased by \$11,900.
4. GASB 68 PERS pension liability adjustment and adjustments to deferred resources inflows and outflows.

Management accepted and recorded all recommended adjustments.

7 – Availability of QuickBooks file

The Board and staff do not have access to the QuickBooks file and all the accounting data. The Board is therefore dependent on an outsourced provider for all their accounting records. Should there be a security breach or other disaster the Board would be vulnerable as they do not have regular copies of backups and the ability to access their data.

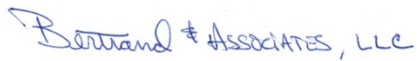
We recommend that a backup copy of the QuickBooks file be sent to the executive director each month.

Summary

The Executive Director was very helpful in answering requests and providing requested items throughout the audit. The bookkeeper was not ready when the audit was scheduled to begin resulting in a delay of several weeks and additional time taken in completing the audit.

If you have any questions, please do not hesitate to contact us.

Sincerely,

A handwritten signature in blue ink that reads "Bertrand & Associates, LLC". The signature is written in a cursive, flowing style.

Bertrand & Associates, LLC

CHIROPRACTIC PHYSICIANS' BOARD OF NEVADA
FINANCIAL STATEMENTS
June 30, 2017 and 2016

CONTENTS

INDEPENDENT AUDITOR’S REPORT	3
MANAGEMENT DISCUSSION & ANALYSIS	5
BASIC FINANCIAL STATEMENTS:	
Statement of Net Position	8
Statement of Revenues, Expenses and Changes in Net Position	9
Statement of Cash Flows	10
Notes to Financial Statements	11
REQUIRED SUPPLEMENTARY INFORMATION:	
Budgetary Comparison Schedule	23
INDEPENDENT AUDITORS REPORT ON COMPLIANCE	25

777 E. William St. Suite 206
Carson City, NV 89701
Tel 775.882.8892
Fax 775.562.2667
Email: Michael@bertrandcpa.com

INDEPENDENT AUDITOR'S REPORT

To the Executive Director and the Board of Directors
Chiropractic Physicians' Board of Nevada

Report on the Financial Statements

We have audited the accompanying statement of net position of the Chiropractic Physicians' Board of Nevada as of June 30, 2017 and 2016 and the related statements of revenues and expenses and changes in net position and statement of changes in cash flows for the years then ended, and the related notes to the financial statements, which collectively comprise the Board's basic financial statements as listed in the table of contents.

Management's Responsibility for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with accounting principles generally accepted in the United States of America; this includes the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

Auditor's Responsibility

Our responsibility is to express opinions on these financial statements based on our audit. We conducted our audit in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. Accordingly, we express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinions.

Opinions

In our opinion, the financial statements referred to above present fairly, in all material respects, the respective financial position of the business-type activities of Chiropractic Physicians' Board of Nevada as of June 30, 2017 and 2016 the respective changes in financial position and cash flows for the years then ended in accordance with accounting principles generally accepted in the United States of America.

Other Matters*Required Supplementary Information*

Accounting principles generally accepted in the United States of America require that the management's discussion and analysis, GASB 68 schedules and budgetary comparison on pages 5, 21 and 25 respectively to be presented to supplement the basic financial statements. Such information, although not a part of the basic financial statements, is required by the Governmental Accounting Standards Board, who considers it to be an essential part of financial reporting for placing the basic financial statements in an appropriate operational, economic, or historical context. We have applied certain limited procedures to the required supplementary information in accordance with auditing standards generally accepted in the United States of America, which consisted of inquiries of management about the methods of preparing the information and comparing the information for consistency with management's responses to our inquiries, the basic financial statements, and other knowledge we obtained during our audit of the basic financial statements. We do not express an opinion or provide any assurance on the information because the limited procedures do not provide us with sufficient evidence to express an opinion or provide any assurance.

A handwritten signature in blue ink that reads "Bertrand & Associates, LLC". The signature is written in a cursive, flowing style.

Carson City, Nevada
October 24, 2017

MANAGEMENT'S DISCUSSION AND ANALYSIS

The Chiropractic Physician's Board of Nevada (CPBN) provides this Discussion and Analysis as an overview of its financial activities for the fiscal year ended June 30, 2017. This information is based on the Board's activities from July 1, 2016 through June 30, 2017, resulting changes and currently known facts, and should be reviewed in conjunction with the CPBN's accompanying financial statements.

CONDENSED STATEMENTS OF NET POSITON

	<u>2017</u>	<u>2016</u>
Cash and investments	\$ 544,159	\$ 260,818
Receivables	84,320	86,020
Other assets	3,688	4,714
Capital assets, net	904	1,686
Total assets	<u>633,071</u>	<u>353,238</u>
 Total deferred outflows	 <u>63,123</u>	 <u>37,346</u>
 Accounts payable and accruals	 8,155	 9,252
Due to State Treasurer	19,941	22,021
Compensated absences	12,326	26,218
PERS net pension liability	260,992	238,870
Total liabilities	<u>301,414</u>	<u>296,361</u>
 Total deferred inflows	 <u>448,503</u>	 <u>195,743</u>
 Total net positon	 <u>\$ (53,703)</u>	 <u>\$ (101,520)</u>

CONDENSED STATEMENTS OF REVENUES AND EXPENSES

	<u>2017</u>	<u>2016</u>
Assessments revenues	\$ 342,235	\$ 387,437
Salaries and benefits	157,589	174,482
PERS retirement expenses	42,846	43,281
Rent	14,381	13,884
General & Administrative	75,063	40,806
Professional	45,336	53,360
Travel	8,870	13,558
Board expense	4,642	8,438
Depreciation expense	782	782
Total operating expenses	<u>349,509</u>	<u>348,591</u>
(Decrease) increase in operating net position	(7,274)	38,846
Increase in non-operating income - net investment income	55,091	26,074
Increase in net position	<u>\$ 47,817</u>	<u>\$ 64,920</u>

STATEMENT OF NET ASSETS

Pursuant to GASB 68 the financial statement is reporting the liability to the Board if PERS were to go insolvent. The net pension liability of the Plan is measured as of June 30, 2016, and the total pension liability for the Plan used to calculate the net pension liability was determined by an actuarial valuation as of June 30, 2015 rolled forward to June 30, 2016 using standard update procedures. The PERS net pension liability based on the Board's proportionate share of .00194% is \$260,992. This leaves the Board at a total net position of (\$53,703).

The Board's net operating position at June 30, 2016 was (\$101,520), compared to (\$53,703) at June 30, 2017. The net investment income increased by \$29,017, however the net position at June 30, 2017, decreased by \$17,103 compared to June 30, 2016. The marketable securities in Employers Holdings, Inc. are considered a stable investment and the CPBN has no plans for its liquidation.

The increase in cash on hand from \$144,738 at June 30, 2016 to \$374,959 at June 30, 2017 is due to the renewal of the Chiropractors renewals during the fiscal year ending June 30, 2017 compared to the significantly lower fee of the Chiropractors Assistants licenses. The current liabilities were \$300,894 at June 30, 2017 compared to \$296,361 at June 30, 2016.

The \$19,921 due to the State Treasurer consists of fines levied on disciplined licensees that are deemed to be collectable over the next few years. There is no liability for compensated absences has accrued during the Executive Director's employment with the State of Nevada.

STATEMENT OF REVENUES, EXPENSES AND CHANGES IN NET ASSETS

Revenues at June 30, 2017 decreased by \$45,202 from the previous year due to fines and other income.

Overall operating expenses increased over the previous year by \$918 due to General and Administrative expenses and Professional fees, and Travel costs.

STATEMENT OF CASH FLOWS

In 2014, the CPBN restructured their cash flow by alternating the certificate and license renewals for Chiropractor's Assistants and Doctors of Chiropractic respectively. By adjusting the renewals to opposite years this has allowed the cash flow to be more manageable.

CPBN ACTIVITIES

The CPBN continues to pursue its primary mission to protect the public through enforcement of the chiropractic statutes and regulations, effective communication with the public and the profession, and interaction with other state boards and national organizations.

The Board continues to streamline operations to create efficiencies and move to a paperless office. Over the past two years we have been working with the Boards software company to allow Chiropractors to access their self-inspection online. Rule-making is an ongoing project and workshops are planned to be held during the current fiscal year.

The preceptorship program that was initiated in 2011 has been effective in attracting chiropractic college students to Nevada and has greatly assisted them in establishing a foundation for practicing in the state after they graduate. There continues to be a small but steady increase in applications.

The Board has applied a concerted conservative approach to managing its expenses for the past several years with positive results.

CONTACTING THE CHIROPRACTIC PHYSICIANS' BOARD'S FINANCIAL MANAGEMENT

This financial report is designed to provide a general overview of the CPBN's finances and activities and to demonstrate the CPBN's accountability for the money it receives. Questions concerning any information provided in this report or other financial information should be directed to:

Julie Strandberg, Executive Director
Chiropractic Physicians' Board of Nevada
4600 Kietzke Lane, Suite M245
Reno, Nevada 89502

chirobd@chirobd.nv.gov
775-688-1923

CHIROPRACTIC PHYSICIANS' BOARD OF NEVADA
STATEMENT OF NET POSITION
June 30, 2017 and 2016

ASSETS	<u>2017</u>	<u>2016</u>
Current assets:		
Cash	\$ 374,959	\$ 144,738
Accounts receivable, net	84,320	86,020
Prepaid	3,688	4,714
Total current assets	<u>462,967</u>	<u>235,472</u>
Capital assets, net	904	1,686
Investments	169,200	116,080
Total noncurrent assets	<u>170,104</u>	<u>117,766</u>
Total assets	<u>633,071</u>	<u>353,238</u>
 DEFERRED OUTFLOWS OF RESOURCES		
Deferred outflows	<u>63,123</u>	<u>37,346</u>
 LIABILITIES		
Current liabilities:		
Accounts payable	3,407	3,217
Due to state treasurer	19,941	22,021
Payroll liabilities	4,748	6,035
Current portion of compensated absences liability	-	11,905
Total current liabilities	<u>28,096</u>	<u>43,178</u>
Noncurrent liabilities:		
Compensated absences	12,326	14,313
PERS net pension liability	260,992	238,870
Total noncurrent liabilities	<u>273,318</u>	<u>253,183</u>
Total liabilities	<u>301,414</u>	<u>296,361</u>
 DEFERRED INFLOWS OF RESOURCES		
Deferred inflows - Pension	77,650	51,335
License fees	370,853	144,408
Total deferred inflows of resources	<u>448,503</u>	<u>195,743</u>
 NET POSITION		
Invested in capital assets	904	1,686
Unrestricted	(54,107)	(103,206)
Total net position	<u>\$ (53,703)</u>	<u>\$ (101,520)</u>

See notes to financial statements

CHIROPRACTIC PHYSICIANS' BOARD OF NEVADA
STATEMENT OF REVENUES, EXPENSES AND CHANGES IN NET POSITION
For the year ended June 30, 2017 and 2016

	<u>2017</u>	<u>2016</u>
Operating revenues:		
Licensing fees	\$ 261,380	\$ 258,911
Other fees	54,477	53,339
Fines and other income	26,378	75,187
Total revenues	<u>342,235</u>	<u>387,437</u>
Operating expense:		
Salaries and benefits	157,589	174,482
PERS retirement expenses	42,846	43,281
Rent	14,381	13,884
General & Administrative	75,063	40,806
Professional	45,336	53,360
Travel	8,870	13,558
Board expense	4,642	8,438
Depreciation expense	782	782
Total operating expenses	<u>349,509</u>	<u>348,591</u>
(Decrease) increase in operating net position	<u>(7,274)</u>	<u>38,846</u>
Decrease in operating net position:		
Increase in non-operating income - net investment income	<u>55,091</u>	<u>26,074</u>
Increase in net position	<u>47,817</u>	<u>64,920</u>
Net position at beginning of year, July 1	<u>(101,520)</u>	<u>(166,440)</u>
Net position at end of year, June 30	<u>\$ (53,703)</u>	<u>\$ (101,520)</u>

See notes to financial statement

CHIROPRACTIC PHYSICIANS' BOARD OF NEVADA
STATEMENT OF CASH FLOWS
For the year ended June 30, 2017 and 2016

	<u>2017</u>	<u>2016</u>
CASH FLOWS FROM OPERATING ACTIVITIES:		
Receipts from licensees	\$ 596,695	\$ 120,867
Payments to vendors	(169,269)	(126,129)
Payments to employees	(129,552)	(149,299)
Payroll taxes & benefits paid	(70,083)	(68,464)
Total cash (used) provided from operating activities	<u>227,791</u>	<u>(223,025)</u>
CASH FLOWS FROM INVESTING ACTIVITIES:		
Interest and dividends	<u>1,930</u>	<u>1,114</u>
Total cash provided from investing activities	<u>1,930</u>	<u>1,114</u>
Net increase (decrease) in cash	229,721	(221,911)
Beginning cash at June 30	<u>144,738</u>	<u>366,649</u>
Cash and Cash Equivalents at year's end, June 30	<u>374,459</u>	<u>144,738</u>
RECONCILIATION OF OPERATING INCOME TO NET CASH:		
Adjustments to reconcile operating income to net cash provided by operating activities:		
Operating net income (loss)	(7,273)	38,846
Depreciation expense	782	782
Decrease (increase) in net accounts receivables	1,700	(50,657)
Decrease in prepaid expense	1,025	2,139
(Increase) in deferred outflows	(25,777)	(17,897)
Increase (decrease) in accounts payable	190	(9,579)
Decrease in payable due to state treasurer	(2,600)	(6,645)
(Decrease) increase in payroll liabilities	(1,287)	511
(Decrease) in compensated absences	(13,892)	(4,175)
Increase net pension liability	22,122	39,563
Increase (decrease) in deferred inflows	252,801	(215,913)
Net cash provided (used) by operating activities	<u>\$ 227,791</u>	<u>\$ (223,025)</u>

See notes to financial statement

CHIROPRACTIC PHYSICIANS' BOARD OF NEVADA
NOTES TO FINANCIAL STATEMENTS
June 30, 2017 and 2016

NOTE 1 - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Background and Reporting Entity

The Chiropractic Physicians' Board of Nevada (Board) is composed of seven members appointed by the governor as follows:

- One member who represents the interests of persons or agencies that regularly provide health care to patients who are indigent, uninsured or unable to afford health care;
- Four members who are:
 - Graduates of chiropractic schools or colleges;
 - Licensed by the Board; and
 - Actually engaged in the practice of chiropractic in the State and have been for at least three years prior to appointment.
- Two members who are representatives of the general public.

The accompanying financial statements of the Board have been prepared in conformity with accounting principles generally accepted in the United States of America (GAAP) as prescribed by the Governmental Accounting Standards Board (GASB). The Board's adopted Governmental Accounting Standards Board (GASB) Statement No. 62, *Codification of Accounting and Financial Reporting Guidance Contained in Pre-November 30, 1989 FASB and AICPA Pronouncements* as of January 1, 2012. Adoption of this standard had no impact on the Board's financial statements. The Board is not considered to be financially accountable for any other governmental entity since no other entities are considered to be controlled by or dependent on the Board. Control or dependence is determined on the basis of budget adoption, funding and appointment of the respective governing board.

Financial Statement Presentation

The Statements of Net Position, Revenues, Expenses and Changes in Net Position and Cash Flows report information on all activities of the Board. The Board is reported as a single enterprise fund.

The Statement of Net Position presents the reporting entity's assets and liabilities, with differences reported as net assets. Net assets are reported in two categories:

Invested in capital assets consist of capital assets, net of accumulated depreciation. Capital assets of the Board have no related debt.

Unrestricted net position consists of net assets that do not meet the definition of the preceding category. Unrestricted net assets often have constraints on resources that are imposed by management, but can be removed or modified.

The Statement of Revenue, Expenses and Changes in Net Position distinguishes operating revenues and expenses from non-operating items. Operating revenues and expenses generally result from providing services and producing and delivering goods in connection with the Board's principal ongoing operations. All revenues and expenses not meeting this definition are reported as non-operating revenues and expenses.

CHIROPRACTIC PHYSICIANS' BOARD OF NEVADA
NOTES TO FINANCIAL STATEMENTS
June 30, 2017 and 2016

NOTE 1 - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (continued)

Measurement Focus, Basis of Accounting

The financial statements are reported using the economic resources management focus and the accrual basis of accounting. Revenues are recorded when earned, and expenses are recorded when a liability is incurred, regardless of the timing of cash flows.

Cash and Equivalents

Cash balances are invested as permitted by law and insured by the Federal Deposit Insurance Corporation (FDIC) up to \$250,000. The Board considers all cash on hand as cash or cash equivalents.

Investments

Investments in marketable securities with readily determinable fair values and all investments in debt securities are reported at their fair values in the statements of net assets. Unrealized gains and losses are included in the change in net assets. The board does not have a formal policy regarding the kind of investments that they can invest in.

Accounts Receivable

Accounts receivable reflect license fees, cost, reimbursements and fines as a result of disciplinary actions. An allowance for doubtful accounts has been established which at year's end June 30, 2017 and 2016 was \$161,974.

Accounts receivable are presented net of allowances for doubtful accounts. Management believes that accounts receivable that are over 90 days old net of allowances are collectible.

Capital Assets and Depreciation

All capital assets are recorded in the Statement of Net Position at historical cost.

Donated capital assets are valued at their estimated fair value on the date of donation. The Board defines capital assets as assets with a unit cost of \$2,000 or more and an estimated useful life in excess of one year. Depreciation is accumulated on a straight line basis over the estimated useful life of the asset, with one-half a year's depreciation taken in the year of acquisition and one-half in the final year. Useful life is estimated by management on the basis of their experience with similar assets.

Deferred Inflows of Resources - Revenues

Various licenses are billed for a two year period resulting in unearned revenues at the end of the fiscal year. Deferred revenues represent amounts received but not earned as of year-end.

Use of Estimates

The Board uses estimates and assumptions in preparing the financial statements in conformity with accounting principles generally accepted in the United States of America. Those estimates and assumptions affect the reported amounts of assets and liabilities, the disclosure of contingent assets and liabilities, and the reported revenues and expenses. Actual results could differ from those estimates.

CHIROPRACTIC PHYSICIANS' BOARD OF NEVADA
NOTES TO FINANCIAL STATEMENTS
June 30, 2017 and 2016

NOTE 1 - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (continued)

Budgets and Budgetary Accounting

NRS 353.005 specifically exempts the Board from the requirements set forth in the State Budget Act. However, the Board prepares an annual budget for each fiscal year that is approved by a majority vote of the Board prior to the start of each fiscal year. The budget is used internally by the Board and staff.

Federal Income Taxes:

The Board is considered an exempt governmental agency in accordance with Internal Revenue Service Code Section 115. Therefore, the Board's income is excludable from gross income for federal income tax purposes.

Prior Year Reclassifications

The prior year's financial statements have been reclassified where applicable to conform to the current year's presentation.

Compensated Absences

Compensated absences are accounted for in accordance with GASB Statement No. 16, Accounting for Compensated Absences, which requires that a liability for compensated absences relating to services already tendered, and that are not contingent on a specified event, will be accounted for in the period whose services are rendered or those events take place. The Boards' policy provides for payment of accrued vacation time upon termination of employment if employed for six months or more, and a maximum payment of \$8,000 for sick leave upon termination of employment if employed ten years or more.

NOTE 2 – CASH & INVESTMENTS

At June 30, 2017 and 2016, cash and cash equivalents totaled \$374,959 and \$144,738 for deposits in a commercial bank. All funds are on deposit with a single financial institution and are carried at cost. The bank carrying balances at June 30, 2017 and 2016 totaled \$399,943 and \$149,655. Bank balances are insured up to \$250,000 by the Federal Deposit Insurance Corporation. \$149,943 represents the amount uninsured at June 30, 2017.

Investments consist of marketable securities in the Employers Holdings, Inc. Fair value at June 30, 2017 and 2016 was \$169,200 and \$116,080. There is no board policy on investments. Investments are classified as Level 1 category as fair value is determined based on a publically quoted market prices.

NOTE 3 – RISK MANAGEMENT

The Board is exposed to various risks of loss related to torts, theft of, damage to, and destruction of assets; errors and omissions; and natural disasters, as are all entities. The Board is covered by commercial insurance purchased from independent third parties. There have been no claims from these risks during the years ended June 30, 2017 and 2016. Settled claims from these risks in the past have been minimal.

CHIROPRACTIC PHYSICIANS' BOARD OF NEVADA
NOTES TO FINANCIAL STATEMENTS
June 30, 2017 and 2016

NOTE 4 – CAPITAL ASSETS

Depreciation is taken on the financial statements over the estimated useful lives of the assets using the straight line method. It is believed by management that the useful lives of furniture and equipment range from five to ten years with no salvage value. When assets are disposed of the cost and related accumulated depreciation are removed from the general ledger and any resulting gain or loss is recognized in operations.

Activity for the years ended June 30 was as follows:

	June 30, 2016	Additions	Dispositions	June 30, 2017
Furniture and equipment	\$ 16,501	\$ -	\$ -	\$ 16,501
Accumulated depreciation	\$ (14,815)	\$ (782)	\$ -	(15,597)
Net equipment	\$ 1,686	\$ (782)	\$ -	\$ 904

	June 30, 2015	Additions	Dispositions	June 30, 2016
Furniture and equipment	\$ 16,501	\$ -	\$ -	\$ 16,501
Accumulated depreciation	\$ (14,033)	\$ (782)	\$ -	(14,815)
Net equipment	\$ 2,468	\$ (782)	\$ -	\$ 1,686

NOTE 5 – POST RETIREMENT BENEFITS

The Board contributes to an agent multiple-employer defined benefit postemployment healthcare plan, Public Employees' Benefits Plan (PEBP), for eligible retired employees as per NRS 287.023. The plan provides medical, vision, dental, and life insurance benefits to eligible retired employees. Employees of the Board are not eligible for participation in the Plan, but if an employee qualifies for the Plan based on service years as an employee of the State of Nevada, the Board may be required to contribute toward the costs of providing postemployment benefits.

Benefit provisions for PEBP are administered by the State of Nevada. NRS 287.043 assigns the authority to establish and amend benefit provisions to the PEBP nine-member board of trustees. Local governments are required to pay their pro-rata cost to provide coverage for persons joining PEBP.

PEBP does not issue a publicly available financial report. Some of the Board's current and past employees may qualify for participation in the plan in the future.

The Board pays an assessment to fund these future benefits at a rate determined by the State Department of Administration. During the years ended June 30, 2017 and 2016 the rate of assessment was 2.36% and 2.13% of actual payroll and \$ 699 and \$702 per employee per month respectively. The total amount the Board paid for the years ended June 30, 2017 and 2016 was \$19,374 and \$28,527 respectively. The Board has no additional liability for unfunded benefits.

CHIROPRACTIC PHYSICIANS' BOARD OF NEVADA
NOTES TO FINANCIAL STATEMENTS
June 30, 2017 and 2016

NOTE 6 – OPERATING LEASES

The Board is obligated under operating leases for office space, a copier, and a postage meter, expiring on various dates through 2020. At the end of the lease terms, they are renewable at their fair rental values. The minimum rental commitments under the operating leases are as follows:

Years ended June 30,	
2018	14,467
2019	14,260
2020	12,100
	<u>\$40,827</u>
	=====

The expense for all operating leases for years ended June 30, 2017 and 2016 was \$15,315 and \$18,173 respectively.

NOTE 7 – DEFINED BENEFIT PENSION COST-SHARING EMPLOYER PLAN

A. General Information about the Pension Plan

Plan Description – All qualified permanent and probationary employees are eligible to participate in the Board's Employee Pension Plans, cost-sharing multiple employer defined benefit pension plans administered by the Public Employees' Retirement System of Nevada (PERS). Benefit provisions under the Plans are established by State statute and Board resolution. PERS issues publicly available reports that include a full description of the pension plans regarding benefit provisions, assumptions and membership information that can be found on the PERS website.

Benefits Provided – PERS provides service retirement and disability benefits, annual cost of living adjustments and death benefits to plan members, who must be public employees and beneficiaries. Benefits are based on years of credited service, equal to one year of full time employment. For regular members entering the System before January 1, 2010, regular members are eligible for retirement at age 65 with five years of service, at age 60 with 10 years of service, or at any age with thirty years of services. For regular members entering the System on or after January 1, 2010, regular members are eligible for retirement at age 65 with five years of service, or age 62 with 10 years of service, or any age with thirty years of service.

CHIROPRACTIC PHYSICIANS' BOARD OF NEVADA
NOTES TO FINANCIAL STATEMENTS
June 30, 2017 and 2016

NOTE 7 – DEFINED BENEFIT PENSION COST-SHARING EMPLOYER PLAN (continued)

The Plans' provisions and benefits in effect at June 30, 2017 are summarized as follows:

	Prior to <u>July 1, 2001</u>	Between July 1, 2001 and <u>January 1, 2010</u>	On or after <u>January 1, 2010</u>
Hire date			
Benefit formula	2.50%	2.67%	2.50%
Benefit vesting option 1	5 years service @65	5 years service @65	5 years service @65
Benefit vesting option 2	10 years service @60	10 years service @60	10 years service @62
Benefit vesting option 3	any age with 30 years service	any age with 30 years service	any age with 30 years service
Benefit payments	monthly for life	monthly for life	monthly for life
Retirement age	50-55	52-67	52-67
Monthly benefits as a % of eligible	2.50%	2.67%	2.50%
Required employer contributions rates	unavailable	unavailable - 21.5%	25.75

Contributions – The contributions are made in accordance with the required rates established by the Nevada Legislature. These statutory rates are increased/decreased pursuant to NRS 286.421 and 286.450. Funding contributions for the Plans are determined bi- annually on an actuarial basis as of June 30 by PERS. The actuarially determined rate is the estimated amount necessary to finance the costs of benefits earned by employees during the year, with an additional amount to finance any unfunded accrued liability. The Board is required to contribute the difference between the actuarially determined rate and the contribution rate of employees.

For the year ended June 30, 2017, the contributions recognized as part of pension expense for the Plan was as follows:

Contributions - employer	\$20,186
--------------------------	----------

***B. Pension Liabilities, Pension Expenses and Deferred outflows/Inflows of Resources
Related to Pensions***

As of June 30, 2017, the Board reported net pension liabilities for its proportionate shares of the net pension liability of the Plan as follows:

	Proportionate share of Net pension Liability
Miscellaneous plan	<u>\$260,992</u>

CHIROPRACTIC PHYSICIANS' BOARD OF NEVADA
NOTES TO FINANCIAL STATEMENTS
June 30, 2017 and 2016

NOTE 7 – DEFINED BENEFIT PENSION COST-SHARING EMPLOYER PLAN (continued)

The Board's net pension liability for the Plan is measured as the proportionate share of the net pension liability. The net pension liability of the Plan is measured as of June 30, 2016, and the total pension liability for the Plan used to calculate the net pension liability was determined by an actuarial valuation as of June 30, 2016. The Board's proportion of the net pension liability was based on a projection of the Board's long-term share of contributions to the pension plan relative to the projected contributions of all participating employers, actuarially determined.

The Board's proportionate share of the net pension liability as of June 30, 2015 and 2016 was as follows:

Proportion - June 30, 2015	0.00194%
Proportion - June 30, 2016	0.00194%
Change-Increase (Decrease)	0.00000%

For the year ended June 30, 2017, the Board recognized pension expense of \$42,846.

At June 30, 2017, the Board reported deferred outflows of resources and deferred inflows of resources related to pensions from the following sources:

	Deferred Outflows of Resources	Deferred Inflows of Resources
Differences between expected and actual experience	\$ -	\$ 17,477
Changes in assumptions	-	-
Net difference between projected and actual earnings on pension plan investments	24,263	-
Changes in proportion and differences between Board contributions and proportionate share of contributions	15,674	60,173
Board contributions subsequent to the measurement	23,186	-
Total	\$ 63,123	\$ 77,650

\$23,186 reported as deferred outflows of resources related to contributions to NVPERS subsequent to the measurement date will be recognized as a reduction of the net pension liability in the year ended June 30, 2017.

CHIROPRACTIC PHYSICIANS' BOARD OF NEVADA
NOTES TO FINANCIAL STATEMENTS
June 30, 2017 and 2016

NOTE 7 – DEFINED BENEFIT PENSION COST-SHARING EMPLOYER PLAN (continued)

Other amounts reported as deferred outflows of resources and deferred inflows of resources related to pensions will be recognized as pension expense as follows:

Measurement Period	
Ended June 30:	
2017	(2,012)
2017	(2,012)
2019	8,605
2020	4,162
2021	(1,602)
2022	(1,730)
Thereafter	-

Actuarial Assumptions – The total pension liabilities in the June 30, 2016 actuarial valuations were determined using the following actuarial assumptions:

	Miscellaneous
Valuation date	June 30, 2016
Measurement date	June 30, 2016
Actuarial Cost Method	Entry -Age Normal Cost
Actuarial Assumptions:	
Consumer Price Index	3.50%
Inflation	3.50%
Payroll growth	5.00%
Projected salary increase	4.6-9.75%
Investment rate of return	8.00%

The underlying mortality assumptions and all other actuarial assumptions used in the June 30, 2016 valuation were based on the results of the experience review completed in 2013. Further details of the Experience Study can found on the PERS website.

Discount Rate – The discount rate used to measure the total pension liability was 8.00% as of June 30, 2016. The projection of cash flows used to determine the discount rate assumed that employee and employer contributions will be made at the rate specified in statute. Based on that assumption, the pension plan's fiduciary net position at June 30, 2016, was projected to be available to make all projected future benefit payments of current active and inactive employees.

CHIROPRACTIC PHYSICIANS' BOARD OF NEVADA
NOTES TO FINANCIAL STATEMENTS
June 30, 2017 and 2016

NOTE 7 – DEFINED BENEFIT PENSION COST-SHARING EMPLOYER PLAN (continued)

Therefore, the long-term expected rate of return on pension plan investments was applied to all periods of projected benefit payments to determine the total pension liability as of June 30, 2016.

The System's Investment Objectives and Policies detail the fund's long-term investment goals, management responsibilities, return/risk expectations, and monitoring requirements. These policies are subject to change at any time by the Board and are reviewed thoroughly at least annually to ensure that they continue to reflect the System's expectations.

Asset allocation is the most significant factor influencing the risk and return of the investment program. Since inception 98% of the System's investment performance is explained by asset allocation. Determination of the fund's long-term asset allocation involves estimating the expected return and risk of major types of investments and blending them into a portfolio which meets the System's risk/return objectives.

To establish an appropriate long-term asset allocation strategy, the Board evaluates expected return and risk for each of the major asset types (stocks, bonds, private markets). These asset classes are then combined in the most efficient manner possible to construct a portfolio that matches the risk and return needs of the fund. By diversifying the System's investments in multiple asset classes the Board is able to reduce the volatility of annual investment earnings. The Board reviews capital market expectations and asset allocation annually. In addition, the Board employs a disciplined rebalancing policy to manage market volatility and to ensure the portfolio's exposures are consistent with the System's long-term asset targets.

Additional information on the discount rate, investment strategy and diversification is available in the PERS CAFR which can be found at www.nvpers.org.

The System's policies which determine the investment portfolio target asset allocation is established by the Board. The asset allocation is reviewed annually and is designed to meet the future risk and return needs of the System.

The following was the Board adopted policy target asset allocation as of June 30, 2016:

<u>Asset Class</u>	<u>Target Allocation</u>	<u>Long-Term Geometric Expected Real Rate of Return*</u>
Domestic Equity	42%	5.50%
International Equity	18%	5.75%
Domestic Fixed Income	30%	0.25%
Private Markets	10%	6.80%

CHIROPRACTIC PHYSICIANS' BOARD OF NEVADA
NOTES TO FINANCIAL STATEMENTS
June 30, 2017 and 2016

NOTE 7 – DEFINED BENEFIT PENSION COST-SHARING EMPLOYER PLAN (continued)

Sensitivity of the Proportionate Share of the Net Pension Liability to Changes in the Discount Rate –

The following presents the net pension liability of the PERS as of June 30, 2016, calculated using the discount rate of 8.00%, as well as what the PERS net pension liability would be if it were calculated using a discount rate that is 1-percentage-point lower (7.00%) or 1-percentage-point higher (9.00%) than the current discount rate:

	Discount rate - 1% (7%)	Current Discount Rate (8%)	Discount Rate +1% (9%)
Misc. Tier1	\$382,675	\$260,992	\$159,893

NOTE 8 – LICENSE RENEWALS

Doctor of Chiropractic licenses are granted for a 2-year period and licenses were renewed for the period beginning January 1, 2015 to December 31, 2016. Chiropractor's Assistant certificates were issued for a 2-year period from January 1, 2016 to December 31, 2017.

NOTE 9 –SUBSEQUENT EVENTS

Management has evaluated the activities and transactions subsequent to June 30, 2017 to determine the need for any adjustments to, and disclosure within the financial statements for the year ended June 30, 2016. Management has evaluated subsequent events through October 24, 2017, which is the date the financial statements were available for issue.

CHIROPRACTIC PHYSICIANS' BOARD OF NEVADA
Schedules of Required Supplementary Information
SCHEDULES OF THE BOARD'S PROPORTIONATE SHARE OF THE NET PENSION LIABILITY

Last 10 Fiscal Years*

<u>Actuarial Valuation Date</u>	<u>Board's proportion of the net pension liability (asset)</u>	<u>Board's proportionate share of the net pension liability (asset)</u>	<u>Board's covered - employee payroll</u>	<u>Board's proportionate share of the net pension liability (asset) as a percentage of its covered-employee payroll</u>	<u>Plan fiduciary net position as a percentage of the total pension liability</u>
<u>Miscellaneous First Tier Plan</u>					
6/30/2016	0.00194%	\$260,992	\$113,403	230.14%	74.1%

* The amounts presented for each fiscal year were determined as of the fiscal year-end

The schedule is presented to illustrate the requirement to show information for 10 years. However, until a full 10-year trend is compiled, only information for those years for which information is available is presented.

**CHIROPRACTIC PHYSICIANS' BOARD OF NEVADA
REQUIRED SUPPLEMENTARY INFORMATION
SCHEDULES OF THE BOARD'S CONTRIBUTIONS**

Last 10 Fiscal Years*

<u>Actuarial Valuation Date</u>	<u>Contractually required contribution</u>	<u>Contribution in relation to the contractually required contribution</u>	<u>Contribution deficiency (excess)</u>	<u>Board's covered employee payroll</u>	<u>Contributions as a percentage of covered employee payroll</u>
<u>Miscellaneous First Tier Plan</u>					
6/30/2016	\$16,444	(\$16,444)	\$0	\$113,403	14.50%

* The amounts presented for each fiscal year were determined as of the fiscal year-end

The schedule is presented to illustrate the requirement to show information for 10 years. However, until a full 10-year trend is compiled, only information for those years for which information is available is presented.

CHIROPRACTIC PHYSICIANS' BOARD OF NEVADA
BUDGETARY COMPARISON SCHEDULE (Non-GAAP budgetary basis)
For the Year Ended June 30, 2016

	Original Budget	Final Budget	Actual	Variance
Revenues				
Licensing fees	\$ 244,375	\$ 244,375	\$ 261,380	\$ 17,005
Other fees	43,325	43,325	54,477	11,152
Fines and other income	67,922	67,922	26,378	(41,544)
Total revenues	355,622	355,622	342,235	(13,387)
Expenses				
Salaries & benefits	170,000	170,000	157,589	12,411
PERS retirement expense	-	-	42,846	(42,846)
Rent	19,937	19,937	14,381	5,556
General & administrative	49,500	49,500	75,063	(25,563)
Professional	59,800	59,800	45,336	14,464
Travel	20,000	20,000	8,870	11,130
Board expense	10,000	10,000	4,642	5,358
Depreciation expense	-	-	782	(782)
Total expenditures	329,237	329,237	349,509	(20,272)
Excess of revenues over (under) expenditures	26,385	26,385	(7,274)	(33,659)
Unrestricted net position, July 1,	(101,520)	(101,520)	(101,520)	-
Increase in non-operating income	-	-	55,091	55,091
Unrestricted net position, June 30	\$ (75,135)	\$ (75,135)	\$ (53,703)	\$ 21,432

COMPLIANCE

**AUDITOR'S REPORT ON COMPLIANCE WITH NEVADA REVISED STATUTES AND
CHIROPRACTIC PHYSICIANS' BOARD OF NEVADA**

To the Members
Chiropractic Physicians' Board of Nevada
4600 Kietzke Lane, Suite M245
Reno, NV 89502

I have audited the entity wide financial statements of the Chiropractic Physicians' Board of Nevada (Board), as of and for the year ended June 30, 2017, and have issued my report thereon dated October 24, 2017. I conducted my audit in accordance with United States generally accepted auditing standards.

Compliance

As part of obtaining reasonable assurance about whether the Chiropractic Physicians' Board of Nevada financial statements are free of material misstatement, I performed tests of its compliance with certain provisions of laws, regulations, contracts, and grants, noncompliance with which could have a direct and material effect on the determination of financial statement amounts. Compliance with Nevada Revised Statutes (NRS) and regulations (Nevada Administrative Code) applicable to the Chiropractic Physicians' Board of Nevada is the responsibility of the Board's management. Providing an opinion on compliance with those provisions was not an objective of my audit, and accordingly, I do not express such an opinion. In connection with my audit, nothing came to my attention that caused me to believe the Board had not complied with NRS 634 and other Nevada Revised Statutes and regulations, insofar as they relate to accounting matters. However, my audit was not directed primarily toward obtaining knowledge of such non-compliance.

This report is intended solely for the information and use of the Board of Directors, management and others within the organization and the Nevada Legislative Counsel Bureau. This restriction is not intended to limit distribution of this report, which is a matter of public record.

Handwritten signature in blue ink that reads "Bertrand & Associates, LLC".

Carson City, Nevada
October 24, 2017

CHIROPRACTIC PHYSICIANS' BOARD OF NEVADA

AGENDA ACTION SHEET

TITLE: **Agenda Item 24** Consideration of potential additions, deletions, and/or amendments to NRS 634 and NAC 634 – For possible action

RECOMMENDED MOTION: **No recommendation**

PRESENTED BY: **Ben Lurie, DC**

MEETING DATE: **January 11, 2018**

TIME REQUIRED: **5 minutes**

BACKGROUND INFORMATION:

- A. Mandatory Self-Inspection report
- B. Fines for not meeting deadlines. i.e. Self-Inspection
- C. Automatic suspension for late renewal
- D. Fine for untimely submission of a CA's second application

REVIEWED BY: X President X Secretary X Executive Director

ACTION: Approved Approved w/Modifications Denied Continued

CHIROPRACTIC PHYSICIANS' BOARD OF NEVADA

AGENDA ACTION SHEET

TITLE: **Agenda Item 25** Discuss/approve joint meeting with the State Board of Oriental Medicine – For possible action

RECOMMENDED MOTION: **No recommendation**

PRESENTED BY: **Ben Lurie, DC**

MEETING DATE: **January 11, 2018**

TIME REQUIRED: **5 minutes**

BACKGROUND INFORMATION: **On November 17, 2017 Dan Musgrove arranged a conference call between the CPBN and the State Board of Oriental Medicine with respect to the upcoming Legislative Session. It was decided that the Oriental Board and the Chiropractic Board would add an agenda item on its next Board meeting to get approval from the entire Board to possibly hold a joint Board meeting to discuss scope of work with respect to the Physical Therapy Board.**

REVIEWED BY: X President X Secretary X Executive Director

ACTION: Approved Approved w/Modifications Denied Continued

CHIROPRACTIC PHYSICIANS' BOARD OF NEVADA

AGENDA ACTION SHEET

TITLE: **Agenda Item 26** Discuss/approve revisions to the Self-Inspection form – For possible action.

RECOMMENDED MOTION: **No recommendation.**

PREPARED BY: **Ben Lurie, DC**

MEETING DATE: **January 11, 2018**

TIME REQUIRED: **5 minutes**

BACKGROUND INFORMATION: The proposed revision to the self-inspection form is to request updated contact phone numbers from the licensee.

REVIEWED BY: ☒ President ☒ Secretary ☒ Executive Director

ACTION: ☐ Approved ☐ Approved w/Modifications ☐ Denied ☐ Continued

Complete and return this form to:
Chiropractic Physicians' Board of Nevada
4600 Kietzke Lane, Suite M-245
Reno, NV 89502
775-688-1921

2016 PRACTICE SELF INSPECTION REPORT

DC Initials

The doctor listed above must be the person who actually completes this form. Please initial to verify your name and address above is accurate. Under NAC 634.430 (1) (h), submitting false or misleading information to the Board is unprofessional conduct and cause for disciplinary action.

1. YOUR WORK E-MAIL ADDRESS (required): _____

2. Is the above address the physical location of your practice? Yes ____ No If no, give the address of your practice:

3. Office Phone #: _____ Cell Phone #: _____

4. Are you the 100% owner of the practice? [] Yes [] No

If no, give the name, address and telephone number of owner(s) and percentage of ownership:

5. Are you incorporated? [] Yes [] No

If yes, give the corporation name and T.I.N., and address and telephone number of corporate headquarters or resident agent (attorney): _____

List names and addresses of corporate officers:

If you are not the owner of the practice at the address on the label at the top of this page, indicate if you are an:

[] Employee [] Associate [] Other (Describe): _____

6. The following is required pursuant to NRS 634.1295 and NAC 634.445:

Do you carry malpractice insurance? [] Yes [] No

If no, is the Disclosure that you DO NOT MAINTAIN PROFESSIONAL LIABILITY INSURANCE posted or is a written disclosure provided to each patient [] Posted [] Written Disclosure

7. Have you been criminally arrested or convicted or had any malpractice judgments or settlements (Including out-of-court settlements or sealed records) that you have not previously reported to the CPBN? Yes No
*[] []

8. Have you become drug or alcohol dependent and/or enrolled in a drug or alcohol rehabilitation program that you have not previously reported to the CPBN? If yes, give details and current status. *[] []

9. Have you been licensed to practice chiropractic in any other state that you have not previously reported to the CPBN? [] []

If yes, list state(s) and active/inactive status: _____

10. If licensed in another state, have you received discipline from that state that has not previously been reported to the CPBN? *[] []

11. Have you been licensed in any other health care field that you have not previously reported to the CPBN? [] []
 If yes, give health care field and date: _____
12. If licensed in another health care field, has that license received discipline that has not previously been reported to the CPBN? *[] []
13. Are you delinquent in the payment of a judgment for the payment of a student loan? *[] []

*Explanation for Question Nos. 6, 7, 9, 11 and 12: _____

14. List **all persons who perform health care services**, including but not limited to any type of treatment, diagnostic work, or records management and including partners, associates, employees, or independent contractors, **within the walls of the office listed on the label or at the corrected address under Question 2 on Page 1:**

Name	Date Began Working	License or Certificate #	Date CA Training	A	B	C	D	E	F	G	H	I
_____	_____	_____	_____	[]	[]	[]	[]	[]	[]	[]	[]	[]
_____	_____	_____	_____	[]	[]	[]	[]	[]	[]	[]	[]	[]
_____	_____	_____	_____	[]	[]	[]	[]	[]	[]	[]	[]	[]
_____	_____	_____	_____	[]	[]	[]	[]	[]	[]	[]	[]	[]
_____	_____	_____	_____	[]	[]	[]	[]	[]	[]	[]	[]	[]
_____	_____	_____	_____	[]	[]	[]	[]	[]	[]	[]	[]	[]

Fill in all blanks that are appropriate for each individual:

A-front office/clerical
 B-assist DC with patient records
 C-assist DC with physiotherapy
 D-assist DC with x-ray exposure or other diagnostic procedure

E-assist DC with massage therapy
 F-licensee DC
 G-unlicensed DC
 H-independent contractor (**describe services**) _____
 I-other (**describe services**): _____

15. List all satellite offices in which you work or that you own or have a financial interest:

Address _____ Work _____ Own _____
 Telephone No. _____ Supervising DC _____

Address _____ Work _____ Own _____
 Telephone No. _____ Supervising DC _____

Address _____ Work _____ Own _____
 Telephone No. _____ Supervising DC _____

The above information is correct to the best of my knowledge. I have personally completed this form.

MUST BE SIGNED: _____, DC **Date:** _____

CHIROPRACTIC PHYSICIANS' BOARD OF NEVADA

AGENDA ACTION SHEET

TITLE: **Agenda Item 27** Establish date for the August CA Exam – For possible action.

RECOMMENDED MOTION: **No recommendation.**

PREPARED BY: **Ben Lurie, DC**

MEETING DATE: **January 11, 2018**

TIME REQUIRED: **5 minutes**

BACKGROUND INFORMATION:

REVIEWED BY: ☒ President ☒ Secretary ☒ Executive Director

ACTION: ☐ Approved ☐ Approved w/Modifications ☐ Denied ☐ Continued

Agenda Item 27

CHIROPRACTIC PHYSICIANS' BOARD OF NEVADA

AGENDA ACTION SHEET

TITLE: **Agenda Item 28** Discussion regarding complaints involving marijuana – For possible action.

RECOMMENDED MOTION: **No recommendation.**

PREPARED BY: **Jason O. Jaeger, DC**

MEETING DATE: **January 11, 2018**

TIME REQUIRED: **5 minutes**

BACKGROUND INFORMATION:

REVIEWED BY: ☒ President ☒ Secretary ☒ Executive Director

ACTION: ☐ Approved ☐ Approved w/Modifications ☐ Denied ☐ Continued

CHIROPRACTIC PHYSICIANS' BOARD OF NEVADA

AGENDA ACTION SHEET

TITLE: **Agenda Item 29** Discussion regarding healthcare radiation standards – For possible action.

RECOMMENDED MOTION: **No recommendation.**

PREPARED BY: **Jason O. Jaeger, DC**

MEETING DATE: **January 11, 2018**

TIME REQUIRED: **5 minutes**

BACKGROUND INFORMATION:

- A. Dr-Jaeger: Radiologic Imaging by Society of Nuclear Medicine and Molecular Imaging
- B. Dr. Rovetti: Choosing Wisely by American Chiropractic Association

REVIEWED BY: ☒ President ☒ Secretary ☒ Executive Director

ACTION: ☐ Approved ☐ Approved w/Modifications ☐ Denied ☐ Continued

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Subjecting Radiologic Imaging to the Linear No-Threshold Hypothesis: A Non Sequitur of Non-Trivial Proportion

Authors

Abstract

Radiologic imaging is claimed to carry an iatrogenic risk of cancer, based on an uninformed commitment to the 70-y-old linear no-threshold hypothesis (LNT). Credible evidence of imaging-related low-dose (<100 mGy) carcinogenic risk is nonexistent; it is a hypothetical risk derived from the demonstrably false LNT. On the contrary, low-dose radiation does not cause, but more likely helps prevent, cancer. The LNT and its offspring, ALARA (as low as reasonably achievable), are fatally flawed, focusing only on molecular damage while ignoring protective, organismal biologic responses. Although some grant the absence of low-dose harm, they nevertheless advocate the "prudence" of dose optimization (i.e., using ALARA doses); but this is a radiophobia-centered, not scientific, approach. Medical imaging studies achieve a diagnostic purpose and should be governed by the highest science-based principles and policies. The LNT is an invalidated hypothesis, and its use, in the form of ALARA dosing, is responsible for misguided concerns promoting radiophobia, leading to actual risks far greater than the hypothetical carcinogenic risk purportedly avoided. Further, the myriad benefits of imaging are ignored. The present work calls for ending the radiophobia caused by those asserting the need for dose optimization in imaging: the low-dose radiation of medical imaging has no documented pathway to harm, whereas the LNT and ALARA most assuredly do.

Keywords

[radiological imaging](#) [linear no-threshold](#) [ALARA](#) [hormesis](#) [adaptive response](#) [radiophobia](#)

The linear no-threshold hypothesis (LNT) has been applied to low-dose and low-dose-rate ionizing radiation for more than 70 y but, lacking valid scientific foundation, remains a hypothesis. Nonetheless, this hypothesis is the orthodox foundation of radiation protection science, in turn forming the basis of regulations and public policy.

The LNT derives from incomplete, early-20th-century genetic-experimental observations yielding inaccurate conclusions, undetected by other scientists until quite recently (1). Hermann Muller, in his 1946 Nobel Lecture, asserted that a no-harm threshold was nonexistent, since linearity had been demonstrated for doses down to 4,000 mGy, a stunning non sequitur. Nor has any evidence since validated the carcinogenicity of low doses. The LNT extrapolation from evidence-supported, high-dose effects to putative low-dose responses claims that all acute ionizing radiation exposure down to zero is harmful proportionally to dose and that it yields cumulative harm throughout life, regardless of how low the dose rate. Both claims are demonstrably false and harmful, leading to LNT-derived regulations and policies that are not protective (2 , 3); for example, more than 1,600 deaths resulted from the LNT-based evacuation policy for nearby residents after the Fukushima nuclear accident (3).

Throughout time, we have been bathed in low-dose radiation from land, sky, and our own bodies. Today's average annual natural background exposure ranges from 1 to 260 mSv in some places on the planet. No associated adverse health effects have been documented anywhere (4). For comparison, typical CT and combined whole-body ¹⁸F-FDG PET/CT scan doses delivered acutely are 10 and 14 mSv, respectively. This radiation-rich history implies that extant life-forms must have developed adaptive, biologic repair and/or removal responses to radiation damage. The primary LNT fallacy is it excludes this evolutionary biology, ignoring the body's differing responses to high versus low radiation doses (5). Low doses stimulate protective responses; high doses overwhelm and inhibit such protections.

Herein are offered dissenting views on subjecting medical imaging to the LNTH, as this hypothesis is characterized by its one-sided failure to incorporate experimental research findings and its support by erroneous mathematic and statistical maneuvers that merely confirm a priori assumptions through circular reasoning. Our heterodoxy maintains that this one-sidedness is twofold: first, it focuses on unquestioned radiogenic cellular damage while ignoring the organism's proven biologic responses to mitigate that damage plus the endogenous damage (due to normal metabolism) several orders of magnitude greater; second, it focuses on only the hypothetical risks of imaging while ignoring its myriad benefits and the actual risks associated with its alternatives (6 – 8). The hypothetical risks of medical imaging pale in comparison to these actual risks.

Unwarranted fear of low-dose radiation leads to the misguided doctrine of “prudence” in dosing—ALARA (as low as reasonably achievable)—that, by often diminishing image quality, increasingly produces suboptimal and even nondiagnostic CT scans (9 , 10). Thus, today, 70 y after Muller's Nobel speech, another non sequitur advances, this time within the field of radiologic imaging. This article provides a scientific rebuttal of the key errors within the LNTH orthodoxy to rehabilitate and restore low-dose radiation's position of respect within science and medicine and to help undo needless public and professional radiophobia.

FAILURE OF THE LNTH GOLD STANDARD

The atomic-bomb survivor cohort of the Life Span Study (LSS) is the single most important dataset—the gold standard—for estimating radiation effects in humans (5 , 11). The 1958–1998 LSS data for acute exposure to low-dose, low linear-energy-transfer radiation, such as the x- and γ-rays used in medical imaging, were reported by the Biologic Effects of Ionizing Radiation (BEIR) VII Committee in 2006 (11) to be consistent with the LNTH dose–response relationship for development of solid cancers. The BEIR Committee operates under the auspices of the National Academy of Sciences, receiving significant financial support from various regulatory and other government agencies; thousands of government and private industry jobs depend on the conclusions of the BEIR Report, which promotes acceptance of the LNTH. The 2005 French Academy of Sciences Report (12), however, reached very different conclusions. Providing evidence for protective adaptive responses and finding no valid evidence for harm below 100 mGy, the report questioned the validity of the LNTH in that range.

The BEIR VII Committee, seeking putative low-dose cancer-risk (<100 mGy) reductions but unwilling to forgo linearity, introduced the artifice of the “dose and dose-rate effectiveness factor.” A factor of 1.5 was chosen to reduce the slope of the LNTH-derived result, though the LSS data are not linear at doses lower than 100 mGy (3 , 13). Rather, linearity is forced by the linear no-threshold model from high-dose extrapolation. Independent analyses of LSS data indicate an apparent threshold as high as 55 mGy, comparable to a threshold of 60 mSv reported by others (3).

Using updated LSS data, Ozasa et al. (14) reported that 0–180 mGy was the lowest dose range exhibiting no significant, acute-dose, excess relative risk (ERR) for all-solid-cancer mortality. In this dose range, the ERR uncertainty (from their Fig. 4) overwhelms its dose dependence, with the 95% confidence intervals including negative ERR values, consistent with a beneficial, as well as a harmful, effect. This uncertainty is not reflected in the linear dose response or its confidence range because that linear fit was estimated by extrapolation from dose levels of 1 Gy or higher (15).

Ozasa et al. used Poisson regression methods to mathematically derive background mortality rates at zero dose, which effectively enables the lowest-dose cohorts to determine this rate by linear extrapolation to zero dose. Other studies show reduced mortality rates in low-dose cohorts (16), compared with cohorts experiencing no radiation above natural background; therefore, Poisson regression introduces negative bias in the background mortality rate, which artificially elevates the reported ERR values.

Correcting this bias, ERR values become negative for doses below approximately 0.6 Gy, beneficially reducing cancer risk relative to background cancer rates (16). Another LSS reanalysis (17) exhibits negative ERRs below a threshold at 200 mSv, again consistent with radiation-induced benefit.

CONTRARY TO THE LNTH, BIOLOGY RESPONDS ADAPTIVELY

The LSS data do not support the LNTH; rather, the observed thresholds and negative ERRs agree with experimental evidence for adaptive cancer protection after low-dose radiation exposure. These data are more consistent with a radiation hormetic (protective) model than with the linear no-threshold (harm at any dose) model. Yet, John Boice, president of the National Council on Radiation Protection and Measurements, continues to assert that the LNTH is the most plausible hypothesis (18) (this council is a congressionally chartered, private corporation that receives financial support from federal radiation regulators and other governmental agencies).

Whether or not low-dose damage is linear, the body's defensive response is nonlinear, leaving the net result nonlinear (19). The body deals with this damage through a set of proven mechanisms, collectively called the adaptive response (3 , 20 , 21), which offers cancer protection through DNA repair involving more than 150 genes, antioxidant production, apoptosis on the cellular level, bystander effects on the tissue level, and immune-system removal of surviving damaged cells on the organismal level. Double-strand-break repair occurs even after low-dose CT scans (22). Numerous studies demonstrate at least 6 mechanisms for reducing cancer rates and increasing longevity, stimulated by low-dose damage (23).

BEIR VII (11) grants the existence of "incomplete" repair, but because imperfect repair of initial DNA damage is assumed, the BEIR Committee dismisses a low-dose threshold for carcinogenicity, ignoring additional mechanisms of defense against radiation-caused damage when DNA repair fails. The report cites a paper by Rothkamm and Löbrich (24) but proceeds to misrepresent their findings (23). The paper provides evidence for mechanisms reducing both spontaneous and radiation-induced damage below spontaneous levels (a hormetic effect), by directly measuring the progression of double-strand-break foci at low doses. Postirradiation counts of cultured cells with double-strand breaks were found to decrease to preirradiation counts, constituting evidence of repair or cell-destroying apoptosis—a finding not mentioned in the BEIR VII report.

The LNTH asserts that radiation damage is cumulative, no matter the dose or dose rate. But this is directly contradicted by the practice of fractionation of high-dose radiation therapy, demonstrating that recovery occurs between treatments (25). More importantly, because low doses stimulate repair or removal of radiogenic damage in excess of that immediate damage, they provide enhanced protections against additional damage over time, including damage from subsequent higher radiation exposures, infections, endogenous production of reactive oxygen species, and other nonradiogenic damage. The net result is reduction of damage below spontaneous levels (21 , 26), likely contributing to a lifetime-cancer-risk reduction.

Further, spontaneous levels of DNA alteration resulting from a cell's normal metabolic processes dwarf those due to low-dose radiation (3 , 27). For example, the average annual U.S. background of 3 mSv produces 3–30 DNA alterations per cell per year, and an acute-dose CT scan about 10–100 alterations per cell, whereas mutation rates due to the body's normal metabolic chemistry are a million times higher. Thus, the LNTH extrapolation of high-dose levels (which are inhibitory of protective mechanisms) down to low-dose levels falsely predicts detrimental effects at a low dose.

Another study, involving radiation exposures to interventional cardiologists (median of 4 mSv/y), compared them with unexposed controls. Low-dose, chronic exposure was associated with two adaptive cellular responses: enhanced antioxidant defense and increased apoptotic response (28). These likely compensate for increased reactive oxygen species production and contribute to maintaining cellular homeostasis. An accompanying editorial noted that these data confirm low-dose protective responses (29).

Mutations are necessary, but not sufficient, to produce clinically overt cancer. The immune system generally keeps cancers in check, and cancers develop mainly when the immune system is suppressed. The role of the immune system in cancer development now replaces the outdated "one mutation = one cancer" model. Recent research shows the inaccuracy in mechanistic models of radiation-induced cancer suggesting that double-strand breaks lead to chromosome aberrations resulting in cancer. Low-dose radiation has been shown to stimulate the immune system, causing a reduction in cancer rates (30). Furthermore, residents in areas with a higher background radiation level (3.3 mSv/y) were found to have higher frequencies of chromosome aberrations than lower-background control populations (1.1 mSv/y) yet had lower all-cancer

mortality, indicating that the frequency of chromosomal aberrations may not be suitable as a surrogate for cancer mortality (31).

The evidence for the biologic-response/cancer-reduction paradigm of low-dose radiation continues to mount. The 2015 Nobel Prize in Chemistry was awarded for research by Tomas Lindahl, Paul Modrich, and Aziz Sancar showing how cells safeguard genetic information, preventing it from disintegrating into chaos, through a host of molecular systems that continuously monitor and repair DNA.

ABSENCE OF ACUTE, LOW-DOSE RADIATION CARCINOGENESIS /S EVIDENCE

As previously noted with the revised Ozasa et al. (14) data, most ERRs in the low-dose range have confidence intervals that include negative values. Negative values suggest that imaging doses reduce rather than increase cancer risk compared with a valid baseline.

The most widely used estimate for the slope of the radiation-induced cancer-mortality dose–response relationship is about 5% per gray for an all-age population. This estimate is primarily derived from LSS data at 1 Gy or higher using a linearity-preserving artifice, the dose and dose-rate effectiveness factor, with a value of 2 (15 , 32), and from the added nonempiric assumption that there is no threshold. This may be verified by a point-estimate calculation at 1 Gy (i.e., 5% at 1 Gy) based on the LSS data (14), but it is not a valid predictor of risk at lower doses; for example, a 10-mGy CT dose would represent a hypothetical 0.05% risk estimate (corresponding to an ERR of 0.004). As can be seen from these same data, below about 200 mGy the dose–response relationship is not an extrapolated line from higher doses but instead is roughly horizontal. Therefore, both the “L” and the “NT” components of “LNT” are false. Since LNTH-derived, low-dose-risk estimates have huge uncertainties and are not validated by observed LSS data (from which they are derived), these risk estimates are not merely notional but flatly false.

Advocates excuse their inability to provide low-dose and low-dose-rate evidence for the LNTH, claiming this inability is because the ratio of radiogenic low-dose cancer risk (the “signal”) to the variation in spontaneous cancer risk (the “noise”) is too small to distinguish signal from noise. This explanation for radiogenic signal invisibility is a red herring for radiologic imaging, including for children irradiated by up to 200 mSv. Solid-cancer incidence rates among the Hiroshima and Nagasaki atomic bomb survivors who were younger than 6 y when the bombings occurred were examined by Preston et al. (33). Their reported relative risk values and our analyses of the raw data in their Table 3 indicate no significant difference between the adult-onset solid-cancer incidence of the control group and that of subjects who had received exposures of up to 200 mSv as children; this agrees with Ozasa’s adult results (14) and therefore suggests that children are not more radiosensitive to harmful effects at low doses.

Hundreds of studies have demonstrated the health benefits of low-dose radiation exposure, and not just absence of harm. These include, for example, reduced cancer incidence and reduced all-cause mortality, that is, increased longevity (12 , 21 , 23). Since these demonstrated benefits, unlike the LNTH-predicted harms, are not rendered invisible by noise, LNTH advocates simply ignore or distort the evidence for benefit.

Nonetheless, these studies show radiogenic cancer-signal invisibility has some validity, but for a different reason. Adaptive responses likely negate a significant portion of the radiogenic signal, forcing the signal-to-noise ratio toward zero. But science cannot observe pure radiogenic signals separately from spontaneous cancer noise because they may be inseparable. According to Ozasa (15) it is difficult to estimate radiogenic risk at low doses because acute A-bomb low doses must be calculated on top of an uncertain background dose and these two values can overlap, becoming indistinguishable.

Although this discussion applies to acute doses (such as CT imaging), the total dose from nuclear medicine procedures is protracted, which is known to reduce risk compared with acute exposure of the same total dose (34). Studies involving thousands of children younger than 20 y who received ^{131}I for diagnostic purposes (<3.7 MBq; small children, <0.37 MBq) have been reported by Siegel and Silberstein (35). These children,

some followed for 40 y, received mean thyroid doses of about 1 Gy. No evidence of increased risk of thyroid cancer due to childhood intake of ^{131}I was found.

EVALUATION OF THE PRESENTED EVIDENCE

The evidence presented shows a reduced, not increased, cancer risk at radiologic imaging doses, and the LSS data show the LNTH-predicted, low-dose carcinogenicity is invalid up to approximately 200 mGy. Thus, the much lower doses from medical imaging of children and adults should not be feared or avoided for radiophobic reasons. A typical CT scan effective dose is about 10 mSv; a PET/CT brain scan, 5–7 mSv; and a routine whole-body ^{18}F -FDG PET/CT scan, 12–15 mSv (36). In general, epidemiologic studies that focus on providing direct low-dose LNTH-consistent risk estimates fail to address the basic sciences (e.g., biology and chemistry) and use often-hidden circular reasoning (assuming that which must be demonstrated empirically), thereby rendering their conclusions false and indefensible (23).

Although recent large epidemiologic studies—Pearce et al. (37) and Mathews et al. (38)—suggested an increased low-dose cancer risk associated with pediatric CT scans, these results have been effectively rebutted. Major flaws are their willingness to draw causal conclusions from mere association and their failure to consider that the association is likely due to reverse causation (i.e., cancer or illness gives rise to CT, not the reverse). Additionally, inaccurate dosimetry and implausible risk estimates are apparent. Other recent large-scaled cohort studies examining pediatric CT cancer risk—Journy et al. (39) and Krille et al. (40)—concluded that confounding by indication and reverse causation must be ruled out completely, or observed excess cancer risk may be falsely, and facily, attributed to CT exposure.

Radiologic imaging, nuclear medicine procedures, and, therefore, cumulative public radiation doses have increased dramatically over several decades, but their contributions to reduced morbidity and improved longevity have also increased. Concomitantly, concerns have arisen that radiation produces a higher radiogenic cancer risk. The dose-optimization movement of pediatric imaging led to the “Image Gently” campaign, which seeks to lower doses. Consensus guidelines for administered activity for pediatric nuclear medicine studies have been developed (41) that advise lower doses, based on the LNTH: “A reasonable assumption is to apply the linear no-threshold hypothesis for radiation-induced carcinogenesis when making judgments about the relative radiation-associated risks of different imaging studies” (42). Yet, as demonstrated herein, assuming the LNTH accurately assesses risk in the face of voluminous evidence to the contrary can never be called “reasonable.”

The usual justification for this assumption is that it errs on the side of caution—the precautionary principle, which may be useful if action to control the feared agent has no, or less harmful, side effects. However, for radiologic imaging, significant collateral negative consequences of lowering dose arise. Reducing patient doses to mitigate purely hypothetical cancer risks increases other well-known risks resulting from fear of imaging (7). These include imaging avoidance, nondiagnostic image quality, and use of alternative imaging procedures, such as a longer-duration MRI study, requiring risk-incurring sedation for young children (6 – 8). The risks of misdiagnoses from inadequate dose could be much higher than the cancer risks that the LNTH falsely predicts and that are putatively avoided by ALARA-based dose-reduction strategies (9).

A NON SEQUITUR: MEDICAL IMAGING SHOULD BE INFLUENCED BY THE LNTH

Discussing potential risks and ignoring corresponding benefits is improper and even harmful (43); unfortunately, quantitative estimates demonstrating relative and absolute benefits of diagnostic imaging are uncommon (6 , 8). Further, comparing long-term cancer risks with the present benefit from an imaging study is not a like-to-like comparison. For example, in a CT study in young adults, underlying medical morbidity, rather than CT-induced cancer, was shown as the much greater driver of adverse patient outcomes; the

observed risk of a patient dying within 5 y from the underlying disease was at least 1–2 orders of magnitude greater than the hypothetical LNTH-derived risk of dying from CT-induced cancer (44).

The very concept of dose “optimization” (ALARA dosing), is one-sided and therefore flawed, ignoring much greater, fear-driven risks, along with the likely dual benefits of imaging: first, the diagnostic information provided, including more accurate and rapid diagnoses, lives saved, quality-of-life improvements, reduced hospital stays, and cost reduction (8) (e.g., we know that CT scans strengthen confidence in prior diagnoses, often leading to better treatments or more accurate diagnoses (45)); and second, the far more likely lifetime-cancer-risk reduction resulting from the radiation itself (21 , 23 , 26 , 30).

A recent study demonstrated a substantial benefit from the use of PET/CT scans to assess response to chemoradiotherapy for primary treatment of patients with squamous-cell head and neck carcinoma with advanced nodal disease (46). The trial assessed the noninferiority of PET/CT-guided surveillance of planned neck dissection performed only if imaging showed an incomplete or equivocal response. The primary endpoint was overall survival. Survival was similar between patients undergoing PET/CT-guided surveillance and patients undergoing neck dissection, but surveillance resulted in considerably fewer operations (~80% of patients avoided neck dissection), which was additionally more cost-effective. Dissection is generally a 3-h operation, involving both considerable morbidity and potentially long hospital stays. Early and accurate diagnosis through medical imaging reduces mortality, the need for treatment, and costs.

Brenner et al. (47) perhaps started the frenzy over CT dose and cancer risk. On the basis of an LNTH calculation involving unsupported parameters with significant uncertainties, they projected that approximately 500 children under the age of 15 y would die of cancer attributable to CT radiation. The irresponsibility of this projection was underscored by International Commission on Radiological Protection Publication 103 (48) and others stressing that the low-dose risk uncertainties of the LNTH show it should not be used to calculate hypothetical cancers from small radiation doses received by large populations. According to Lauriston Taylor (25), this type of calculation is based on a literal application of the LNTH, treating it as fact even though there is no statistical or other verification of this calculation. Such claims, he said, are “deeply immoral uses of our scientific knowledge.” Estimating future CT-caused cancers on the basis of the unsupportable assumptions of the linear no-threshold model (e.g., the fallacious 5%/Sv cancer risk) results in a purely fictitious prediction serving only to generate fear-based negative consequences.

The goal of dose management should be aimed at achieving diagnostic-quality images, not reducing dose in the hormetic imaging-dose ranges. It has been suggested that 1 in 20 pediatric abdominal CT scans may be inadequate for diagnostic purposes because of radiation-dose-reduction efforts. This will negatively influence the care of some patients because of misguided treatment (7). Importantly, doses cited for nuclear medicine and CT examinations do not even represent patient-specific doses, but rather doses resulting from various models (49). In nuclear medicine, dose optimizers look to lower administered activities, and dosing guidelines for diagnostic-quality images, based on body weight, are available that propose to have a positive impact on uniform pediatric dosing. But approaches based solely on administered activity are insufficient because they ignore interpatient biokinetics, which are highly variable, significantly affecting dose estimates and image quality. For example, in some patients, radiopharmaceutical clearance is quicker than average, and the result may be a suboptimal image resulting in lower counts and increased image noise from inappropriately reduced administered activity. Recently, a methodology incorporating adjustment for body morphometry, use of age-specific biokinetics, and more detailed phantom modeling has been described as a first step in reducing pediatric absorbed dose while maintaining image quality; but although image quality has objective, measurable properties, its subjective properties (i.e., radiologist or nuclear physician interpretability) are not easily quantified (50).

The goal of the Image Gently Alliance (51) is to lower the potential risk of CT-caused cancer in children, but this risk is hypothetical, lacking credible evidence. Furthermore, on the basis of the LSS data, children are not more radiosensitive than adults in the imaging dose range. The Alliance mainly addresses pediatric, ALARA-based CT optimization, but without knowledge of actual patient doses and without demonstrated harm at diagnostic imaging doses, this unintentionally misleads and frightens the public.

All medical procedures require justification in the form of medical indication, but radiation exposure levels have no place in that process. There is no excuse for policies and warnings leading to nondiagnostic scans, fear-driven avoidance of medically indicated imaging, or selection of less optimal alternative procedures. The problem is radiophobia, not radiation. Optimization—using doses that are ALARA—is, thus, without justification, only multiplying illnesses, injuries, and deaths. Therefore, the International Commission on

Radiological Protection—recommended fundamental principles of radiation protection—justification and optimization—are mutually contradictory and without merit for radiologic imaging and other sources of low-dose radiation exposure as well.

Many grant the absence of low-dose harm yet nevertheless advocate lower imaging dose as a prudent approach; but this conflates actual prudence, restricting medical procedures to those clinically indicated, with the prejudice-based false prudence of limiting clinically indicated imaging doses. This unjustified, radiophobia-centered approach falsely vilifies beneficial imaging without confirmatory data and entails extremely harmful consequences. The declaration that the LNTH provides “known” cancer risks due to imaging must stop. The use of the LNTH and the advocacy for ALARA dosing by various groups (e.g., Image Wisely and Image Gently) are misguided and not science- or evidence-based. These groups serve only to frighten rather than to educate, further enhancing the probability of negative outcomes; we therefore recommend that the imaging community come together to decide whether the activities of such groups should be terminated.

MEDICAL IMAGING AND THE FAILURE OF LNTH ORTHODOXY

Medical imaging is said to carry an iatrogenic risk of cancer from radiation exposure. But credible evidence of cancer risk from imaging, particularly CT and PET/CT scans, is nonexistent; this risk is an imaginary prediction derived from the demonstrably false LNTH. Low-dose radiation from these scans does not cause, but more likely helps prevent, cancer. Actual risk arises from radiophobia through patients’ fear-driven imaging avoidance and physician-recommended substitution of alternative procedures. Furthermore, true iatrogenic risk arises not only from such alternative procedures but also from misdiagnoses that are secondary either to patient refusal of medically indicated imaging or to nondiagnostic scans resulting from insufficient exposure. Obtaining correct diagnoses and avoiding riskier alternatives should be paramount; medical imaging is intended to achieve a diagnostic purpose; thus, exposure should not be reduced below the required level to achieve this purpose.

Imaging is a medical procedure that should be governed by the highest, science-based principles and policies (use of proper procedures, appropriately calibrated equipment, etc.). Yet, many believe imaging should be managed by LNTH principles. Herein is the logical and medical fallacy of this conclusion: the LNTH is an invalidated hypothesis, spawning the ALARA principle. It is responsible for misguided concerns promoting dose optimization, leading to risks far greater than even the imaginary low-dose carcinogenic risk it purports to avoid while ignoring the benefits of medical imaging.

With no evidence supporting the LNTH, and much evidence to support hormesis at imaging doses, LNTH advocates are blindly responsible for promoting radiophobia with all its negative consequences. The LNTH and its offspring, ALARA, do not err on the side of caution. Radiophobia can no longer be ignored: proper low-dose radiation exposure has no documented pathway to harm, whereas the LNTH and ALARA most assuredly do.

The only rational and public-health-protective conclusion is that subjecting the life-saving practice of medical imaging to the LNTH is a non sequitur. Medical imaging must no longer suffer in the longstanding thrall of the LNTH. It is incumbent on the medical imaging community to finally and unambiguously denounce the LNTH and, unencumbered by false beliefs, act as advocates for the safety and life-saving benefits of medical imaging.

Footnotes

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We recommend

Dose Optimization to Minimize Radiation Risk for Children Undergoing CT and Nuclear Medicine Imaging is Misguided and Detrimental
Jeffrey A. Siegel et al., *J Nucl Med*, 2017

Letter: Subjecting Radiologic Imaging to the Linear No-Threshold Hypothesis: A Non Sequitur!
Edward B Silberstein, *J Nucl Med*, 2017

Regarding: Subjecting Radiologic Imaging to the Linear No-Threshold Hypothesis: A Non Sequitur of Non-Trivial Proportion
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Society of Nuclear Medicine, ScienceDaily, 2017

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Five Things Physicians and Patients Should Question

1 Do not obtain spinal imaging for patients with acute low-back pain during the six (6) weeks after onset in the absence of red flags.

In the absence of red flags, evidence-based guidelines do not support the routine use of spinal imaging for patients with acute back pain of less than six weeks duration. Red flags include history of cancer, fracture or suspected fracture based on clinical history, progressive neurologic symptoms and infection, as well as conditions that potentially preclude a dynamic thrust to the spine, such as osteopenia, osteoporosis, axial spondyloarthritis and tumors. Unnecessary imaging incurs monetary cost, exposes the patient to ionizing radiation, and can result in labeling patients with conditions that are not clinically meaningful, creating a false sense of vulnerability and disability. Indeed, several studies have shown that the routine use of radiographs in the care of low-back pain may result in worse outcomes than without their use.

2 Do not perform repeat imaging to monitor patients' progress.

With few exceptions (e.g., the long-term management of idiopathic scoliosis) radiographic findings should not be used as outcome measures for low-back pain. There is currently no data available to support a relationship between changes in alignment or other structural characteristics and patient improvement. This practice increases costs, exposes patients unnecessarily to ionizing radiation and may distract from more meaningful outcomes. Furthermore, there is no known correlation between performing routine or repeat imaging studies to monitor a patient's condition and improved clinical outcomes or meaningful changes in patient management. Repeat imaging is appropriate only if strong clinical indications exist, such as a major change in diagnosis, documented worsening of symptoms or significant progression of disease. Failure to respond to treatment is not an indication for repeat imaging.

3 Avoid protracted use of passive or palliative physical therapeutic modalities for low-back pain disorders unless they support the goal(s) of an active treatment plan.

Passive physical therapeutic modalities are defined as those interventions applied to a patient with no active participation on the part of the patient. These include heat, cold, electrical stimulation and ultrasound. These passive therapies can play an important role in facilitating patient participation in an active treatment program. However, the use of passive therapies untethered to the goal of increasing physical activity can be harmful, as it can lead to patient inactivity, prolonged recovery and increased costs. For any patient with a low-back pain disorder to achieve an optimal clinical outcome, an essential element is to restore, maintain or increase the level of physical activity. The evidence demonstrates that both general physical activity (e.g., walking, jogging, biking) and specific exercise regimens are effective in treating and preventing low-back pain and may lead to better outcomes when combined with spinal manipulation.

4 Do not provide long-term pain management without a psychosocial screening or assessment.

There is a high probability that any person with a chronic pain syndrome has a concomitant psychological disorder, most notably depression and/or anxiety. The relationship between chronic pain and depression/anxiety is well established. The causal arrow between pain and these disorders can point in either direction and over time may form a positive feedback loop between these two elements. Screening tools are available that will aid in the detection of potential depression/anxiety, and, when indicated, a referral may be most appropriate for more extensive evaluation and treatment. In addition, lesser psychological factors such as catastrophizing and fear avoidance behavior may interfere with a patient's recovery and should be recognized by the clinician. Recognizing indicators of patient psychosocial health behavioral factors can affect a patient's recovery and/or compliance with treatment and may decrease the risk of developing chronic illness/pain. Tools such as StarTBack 9 screening tool, PHQ-9 depression scale and the Fear Avoidance Belief Questionnaire are examples.

5 Do not prescribe lumbar supports or braces for the long-term treatment or prevention of low-back pain.

While there may be limited benefit in the short term, the prolonged use of lumbar supports is not supported by the literature for the treatment or prevention of low-back pain. Numerous systematic reviews have found limited to no value for their use in this context. The literature clearly demonstrates that such passive therapies are contrary to the currently accepted central principle of low-back pain care, which is that the patient must engage in an active rehabilitative regimen to achieve the best outcomes.

How This List Was Created

The American Chiropractic Association (ACA) utilized its Committee on Quality Assurance and Accountability (CQAA) to serve as an expert task force of doctors of chiropractic (DCs) to identify areas/items common to the practice of chiropractic for which recommendations were supported by clinical research and would result in high-value, cost-effective services and improved patient outcomes. A literature search was conducted and the task force collaboratively identified a draft list of six recommendations based upon established *Choosing Wisely*® criteria. The list was submitted to the ACA Board of Governors for initial review. After further refinement, the final list of five strategies was selected, submitted to and approved by the ACA Board of Governors.

Choosing Wisely® recommendations 1 and 2 are performance measures approved by Centers for Medicare and Medicaid Services (CMS) for the 2017 Spine IQ Qualified Clinical Data Registry for Conservative Spine Care.

ACA's disclosure and conflict of interest policy can be found at www.acatoday.org.

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About the ABIM Foundation

The mission of the ABIM Foundation is to advance medical professionalism to improve the health care system. We achieve this by collaborating with physicians and physician leaders, medical trainees, health care delivery systems, payers, policymakers, consumer organizations and patients to foster a shared understanding of professionalism and how they can adopt the tenets of professionalism in practice.



To learn more about the ABIM Foundation, visit www.abimfoundation.org.

About the American Chiropractic Association

The American Chiropractic Association (ACA) is the largest professional association in the United States representing doctors of chiropractic. Chiropractors focus on disorders of the musculoskeletal system and the nervous system, and the effects of these disorders on general health and function. Chiropractic services are used most often to treat conditions such as back pain, neck pain, pain in the joints of the arms or legs, and headaches. Widely known for their expertise in spinal manipulation, chiropractors practice a hands-on, drug-free approach to health care that includes patient examination, diagnosis and treatment. On behalf of its members, ACA educates the public about the benefits of chiropractic services, supports research, and provides professional and educational opportunities for chiropractors, with the goal of advancing high-quality patient care. ACA promotes the highest standards of ethics and evidence-informed patient care, and is proud to partner with the *Choosing Wisely*® campaign.



To learn more about ACA, visit www.acatoday.org.

CHIROPRACTIC PHYSICIANS' BOARD OF NEVADA

AGENDA ACTION SHEET

TITLE: **Agenda Item 30** Discussion/approval to carry and/or recommend CBD products – For possible action.

RECOMMENDED MOTION: **No recommendation.**

PREPARED BY: **Jason O. Jaeger, DC**

MEETING DATE: **January 11, 2018**

TIME REQUIRED: **5 minutes**

BACKGROUND INFORMATION: **See attached.**

REVIEWED BY: ☒ President ☒ Secretary ☒ Executive Director

ACTION: ☐ Approved ☐ Approved w/Modifications ☐ Denied ☐ Continued

Natural EZE CBD OIL

1500 MG & 750 MG

CERTIFIED ORGANIC INDUSTRIAL HEMP
SUPERCRITICAL CO2 EXTRACTION
NO THC
CERTIFIED GMP FACILITY

Natural EZE CBD is a Full Spectrum plant extract that contains several Cannabinoids including, CBD, CBDA, CBDV, CBG, CBC and CBN

This Full Spectrum 30ml Hemp Oil Tincture contains 1500mg of CBD

Our Hemp Oil Tincture is made with Pesticide and Solvent free Non-GMO Industrial Hemp Oil extracted from the mature stalks of the hemp plant.

CBD is one of 85+ cannabinoids (active compounds responsible for producing the effects cannabis has on the body) works by interacting with a person's endocannabinoid system.

The endogenous cannabinoid system is comprised of endocannabinoids and other receptors, which are located in the immune cells, connective tissues, glands, organs and brain, and its purpose is to maintain the body's homeostasis.

CBD is an all-natural cannabinoid with no known side effects and no psychoactive properties.

Our Hemp Oil Tincture is made in a cGMP facility and meets all Food Safety requirements of the State of Washington

We import only the highest quality EU hemp biomass derived from stalks. All of our hemp oil is made in the USA.

Wouldn't be great if you could relieve most symptoms with a single substance? If instead of having to take Xanax for anxiety, Emend for nausea and Oxycodone for pain, you could take just one substance without having to worry about adverse interactions between drugs and overdose? Well that substance exists. It grows out of the ground, not in a laboratory. Yes it is CBD

THE NERVOUS SYSTEM

- Aids in sleep.
CBN
- Reduces seizures and convulsions.
CBD THCv
- Tranquilizing.
CBD

DIGESTIVE SYSTEM

- Appetite suppressant.
THCv
- Appetite stimulant.
THC
- Reduces contractions in the small intestines.
CBD

MUSCULAR & SKELETAL

- Promotes bone growth.
CBD CBG CBC THCv
- Suppresses muscle spasms.
THC CBD CBN
- Reduces inflammation.
THC CBD CBC

ENDOCRINE SYSTEM & IMMUNE RESPONSE

- Kills or slows bacteria growth.
CBD CBG
- Treats fungal infections.
CBG
- Reduces blood sugar levels.
CBD
- Treats psoriasis.
CBD

CIRCULATORY SYSTEM

- Reduces risk of artery blockage - anti-ischemic.
CBD
- Increases cerebral blood flow.
THC CBD

WHOLE BODY RELIEF & PROTECTION

- Inhibits cell growth in tumors and cancer cells.
THC CBD CBG CBC
- Reduces or eliminates pain.
THC CBD CBN CBC

CHIROPRACTIC PHYSICIANS' BOARD OF NEVADA

AGENDA ACTION SHEET

TITLE: **Agenda Item 31** Discussion regarding proposed revisions to the CCE Accreditation Standards – For possible action

RECOMMENDED MOTION: **No recommendation**

PRESENTED BY: **Ben Lurie, DC**

MEETING DATE: **January 11, 2018**

TIME REQUIRED: **5 minutes**

BACKGROUND INFORMATION: **See attached.**

REVIEWED BY: X President X Secretary X Executive Director

ACTION: Approved Approved w/Modifications Denied Continued



8049 North 85th Way
Scottsdale AZ 85258-4321
480-443-8877 | www.cce-usa.org

PUBLIC DISCLOSURE NOTICE ON
LIFE CHIROPRACTIC COLLEGE WEST
Hayward, California
Effective: July 15, 2017

In accordance with the Council on Chiropractic Education's (CCE) policy and U.S. Department of Education requirements, when an institution's governing board notifies CCE in writing of its decision to voluntarily withdraw its accreditation and the Council takes an accreditation action, CCE releases this decision to the U.S. Department of Education, Council for Higher Education Accreditation, appropriate institutional and specialized accrediting agencies, state licensing boards and the public.

Recent Council Action

Please be advised that the doctor of chiropractic degree program at Life Chiropractic College West (LCCW), Hayward, California, notified CCE in writing of its decision to voluntarily withdraw its institutional accreditation status only with CCE. At its July 15, 2017 Semi-Annual Meeting, the Council accepted the voluntary withdrawal from institutional accreditation by LCCW due to the college obtaining institutional accredited status with the WASC Senior College and University Commission (WSCUC) in March 2017. It is important to note that LCCW still maintains its programmatic accreditation status with CCE which was originally granted in July 1987 and most recently reaffirmed in January 2011.

Next Steps

In accordance with the CCE Schedule for Accreditation Activities, LCCW is currently scheduled to submit its programmatic Self-Study by May 1, 2018 in anticipation of a comprehensive site visit in the fall of 2018.

At its meeting in January 2019, the Council will review the Self-Study, Fall 2018 Final Site Team Report and the Program response to the Final Site Team Report in a status review meeting with the program.

Contact Information

You may contact the Council on Chiropractic Education (CCE) by email at cce@cce-usa.org or by phone at 480-443-8877, if you have any questions regarding this notice.

Distribution:

CCE Councilors
State Licensing Boards
WASC Senior College and University Commission
National, Regional & Specialized Accrediting Agencies
U. S. Department of Education
Council for Higher Education Accreditation

DCs Included in FAA BasicMed Flight Physical Program

Earlier this spring, a new FAA Flight Physical became available to licensed private pilots. The new program allows private pilots to obtain a BasicMed Flight Physical in place of a 3rd Class Medical Certificate provided by an Aviation Medical Examiner.

The BasicMed Flight Physical can be performed by an Aviation Medical Examiner “or by a State-Licensed Physician.” The FAA has determined that the BasicMed Flight Physical can be performed by a “State Licensed Specialty Physician” and recently provided clarification that doctors of chiropractic who are considered by their state licensing board as a “Chiropractic Physician” are eligible to perform the BasicMed exam. An additional requirement is that the state’s chiropractic scope of practice allows performing all components of the BasicMed physical.

State licensing boards may be asked to determine if licensees are eligible to perform these examinations described above as there are at least 31 state boards that allow use of the phrase “chiropractic physician.”

FCLB has been informed the BasicMed physical exam is slightly less comprehensive than the commercial driver physical. However, the decision-making protocol is significantly different as is the administrative procedure. As a matter of public protection, it is essential that those that perform the BasicMed Flight Physical do so in a complete and correct way.

Even those who perform CDL physicals for commercial drivers as National Registry Certified Medical Examiners may need preliminary training. DCs who are not National Registry Certified Medical Examiners may need additional training hours.

This unexpected but significant opportunity has the potential to be of great benefit for the chiropractic profession in performing physical exams in this and other Federal programs.

As we get updated information about this new opportunity for the chiropractic profession, we will pass it along to you. Please let us know if you have any questions.

CHIROPRACTIC PHYSICIANS' BOARD OF NEVADA

AGENDA ACTION SHEET

TITLE: Agenda Item 32 Discussion on MSO, MD/DC practices, employment of a DC by an MD or DO or other entity in which a licensed chiropractic physician is performing chiropractic services, physiotherapy and maintaining records - For possible action

RECOMMENDED MOTION: No recommendation

PRESENTED BY: Dr. Ben Lurie

MEETING DATE: January 11, 2018

TIME REQUIRED: 15 minutes

BACKGROUND INFORMATION: There are some DC's that are entering into Management Service Organizations (MSO) (MD/DC Practices) and/or being employed by an MD in the State of Nevada. A legal discussion on DC's maintaining their records in a SOAP format according to NRS 634, NAC 634 and NRS 629 as a licensed Doctor of Chiropractic separate from that of the Medical Doctor.

REVIEWED BY: X President X Secretary X Executive Director

ACTION: Approved Approved w/Modifications Denied Continued

CHIROPRACTIC PHYSICIANS' BOARD OF NEVADA

AGENDA ACTION SHEET

TITLE: **Agenda Item 33** Discuss/approve revisions to the Board travel policy – For possible action.

RECOMMENDED MOTION: **Approve revisions.**

PRESENTED BY: **Dr. Ben Lurie**

MEETING DATE: **January 11, 2018**

TIME REQUIRED: **15 minutes**

BACKGROUND INFORMATION: **At the Boards' October 11, 2017 meeting there was discussion regarding Board reimbursement for reasonable forms of transportation while on Board business. Please see the attached proposed revisions to the Boards' travel policy.**

REVIEWED BY: ☒ President ☒ Secretary ☒ Executive Director

ACTION: ☐ Approved ☐ Approved w/Modifications ☐ Denied ☐ Continued

Chapter 3

COMPENSATION OF SALARY TO BOARD MEMBERS AND PER DIEM ALLOWANCE AND TRAVEL EXPENSES TO BOARD MEMBERS AND EMPLOYEES

- I. Board members will receive a salary while engaged in the business of the Board.
 - A. Board members will receive \$150 for a full day or any portion of a day for attending a physical meeting, including national and regional conferences and conventions, and videoconferences.
 - B. Board members will receive \$18.75 for each hour or any portion of an hour for participating in a conference call meeting or for any work approved by the Board.
- II. Board members and staff will receive a per diem allowance established by the U.S. General Services Administration (GSA) for the primary destination and will be reimbursed for travel expenses incurred while engaged in the business of the Board approved by the Board at the current rate provided for state officers and employees provided the following criteria for travel is met:
 - A. Mileage will be paid for travel in a personal vehicle except for attendance at Board meetings held within a 30 mile radius of the work location of the Board member or staff.
 - B. Transportation at a reasonable cost with a receipt will be reimbursed for parking, taxi, subway/bus, etc. Rental cars must be ~~approved~~ reserved in advance by the Board and obtained only through the state Fleet Services Division depending on availability. Reasonable gasoline purchases must be submitted with receipt.
 - C. Meals will be reimbursed if travel occurs outside of a 30 mile radius of the work location of the Board member or staff as follows:
 1. Breakfast: Travel status must begin before 6:30 AM.
 2. Dinner: Travel status must end after 6:30 PM.Board members and staff shall not claim full meals furnished to them during a conference, meeting, or other work function on their reimbursement request.

- D. Air travel will be on the least expensive flights available; whenever possible, flight arrangements will be made 30 days or more in advance to obtain the least expensive flights.
 - E. Hotel room and a meal will be paid for the night before a regularly scheduled meeting for those traveling out of town. (Receipt Required)
 - 1. The \$150 Board member salary will not be paid for the day before a meeting.
 - 2. Hotel room will be paid if no flight is available on the same calendar day after the end of the meeting or event.
 - F. Excess lodging rates will be reimbursed if previously approved ~~on the appropriate form~~ by submitting the request in writing to the Executive Director.
 - G. No more than two Board members may represent the Board at an out of state event at the Board's expense.
 - H. If additional Board members request to attend an event at Board expense, the request must be formally approved by the Board prior to the event.
 - I. A Board member may travel outside the 30 mile requirement of their principle station at the Board's expense upon approval of the Board.
 - J. The Board's staff may attend a Board-related event at the Board's expense upon prior approval of the Board.
 - K. The Board's staff will receive flex-time off and be reimbursed for mileage and per diem expenses incurred while attending Board meetings or other Board-related events on regularly scheduled days off.
- III. Payment of salaries, per diem allowances and travel expenses.
- A. Board members will receive at the meeting a check for \$150 salary for each day of attendance at a physical Board meeting.
 - B. Board members will receive a check for salary for attendance at all other official meetings, including national and regional conferences and conventions, and any time spent performing work for the Board upon receipt of an Expense Reimbursement Claim form.
 - C. Board members and staff will receive a check for per diem allowances and travel expenses upon receipt of an Expense Reimbursement Claim form and required receipts.

- D. Payment of expenses that require receipts will be denied if the receipts do not accompany Expense Reimbursement Claim form.
 - E. Expense Reimbursement Claim forms may combine salary, per diem allowance, and travel expenses.
 - F. Expense Reimbursement Claim forms **must** be submitted to the Board office for payment within 30 days of the date incurred.
- IV. Requests for Board salaries and reimbursement for expenses shall be approved by the Board Secretary-Treasurer and the Executive Director.

Approved: July 23, 2005 with all Board member in favor.

Ratified: January 28, 2006
Motion: Potts
Second: Beyer
Passed: Unanimously

Revised: November 29, 2007
Motion: Yamane
Second: Potts
Passed: Unanimously

Revised: October 10, 2008
Motion: Youngblood
Second: Yamane
Passed: Unanimously

Revised: September 26, 2015
Motion: Rovetti
Second: Davis
Passed: Unanimous

Amended: January 13, 2017
Motion: Jaeger
Second: Lurie
Passed: Unanimous

CHIROPRACTIC PHYSICIANS' BOARD OF NEVADA

AGENDA ACTION SHEET

TITLE: **Agenda Item 34** – Election of Officers - For possible action

RECOMMENDED MOTION:

PRESENTED BY: **Dr. Ben Lurie**

MEETING DATE: **January 11, 2018**

TIME REQUIRED: **15 minutes**

BACKGROUND INFORMATION: Pursuant to NAC 634.140 the Board will elect officers as required pursuant to [NRS 634.030](#) at the first regular meeting of the Board during each even-numbered year.

REVIEWED BY: ☒ President ☒ Secretary ☒ Executive Director

ACTION: ☐ Approved ☐ Approved w/Modifications ☐ Denied ☐ Continued

CHIROPRACTIC PHYSICIANS' BOARD OF NEVADA

AGENDA ACTION SHEET

TITLE: **Agenda Item 35** Reassign Committees - For possible action

- A. Continuing Education Committee**
- B. Legislative Committee**
- C. Preceptorship Committee**
- D. Test Committee**

RECOMMENDED MOTION: **No recommendation**

PRESENTED BY: **Ben Lurie, DC**

MEETING DATE: **January 11, 2018**

TIME REQUIRED: **10 minutes**

BACKGROUND INFORMATION:

REVIEWED BY: X President X Secretary X Executive Director

ACTION: Approved Approved w/Modifications Denied Continued

Agenda Item 35

CHIROPRACTIC PHYSICIANS' BOARD OF NEVADA

AGENDA ACTION SHEET

TITLE: **Agenda Item 36 Correspondence Report – No action**

RECOMMENDED MOTION: **Non-Action item.**

PREPARED BY: **Ben Lurie, DC**

MEETING DATE: **January 11, 2018**

TIME REQUIRED: **5 minutes**

BACKGROUND INFORMATION: **See attached.**

REVIEWED BY: ☒ President ☒ Secretary ☒ Executive Director

ACTION: ☐ Approved ☐ Approved w/Modifications ☐ Denied ☐ Continued



NBCe COMMUNICATOR

PAUL TOWNSEND ANNOUNCES RETIREMENT

The NBCE Director of Practical Testing and Research Dr. Paul Townsend has announced his retirement from the National Board of Chiropractic Examiners effective December 31, 2017.

On behalf of the NBCE Board of Directors, President Dr. Salvatore D. LaRusso expressed appreciation to Dr. Townsend for "his professionalism and devotion to Part IV. Under Dr. Townsend's leadership, the NBCE has continued development of this exam, ensuring its enduring relevance and importance to chiropractic. The fact that all 50 states now accept or require passing Part IV demonstrates its impact upon the profession. The NBCE is extremely proud and grateful to Dr. Townsend. We wish him good fortune, health and happiness in his future endeavors."

Paul Townsend's career in chiropractic began graduating with honors and being the class valedictorian of in the fall class at Palmer College of Chiropractic in 1973. Later he taught at Palmer as an associate professor in Palmer's Outpatient Clinic, and in the Department of Post-Graduate Education as a lecturer in Sports Chiropractic. Dr. Townsend first came to the NBCE in 1976 as a Part II Test Committee participant. In 1979, Dr. Townsend left the Palmer faculty and moved to Colorado, where he was asked by the NBCE to become a private contract consultant.

Dr. Townsend was instrumental in the development of the Part IV examination, and led a committee to study feasibility of implementing a nationwide practical examination for chiropractic licensure. The first official Part IV examination was administered on four chiropractic college campuses in January 1996. Today, Part IV is administered on eleven college campuses, and is widely considered a standard of excellence in the chiropractic profession.

"I am excited to know that the NBCE Board of Directors has appointed Dr. Andy Gow, a rising star at the NBCE, to be the new Director of Practical Testing," said Dr. Townsend. "Under Dr. Gow's leadership, I am confident that Part IV will continue to be the benchmark for professional licensure testing in the health occupations."



NBCE ANNOUNCES 2017 SCHOLARSHIP WINNERS

Greeley, Colo.—The National Board of Chiropractic Examiners congratulates five winners of the annual scholarship competition. This is the second year of the competition, with three awards presented in 2016.

The winners for 2017 include:

- Integration into Medicare and Medicaid: The Moral Responsibility of Chiropractic, by **Ryan Burdick**, Cleveland University-Kansas City
- Interdisciplinary Chiropractic: A Shift Towards a Collaborative Educational Paradigm, by **Aidan Kaye**, New York Chiropractic College
- The Integration of Chiropractic Across Race, Religion, Ethnic or Gender Diverse Populations: A Review of the Literature, by **Chandra Kenyon**, Life University
- The Three E's, by **Brittany Schmidt**, Northwestern Health Sciences University
- Beyond the Eight Percent: The Patients We Aren't Seeing Are Those Who Need Us Most, by **Chloe Hommel Tillman**, Logan University

The students will each receive \$2,000 for their winning essay. The scholarship is open to students enrolled in U.S., CCE-accredited, chiropractic degree programs; students must be in good academic standing and have passed NBCE Part I. Entrants are required to submit an original essay, written by one student, on a humanities topic that focuses on or relates to chiropractic.

An independent third party, Brighthall, Inc., administers the program with President Dr. Claire Johnson leading the review and selection process. The 2018 scholarship program has been approved by the NBCE's board and will be launched in early 2018.

"The NBCE is proud to honor academic excellence through this program," said NBCE President Dr. Salvatore LaRusso. "We look forward to continuing to support future chiropractors in 2018."

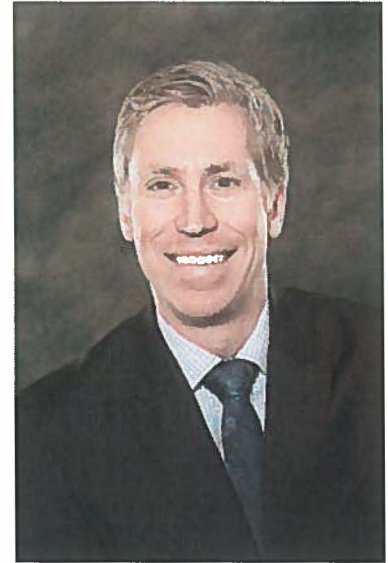
Headquartered in Greeley, Colo., the NBCE is the international testing organization for the chiropractic profession, with the mission of ensuring professional competency through excellence in testing. Established in 1963, the NBCE develops, administers and scores legally defensible, standardized written and practical examinations for candidates seeking chiropractic licensure throughout the United States and in several foreign countries.

communications@nbce.org | [970 356 9100](tel:9703569100) | www.nbce.org
[901 54th Avenue](#) [Greeley, CO 80634](#)

NBCE WELCOMES NEW PART IV DIRECTOR

Greeley, Colo.—The NBCE is pleased to announce the appointment of Andrew R. Gow, D.C., as the Director of Part IV Practical Testing Research and Development. Dr. Gow assumed his new position on January 1, 2018. He is responsible for overseeing the exam development, administration, and scoring of Part IV.

Dr. Gow is a 1999 graduate of Logan University and practiced in Loveland, Colorado, before coming to the NBCE. He received Diplomate certification in acupuncture from the National Certification Commission for Acupuncture and Oriental Medicine in 2003. In 2006, he began teaching acupuncture at Aims Community College. Through this training, doctors meet State of Colorado requirements to practice acupuncture in a chiropractic setting. Dr. Gow first came to the NBCE in 2008 to as a subject matter expert in acupuncture.



Dr. Andrew Gow

Dr. Gow joined the NBCE staff in 2009 as a chiropractic specialist in the Written Testing Department with specific responsibility for item development and overseeing test committees.

Dr. Gow commented, "I am pleased to be involved in one of the most important tests of the NBCE. We will continue and expand on the work of Dr. Paul Townsend, with introduction of digital diagnostic imaging to Part IV exams in the fall of 2018." He continued, "I look forward to working with the large team of staff, consultants, examiners, and others whose combined efforts make Part IV such an important part of the standardized testing process."

NBCE President Dr. Salvatore D. LaRusso expressed confidence in the appointment, stating, "With Dr. Gow's exceptional experience in all phases of NBCE testing, we are confident he will ensure stability in Part IV, utilizing the increasingly important role of evidence-informed chiropractic in Part IV testing."

Headquartered in Greeley, Colo., the NBCE is the international testing organization for the chiropractic profession. Established in 1963, the mission of the NBCE is to ensure professional competency through excellence in testing.

Open letter to the chiropractic profession:

Dear colleagues,

I am writing in response to information that came to me recently from several chiropractors in a short period of time about the **American Posture Institute** that I believe the profession should be aware of. Mark Wade and Krista Burns, whom I also have called friends, have done some things that I cannot stand for. Namely, they have deceived you and I with a tangled web of lies and other unethical practices. It saddens and angers me to write this letter but I believe in living in truth. I am not here to be negative but so shed light on a dark corner of our profession.

I will explain each point to make it clear from my point of view. I cannot say anything about the program they sell (either negative or positive) because I have not looked in depth at the actual material they sell. The point is the WAY they promote it to the profession. I know they have invested many hard hours in its preparation. I know them personally, travelled with them and we went to many seminars together. It saddens me that Chiropractors would put so much into a program and unethically fill it with deception and lies to make money off a profession who works so hard to help people.

Being that they do not have a practice and are living outside the U.S. they seem to be out of any legal jurisdiction. The Chiropractic profession has not always done a good job in looking after itself and I think we need to step up.

Take a look at the arguments below and judge for yourself. Should this continue?

Points of contention:

1. Fake testimonials

Fake testimonials used with the purpose to deceive for financial gain is a crime.

This is called conspiracy to defraud.

Chiropractors and their companies (affiliates) who sell their product may be at risk of conspiracy to defraud for the fake testimonials of non-chiropractic actors and Facebook screenshots in their marketing. (It depends on your local jurisdiction.)

This is what pushed me over the top. Outright lies and deception with intent to make a profit from the chiropractic profession. Here we find actors and not real clients. Here is an example:

<https://americanpostureinstitute.com/cpn-enrollment/>

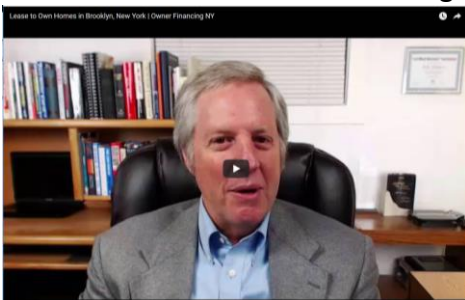
Scroll down and look at the section "Proven and Tested by Professionals like you:"

Click on "David" from Michigan.



Pause that video then go to the next...

Meet "Bob" from Owner Financing NY...



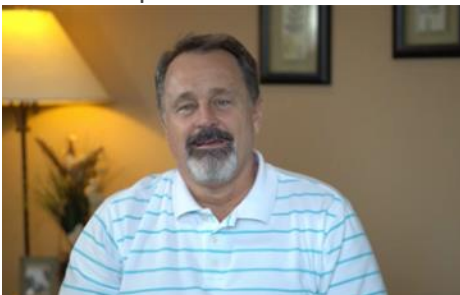
[https://www.youtube.com/embed/ LvBORMGsmo](https://www.youtube.com/embed/LvBORMGsmo)

Now go back to the former and meet Jason from Texas...
Or click on the link below.

<https://player.vimeo.com/video/187853942>



Matches up with this other website testimonial.



<http://myfamli.com/>

You see more of this this guy at:

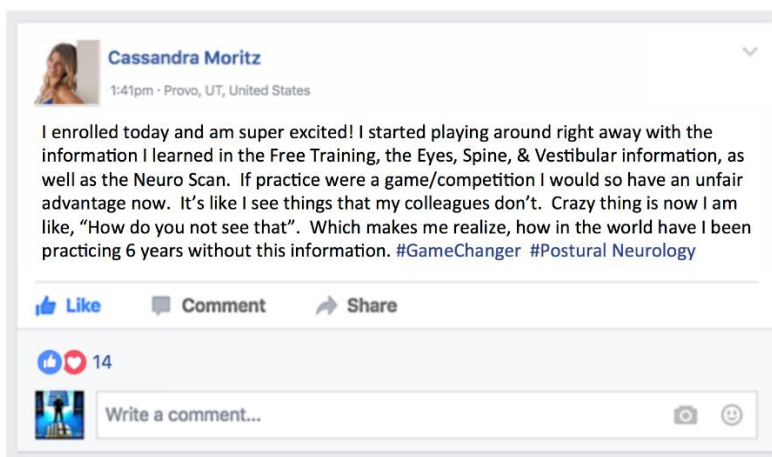
<https://makemoneybay.com/copy-my-cashflow-review>



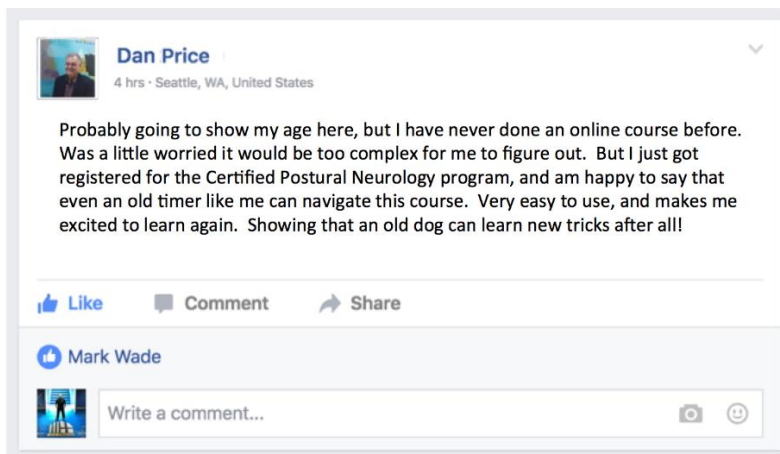
Thought I was going to be sick when I found this out. I had no idea it was also possible to fake Facebook testimonials until I started looking further on the **American Posture Institute enrollment page**. (See below.) I did a search about this and found several websites like Simitator, StatusClone and PrankMeNot that will make fake testimonials for you. Ugh!

Many of the Facebook testimonials on the **American Posture Institute** seem to be fake. I only looked at a few.

Look at the “Hear What They Are Saying:” section on the same page.



Cassandra Moritz is a little girl on Facebook...



There is a Dan Price is from Seattle, but he is a young surfer dude.

I did find a Chiropractor named Daniel-Price but the first name is Jennifer.

There are no people on Facebook that match those names.
(I stopped after those two, which was enough for me.)

Here is some legal info on fake testimonials.

- <http://www.cbc.ca/news/business/video-review-testimonial-marketplace-1.3953793>

Individuals, including actors like Sanpan, could serve up to 14 years in prison and could be liable for penalties up to \$750,000 under the Competition Act if they know they will be used in deceptive advertising. Corporations could face fines of up to \$10,000,000.

The Competition Bureau won't say if it's investigating individuals like Sanpan. But the agency has taken action on fake written reviews online.

In 2015, the Bureau fined Bell Media \$1.25 million dollars after its employees were caught posting reviews for its new app without disclosing their relationship to the company. Bell was the first company to have been fined for deceptive online reviews.

- <https://www.reviewtrackers.com/legal-risks-writing-positive-fake-astroturf-online-business-reputation/>

Astroturfing can be prosecuted under several variations of consumer protection laws designed to protect the end user from false and deceitful advertising. In addition to state laws, consumers are also afforded protection at the national level from the Federal Trade Commission (FTC). In fact, in 2013, after a year-long investigation by the Attorney General, 19 [local businesses were fined](#) over \$350,000 collectively when they were found guilty of generating false reviews on review sites like Yelp, TripAdvisor, [Urbanspoon](#), OpenTable and others.

2. Stealing parts of already used clinical test and saying he (Mark) invented it:

The “push test” and the “Wade technique for postural analysis” were not developed by Mark Wade, he learned it as part of the standard analysis procedures from the *Advanced Biostructural Correction™* Technique from seminars (that we happened to take together) and gave them a new name.

What are the differences in ABC and the Wade Technique?

Postural evaluation from ABC technique:

Instructions before ALL the pictures are, "Breathe in. Breathe out and let your body relax and slump."

<https://meningealrelease.com/first-rib-maneuver>

How to Perform the Wade Technique for Postural Analysis:

How do you perform this technique? First you have the patient close their eyes. Then have them

breath in fully and breathe out fully. As they exhale they are instructed to collapse their shoulders allowing their body to fall into normal posture.

<https://americanpostureinstitute.com/instant-validation-of-all-posture-analyses/>

Mark's claims:

Push test-

<http://www.amnacademy.com/posture-2/> See part 2, Posture- "In this course..."

<http://councilonhumanfunction.com/layouts/dr-mark-wade/> (website owned by Krista)

Wade technique-

The "Wade Technique for Posture Analysis"

https://youtu.be/-Vtgr3HM_M

Here is a picture of Krista getting checked by the instructor at the Advanced Biostructural Correction™ technique seminar that we took in November of 2014:



Mark took the 'push test' out of the standard ABC protocol cutting out the occipital check. We were also instructed to look for segmental 'postural instability' as we performed the technique.

3. Advertising that you have earned their unrecognized certificate may jeopardize a chiropractor's license.

The API website encourages participants to market their "Expertise" on social media.

<https://americanpostureinstitute.com/how-to-position-yourself-as-the-go-to-ergonomic-expert>

Chiropractors who complete the API program and advertise they are a "Certified Posture Expert" where there is no accrediting Board, may be at risk of violating state board regulations and put their license in jeopardy. Most (if not all) chiropractic state boards have rules about advertising as an expert or specialist where they cannot claim a title unless he or she is registered with and approved by the appropriate board as holding the applicable professional credentials in that field.

An example from the Nevada state board states the following:

Anybody can certify anyone for anything. As a general rule, using the word certified, expert, fellow, or specialist in any advertisement constitutes a violation of the above regulations unless the licensee has taken 100+ hours in a course approved by the Board and has registered with the Board.

4. Claiming to have a PhD when she (Krista) does not and other unverifiable claims with the seeming intent to deceive the buyer from reality (fraudulent claims?)

- a. On this site <https://americanpostureinstitute.com/most-certified-posture-experts> , Krista claims to have a PhD in Health Administration & Policy. **She does not!** She is enrolled in a DHA program through Capella University but has not finished it. Punishment for resume fraud of this variety varies from state to state. In New Jersey, the use of a fraudulent degree is subject to a civil penalty of \$1,000 for each offense. Texas, on the other hand, classifies falsifying your educational record as a Class B misdemeanor (punishable by up to \$2,000 in fines and 6 months in prison), and Kentucky raises it to a Class A misdemeanor (punishable by up to a year in prison).

I wrote to the University where she claimed to hold a PhD and here is our correspondence:

Dear Mr. Sundeen,

Could you please confirm if Krista Burns has received a PhD in Health Administration or DHA degree from your university?

Thank you for your help,

Dr. David Damaske

From "Sundeen, Scott" Scott.Sundeen@capella.edu
Date: 12 ottobre 2017 15:51:53 CEST

Hello, Dr. Damaske-

At this time, we can see that the learner is in the Doctor of Health Administration program, with a specialization in Health Policy and Advocacy. **She has not yet completed the program, however.** She is registered for the current term which began on 10/09, though we will not be able to confirm enrollment until after the second Friday of the term, which is census and would be the final drop deadline. Regarding her year in school, although we cannot confirm number of credits, we can confirm she has been continuously enrolled since fall 2011 term.

Sincerely,
Scott Sundeen
Learner Records Representative

Questionable claims, certificates and degrees they invented themselves or are not officially recognized. Although not “illegal”, it brought questions to my mind.

- b. Mark is a Posturologist? There is no reference to it on the “most certified posture experts” sheet. (<https://americanpostureinstitute.com/most-certified-posture-experts>) Where did he become a posturologist. As far as I could find, there are no schools in the US that make one a posturologist. In Italy, it is offered as a 150 hour course but he was not registered with the school or the association.
- c. On this website <http://councilonhumanfunction.com> Mark claims to have 45 Additional Certifications in Human Function they are not listed on his extensive expert sheet.
- d. Claiming “The Top Ranked Expert Posture Certification On The Planet!” on this website (<https://americanpostureinstitute.com/certifications>) Question: Top ranked by who or whom?
- e. Speakers at the *International Functional Medicine Conference* in 2014. <https://americanpostureinstitute.com/api-specialists-3/> They were not on the list of speakers for the Institute for Functional Medicine’s Annual Conference in 2014, which was a food and nutrition conference held in California. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4684110> Maybe they had a conference on one of the 600+ websites (domains) that they own: www.internationalfunctionalmedicinesummit.com, www.internationalfunctionalmedicinesymposium.com
- f. Claiming through AmpLIFEied to have the largest posture based practice in Italy. (email available on request. From Feb. 2016) This is simply not true. Numbers are not important, people are. There are only 4 posture based practices in all of Italy. Theirs was not the largest. A former associate estimated they saw 60 to 70 patients per week, together. I also ask then, if it was so large and prosperous why did they abandon it and their patients?
- g. They claim several certificates that they produced. They should not do that until others are in control of the examination process. <https://americanpostureinstitute.com/most-certified-posture-experts>

So what can you do?

Even though Mark and Krista do not have a clinic now, I believe there are steps we can take to stop this deception.

1. If you feel strongly about this issue you can send a complaint to the Federal trade commission (link below)
2. You can complain to your state board or national registry (they can decide to warn their chiropractors if they deem it necessary)
3. You can tell them how you feel.

To complain to the FTC:

<https://www.ftc.gov/faq/consumer-protection/submit-consumer-complaint-ftc>

Finally, to Mark and Krista...

At least for me, I am willing to forgive the betrayal of me and my profession. Just tell the truth. I believe you both have great potential and gifts to offer the profession. Just come clear with the truth and stop the false advertising and unethical marketing or don't sell your product. I will leave you with your own words printed on your website:

"You don't have to try and "sell" or "trick" your clients. When you get expert-level results, you will have more and more happy (doctors) ~~patients~~ that will want to refer to you. You will be a sought after authority by local businesses and corporations."

<https://americanpostureinstitute.com/how-to-position-yourself-as-the-go-to-ergonomic-expert>

Sincerely,

David Damaske, DC

PS- This letter is not meant to harm Mark and Krista in any way. It is to bring to light the way they have marketed their program, which in my opinion is unethical. I gain nothing from writing this only knowing that the truth is revealed. This information would have surfaced sooner or later and I believe that sooner was better. My hope is that chiropractors and the API affiliates may be protected from any legal trouble.

CHIROPRACTIC PHYSICIANS' BOARD OF NEVADA

AGENDA ACTION SHEET

TITLE: **Agenda Item 37 Board Member Comments – No action**

RECOMMENDED MOTION: **Non-Action item.**

PREPARED BY: **Ben Lurie, DC**

MEETING DATE: **January 11, 2018**

TIME REQUIRED: **5 minutes**

BACKGROUND INFORMATION: **Board members may comment on any topic but no action may be taken.**

REVIEWED BY: ☒ President ☒ Secretary ☒ Executive Director

ACTION: ☐ Approved ☐ Approved w/Modifications ☐ Denied ☐ Continued

CHIROPRACTIC PHYSICIANS' BOARD OF NEVADA

AGENDA ACTION SHEET

TITLE: **Agenda Item 38** Public Interest Comments – No action

This portion of the meeting is open to the public to speak on any topic NOT on today's agenda and may be limited to 3 minutes

RECOMMENDED MOTION: **Non-Action item.**

PREPARED BY: **Ben Lurie, DC**

MEETING DATE: **January 11, 2018**

TIME REQUIRED: **3 minutes per person per topic**

BACKGROUND INFORMATION: **The public may speak to the Board about any topic not on the agenda but no action may be taken.**

REVIEWED BY: ☒ President ☒ Secretary ☒ Executive Director

ACTION: ☐ Approved ☐ Approved w/Modifications ☐ Denied ☐ Continued

CHIROPRACTIC PHYSICIANS' BOARD OF NEVADA

AGENDA ACTION SHEET

TITLE: **Agenda Item 39** Adjournment – For possible action

RECOMMENDED MOTION: **Adjourn the meeting.**

PRESENTED BY: **Ben Lurie, DC**

MEETING DATE: **January 11, 2018**

TIME REQUIRED: **5 minutes**

BACKGROUND INFORMATION: **The meeting should be formally adjourned when all matters on the agenda have been addressed.**

REVIEWED BY: __X__ President __X__ Secretary __X__ Executive Director

ACTION: ____ Approved ____ Approved w/Modifications ____ Denied ____ Continued