



**Dora**  
Department of Regulatory Agencies

**Division of Professions  
and Occupations**  
Lauren Larson  
Division Director

**Board of Chiropractic Examiners**  
Deann Conroy  
Program Director

John W. Hickenlooper  
Governor

Barbara J. Kelley  
Executive  
Director

November 27, 2012

Dr. Matthew McCoy, D.C.  
Vice President – Foundation for Vertebral Subluxation  
4390 Bells Ferry Road  
Kennesaw, GA 30144

via E-mail: [matthewmccoy@comcast.net](mailto:matthewmccoy@comcast.net)  
[vertebralsubluzation@gmail.com](mailto:vertebralsubluzation@gmail.com)

RE: Colorado Open Records Request

Dear Dr. McCoy, D.C.:

Thank you for your request for records under the Colorado Open Records Law. Your request relates to the Colorado Board of Chiropractic Examiner's ("Board") proposed changes to Rule 7(C) regarding injectables. You requested the following documents from the November 15, 2012 Board agenda and Rulemaking:

1. Confidential Memorandum from the Attorney General's Office
2. Missouri Injectable Memorandum – August 22, 2012
3. Colorado Medical Board's Memorandum to the Board
4. Colorado Medical Society letters to Board
5. Minutes of the November 15, 2012, Board meeting
6. Any and all other communications, E-mails, letters, correspondence, FAXes, memos, etc. between or to the Board and its members regarding this issue.

The following is my response to your requests by number:

1. As to your first request, the confidential memorandum from the Attorney General's Office is just as it is named- confidential. The Attorney General

represents the Board in all legal matters and therefore there is an attorney-client privilege regarding this document. It is not a public document.

2. Missouri Injectable Memorandum dated August 22, 2012 is enclosed.
3. Colorado Medical Board's Memorandum to the Board is enclosed.
4. Colorado Medical Society letters presented to the Board are enclosed.
5. The November 15, 2012, Board meeting minutes will be posted online on the DORA website when they are approved in January 2013, at the next Board meeting.
6. Other correspondence regarding Rule 7 (C) are enclosed.

Sincerely,

FOR THE COLORADO BOARD OF CHIROPRACTIC EXAMINERS

  
Deann Conroy  
Program Director

Enclosures



Jeremiah W. (Jay) Nixon  
Governor  
State of Missouri

Jane A. Rackers, Division Director  
DIVISION OF PROFESSIONAL REGISTRATION

Department of Insurance  
Financial Institutions  
and Professional Registration  
John M. Huff, Director

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Loree V. Kessler, MPA  
Executive Director

## Memo

**To:** Missouri Licensed Chiropractors  
**From:** Missouri State Board of Chiropractic Examiners  
**Date:** August 22, 2012  
**Re:** Injectable Nutrition in Missouri

For some time, the Missouri State Board of Chiropractic Examiners has received inquiries and information regarding the injectable and intravenous delivery of dietary nutritional supplements to chiropractic patients ("injectable nutrition"). The growing availability of such products to alternative health care practitioners, and their patients, has prompted the Missouri Board of Pharmacy to examine the sale and distribution of injectable nutrition within Missouri, and the applicability of state and federal statutory limitations placed on the sale and distribution of these products. This examination by the Missouri Board of Pharmacy, combined with an increasing number of inquiries to the State Board by and relating to the vendors and distributors of injectable nutrition, has brought this topic to the forefront once again. Based upon the State Board of Chiropractic Examiners' recent consultation with the Missouri Board of Pharmacy for clarification of this issue, the following information is being provided in order to assist Missouri chiropractors in evaluating the contemplated utilization of injectable nutrients within a licensee's practice.

First, that portion of the licensure law commonly referred to as the "scope of practice" does not include the authority to "prescribe" any "drug or medicine", nor does the law authorize the state board to approve a type of treatment that is not within the scope of practice. Specifically, Section 331.010.1 RSMo of the licensure law for chiropractors states, "[t]he 'practice of chiropractic' is defined as the science and art of examination, diagnosis, adjustment, manipulation and treatment both in inpatient and outpatient settings, by those methods commonly taught in any chiropractic college or chiropractic program in a university which has been accredited by the Council on Chiropractic Education, its successor entity or approved by the board. It shall not include the use of operative surgery, obstetrics, osteopathy, podiatry, nor the administration or prescribing of any drug or medicine nor the practice of medicine. The practice of chiropractic is declared not to be the practice of medicine and operative surgery or osteopathy within the meaning of chapter 334 and not subject to the provisions of the chapter". Section 331.010.1, RSMo. Supp. (emphasis added).



Secondly, Missouri law regulates the prescribing and dispensing of "legend drugs", which may also be referred to as "Rx Only" drugs. The following definition of "Legend drug" appears in section 338.330, RSMo relating to pharmacies and wholesale drug distributors:

(1) "Legend drug":

(a) Any drug or biological product:

a. Subject to Section 503(b) of the Federal Food, Drug and Cosmetic Act, including finished dosage forms and active ingredients subject to such Section 503(b); or

b. Required under federal law to be labeled with one of the following statements prior to being dispensed or delivered:

(i) "Caution: Federal law prohibits dispensing without prescription";

(ii) "Caution: Federal law restricts this drug to use by or on the order of a licensed veterinarian"; or

(iii) "Rx Only"[.]

(Emphasis added).

Third, pursuant to the definition of "legend drug" in the statutes administered by the Board of Pharmacy, which includes all products required by federal law to be marked as "Rx Only", no such "legend drug" can be *sold to, or purchased and administered by, any health professional(s) that do not have statutory authority to "prescribe" legend drugs.* The U.S. Food and Drug Administration, ("FDA"), has informed the chiropractic board that nutritional supplements, in essence, *become legend drugs when they are manufactured, packaged, and sold for administration via the route of injection or IV.* This includes both unaltered supplements which are packaged and sold for injection/IV administration, as well as blended, mixed, or compounded products.

The FDA's position derives from the Dietary Supplement Health and Education Act of 1994, which act is administered by the FDA. This act defines the term "dietary supplement" to mean "a product (other than tobacco) intended to supplement the diet that bears or contains one or more of the following dietary ingredients:

- a vitamin;
- a mineral;
- an herb or other botanical;
- an amino acid;
- a dietary substance for use by man to supplement the diet by increasing the total dietary intake; or
- a concentrate metabolite, constituent, extract, or combination of any ingredient described in [the above]."

This act further defines "dietary supplement" to mean a product that "is intended for ingestion in a form described in Section 411 C1 (B)(i)". Section 411 C1(B)(i) clarifies that "ingestion" means *oral* intake of the supplement. This provision specifically requires that, in order to be a "dietary supplement", rather than a "legend drug", the supplement must be one that:

**"(i) [I]s intended for ingestion in tablet, capsule, powder, softgel, gelcap, or liquid form. . ."**

Products, such as those coming from other countries or from other states within the United States, may not be in compliance with federal law when the "Rx Only" designation is omitted from the labeling of these products. However, such omission does *not* change the character of such products or their legal status as "legend drugs".

A Missouri licensed chiropractor considering the utilization of injectable nutrition, needs to first consult with their own legal counsel to discuss the legality and implications of such practice by examining the scope of practice for chiropractors, the laws relating to legend drugs, and corresponding regulations promulgated by the Missouri Board of Pharmacy and federal Food and Drug Administration.





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**Colorado Medical  
Board**  
Marschall S. Smith  
Program Director

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Director

## Memorandum

To: Colorado State Board of Chiropractic Examiners

From: Colorado Medical Board  
Marschall S. Smith, Program Director 

Date: October 26, 2012

Re: Comments in opposition to the Colorado State Board of Chiropractic Examiners noticed rule, 3 CCR 707-1, Scope of Practice Issues (Rule 7)

I am reaching out to you on behalf of the Colorado Medical Board (CMB), who has authorized me to speak on their behalf regarding this issue. The CMB has reviewed your recently noticed rule which, if adopted, would authorize chiropractors to perform subcutaneous injections. The CMB does not believe that such injections are within the scope of chiropractic as defined in §12-33-102(1.7), C.R.S. The CMB also expresses concern that the public could be harmed by such practice.

Specifically, your Rule 7 would authorize chiropractors to subcutaneously inject non-FDA approved substances such as "homeopathic and botanical medicines, vitamins, and minerals, phytonutrients, antioxidants, enzymes and glandular extracts." These substances are not specifically defined; for instance, it is unclear what constitutes a phytonutrient or glandular extract. The subcutaneous injection of such ambiguous substances present unnecessary risk to the health of prospective recipients, and could cause unnecessary harm requiring physician rescue or response. The CMB believes that such a rule exceeds your board's statutory authority because it authorizes subcutaneous injections and, separately, because it authorizes injections of substances that are non-FDA approved or undefined. Moreover, the CMB believes that these subjects fall within the CMB's legal responsibility to protect the public against the unauthorized, unqualified, and improper practice of the healing arts in this state.

Additionally, the CMB requests that it be added to your board's list of interested parties for rule making purposes.

As the Program Director for the CMB, I have become increasingly aware of scope of practice issues involving the medical and chiropractic professions. To facilitate a comprehensive and public-protection oriented approach to these scopes of practice issues, I would like to invite members of your board to participate in a joint working group. Please let me know if your board is interested in participating in such a group.





To: Board of Chiropractic Examiners  
Date: August 9, 2012  
Time: 9:00 AM  
Re: Proposed Rulemaking: 3 CCR 707-1, *Rule 7C, Scope of Practice*

The Colorado Board of Chiropractic Examiners has issued new proposed rule changes. Among the proposed changes are changes to Rule 7(C) Scope of Practice, which would allow Chiropractors to administer Nutritional Remedial Measures by means of injection, oral, topical, and inhalation.

Under the current version of Rule 7(C), Chiropractors may administer Nutritional Remedial Measures for their patients; however, the term "administer" does not include injections, oral, topical, and inhalation. The proposed change to the rules would permit Chiropractors to administer Nutritional Remedial Measures by injection, oral, topical, and inhalation. The Colorado Medical Society (CMS) hereby objects to new proposed rule 7C on the following grounds:

**A. Proposed Rule 7C is inconsistent with and contrary to statute, C.R.S. section 12-33-118; hence the proposed rule exceeds the statutory authority of the Colorado Board of Chiropractic Examiners.**

Colorado Revised Statute section 12-33-118 provides:

*"[A license to practice chiropractic] shall not confer upon the licensee the right to practice surgery or obstetrics or to prescribe, compound, or administer drugs, or to administer anesthetics."*

Further Colorado Revised Statute section 12-33-102(1.7) provides:

*"'Chiropractic' means that branch of healing arts that is based on the premise that disease is attributable to the abnormal functioning of the human nervous system. It includes the diagnosing and analyzing of human ailments and seeks the elimination of the abnormal functioning of the human nervous system by the adjustment or manipulation, by hand or instrument, of the articulations and adjacent tissue of the human body, particularly the spinal column, and the use as indicated of procedures that facilitate the adjustment or manipulation and make it more effective and the use of sanitary, hygienic, nutritional, and prevention of disease, and treatment of human ailments. . . 'Chiropractic' does not include colonic irrigation therapy. . ."*

Colorado Revised Statute section 12-33-102(2) provides: *"Chiropractic adjustment" means the application, by hand, by a trained chiropractor who has fulfilled the educational and licensing requirements of this article, of adjustive force to correct subluxations, fixations, structural distortions, abnormal tensions, and disrelated structures, or to remove interference with the transmission of nerve force. The application of the dynamic adjustive thrust is designed and intended to produce and usually elicits audible and perceptible release of tensions and movement of tissues or*



*anatomical parts for the purpose of removing or correcting interference to nerve transmission and expression."*

Under current Colorado law, chiropractors may not prescribe or perform invasive procedures such as injections, transfusions or surgery. Administering medications, through invasive procedures such as injections, through inhalation directly into the lungs of a patient, orally or topically is beyond the scope of practice authorized by Colorado law. The proposed rule conflicts with the design of Colorado statute and would be in excess of the administrative authority granted in the above referenced statutory provisions.<sup>1</sup>

Colorado law excepts from its definition the use of needles for venipuncture and acupuncture. If the legislature intended chiropractors to administer drugs through injections it would not have specifically excluded from that definition the use of needles for certain purposes. The legislature intended to exclude the use of needles from the scope of the practice of chiropractic except for venipuncture or the practice of acupuncture. The Board of Chiropractic Examiners cannot adopt a rule inconsistent with the statute.

**B. House Bill 10-1416, an effort to change existing law to allow chiropractors to provide medication by injection, did not pass the General Assembly. In testimony, the Colorado Chiropractic Association, acknowledged that existing Colorado law prohibits chiropractors from injecting medication.**

In 2010, House Bill 10-1416, sought to allow appropriately trained chiropractors to administer drugs for the treatment of neuromusculoskeletal ailments as follows:

"12-33-118. Use of title. A license to practice chiropractic entitles the holder to use the title "Doctor" or "Dr." when accompanied by the word "Chiropractor" or the letters "D.C.", and to use the title of "Doctor of Chiropractic". Such license shall not confer upon the licensee the right to practice surgery or obstetrics or to prescribe, compound, or administer drugs, or to administer anesthetics, *EXCEPT TO ADMINISTER A FORMULARY BY APPROPRIATELY TRAINED DOCTORS OF CHIROPRACTIC AS DETERMINED BY THE COLORADO BOARD OF CHIROPRACTIC EXAMINERS FOR THE TREATMENT OF NEUROMUSCULOSKELETAL AILMENTS, LIMITED TO TOPICAL, SUBCUTANEOUS, AND INTRAMUSCULAR ROUTES OF ADMINISTRATION.*"

Testimony on behalf of the Colorado Chiropractic Association (CCA) in support of HB 10-1416, which sought to expand the scope of practice of the chiropractor to allow them to inject homeopathic remedies and specific drugs, acknowledged that Colorado's existing law prohibits administration of drugs including by injections or topically and is binding as an admission against the CCA.

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<sup>1</sup> Moreover, chiropractic is a health care discipline which emphasizes the inherent recuperative power of the body to heal itself without the use of drugs or surgery. (Association of Chiropractic Colleges, [http://www.chirocolleges.org/paradigm\\_scope\\_practice.html](http://www.chirocolleges.org/paradigm_scope_practice.html).)

This bill failed to pass the General Assembly. The Colorado Board of Chiropractic Examiners cannot promulgate a rule expanding the scope of practice of the chiropractors to allow them to administer drugs through topical, oral, inhalation and injection without the authority of an expanded enabling statute.

The legislative history demonstrates a repeated failure by the CCA in the Colorado General Assembly to expand the definition of "administer" to include giving a drug via methods that include but are not limited to injections. (See also House Bill 97-1017.)

**C. The Colorado Medical Society opposes the proposed that would allow chiropractors to administer drugs will jeopardize patient safety.**

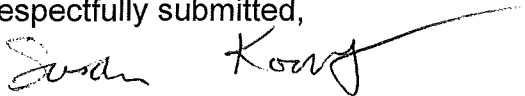
Placing prescriptive authority in the hands of chiropractors seriously compromises patient safety. The ability to prescribe or administer medications requires extensive education and clinical training. And, the difference in education and training between a physician and a chiropractor is vast. Consider the following:

- Medical students are required to take one year of pharmacology courses and receive ongoing pharmacology study and training throughout their third and fourth year of medical school - called clinical rotations which amount to approximately 8000 clinical hours. In addition, they fulfill three to five years of residency; approximately 15,000 clinical hours for family residency and more for specialty residencies
- Pharmacological courses are not part of the required courses that Chiropractic students must take in chiropractic school. Additionally, they must fulfill only 4,200 hours of combined classroom, laboratory and clinical experience over four years of schooling
- Chiropractors do not have any residency component to their educational and training programs.

Safe prescribing is a delicate art that depends on a broad and deep foundation of how medications interact with one another when taken for co-occurring conditions. Patient safety depends on ensuring that practitioners who have studied pharmacology and have a nuanced understanding of drugs are in a position to prescribe and administer medications through inhalation, injections, topically or orally.

In sum, the Colorado Medical Society objects to the expanded scope of practice set forth in proposed rule 7C, as beyond chiropractic's statutory authority, and extends in to the practice of medicine.

Respectfully submitted,



Susan Koontz

General Counsel, Colorado Medical Society



*Capital letters indicate new material to be added to existing statute.  
Dashes through the words indicate deletions from existing statute.*

## **First Regular Session**

## **Sixty-first General Assembly**

LLS NO. 970075.01 JLB HOUSE BILL 971017

## **STATE OF COLORADO**

BY REPRESENTATIVE Salaz

## **HEALTH, ENVIRONMENT, WELFARE & INSTITUTIONS**

### **A BILL FOR AN ACT**

**CONCERNING LIMITED PRESCRIPTIVE AUTHORITY FOR CHIROPRACTORS, AND, IN CONNECTION THEREWITH, ESTABLISHING QUALIFICATION REQUIREMENTS.**

### **Bill Summary**

*(Note: This summary applies to this bill as introduced and does not necessarily reflect any amendments which may be subsequently adopted.)*

Authorizes chiropractors who satisfactorily complete qualification requirements to prescribe, administer, and inject noncontrolled legend drugs. Expressly prohibits chiropractors from prescribing, administering, or injecting controlled substances. Authorizes the state board of chiropractic examiners to promulgate rules for the administration of a limited prescription program which authorizes chiropractors with limited prescriptive authority to prescribe noncontrolled legend drugs. The program expressly prohibits chiropractors from prescribing controlled substances.

Requires applicants for limited prescriptive authority to complete 6,000 hours of fulltime chiropractic practice, 24 hours of course work in injections and injectables approved by an accredited chiropractic college, and 96 hours of course work in pharmacology and pharmacotherapy taught by an accredited school of pharmacy. Includes a continuing education

requirement.

Includes the following acts within "unprofessional conduct":

- Prescribing noncontrolled legend drugs without having completed the qualification requirements;
- Using fraud, misrepresentation, or deceit when applying for limited prescriptive authority or completing the qualification requirements for such authority.

*Be it enacted by the General Assembly of the State of Colorado:*

**SECTION 1.** 1233102, Colorado Revised Statutes, 1991 Repl. Vol., is amended to read:

**1233102. Definitions.** As used in this article, unless the context otherwise requires:

(1) "ACUPUNCTURE" MEANS THE PUNCTURE OF THE SKIN WITH FINE NEEDLES FOR DIAGNOSTIC AND THERAPEUTIC PURPOSES.

(2) "ADMINISTER" MEANS TO GIVE A DRUG VIA METHODS THAT INCLUDE, BUT ARE NOT LIMITED TO, INJECTIONS.

~~(1)~~ (3) "Chiropractic" means that branch of the healing arts ~~which~~ THAT is based on the premise that disease is attributable to the abnormal functioning of the human nervous system. It includes the diagnosing and analyzing of human ailments and seeks the elimination of the abnormal functioning of the human nervous system by the adjustment or manipulation, by hand, of the articulations and adjacent tissue of the human body, particularly the spinal column, and the usage as indicated of procedures ~~which~~ THAT facilitate and make the adjustment or manipulation more effective, and the use of sanitary, hygienic, nutritional, and physical remedial measures necessary to such practice. "Chiropractic" includes the use of venipuncture for diagnostic purposes. "Chiropractic" does not include colonic irrigation therapy. "Chiropractic" includes treatment by acupuncture AND THE USE OF NONCONTROLLED LEGEND DRUGS when performed by an appropriately trained chiropractor as determined by the Colorado state board of chiropractic examiners. Nothing in this section shall apply to persons using acupuncture not licensed by the board.

~~(1.5) "Acupuncture" means the puncture of the skin with fine needles for diagnostic and therapeutic purposes.~~

~~(2)~~ (4) "Chiropractic adjustment" means the application, by hand, by a trained chiropractor who



has fulfilled the educational and licensing requirements of this article, of adjustive force to correct subluxations, fixations, structural distortions, abnormal tensions, and disrelated structures, or to remove interference with the transmission of nerve force. The application of the dynamic adjustive thrust is designed and intended to produce and usually elicits audible and perceptible release of tensions and movement of tissues or anatomical parts for the purpose of removing or correcting interference to nerve transmission and expression.

(3) (5) "Electrotherapy" means the application of any radiant or current energies of high or low frequency, alternating or direct, except surgical cauterization, electrocoagulation, the use of radium in any form, and Xray therapy.

(6) "LIMITED PRESCRIPTIVE AUTHORITY" MEANS THE AUTHORITY TO PRESCRIBE AND ADMINISTER NONCONTROLLED LEGEND DRUGS.

(7) "NONCONTROLLED LEGEND DRUGS" MEANS A LEGEND DRUG THAT IS AN ANALGESIC, ANTIINFLAMMATORY, MUSCLE RELAXANT, OR NUTRITIONAL THERAPY. "NONCONTROLLED LEGEND DRUG" DOES NOT MEAN A CONTROLLED SUBSTANCE, AS DEFINED IN SECTION 1818102 (5), C.R.S.

(4) (8) "Venipuncture" means the puncture of a vein for the withdrawal of blood for the purpose of diagnosis through blood analysis. Any blood analysis shall be done by a chiropractor or by a commercial laboratory.

**SECTION 2.** 1233107 (1), Colorado Revised Statutes, 1991 Repl. Vol., as amended, is amended BY THE ADDITION OF A NEW PARAGRAPH to read:

**1233107. Board powers.** (1) The board is authorized to and shall:

(i) ADOPT SUCH RULES AS ARE NECESSARY TO ADMINISTER THE APPLICATION PROCEDURES AND QUALIFICATION REQUIREMENTS OF CHIROPRACTORS SEEKING TO ACQUIRE AND MAINTAIN LIMITED PRESCRIPTIVE AUTHORITY PURSUANT TO SECTION 1233111.7.

**SECTION 3.** Article 33 of title 12, Colorado Revised Statutes, 1991 Repl. Vol., as amended, is amended BY THE ADDITION OF A NEW SECTION to read:

**1233111.7. Limited prescription authority requirements.** (1) AN APPLICATION FOR LIMITED PRESCRIPTIVE AUTHORITY SHALL BE ON A FORM PROMULGATED BY THE BOARD FOR SUCH PURPOSE AND SHALL INCLUDE PROOF OF SATISFACTORY COMPLETION OF THE REQUIREMENTS SET FORTH IN SUBSECTION (2) OF THIS SECTION.

(2) TO QUALIFY FOR LIMITED PRESCRIPTIVE AUTHORITY, A CHIROPRACTOR SHALL HAVE:

(a) COMPLETED A MINIMUM OF SIX THOUSAND HOURS OF FULLTIME CHIROPRACTIC PRACTICE;

(b) SATISFACTORILY COMPLETED TWENTYFOUR HOURS OF COURSE WORK IN INJECTIONS AND INJECTABLES APPROVED BY A CHIROPRACTIC COLLEGE ACCREDITED BY THE COUNCIL ON CHIROPRACTIC EDUCATION; AND

(c) SATISFACTORILY COMPLETED TWENTYFOUR COURSE WORK HOURS IN PHARMACOLOGY AND SEVENTYTWO COURSE WORK HOURS IN PHARMACOTHERAPY, ALL OF WHICH HOURS ARE TAUGHT BY A SCHOOL OF PHARMACY ACCREDITED BY THE AMERICAN COUNCIL ON PHARMACEUTICAL EDUCATION.

(3) A CHIROPRACTOR SHALL NOT MAINTAIN LIMITED PRESCRIPTIVE AUTHORITY OBTAINED PURSUANT TO THIS SECTION UNLESS, EACH YEAR, SUCH CHIROPRACTOR COMPLETES TWELVE COURSE WORK HOURS OF PHARMACOTHERAPY TAUGHT BY A SCHOOL OF PHARMACY ACCREDITED BY THE AMERICAN COUNCIL ON PHARMACEUTICAL EDUCATION. SUCH TWELVE HOURS SHALL NOT BE IN ADDITION TO THE FIFTEEN HOURS REQUIRED PURSUANT TO SECTION 1233116.

**SECTION 4.** 1233116, Colorado Revised Statutes, 1991 Repl. Vol., is amended to read:

**1233116. Continuing education.** (1) It is hereby expressly declared to be the purpose of this section to provide for an increase in the annual scientific educational requirements of licensed Colorado chiropractors. Each licensed Colorado chiropractor in active practice within the state of Colorado shall be required annually to attend not less than fifteen hours of scientific clinics, forums, or chiropractic educational study consisting of subjects basic to the field of the healing arts as set forth in section 1233111. Each year at the time of its regular June meeting the board shall prepare an educational schedule of minimum postgraduate requirements of subjects as set forth in section 1233111 that shall be met by any school, clinic, forum, or convention giving such educational work, and such minimum standards must be complied with by such school, clinic, forum, or convention before the board issues a postgraduate attendance certificate. Credit hours shall be determined by the board. Applicants shall apply to the board prior to or after the course and present proof of attendance and synopsis of the course content for approval of credit hours. This provision is made mandatory in the best interest of public health and welfare and to provide progress in the field of chiropractic. If any licensed chiropractor is unable to comply with this



section on account of dire emergency and for good cause shown, the board may waive the provisions of this section.

(2) ANY COURSE WORK HOURS COMPLETED IN PHARMACOTHERAPY PURSUANT TO SECTION 1233111.7, FOR THE PURPOSE OF MAINTAINING LIMITED PRESCRIPTIVE AUTHORITY SHALL BE APPLIED TO THE FIFTEEN HOURS REQUIRED UNDER SUBSECTION (1) OF THIS SECTION.

**SECTION 5.** 1233117 (1) (a) and (1) (v), Colorado Revised Statutes, 1991 Repl. Vol., as amended, are amended to read:

**1233117. Discipline of licensees letters of admonition, suspension, revocation, denial, and probation grounds.** (1) Upon any of the following grounds, the board may issue a letter of admonition to a licensee or may revoke, suspend, deny, refuse to renew, or impose conditions on such licensee's license:

(a) Using fraud, misrepresentation, or deceit in applying for, securing, renewing, or seeking reinstatement of a license, ~~or in~~ taking an examination provided for in this article, **APPLYING FOR LIMITED PRESCRIPTIVE AUTHORITY, OR COMPLETING THE QUALIFICATION REQUIREMENTS SET FORTH IN SECTION 1233111.7;**

(v) Engaging in any of the following activities and practices:

(I) ~~Willful and repeated ordering or performance~~ **WILLFULLY AND REPEATEDLY ORDERING OR PERFORMING**, without clinical justification, ~~of~~ demonstrably unnecessary laboratory tests or studies;

(II) ~~The administration~~ **ADMINISTERING**, without clinical justification, ~~of~~ treatment ~~which~~ **THAT** is demonstrably unnecessary;

(III) ~~The failure~~ **FAILING** to obtain consultations or perform referrals when failing to do so is not consistent with the standard of care for the profession; ~~or~~

(IV) Ordering or performing, without clinical justification, any service, Xray, or treatment ~~which~~ **THAT** is contrary to recognized standards of the practice of chiropractic as interpreted by the board; **OR**

(V) **PRESCRIBING OR ADMINISTERING NONCONTROLLED LEGEND DRUGS WITHOUT HAVING LIMITED PRESCRIPTIVE AUTHORITY, PURSUANT TO SECTION 1233111.7.**

**SECTION 6. Effective date applicability.** This act shall take effect July 1, 1997, and shall apply to acts occurring on or after said date.

**SECTION 7. Safety clause.** The general assembly hereby finds, determines, and declares that this act is necessary for the immediate preservation of the public peace, health, and safety.



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## Status Sheet

Current through August 08, 2012

This is not an official record of action taken by the Colorado General Assembly.  
It is intended for informational purposes only.

### Status HB10-1416

**RIESBERG** Administration Of Drugs By Chiropractors

04/19/2010 Introduced In House - Assigned to Health and Human Services

04/19/2010 Introduced In House - Assigned to Health and Human Services + Appropriations

04/22/2010 House Committee on Health and Human Services Refer Amended to Appropriations

04/30/2010 House Committee on Appropriations Postpone Indefinitely

\* Indicates unofficial action

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Second Regular Session  
Sixty-seventh General Assembly  
STATE OF COLORADO

INTRODUCED

LLS NO. 10-1093.01 Kristen Forrestal

HOUSE BILL 10-1416

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HOUSE SPONSORSHIP

Riesberg,

SENATE SPONSORSHIP

(None),

---

House Committees  
Health and Human Services

Senate Committees

---

A BILL FOR AN ACT

101 CONCERNING THE ADMINISTRATION OF DRUGS BY TRAINED  
102 CHIROPRACTORS FOR THE TREATMENT OF  
103 NEUROMUSCULOSKELETAL AILMENTS.

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Bill Summary

*(Note: This summary applies to this bill as introduced and does not reflect any amendments that may be subsequently adopted. If this bill passes third reading in the house of introduction, a bill summary that applies to the reengrossed version of this bill will be available at <http://www.leg.state.co.us/billsummaries>.)*

The bill allows appropriately trained chiropractors to administer drugs for the treatment of neuromusculoskeletal ailments.

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Shading denotes HOUSE amendment. Double underlining denotes SENATE amendment.  
*Capital letters indicate new material to be added to existing statute.*  
*Dashes through the words indicate deletions from existing statute.*



1     *Be it enacted by the General Assembly of the State of Colorado:*

2             **SECTION 1.** 12-33-118, Colorado Revised Statutes, is amended  
3     to read:

4             **12-33-118. Use of title.** A license to practice chiropractic entitles  
5     the holder to use the title "Doctor" or "Dr." when accompanied by the  
6     word "Chiropractor" or the letters "D.C.", and to use the title of "Doctor  
7     of Chiropractic". Such license shall not confer upon the licensee the right  
8     to practice surgery or obstetrics or to prescribe, compound, or administer  
9     drugs, or to administer anesthetics, EXCEPT TO ADMINISTER A FORMULARY  
10    BY APPROPRIATELY TRAINED DOCTORS OF CHIROPRACTIC AS DETERMINED  
11    BY THE COLORADO BOARD OF CHIROPRACTIC EXAMINERS FOR THE  
12    TREATMENT OF NEUROMUSCULOSKELETAL AILMENTS, LIMITED TO  
13    TOPICAL, SUBCUTANEOUS, AND INTRAMUSCULAR ROUTES OF  
14    ADMINISTRATION. Nothing in this article shall be construed to prohibit or  
15    to require a license for bona fide chiropractic students or interns in  
16    attendance upon a regular course of instruction in a lawfully operated  
17    chiropractic school or hospital with respect to performing chiropractic  
18    services within such school or hospital while under the direct supervision  
19    of a licensed chiropractor.

20            **SECTION 2. Act subject to petition - effective date.** This act  
21    shall take effect at 12:01 a.m. on the day following the expiration of the  
22    ninety-day period after final adjournment of the general assembly (August  
23    11, 2010, if adjournment sine die is on May 12, 2010); except that, if a  
24    referendum petition is filed pursuant to section 1 (3) of article V of the  
25    state constitution against this act or an item, section, or part of this act  
26    within such period, then the act, item, section, or part shall not take effect

1 unless approved by the people at the general election to be held in  
2 November 2010 and shall take effect on the date of the official  
3 declaration of the vote thereon by the governor.



# Colorado Medical Society

"Advocating excellence in the profession of medicine"

P.O. Box 17550 • Denver, CO 80217-0550 • 720-859-1001 or 800-654-5653 • fax 720-859-7509 • [www.cms.org](http://www.cms.org)

August 22, 2012

Nancy Werner  
Program Specialist  
Colorado Department of Regulatory Agencies  
Division of Professions and Occupations  
1560 Broadway, Suite 1350  
Denver, CO 80202

Re: Proposed Rulemaking 3 Colo. Code Regs. Section 707—1, Rule 7C-  
Supplemental Submission

The Colorado Board of Chiropractic Examiners has issued new proposed rule changes to the above referenced rule. The Colorado Medical Society (hereinafter "CMS") hereby submits this supplemental submission and incorporates by reference CMS' original submission dated August 9, 2012 attached hereto as Exhibit A and referred to herein as "CMS' original submission". CMS respectfully objects to this new proposed rule in its entirety.

The new proposed rule by the Colorado Board of Chiropractic Examiners seeks to expand Rule 7C by adding this additional language:

"Administer means by Oral Topical Inhalation and Injection.

All chiropractors that choose to administer homeopathic and botanical medicines, vitamins, and minerals, phytonutrients, antioxidants, enzymes and glandular extracts by means of injectable procedures shall be certified by the board. Applications for certification in Injectables shall be made in a manner approved by the Board. Certification in Injectables by the State Board of Chiropractic Examiners may be obtained by complying with the following:

1. Successfully complete a minimum of a combined total of 24 hours of theoretical study and supervised clinical instruction obtained from a college of chiropractic approved by the Council on Chiropractic Education (CCE) or the equivalent hours of study and clinical supervision obtained from an instructor recognized by the postgraduate facility of a chiropractic institution or approved by CCE to teach this course and
2. Passing a nationally recognized Injectable certification examination recognized by a CCE accredited chiropractic college."

## **Current Colorado Law**

The Chiropractic Practice Act specifically provides:

(1.7) "Chiropractic" means that branch of the healing arts that is based on the

premise that disease is attributable to the abnormal functioning of the human nervous system. It includes the diagnosing and analyzing of human ailments and seeks the elimination of the abnormal functioning of the human nervous system by the adjustment or manipulation, by hand or instrument, of the articulations and adjacent tissue of the human body, particularly the spinal column, and the use as indicated of procedures that facilitate the adjustment or manipulation and make it more effective and the use of sanitary, hygienic, nutritional, and physical remedial measures for the promotion, maintenance, and restoration of health, the prevention of disease, and the treatment of human ailments. "Chiropractic" includes the use of venipuncture for diagnostic purposes. "Chiropractic" does not include colonic irrigation therapy. "Chiropractic" includes treatment by acupuncture when performed by an appropriately trained chiropractor as determined by the Colorado state board of chiropractic examiners. Nothing in this section shall apply to persons using acupuncture not licensed by the board." *Section 12-33-102(1.7), C.R.S.*

"(2) "Chiropractic adjustment" means the application, by hand, by a trained chiropractor who has fulfilled the educational and licensing requirements of this article, of adjustive force to correct subluxations, fixations, structural distortions, abnormal tensions, and disrelated structures, or to remove interference with the transmission of nerve force. The application of the dynamic adjustive thrust is designed and intended to produce and usually elicits audible and perceptible release of tensions and movement of tissues or anatomical parts for the purpose of removing or correcting interference to nerve transmission and expression." *Section 12-33-102(2), C.R.S.*

(3) "Electrotherapy" means the application of any radiant or current energies of high or low frequency, alternating or direct, except surgical cauterization, electrocoagulation, the use of radium in any form, and X-ray therapy." *Section 12-33-102(3), C.R.S.*

(4) "Venipuncture" means the puncture of a vein for the withdrawal of blood for the purpose of diagnosis through blood analysis. Any blood analysis shall be done by a chiropractor or by a commercial laboratory." *Section 12-33-102(4), C.R.S.*

Colorado law further provides:

"A license to practice chiropractic entitles the holder to use the title "Doctor" or "Dr." when accompanied by the word "Chiropractor" or the letters "D.C.", and to use the title of "Doctor of Chiropractic". Such license shall not confer upon the licensee the right to practice surgery or obstetrics or to prescribe, compound, or administer drugs, or to administer anesthetics. Nothing in this article shall be construed to prohibit or to require a license for bona fide chiropractic students or interns in attendance upon a regular course of instruction in a lawfully operated chiropractic school or hospital with respect to performing chiropractic services within such school or hospital while under the direct supervision of a licensed chiropractor." *Section 12-33-118, C.R.S.*

## **Colorado Rules**

Board Rule 7, 3 Colo. Code Regs. Section 707-1, sets forth the scope of practice for chiropractors and Rule 7C defines “nutritional remedial measures” as follows:

“Nutritional Remedial Measures” as referenced in section 12-33-102(1), C.R.S., means that a doctor of chiropractic may administer, prescribe, recommend, compound, sell and distribute homeopathic and botanical medicines, vitamins, minerals, phytonutrients, antioxidants, enzymes, glandular extracts, non-prescription drugs, durable and non-durable medical goods and services.”

## **Colorado Policies**

The relevant Board of Chiropractic Examiners policies are:

- Policy 30-7 DETERMINATION OF SCOPE OF PRACTICE In determining whether a specific individual act or practice is within the lawful scope of practice of a licensed Colorado chiropractor, the Board may consider the following:
- If the act is allowed by statute,
  - if it advances or is not harmful to the life, health, property and the public welfare of the people of this State,
  - if the procedure is taught at or through a CCE accredited chiropractic college or equivalent,
  - if the practitioner has demonstrated competency through didactic and clinical training.
  - The Board then may also consider if the act or practice constitutes generally accepted practice among Colorado chiropractors and its basis in:
    - doctoral (professional) level didactic and clinical training
    - post-doctoral (post-professional) level didactic and clinical training
  - Policy 30-9 PRACTICES WITHIN THE SCOPE OF CHIROPRACTIC PRACTICE BY STATUTE ARE: Practices within the scope of chiropractic in Colorado include, but are not limited to:
    - Use of spirometry devices for therapeutic or diagnostic purposes.
    - Ordering or performing of CT scan, MRI, and thermography
    - Use of TENS therapy by licensees who are qualified to practice electrotherapy.
    -



- All blood, saliva, urine and hair laboratory testing consistent with the clinical presentation.
- All forms of physiotherapy and oxygen therapy
- Paraspinal surface electromyography
- Nerve conduction velocity (NCV)
- Needle electromyography
- Electrocardiography (EKG/ECG)
- Electrotherapy/Physical Remedial Measures
- Animal chiropractic
- Acupuncture
- Dry needling
- Manipulation under anesthesia (MUA)

Topical administration in conjunction with acupuncture needles of vitamins, minerals, phytonutrients, antioxidants, enzymes, glandular extracts, botanical and homeopathic medicines for diagnostic and therapeutic purposes by doctors of chiropractic certified by the Board in acupuncture. (Revised March 11, 2010.)

## **Supplemental Legal Arguments**

**A. The Chiropractic Act sets forth the scope of practice of a licensed Colorado chiropractor to include “adjustments and manipulations, by hand or instrument” and does not include the practices of “administration”, “injection”, and “prescription”.**

In resolving whether Rule 7C exceeds the intent of statutory language relating to the scope of practice of chiropractors, the statutory language should be reviewed. In construing statutory provisions, full effect must be given to the legislative intent. *Conte v. Meyer*, 882 P.2d 962, 965 (Colo.1994). If the legislative intent is immediately conveyed by the commonly understood and accepted meaning of the statutory language, there is no need to look further and must give effect to the statute as written. *PDM Molding, Inc. v. Stanberg*, 898 P.2d 542, 545 (Colo.1995). Legislative history may be reflected by successive drafts of bills and amendments. *Three Bells Ranch v. Cache La Poudre*, 758 P.2d 164 (Colo. 1988).

On October 15, 2008, the Office of Policy, Research and Regulatory Reform (hereinafter "OPR"), issued its report and recommendations of the "2008 Sunset Review: Colorado State Board of Chiropractic Examiners". Therein, recommendation 4 states: "Section 12-33-102(1), C.R.S., defines 'chiropractic' and needs to be updated ... Modern chiropractic includes the use of certain instruments that adjust subluxations of the spine. This should be specified in the definition of chiropractic to more accurately reflect the use of technology by chiropractors." OPR October 15, 2008 Sunset Review Report at page 25. To that end, OPR recommended that the term 'instrument' be added to the definition of 'chiropractic' as follows:

"Chiropractic" means that branch of the healing arts that is based on the premise that disease is attributable to the abnormal functioning of the human nervous system. It includes the diagnosing and analyzing of human ailments and seeks the elimination of the abnormal functioning of the human nervous system by the adjustment or manipulation, by hand or instrument, of the articulations and adjacent tissue of the human body, particularly the spinal column, and the use as indicated of procedures that facilitate the adjustment or manipulation and make it more effective and the use of sanitary, hygienic, nutritional, and physical remedial measures for the promotion, maintenance, and restoration of health, the prevention of disease, and the treatment of human ailments. *Id.* at page 26.

In response to DORA's recommendations, Mr. Kevin Heupel, attorney for Bob Nelson, D.C., wrote to CMS stating that the OPR recommendations do not go far enough to reflect current chiropractic practice. Specifically, Mr. Heupel proposed an amendment in the 2009 legislative session to the definition of "chiropractic" as follows:

"Chiropractic means the branch of the healing arts . . . It includes the diagnosing and analyzing of human ailments, and seeks elimination of abnormal functioning of the human nervous system by the adjustment or manipulation, by hand, instrument, administration, injection or prescription, of the articulation and adjacent tissue of the human body. . . ." (Attached hereto as Exhibit B and incorporated herein by this reference is Heupel Law letter to CMS dated February 3, 2009 discussing these proposed amendments.)

Mr. Heupel's letter clearly demonstrates that a chiropractor's scope of practice is limited, by statute, "to adjustment or manipulation, by hand or instrument", and does not include invasive procedures such as injections, prescriptions and administrations.

As set forth in CMS' original submission, in 2010, House Bill 10-1416, the chiropractors again sought to expand their scope of practice to include "administering formulary (including nutritional remedial measures) limited to topical, subcutaneous, and intramuscular routes of administration." The Colorado General Assembly considered and ultimately rejected this expansion of the scope of practice of chiropractors.

Based on the express limitations of a chiropractor's scope of practice as set forth in Colorado law, the term "administer" in the current Rule 7C cannot be interpreted to

include injections, oral, topical and inhalation. Further, interpreting the term "administer" to include injections, oral, topical and inhalation would be contrary to Section 12-33-118, C.R.S., that expressly prohibits a chiropractor from prescribing, compounding or administering drugs. There is simply no statutory authority for chiropractors to inject, administer, or prescribe and the Chiropractic Act limits their scope of practice to adjustments or manipulations by hand or instruments.

Accordingly, the new proposed Rule 7C exceeds the scope of statutory authority for which it is written, and would be void, as a matter of law, as misconstruing current law. Repeatedly, the chiropractors have requested the Colorado General Assembly to expand their scope of practice to include administration, injections and/or prescriptions. Each of these attempts has been considered and ultimately rejected.

**B. New Proposed Rule 7C is in violation of the Board of Chiropractic Examiners Policy 30-7.**

Policy 30-7 provides, in part, that the Board of Chiropractic Examiners in determining whether a specific individual act or practice is within the lawful scope of practice of a licensed Colorado chiropractor, the Board may consider the following: If the act is allowed by statute and if it advances or is not harmful to the life, health, property and the public welfare of the people of this State.

Injections and other invasive procedures performed by chiropractors exceed the scope of practice authorized by Colorado law. Injections may cause a patient to have a severe allergic or other adverse action. Chiropractors are not trained in treating these serious medical conditions. Allowing injections to be given by chiropractors creates serious patient safety risks, including to the life, health and well being of the patient. In addition, Policy 30-9 specifically limits nutritional remedial measures to topical administration. Therefore, consistent with both policies, the Board of Chiropractic Examiners should not adopt this new proposed rule.

Respectfully submitted,

A handwritten signature in cursive script that reads "Susan Koontz".

Susan Koontz, JD  
General Counsel  
Colorado Medical Society



To: Board of Chiropractic Examiners  
Date: August 9, 2012  
Time: 9:00 AM  
Re: Proposed Rulemaking: 3 CCR 707-1, Rule 7C, Scope of Practice

The Colorado Board of Chiropractic Examiners has issued new proposed rule changes. Among the proposed changes are changes to Rule 7(C) Scope of Practice, which would allow Chiropractors to administer Nutritional Remedial Measures by means of injection, oral, topical, and inhalation.

Under the current version of Rule 7(C), Chiropractors may administer Nutritional Remedial Measures for their patients; however, the term "administer" does not include injections, oral, topical, and inhalation. The proposed change to the rules would permit Chiropractors to administer Nutritional Remedial Measures by injection, oral, topical, and inhalation. The Colorado Medical Society (CMS) hereby objects to new proposed rule 7C on the following grounds:

**A. Proposed Rule 7C is inconsistent with and contrary to statute, C.R.S. section 12-33-118; hence the proposed rule exceeds the statutory authority of the Colorado Board of Chiropractic Examiners.**

Colorado Revised Statute section 12-33-118 provides:

*"[A license to practice chiropractic] shall not confer upon the licensee the right to practice surgery or obstetrics or to prescribe, compound, or administer drugs, or to administer anesthetics."*

Further Colorado Revised Statute section 12-33-102(1.7) provides:

*"'Chiropractic' means that branch of healing arts that is based on the premise that disease is attributable to the abnormal functioning of the human nervous system. It includes the diagnosing and analyzing of human ailments and seeks the elimination of the abnormal functioning of the human nervous system by the adjustment or manipulation, by hand or instrument, of the articulations and adjacent tissue of the human body, particularly the spinal column, and the use as indicated of procedures that facilitate the adjustment or manipulation and make it more effective and the use of sanitary, hygienic, nutritional, and prevention of disease, and treatment of human ailments. . . 'Chiropractic' does not include colonic irrigation therapy. . ."*

Colorado Revised Statute section 12-33-102(2) provides: *"Chiropractic adjustment" means the application, by hand, by a trained chiropractor who has fulfilled the educational and licensing requirements of this article, of adjustive force to correct subluxations, fixations, structural distortions, abnormal tensions, and disrelated structures, or to remove interference with the transmission of nerve force. The application of the dynamic adjustive thrust is designed and intended to produce and usually elicits audible and perceptible release of tensions and movement of tissues or*

*Exhibit A to supplemental submission*

*anatomical parts for the purpose of removing or correcting interference to nerve transmission and expression."*

Under current Colorado law, chiropractors may not prescribe or perform invasive procedures such as injections, transfusions or surgery. Administering medications, through invasive procedures such as injections, through inhalation directly into the lungs of a patient, orally or topically is beyond the scope of practice authorized by Colorado law. The proposed rule conflicts with the design of Colorado statute and would be in excess of the administrative authority granted in the above referenced statutory provisions.<sup>1</sup>

Colorado law excepts from its definition the use of needles for venipuncture and acupuncture. If the legislature intended chiropractors to administer drugs through injections it would not have specifically excluded from that definition the use of needles for certain purposes. The legislature intended to exclude the use of needles from the scope of the practice of chiropractic except for venipuncture or the practice of acupuncture. The Board of Chiropractic Examiners cannot adopt a rule inconsistent with the statute.

**B. House Bill 10-1416, an effort to change existing law to allow chiropractors to provide medication by injection, did not pass the General Assembly. In testimony, the Colorado Chiropractic Association, acknowledged that existing Colorado law prohibits chiropractors from injecting medication.**

In 2010, House Bill 10-1416, sought to allow appropriately trained chiropractors to administer drugs for the treatment of neuromusculoskeletal ailments as follows:

"12-33-118. Use of title. A license to practice chiropractic entitles the holder to use the title "Doctor" or "Dr." when accompanied by the word "Chiropractor" or the letters "D.C.", and to use the title of "Doctor of Chiropractic". Such license shall not confer upon the licensee the right to practice surgery or obstetrics or to prescribe, compound, or administer drugs, or to administer anesthetics, *EXCEPT TO ADMINISTER A FORMULARY BY APPROPRIATELY TRAINED DOCTORS OF CHIROPRACTIC AS DETERMINED BY THE COLORADO BOARD OF CHIROPRACTIC EXAMINERS FOR THE TREATMENT OF NEUROMUSCULOSKELETAL AILMENTS, LIMITED TO TOPICAL, SUBCUTANEOUS, AND INTRAMUSCULAR ROUTES OF ADMINISTRATION.*"

Testimony on behalf of the Colorado Chiropractic Association (CCA) in support of HB 10-1416, which sought to expand the scope of practice of the chiropractor to allow them to inject homeopathic remedies and specific drugs, acknowledged that Colorado's existing law prohibits administration of drugs including by injections or topically and is binding as an admission against the CCA.

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<sup>1</sup> Moreover, chiropractic is a health care discipline which emphasizes the inherent recuperative power of the body to heal itself without the use of drugs or surgery. (Association of Chiropractic Colleges, [http://www.chirocolleges.org/paradigm\\_scope\\_practice.html](http://www.chirocolleges.org/paradigm_scope_practice.html).)



This bill failed to pass the General Assembly. The Colorado Board of Chiropractic Examiners cannot promulgate a rule expanding the scope of practice of the chiropractors to allow them to administer drugs through topical, oral, inhalation and injection without the authority of an expanded enabling statute.

The legislative history demonstrates a repeated failure by the CCA in the Colorado General Assembly to expand the definition of "administer" to include giving a drug via methods that include but are not limited to injections. (See also House Bill 97-1017.)

**C. The Colorado Medical Society opposes the proposed that would allow chiropractors to administer drugs will jeopardize patient safety.**

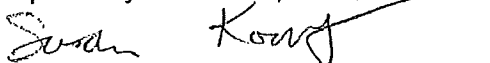
Placing prescriptive authority in the hands of chiropractors seriously compromises patient safety. The ability to prescribe or administer medications requires extensive education and clinical training. And, the difference in education and training between a physician and a chiropractor is vast. Consider the following:

- Medical students are required to take one year of pharmacology courses and receive ongoing pharmacology study and training throughout their third and fourth year of medical school - called clinical rotations which amount to approximately 8000 clinical hours. In addition, they fulfill three to five years of residency; approximately 15,000 clinical hours for family residency and more for specialty residencies
- Pharmacological courses are not part of the required courses that Chiropractic students must take in chiropractic school. Additionally, they must fulfill only 4,200 hours of combined classroom, laboratory and clinical experience over four years of schooling
- Chiropractors do not have any residency component to their educational and training programs.

Safe prescribing is a delicate art that depends on a broad and deep foundation of how medications interact with one another when taken for co-occurring conditions. Patient safety depends on ensuring that practitioners who have studied pharmacology and have a nuanced understanding of drugs are in a position to prescribe and administer medications through inhalation, injections, topically or orally.

In sum, the Colorado Medical Society objects to the expanded scope of practice set forth in proposed rule 7C, as beyond chiropractic's statutory authority, and extends in to the practice of medicine.

Respectfully submitted,



Susan Koontz  
General Counsel, Colorado Medical Society

*Capital letters indicate new material to be added to existing statute.  
Dashes through the words indicate deletions from existing statute.*

## **First Regular Session**

## **Sixty-first General Assembly**

LLS NO. 970075.01 JLB HOUSE BILL 971017

## **STATE OF COLORADO**

BY REPRESENTATIVE Salaz

## **HEALTH, ENVIRONMENT, WELFARE & INSTITUTIONS**

### **A BILL FOR AN ACT**

**CONCERNING LIMITED PRESCRIPTIVE AUTHORITY FOR CHIROPRACTORS, AND, IN CONNECTION THEREWITH, ESTABLISHING QUALIFICATION REQUIREMENTS.**

### **Bill Summary**

*(Note: This summary applies to this bill as introduced and does not necessarily reflect any amendments which may be subsequently adopted.)*

Authorizes chiropractors who satisfactorily complete qualification requirements to prescribe, administer, and inject noncontrolled legend drugs. Expressly prohibits chiropractors from prescribing, administering, or injecting controlled substances. Authorizes the state board of chiropractic examiners to promulgate rules for the administration of a limited prescription program which authorizes chiropractors with limited prescriptive authority to prescribe noncontrolled legend drugs. The program expressly prohibits chiropractors from prescribing controlled substances.

Requires applicants for limited prescriptive authority to complete 6,000 hours of fulltime chiropractic practice, 24 hours of course work in injections and injectables approved by an accredited chiropractic college, and 96 hours of course work in pharmacology and pharmacotherapy taught by an accredited school of pharmacy. Includes a continuing education

requirement.

Includes the following acts within "unprofessional conduct":

- Prescribing noncontrolled legend drugs without having completed the qualification requirements;
- Using fraud, misrepresentation, or deceit when applying for limited prescriptive authority or completing the qualification requirements for such authority.

*Be it enacted by the General Assembly of the State of Colorado:*

**SECTION 1.** 1233102, Colorado Revised Statutes, 1991 Repl. Vol., is amended to read:

**1233102. Definitions.** As used in this article, unless the context otherwise requires:

(1) "ACUPUNCTURE" MEANS THE PUNCTURE OF THE SKIN WITH FINE NEEDLES FOR DIAGNOSTIC AND THERAPEUTIC PURPOSES.

(2) "ADMINISTER" MEANS TO GIVE A DRUG VIA METHODS THAT INCLUDE, BUT ARE NOT LIMITED TO, INJECTIONS.

~~(1)~~ (3) "Chiropractic" means that branch of the healing arts ~~which~~ THAT is based on the premise that disease is attributable to the abnormal functioning of the human nervous system. It includes the diagnosing and analyzing of human ailments and seeks the elimination of the abnormal functioning of the human nervous system by the adjustment or manipulation, by hand, of the articulations and adjacent tissue of the human body, particularly the spinal column, and the usage as indicated of procedures ~~which~~ THAT facilitate and make the adjustment or manipulation more effective, and the use of sanitary, hygienic, nutritional, and physical remedial measures necessary to such practice. "Chiropractic" includes the use of venipuncture for diagnostic purposes. "Chiropractic" does not include colonic irrigation therapy. "Chiropractic" includes treatment by acupuncture AND THE USE OF NONCONTROLLED LEGEND DRUGS when performed by an appropriately trained chiropractor as determined by the Colorado state board of chiropractic examiners. Nothing in this section shall apply to persons using acupuncture not licensed by the board.

~~(1.5) "Acupuncture" means the puncture of the skin with fine needles for diagnostic and therapeutic purposes.~~

~~(2)~~ (4) "Chiropractic adjustment" means the application, by hand, by a trained chiropractor who

has fulfilled the educational and licensing requirements of this article, of adjustive force to correct subluxations, fixations, structural distortions, abnormal tensions, and disrelated structures, or to remove interference with the transmission of nerve force. The application of the dynamic adjustive thrust is designed and intended to produce and usually elicits audible and perceptible release of tensions and movement of tissues or anatomical parts for the purpose of removing or correcting interference to nerve transmission and expression.

(3) (5) "Electrotherapy" means the application of any radiant or current energies of high or low frequency, alternating or direct, except surgical cauterization, electrocoagulation, the use of radium in any form, and Xray therapy.

(6) "LIMITED PRESCRIPTIVE AUTHORITY" MEANS THE AUTHORITY TO PRESCRIBE AND ADMINISTER NONCONTROLLED LEGEND DRUGS.

(7) "NONCONTROLLED LEGEND DRUGS" MEANS A LEGEND DRUG THAT IS AN ANALGESIC, ANTIINFLAMMATORY, MUSCLE RELAXANT, OR NUTRITIONAL THERAPY. "NONCONTROLLED LEGEND DRUG" DOES NOT MEAN A CONTROLLED SUBSTANCE, AS DEFINED IN SECTION 1818102 (5), C.R.S.

(4) (8) "Venipuncture" means the puncture of a vein for the withdrawal of blood for the purpose of diagnosis through blood analysis. Any blood analysis shall be done by a chiropractor or by a commercial laboratory.

**SECTION 2.** 1233107 (1), Colorado Revised Statutes, 1991 Repl. Vol., as amended, is amended BY THE ADDITION OF A NEW PARAGRAPH to read:

**1233107. Board powers.** (1) The board is authorized to and shall:

(i) ADOPT SUCH RULES AS ARE NECESSARY TO ADMINISTER THE APPLICATION PROCEDURES AND QUALIFICATION REQUIREMENTS OF CHIROPRACTORS SEEKING TO ACQUIRE AND MAINTAIN LIMITED PRESCRIPTIVE AUTHORITY PURSUANT TO SECTION 1233111.7.

**SECTION 3.** Article 33 of title 12, Colorado Revised Statutes, 1991 Repl. Vol., as amended, is amended BY THE ADDITION OF A NEW SECTION to read:

**1233111.7. Limited prescription authority requirements.** (1) AN APPLICATION FOR LIMITED PRESCRIPTIVE AUTHORITY SHALL BE ON A FORM PROMULGATED BY THE BOARD FOR SUCH PURPOSE AND SHALL INCLUDE PROOF OF SATISFACTORY COMPLETION OF THE REQUIREMENTS SET FORTH IN SUBSECTION (2) OF THIS SECTION.

(2) TO QUALIFY FOR LIMITED PRESCRIPTIVE AUTHORITY, A CHIROPRACTOR SHALL HAVE:

(a) COMPLETED A MINIMUM OF SIX THOUSAND HOURS OF FULLTIME CHIROPRACTIC PRACTICE;

(b) SATISFACTORILY COMPLETED TWENTYFOUR HOURS OF COURSE WORK IN INJECTIONS AND INJECTABLES APPROVED BY A CHIROPRACTIC COLLEGE ACCREDITED BY THE COUNCIL ON CHIROPRACTIC EDUCATION; AND

(c) SATISFACTORILY COMPLETED TWENTYFOUR COURSE WORK HOURS IN PHARMACOLOGY AND SEVENTYTWO COURSE WORK HOURS IN PHARMACOTHERAPY, ALL OF WHICH HOURS ARE TAUGHT BY A SCHOOL OF PHARMACY ACCREDITED BY THE AMERICAN COUNCIL ON PHARMACEUTICAL EDUCATION.

(3) A CHIROPRACTOR SHALL NOT MAINTAIN LIMITED PRESCRIPTIVE AUTHORITY OBTAINED PURSUANT TO THIS SECTION UNLESS, EACH YEAR, SUCH CHIROPRACTOR COMPLETES TWELVE COURSE WORK HOURS OF PHARMACOTHERAPY TAUGHT BY A SCHOOL OF PHARMACY ACCREDITED BY THE AMERICAN COUNCIL ON PHARMACEUTICAL EDUCATION. SUCH TWELVE HOURS SHALL NOT BE IN ADDITION TO THE FIFTEEN HOURS REQUIRED PURSUANT TO SECTION 1233116.

**SECTION 4.** 1233116, Colorado Revised Statutes, 1991 Repl. Vol., is amended to read:

**1233116. Continuing education.** (1) It is hereby expressly declared to be the purpose of this section to provide for an increase in the annual scientific educational requirements of licensed Colorado chiropractors. Each licensed Colorado chiropractor in active practice within the state of Colorado shall be required annually to attend not less than fifteen hours of scientific clinics, forums, or chiropractic educational study consisting of subjects basic to the field of the healing arts as set forth in section 1233111. Each year at the time of its regular June meeting the board shall prepare an educational schedule of minimum postgraduate requirements of subjects as set forth in section 1233111 that shall be met by any school, clinic, forum, or convention giving such educational work, and such minimum standards must be complied with by such school, clinic, forum, or convention before the board issues a postgraduate attendance certificate. Credit hours shall be determined by the board. Applicants shall apply to the board prior to or after the course and present proof of attendance and synopsis of the course content for approval of credit hours. This provision is made mandatory in the best interest of public health and welfare and to provide progress in the field of chiropractic. If any licensed chiropractor is unable to comply with this



section on account of dire emergency and for good cause shown, the board may waive the provisions of this section.

(2) ANY COURSE WORK HOURS COMPLETED IN PHARMACOTHERAPY PURSUANT TO SECTION 1233111.7, FOR THE PURPOSE OF MAINTAINING LIMITED PRESCRIPTIVE AUTHORITY SHALL BE APPLIED TO THE FIFTEEN HOURS REQUIRED UNDER SUBSECTION (1) OF THIS SECTION.

**SECTION 5.** 1233117 (1) (a) and (1) (v), Colorado Revised Statutes, 1991 Repl. Vol., as amended, are amended to read:

**1233117. Discipline of licensees letters of admonition, suspension, revocation, denial, and probation grounds.** (1) Upon any of the following grounds, the board may issue a letter of admonition to a licensee or may revoke, suspend, deny, refuse to renew, or impose conditions on such licensee's license:

(a) Using fraud, misrepresentation, or deceit in applying for, securing, renewing, or seeking reinstatement of a license, ~~or in~~ taking an examination provided for in this article, **APPLYING FOR LIMITED PRESCRIPTIVE AUTHORITY, OR COMPLETING THE QUALIFICATION REQUIREMENTS SET FORTH IN SECTION 1233111.7;**

(v) Engaging in any of the following activities and practices:

(I) ~~Willful and repeated ordering or performance~~ **WILLFULLY AND REPEATEDLY ORDERING OR PERFORMING**, without clinical justification, ~~of~~ demonstrably unnecessary laboratory tests or studies;

(II) ~~The administration~~ **ADMINISTERING**, without clinical justification, ~~of~~ treatment ~~which~~ **THAT** is demonstrably unnecessary;

(III) ~~The failure~~ **FAILING** to obtain consultations or perform referrals when failing to do so is not consistent with the standard of care for the profession; ~~or~~

(IV) Ordering or performing, without clinical justification, any service, Xray, or treatment ~~which~~ **THAT** is contrary to recognized standards of the practice of chiropractic as interpreted by the board; **OR**

(V) **PRESCRIBING OR ADMINISTERING NONCONTROLLED LEGEND DRUGS WITHOUT HAVING LIMITED PRESCRIPTIVE AUTHORITY, PURSUANT TO SECTION 1233111.7.**

**SECTION 6. Effective date applicability.** This act shall take effect July 1, 1997, and shall apply to acts occurring on or after said date.

**SECTION 7. Safety clause.** The general assembly hereby finds, determines, and declares that this act is necessary for the immediate preservation of the public peace, health, and safety.



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## Status Sheet

Current through August 08, 2012

This is not an official record of action taken by the Colorado General Assembly.  
It is intended for informational purposes only.

### Status HB10-1416

**RIESBERG** Administration Of Drugs By Chiropractors

04/19/2010 Introduced In House - Assigned to Health and Human Services

04/19/2010 Introduced In House - Assigned to Health and Human Services + Appropriations

04/22/2010 House Committee on Health and Human Services Refer Amended to Appropriations

04/30/2010 House Committee on Appropriations Postpone Indefinitely

\* Indicates unofficial action

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Second Regular Session  
Sixty-seventh General Assembly  
STATE OF COLORADO

INTRODUCED

LLS NO. 10-1093.01 Kristen Forrestal

HOUSE BILL 10-1416

---

HOUSE SPONSORSHIP

Riesberg,

SENATE SPONSORSHIP

(None),

---

House Committees  
Health and Human Services

Senate Committees

---

A BILL FOR AN ACT

101 CONCERNING THE ADMINISTRATION OF DRUGS BY TRAINED  
102 CHIROPRACTORS FOR THE TREATMENT OF  
103 NEUROMUSCULOSKELETAL AILMENTS.

---

Bill Summary

*(Note: This summary applies to this bill as introduced and does not reflect any amendments that may be subsequently adopted. If this bill passes third reading in the house of introduction, a bill summary that applies to the reengrossed version of this bill will be available at <http://www.leg.state.co.us/billsummaries>.)*

The bill allows appropriately trained chiropractors to administer drugs for the treatment of neuromusculoskeletal ailments.

---

Shading denotes HOUSE amendment. Double underlining denotes SENATE amendment.  
Capital letters indicate new material to be added to existing statute.  
Dashes through the words indicate deletions from existing statute.

1     *Be it enacted by the General Assembly of the State of Colorado:*

2             **SECTION 1.** 12-33-118, Colorado Revised Statutes, is amended  
3     to read:

4             **12-33-118. Use of title.** A license to practice chiropractic entitles  
5     the holder to use the title "Doctor" or "Dr." when accompanied by the  
6     word "Chiropractor" or the letters "D.C.", and to use the title of "Doctor  
7     of Chiropractic". Such license shall not confer upon the licensee the right  
8     to practice surgery or obstetrics or to prescribe, compound, or administer  
9     drugs, or to administer anesthetics, EXCEPT TO ADMINISTER A FORMULARY  
10    BY APPROPRIATELY TRAINED DOCTORS OF CHIROPRACTIC AS DETERMINED  
11    BY THE COLORADO BOARD OF CHIROPRACTIC EXAMINERS FOR THE  
12    TREATMENT OF NEUROMUSCULOSKELETAL AILMENTS, LIMITED TO  
13    TOPICAL, SUBCUTANEOUS, AND INTRAMUSCULAR ROUTES OF  
14    ADMINISTRATION. Nothing in this article shall be construed to prohibit or  
15    to require a license for bona fide chiropractic students or interns in  
16    attendance upon a regular course of instruction in a lawfully operated  
17    chiropractic school or hospital with respect to performing chiropractic  
18    services within such school or hospital while under the direct supervision  
19    of a licensed chiropractor.

20            **SECTION 2. Act subject to petition - effective date.** This act  
21    shall take effect at 12:01 a.m. on the day following the expiration of the  
22    ninety-day period after final adjournment of the general assembly (August  
23    11, 2010, if adjournment sine die is on May 12, 2010); except that, if a  
24    referendum petition is filed pursuant to section 1 (3) of article V of the  
25    state constitution against this act or an item, section, or part of this act  
26    within such period, then the act, item, section, or part shall not take effect

1 unless approved by the people at the general election to be held in  
2 November 2010 and shall take effect on the date of the official  
3 declaration of the vote thereon by the governor.



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## MEMORANDUM

Tuesday, February 3, 2009

TO: Diana Protopapa  
Director of Legislative Affairs  
Colorado Medical Society

FROM: Kevin D. Heupel  
Attorney for Bob Nelson, D.C.

RE: Proposed Amendment to Chiropractic Practice Act

The Colorado Chiropractic Practice Act and Board of Chiropractic Examiners are undergoing a sunset review this year. As part of the process, the Department of Regulatory Agencies ("DORA") has issued some recommendations and amendments to the practice act. Unfortunately, however, the amendments do not go far enough to reflect current chiropractic practice. There is one central area that the sunset review fails to address, which is the administration and prescription of nutritional remedial measures.

### Background on Nutritional Remedial Measures

Over the last couple of years, the Chiropractic Board has adopted rules allowing chiropractors to administer and prescribe nutritional remedial measures. However, due to some wording in the current practice act, chiropractors are not able to prescribe or obtain nutritional remedial measures that fall within the FDA's legend drug category.

The practice act at section 12-33-102(1), C.R.S., provides that a licensed chiropractor can use "nutritional remedial measures" necessary to his/her practice. This Chiropractic Board further defined "nutritional remedial measures" by implementing Rule 7(C), which states:

"Nutritional remedial measures as referenced in § 12-33-102(1), C.R.S., means that a doctor of chiropractic may administer, prescribe, recommend, compound, sell and distribute homeopathic and botanic medicines, vitamins, minerals, phytonutrients, antioxidants, enzymes, glandular extracts, non-prescriptive drugs, durable and non-durable medical goods and devices."

3 Colo. Code Regs. 707-1

Exhibit B to Supplemental  
Submission

However, the practice act at section 12-33-118, C.R.S., prohibits a chiropractor from prescribing and administering drugs related to the practice of medicine as defined in § 12-36-106, C.R.S. As a result, some pharmacies will not dispense "legend drugs" falling within the definition of nutritional remedial measures to a chiropractor even though Rule 7 and § 12-33-102(1), C.R.S., provide for such authority within the scope of chiropractic practice. "Legend drug" means any drug intended for use by humans that carries on its label any of the following: " Caution: Federal law prohibits dispensing without a prescription", "Rx", or "Rx Only". Recently, my client contacted Brown's Pharmacy in Parker, Colorado, and Key Company in St. Louis, Missouri, for vitamin B-12 (30 cc vial), which is a legend drug. Both pharmacies would not fill the order for B-12 because it was their understanding that Colorado chiropractors do not have prescription authority.

In hopes to get assistance on this issue, my client contacted the Department of Justice, Drug Enforcement Agency (DEA) about obtaining a DEA Registration in order to access those nutritionals that are considered to be legend drugs by the FDA. The U.S. Department of Justice responded to his inquiry and suggested that he contact the Colorado State Board of Chiropractors for clarification of their regulations.

With the DEA recommendation, my client and I then filed a declaratory order with the Colorado State Board of Chiropractic Examiners to clarify this ruling. However, DORA refused to issue any order and merely stated that the issue needed to be resolved through statutory amendments. It was our hope that DORA would address the issue in the sunset review, but again, DORA did not and referred it back to the profession for resolution.

As a result of these road blocks over the last year, we believe it is important to amend the chiropractic practice act to ensure that chiropractors can practice within their full scope of authority by being able to prescribe, administer, inject, and dispense nutritional remedial measures that fall within the legend drug category. My client has no interest in seeking full prescription authority for legend drugs that are beyond the scope of his chiropractic practice and training; and certainly has no interest in prescribing controlled substances. Instead, the goal is to clarify the scope of practice within the context of the state chiropractic statute and rules to reflect the current practice and training of Colorado doctors of chiropractic.

#### Proposed Amendments

In order to resolve some of these issues and ensure that the practice act is broad enough to represent the current practice of science and art of chiropractic medicine, my client would like to see two amendments added to the current practice act sunset language.

The first amendment is to add "administration", "injection" and "prescription" to the definition of chiropractic at 12-33-102(1), C.R.S., as proposed to be amended by DORA in the Sunset Review (DORA's amendments are in **bold** and my client's recommendations are in ***bold italics***):

- (1) "Chiropractic" means that branch of the healing arts which is based on the premise that disease is attributable to the abnormal functioning of the

human nervous system. It includes the diagnosing and analyzing of human ailments, and seeks the elimination of the abnormal functioning of the human nervous system by the adjustment or manipulation, by hand, instrument, **administration, injection or prescription**, of the articulations and adjacent tissue of the human body, particularly the spinal column, and the usage as indicated of procedures which facilitate and make the adjustment or manipulation more effective, and the use of sanitary, hygienic, nutritional, and physical remedial measures **for the promotion, maintenance, and restoration of health, the prevention of disease and the treatment of human ailments.** "Chiropractic" includes the use of venipuncture for diagnostic purposes. "Chiropractic" includes treatment by acupuncture when performed by an appropriately trained chiropractor as determined by the Colorado state board of chiropractic examiners. Nothing in this section shall apply to persons using acupuncture not licensed by the board.

The second amendment is to distinguish chiropractic authority to prescribe and administer nutritional remedial measures in the statute at 12-33-118, C.R.S., which is the primary source of the current problem. The proposed amendment would allow a chiropractor to prescribe nutritional remedial measures in all forms, including those that fall within the "legend drug" category, and certain anesthetics, but not an ability to perform anesthesia. This would allow for the continued use of ethyl chloride, an anesthetic used for spray and stretch and the treatment of musculoskeletal injuries. At the same time, the proposed amendment would require the Colorado Chiropractic Board of Examiners to develop a formulary through open rulemaking so that it is clear to all practitioners and pharmacies as to the intended scope of what constitutes a nutritional remedial measure.

My client would propose the following amendment and is certainly open to suggestions in order for the intent and scope to be clear:

12-33-118. A license to practice chiropractic entitles the holder to use the title "Doctor" or "Dr." when accompanied by the word "Chiropractor" or the letters "D.C.", and to use the title of "Doctor of Chiropractic". Such license shall not confer upon the licensee the right to practice surgery or obstetrics or to prescribe, compound, or administer drugs, or to administer ~~anesthetics~~ **anesthesia**. Nothing in this article shall be construed to prohibit **the use of nutritional remedial measures in all forms, including those formulated as legend drugs**, nor to require a license for bona fide chiropractic students or interns in attendance upon a regular course of instruction in a lawfully operated chiropractic school or hospital with respect to performing chiropractic services within such school or hospital while under the direct supervision of a licensed chiropractor. **A formulary that includes all substances constituting nutritional remedial measures shall be developed and approved by the board.**

## Scope of Nutritional Remedial Measures

As stated earlier, my client is not seeking or intends to seek to have full prescription rights to legend drugs and controlled substances. Instead, my client is seeking prescription authority to a subset of nutritional remedial measures that constitute legend drugs.

The following is a list of nutritional remedial measures and examples in each category that my client would like to prescribe; however, because some of these measures fall within the legend drug category, my client cannot use them:

**Homeopathic medicine:** e.g., Traumeel (Arnica- BHI Heel®).

**Botanical medicine:** e.g., Omega 3 (Omacor®) and Liver Maintenance Formula (Silymarin- Physiologics®).

**Vitamins:** e.g., B, C, E, A, and K.

**Minerals:** e.g., Calcium, Magnesium.

**Phytonutrients:** e.g., Resveratrol.

**Antioxidants:** e.g., Hydrosoluble CoQ10.

**Enzymes:** e.g., lipase.

**Glandular extracts:** e.g., adrenal, thyroid.

**Non-Prescription Drugs:** e.g., NSAIDs, aspirin.

**Durable and Non-Durable Medical Goods and Devices:** e.g., TENS, orthopedic splints and supplies.

In the past, obtaining some of these items was not a problem because most were considered over-the-counter drugs by the FDA. However, in the last few years, some of these items, such as Omega 3, have been reformulated and fall under the legend drug category, which requires a prescription. My client and I have researched the FDA reasoning as to why the change and have had no success. A pharmaceutical representative has stated that the move was to allow for higher quality and reliable products with demonstrated efficacy to become available to the consumer.

To get better information regarding this movement towards nutritionals becoming legend drugs, my client and I spoke with an executive of the Colorado pharmacy industry. He stated that the FDA determined that some of these products in their over-the-counter form contained inconsistent product ingredients. By reclassifying the substances as legend drugs, the FDA is able to mandate good manufacturing practices in order to ensure the substances are safe. This

allows the FDA is able to assess the true benefit of such substances and require manufacturers to perform studies and have documented evidence supporting their marketing claims.

There is the possibility of harm if legend drugs are used irresponsibly or incorrectly. However, chiropractors have the training and skills necessary to use legend drugs that fall under the category of nutritional remedial measures. Nutrition has been a deeply rooted and robust part of the chiropractic curriculum and practice act since the 1950s.

I have attached a copy of the Council on Chiropractic Education Standards for Doctor of Chiropractic Programs and Requirements for Institutional Status 2007 Report. On page 22, you will see that 90 credit hours of undergraduate education is an admission requirement before entering chiropractic school. Page 18 states that all chiropractic students are required to complete 4,200 hours of minimum of classroom time prior to clinical. The curriculum required for the must include the following subjects (not necessarily in individual courses for each subject): anatomy; biochemistry; physiology; microbiology, pathology; public health; physical, clinical and laboratory diagnosis; gynecology; obstetrics; pediatrics; geriatrics; dermatology; otolaryngology; diagnostic imaging procedures; psychology; **nutrition/dietetics**; biomechanics; orthopedics; neurology; first aid and emergency procedures; spinal analysis; principles and practice of chiropractic; clinical decision making; adjustive techniques; research methods and procedures; and professional practice ethics. The clinical competencies are detailed on pages 29-39 and page 38 clearly states that chiropractors must have the skills to identify and initiate the appropriate nutritional supplements or supplementation as part of their health care regimen. Thus, despite the refinements of some nutritionals, chiropractors have adequate training to use those constituting legend drugs.

### Conclusion

As noted in the Sunset Review, the definition of chiropractic has not been updated since the late 1950s and the word nutritional existed at that time. The proposed amendments are brought forward to resolve a current problem in regards to nutritionals.

In the interest of public safety and welfare, chiropractors should have access to the growing emergence of high quality, by prescription only nutritional legend drugs. This growth has been fueled by the general inconsistency in nutritional products, the FDA focus towards employing good manufacturing practices (GMP), requiring product claims to be supported by research and the product to be efficacious and support any claims made. Chiropractors, who have had a long history of training and use of nutritional remedial measures should have access to legitimate, scientifically formulated high quality nutritionals that have had the benefit of scientific studies so they can provide their patients with care that is both safe and effective.

Regardless of one's medical or healthcare philosophy, the definition of chiropractic needs to be updated to allow chiropractors to practice to the extent of their training and expertise. It is our opinion that these amendments will permit chiropractors to use nutritional remedial measures safely, responsibly, and within their scope of training and practice.

cc Bob Nelson, D.C.  
Colorado Chiropractic Association

**Resolution # 10****Title: Scope of Practice****Submitted by: Dr. Pearson, Dr. Miller**

The ACA recognizes that the chiropractic educational process has evolved and continues to evolve with emerging technologies, research, and best practice standards for clinical care. The ACA recognizes the environment within the age of health care reform demands ongoing evolution.

The ACA is an inclusive organization that supports accredited chiropractic educational institutions including, CCE and other educational certifying bodies such as Army One Source, APHA and the Chiropractic DOT program. The ACA recognizes the duties of these institutions are to educate and train our chiropractic student doctors to the level of providing conservative primary care services to the health consumers of our country.

Other healing arts disciplines have specialty areas of practice; the ACA further supports our institutions in their efforts to educate chiropractic physicians practicing in the field to fulfill diverse patient care needs throughout our country by providing post-doctoral training/education leading to a post-doctoral certification.

The individual states retain the authority to license chiropractic physicians and our chiropractic specialties therefore;

**Be it Resolved:**

That it is the ACA's position that the scope of practice of chiropractic physicians and post-doctoral chiropractic specialties should be determined by the education and training provided within CCE accredited institutions and/or the education and training provided through post-graduate / post-doctoral courses and specialties and;

**Be it further Resolved:**

The ACA encourages individual states and US Territories to establish uniform scopes of practice commensurate with contemporary education and training.

**RATIONALE,** Modifications acknowledge the role of chiropractic educational standards in determining a contemporary scope of practice, and that legislation should uniformly reflect the fullest extent of those standards.



**Good morning. I am Shad Sutton a licensed Chiropractor practicing in the State of Colorado since 1988.**

**I would like to thank the board for the opportunity to speak here today and its due diligence in clarifying the term administration to include injectables in our Chiropractic practice act..**

**There are currently several states which allow injectable nutrition and expanded scope in their respective Chiropractic practice acts. Examples of these states are Oklahoma, Oregon, Utah, New Mexico, and Idaho.**

**Contained in the Oklahoma Practice Act outlined in Section 161.12 subsection B 7. It states; Unlawfully possessing, prescribing or administering any drug, medicine, serum, or vaccine. This section shall not prevent a chiropractic physician from possessing, prescribing, or administering, by a needle or otherwise, vitamins, minerals or nutritional supplements, or from practicing within the scope of the science and art of chiropractic as defined in section 161.2 of this title.**

**Oregon in its chiropractic practice act Division 15 Consumer Protection. 811-015-0030 Chiropractic Obstetrics, Minor Surgery, and Proctology number (2) states: A chiropractic physician licensed in Oregon who wishes to practice minor surgery and/or proctology must apply to, and receive from the Board a certification of special competency in minor surgery and/or proctology.**

**Utah in its chiropractic practice act. Under R156-73-501 Unprofessional conduct (12) administering through the skin, limited to subcutaneous or intramuscular administration, of any substances other than non-prescription drugs as defined in subsections 58-17b-102(39) or non-controlled substances as defined in Subsection 58-37-2 (13) administering injections of non-prescription drugs or non-controlled substances without sufficient competency and training as demonstrated by the following: (a) completion of a recognized course on injectables and their administration, under the sponsorship of or approved by an institution, organization or association meeting the continuing education standards as defined in section R156-73-303b; and (b) receiving a passing score on a certifying examination.**

**New Mexico in its chiropractic practice act under section 16.4.15.8 A. states: A chiropractic physician shall have the prescriptive authority to administer through injection and prescribe the compounding of substances that are authorized in the advanced practice formulary. Those with active registration are allowed prescription authority that is limited to the current formulary as agreed on by the New Mexico board of chiropractic examiners and as by statute, by the New Mexico board of pharmacy and the New Mexico medical board.**

**Idaho in its chiropractic practice act. Under 24.03.01 Rules of the State board of Chiropractic Physicians 020. Scope of Practice states Clinical nutritional methods as referenced in Section 54-704, Idaho Code, include, but not limited to the clinical use, administration, recommendation, compounding, prescribing, selling, and distributing vitamins, minerals, botanical medicine, herbals, homeopathic, phytonutrients, antioxidants, enzymes, and glandular extracts, durable and non-durable medical goods and devices in all their forms.**

**Once again thank you for the time and effort which you have put forth to provide further comprehensive care for the public here in Colorado.**

DEFINITIONS for  
ADMINISTER

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# COLORADO REVISED STATUTES

## Title 12 **Professions and Occupations**

### Article 22 **Pharmaceuticals and Pharmacists**

Effective July 1, 2010

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## PART 1 GENERAL PROVISIONS

### 12-22-101. Public interest.

The practice of pharmacy is declared a professional practice affecting the public health, safety, and welfare and is subject to regulation and control in the public interest. It is a matter of public interest and concern that the practice of pharmacy, as defined in this part 1, merits and receives the confidence of the public and that only qualified persons be permitted to practice pharmacy in this state. This part 1 shall be liberally construed to carry out these objects and purposes. Pursuant to these standards and obligations, the state board of pharmacy may adopt, by rule and regulation, rules of professional conduct.

### 12-22-102. Definitions.

As used in this part 1, unless the context otherwise requires:

(1) "Administer" means the direct application of a drug to the body of a patient or research subject by injection, inhalation, ingestion, or any other method.

(2) "Advertise" means to publish or display information about prescription prices or drugs in any medium.

(2.5) "Anabolic steroid" has the same meaning as that set forth in section 18-18-102 (3), C.R.S.

(3) Repealed.

(4) "Board" means the state board of pharmacy.

(5) "Casual sale" means a transfer, delivery, or distribution to a corporation, individual, or other entity, other than a consumer, entitled to possess prescription drugs; except that the amount of drugs transferred, delivered, or distributed in such manner by any registered prescription drug outlet or hospital other outlet shall not exceed ten percent of the total number of dosage units of drugs dispensed and distributed on an annual basis by such outlet.

(6) (a) "Compounding" means the preparation, mixing, assembling, packaging, or labeling of a drug or device:

(I) As the result of a practitioner's prescription drug order, chart order, or initiative, based on the relationship between the practitioner, patient, and pharmacist in the course of professional practice; or

(II) For the purpose of, or as an incident to, research, teaching, or chemical analysis and not for sale or dispensing.

(b) "Compounding" also includes the preparation of drugs or devices in anticipation of prescription drug orders based on routine, regularly-observed prescribing patterns.

NOT DEFINED  
MEDICAL, ACUPUNCTURE,  
OSTEOPATHIC, ECT...  
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#### administer

**Pharmacology verb** To apply a substance—by injection, inhalation, ingestion or by other means, to the body of a Pt or research subject by either a health practitioner or his authorized agent and under his direction, or by the Pt or research subject himself. Cf Dispense Medtalk → Vox populi Give.

McGraw-Hill Concise Dictionary of Modern Medicine. © 2002 by The McGraw-Hill Companies, Inc.

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DTaP  
DTP  
DTP vaccine

hepatitis A vaccine inactivated IPV  
live vaccine  
Lyme disease vaccine  
meningococcal polysaccharide vaccine

mumps virus vaccine live OPV  
pneumococcal heptavalent conjugate vaccine  
pneumococcal vaccine polyvalent  
polyvalent vaccine

rabies vaccine  
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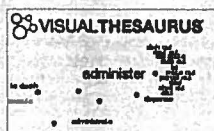
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#### World English Dictionary

Collins

**administer** (əd'mɪnɪstə) 7

—**vb**(when *intr*, *fol*l *by*to)

1. (*also intr*) to direct or control (the affairs of a business, government, etc)
2. to put into execution; dispense: *administer justice*
3. to give or apply (medicine, assistance, etc) as a remedy or relief
4. to apply formally; perform: *to administer extreme unction*
5. to supervise or impose the taking of (an oath, etc)
6. to manage or distribute (an estate, property, etc)

[C14: *amynistre*, via Old French from Latin *administrare*, from *ad-* to + *ministrāre* to minister]

Collins English Dictionary - Complete & Unabridged 10th Edition  
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#### Word Origin & History

*Etymonline*

**administer**

late 14c., "to manage as a steward," from O.Fr. *amīnistrer*, from L. *administrare* "serve, carry out, manage," from *ad-* "to" + *ministrare* "serve" (see *minister*). Used of medicine, etc., "to give," from 1540s.

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#### Medical Dictionary

*Merriam-Webster*

**ad·min·is·ter** **definition**

Pronunciation: /ad·mɪn·ə·stər/ Function: **vt** **ad·min·is·tered**; **ad·min·is·ter·ing**; Pronunciation: /-st(ə-)rɪn/ **antibiotic may be administered orally or by injection**

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Medical Dictionary:

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2 entries found for **administer**.

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administer  
self-administer

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Main Entry: **ad·min·is·ter**

Pronunciation: əd-<sup>ˈ</sup>min-ə-stər

Function: *transitive verb*

Inflected Form(s): **ad·min·is·tered; ad·min·ister·ing** /-st(ə-)rɪŋ/

: to give (as medicine) remedially <the antibiotic may be *administered* orally or by injection>

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## Administering

Drugs, both medicinal and recreational, can be administered in a number of ways. Many substances can be administered in a variety of ways rather than just one.

- Bolus
- Inhaled, (breathed into the lungs), as an aerosol or dry powder. (This includes smoking a substance)
- Injected as a solution, suspension or emulsion either: intramuscular, intravenous, intraperitoneal, intraosseous.
- Insufflation, or snorted into the nose.
- Orally, as a liquid or solid, that is absorbed through the intestines.
- Rectally as a suppository, that is absorbed by the rectum or colon.
- Sublingually, diffusing into the blood through tissues under the tongue.
- Topically, usually as a cream or ointment. A drug administered in this manner may be given to act locally or systemically.<sup>[1]</sup>
- Vaginally as a suppository, primarily to treat vaginal infections.



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administrators

Subn

administer

administer (transitive verb)

Self-administer

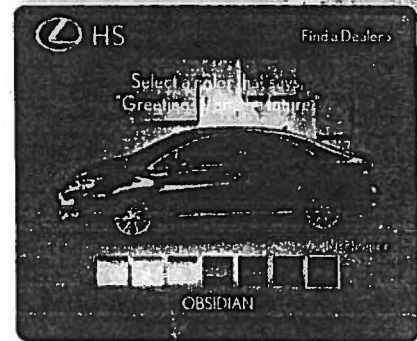
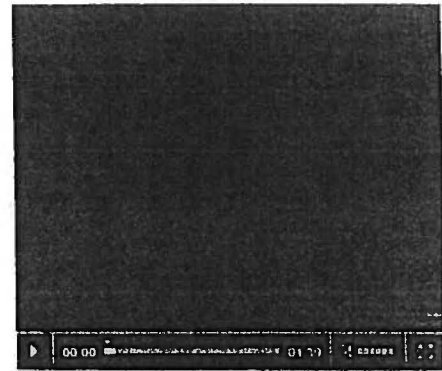
ad·min·is·ter

ad·min·is·tered ad·min·is·ter·ing

definition of Administer

to give (as medicine) remedially <the antibiotic may be administered orally or by injection>

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After Glenn Beck used it to speculate on the outcome of



In commentary about Tony Blair and the demise of tyrants

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## ad-min-is-ter

## Pronounced:

/əd'mɪnɪstə-/

## Function:

verb

## Inflected forms:

ad-min-is-ters; ad-min-is-tered; ad-min-is-tering

## Meaning:

1 [+ obj] : to manage the operation of (something, such as a company or government) or the use of (something, such as property) • As a cost-saving measure, voters have elected to have the two towns *administered* jointly. • The UN personnel are there to help *administer* the territory. • She's been hired to *administer* the fund.

2 [+ obj] : to provide or apply (something, such as justice) : to put (something) into effect • *administer* justice [=give fair rewards and punishments in legal disputes and for crimes] • *administer* punishment

3 [+ obj] : to give or present (something) officially or as part of a ceremony • The assistant will *administer* the test. • *administer* an oath • a priest to *administer* the sacraments

4 [+ obj] : to give (a drug, medicine, or treatment) to someone • The doctor will *administer* the anesthesia before the surgery begins. • The drug is *administered* by injection.

5 [no obj] : to give needed help or care to others → to • *administer* [= (more commonly) *minister*] to an ailing friend • *administer* to the needs of the poor

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**Subject:** RE: Proposed chiropractic rule changes

**From:** Nenoff, Eileen  
**Sent:** Monday, August 06, 2012 1:21 PM  
**To:** Hill, Lisa M; Conroy, Deann M; 'drrob@palmer-chiropractic.com'  
**Subject:** FW: Proposed chiropractic rule changes

Dear Ms. Conroy and Ms. Hill:

This office received the following input regarding the Board of Chiropractic Examiners' proposed rules. Please make these comments available for consideration during your upcoming rulemaking hearing.

Thank you.  
Sincerely,  
Eileen Nenoff  
Colorado Department of  
Regulatory Agencies  
Executive Director's Office  
Office of Policy, Research & Regulatory Reform  
1560 Broadway, Suite 1550  
Denver, CO 80202  
P 303.894.2992 | F 303.894.7885  
[www.dora.state.co.us](http://www.dora.state.co.us)

Please consider the environment before printing this e-mail.

-----Original Message-----

From: Dr. Rob Palmer [<mailto:drrob@palmer-chiropractic.com>]  
Sent: Monday, August 06, 2012 1:17 PM  
To: Nenoff, Eileen  
Subject: RE: Proposed chiropractic rule changes

Yes, definitely. I can also be reached by phone at 719-433-0812. It looks like I won't be able to make it up to Denver to attend the meeting but would be happy to discuss the proposals with anyone. I think they need to look at how much opposition there already has been to the injection issue. Contrary to what some may say, the state association and members are NOT in favor of injections being part of Chiropractic.

Thanks, Rob Palmer, DC

-----Original Message-----

From: Nenoff, Eileen [<mailto:Eileen.Nenoff@dora.state.co.us>]  
Sent: Monday, August 06, 2012 12:36 PM  
To: 'Robert Palmer, DC'  
Subject: RE: Proposed chiropractic rule changes

Dear Mr. Palmer:

Thank you for taking the time to review and comment on the Board of Chiropractic Examiners' proposed rules.

I would like to forward your input to the Board for their consideration during the hearing on Thursday. Would you like me to forward your name and contact information as well?

Again, thank you for your input.

Sincerely,

Eileen Nenoff

Colorado Department of

Regulatory Agencies

Executive Director's Office

Office of Policy, Research & Regulatory Reform

1560 Broadway, Suite 1550

Denver, CO 80202

P 303.894.2992 | F 303.894.7885

[www.dora.state.co.us](http://www.dora.state.co.us)

Please consider the environment before printing this e-mail.

-----Original Message-----

From: Robert Palmer, DC [<mailto:drrob@palmer-chiropractic.com>]

Sent: Sunday, August 05, 2012 11:58 PM

To: Web, OPR

Subject: Proposed chiropractic rule changes

**Mr Harrelson, I recently read the proposed rule changes and was alarmed at what I saw. There will be a financial as well as legislative impact if these are passed.**

**There are a handful of Chiro's that have been trying every way possible to be able to inject medications. They have failed at all previous attempts and were met with huge opposition from the CCA, CMS, their peers as well as patients. There has also been a national campaign against these few wanting to radically change our profession. The financial impact would be higher malpractice premiums and a decrease in practice income due to a loss of credibility amongst other healthcare providers. The medical community has made it clear that they will not allow this to ever pass the legislature so this could start a large battle.**

**How can they think they need only 24 hours to adequately learn to inject a human when we need over a hundred to just run a surface emg and 210 hours to adjust an animal?**

**I would enjoy discussing this further with you if necessary. I will try to get to the meeting on Thursday.**

**Thanks for your time,  
Robert Palmer, DC**

Sent from my iPhone

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**Subject:** RE: Objection to the Colorado State Board of Chiropractic Examiners' Proposed Amendment to Rule 7(C) of 3 CCR 707-1

---

**From:** Todd Gonzales [mailto:todd.gonzales@earthlink.net]  
**Sent:** Friday, July 20, 2012 3:00 PM  
**To:** Conroy, Deann M; Kelley, Barbara J  
**Cc:** John.Suthers@state.co.us; Dan.Cartin@state.co.us; Chuck.Brackney@state.co.us; Conroy, Deann M; Tanya.Light@state.co.us; Todd Gonzales  
**Subject:** Objection to the Colorado State Board of Chiropractic Examiners' Proposed Amendment to Rule 7(C) of 3 CCR 707-1

**Subject: Objection to the Colorado State Board of Chiropractic Examiners' Proposed Amendment to Rule 7(C) of 3 CCR 707-1**

July 20, 2012

**VIA E-MAIL**

Colorado State Board of Chiropractic Examiners  
1560 Broadway  
Suite 1350  
Denver, CO 80202  
E-mail: [Deann.Conroy@dora.state.co.us](mailto:Deann.Conroy@dora.state.co.us)

**AND**

Ms. Barbara J. Kelley  
Executive Director  
Colorado Department of Regulatory Agencies  
1560 Broadway  
Suite 1550  
Denver, CO 80202  
E-mail: [Barbara.Kelley@dora.state.co.us](mailto:Barbara.Kelley@dora.state.co.us)

**OBJECTION TO THE COLORADO STATE BOARD OF CHIROPRACTIC EXAMINERS'**  
**PROPOSED AMENDMENT TO RULE 7(C) OF 3 CCR 707-1**

This Objection to the Colorado State Board of Chiropractic Examiners' Proposed Amendment to Rule 7(C) of 3 CCR 707-1 is submitted for the August 9, 2012, Colorado State Board of Chiropractic Examiners Proposed Rulemaking and Rulemaking Hearing.

1. The Colorado State Board of Chiropractic Examiners' proposed amendment to Rule 7(C) of 3 CCR 707-1 regarding the definition of the term "administer" to include "by...Injection" is contrary to article 33 of Title 12, C.R.S., specifically:

a. A license to practice chiropractic "shall not confer upon the licensee the right...to prescribe, compound, or administer drugs, or to administer anesthetics" (emphasis added). § 12-33-118, C.R.S.



b. The Colorado State Board of Chiropractic Examiners is not authorized to and shall not adopt, promulgate, or revise rules and regulations "inconsistent with the law" (emphasis added). § 12-33-107(1)(a), C.R.S.

c. A person holding a license to practice chiropractic in this state shall not violate article 33 of Title 12, C.R.S. § 12-33-117(1)(q), C.R.S.

d. A person holding a license to practice chiropractic in this state shall not "[perform] a procedure in the course of patient care that is beyond...the scope of authorized chiropractic services under [article 33 of Title 12, C.R.S.]" (emphasis added). § 12-33-117(1)(ee), C.R.S.

2. As defined in § 25-5-402(9) of the Colorado Food and Drug Act, the term "drug" means:

(a) Articles recognized in the official United States pharmacopoeia, official homeopathic pharmacopoeia of the United States, official national formulary, or any supplement to any of them;

(b) Articles intended for use in the diagnosis, cure, mitigation, treatment, or prevention of disease in man or other animals;

(c) Articles, other than food, intended to affect the structure or any function of the body of man or other animals;

(d) Articles intended for use as a component of any article specified in paragraphs (a), (b), or (c) of this subsection (9) but does not include devices or their components, parts, or accessories.

3. As defined in § 201(g)(1) of the Federal Food, Drug, and Cosmetic Act (FD&C Act) (21 U.S.C. 321(g)(1)), the term "drug" means:

(A) articles recognized in the official United States Pharmacopoeia, official Homeopathic Pharmacopoeia of the United States, or official National Formulary, or any supplement to any of them; and

(B) articles intended for use in the diagnosis, cure, mitigation, treatment, or prevention of disease in man or other animals; and

(C) articles (other than food) intended to affect the structure or any function of the body of man or other animals; and

(D) articles intended for use as a component of any article specified in clause (A), (B), or (C).

4. Unlike oral homeopathic and botanical medicines, vitamins, minerals, phytonutrients, antioxidants, enzymes and glandular extracts—which could be dietary supplements, injectable homeopathic and botanical medicines, vitamins, minerals, phytonutrients, antioxidants, enzymes and glandular extracts, even injectable sterile water and saline, are, by law, classified as prescription (Rx) drugs under § 503(b)(1)(A) and (B) of the FD&C Act (21 U.S.C. 353(b)(1)(A) and (B)) because of, but not limited to, "the method of [their] use." For more information, see the publication *Approved Drug Products with Therapeutic Equivalence Evaluations* (the List, commonly known as the Orange Book) identifies drug products approved on the basis of safety and effectiveness by the Food and Drug Administration (FDA) under the FD&C Act.

5. In conclusion, as set forth in paragraph 1(a) above, a license to practice chiropractic "shall not confer upon the licensee the right...to prescribe, compound, or administer drugs" such as injectable homeopathic and botanical medicines, vitamins, minerals, phytonutrients, antioxidants, enzymes and glandular extracts (emphasis added). § 12-33-118, C.R.S. Therefore, the Colorado State Board of Chiropractic Examiners' proposed amendment to Rule 7(C) of 3 CCR 707-1 regarding the definition of the term "administer" to include "by...Injection" is contrary to article 33 of Title 12, C.R.S. See particularly § 12-33-118, C.R.S. See also § § 12-33-107(1)(a) and 12-33-117(1)(q) and (ee), C.R.S. and § 25-5-402(9) of the Colorado Food and Drug Act.

Respectfully submitted,

/s/

Todd Gonzales, L.Ac.

1926 Mesaview Ln.

Ft. Collins, CO 80526

E-mail: [todd.gonzales@earthlink.net](mailto:todd.gonzales@earthlink.net)

cc:

John W. Suthers, Attorney General, Office of the Attorney General (E-mail: [John.Suthers@state.co.us](mailto:John.Suthers@state.co.us))

Dan Cartin, Director, Office of Legislative Legal Services (E-mail: [Dan.Cartin@state.co.us](mailto:Dan.Cartin@state.co.us))

Chuck Brackney, Senior Staff Attorney, Business, Health Care, Natural Resources, and Environment Team, Office of Legislative Legal Services (E-mail: [Chuck.Brackney@state.co.us](mailto:Chuck.Brackney@state.co.us))

Deann Conroy, Program Director, Colorado State Board of Chiropractic Examiners (E-mail: [Deann.Conroy@dora.state.co.us](mailto:Deann.Conroy@dora.state.co.us))

Tanya Light, Assistant Attorney General, Colorado State Board of Chiropractic Examiners (E-mail: [Tanya.Light@state.co.us](mailto:Tanya.Light@state.co.us))





**COLORADO CHIROPRACTIC ASSOCIATION**  
*The voice of Colorado chiropractic since 1917*

August 1, 2012

Deann Conroy, Program Director  
Colorado Department of Regulatory Agencies  
Division of Registrations  
Health Services Section  
1560 Broadway, Suite 1350  
Denver, CO 80202

Dear Ms. Conroy:

Thank you for your continued service on behalf of the Colorado Board of Chiropractic Examiners (CBCE). I appreciate your open communication and regulatory expertise.

I'm writing to you today regarding the proposed change to Rule 7 Scope of Practice under Nutritional Remedial Measures that defines "administer" to include injection.

The CCA Board of Directors voted in favor of supporting the definition of "administer" to include injection on February 10, 2011 and verified that vote on October 10, 2011.

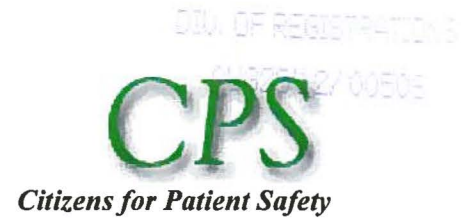
In addition, I support the proposed education and certification requirements for doctors of chiropractic to perform injections in Colorado as recommended by the CBCE.

I applaud the CBCE's thoughtful efforts in this important matter and feel sure that with the proper training and certification, doctors of chiropractic who choose to perform injections of nutritional and homeopathic substances will do so safely.

Thank you for your time and please let me know if you have questions.

Sincerely,

Nelson Vetanze, DC  
2011-12 CCA President



August 28, 2012

Nancy Werner  
Program Specialist  
Colorado Department of Regulatory Agencies  
Division of Professions and Occupations  
1560 Broadway, Suite 1350  
Denver, Colorado 80202

Re: Proposed Rulemaking 3 Colo. Code Regs. Section 707-1, Rule 7C- Submission of Statement from Citizens for Patient Safety, Patty Skolnik, M.S.W.

The new proposed rule by the Colorado Board of Chiropractic Examiners seeks to expand Rule 7C by adding this additional language:

"Administer means by Oral Topical Inhalation and Injection.

All chiropractors that choose to administer homeopathic and botanical medicines, vitamins, and minerals, phytonutrients, antioxidants, enzymes and glandular extracts by means of injectable procedures shall be certified by the board. Applications for certification in Injectables shall be made in a manner approved by the Board. Certification in Injectables by the State Board of Chiropractic Examiners may be obtained by complying with the following:

1. Successfully complete a minimum of a combined total of 24 hours of theoretical study and supervised clinical instruction obtained from a college of chiropractic approved by the Council on Chiropractic Education (CCE) or the equivalent hours of study and clinical supervision obtained from an instructor recognized by the postgraduate facility of a chiropractic institution or approved by CCE to teach this course and
2. Passing a nationally recognized Injectable certification examination recognized by a CCE accredited chiropractic college."

I am Patty Skolnik, M.S.W., of Citizens for Patient Safety (CPS). Our Mission at CPS is to educate ourselves and future generations to take action to protect our health and safety from medical errors. I am very concerned about the patient safety risks associated with allowing chiropractors to inject nutritional remedial measures into patients. I submit this letter in opposition to the new proposed rule.

I am very uncomfortable with allowing procedures, including injections, to be performed on any patient with someone who has not been trained in the procedures for giving injections including



*Citizens for Patient Safety*

into a muscle, joint or spine. I have concerns that chiropractors are not trained in pharmacology including possible side effects, drug interactions, and how to recognize and treat these reactions. I also have concerns about using "nutritional remedial measures" which are compounds that have not been thoroughly researched, especially with patients that have chronic diseases and are taking multiple drugs. I am very concerned that the combination of the above will lead to an increase in adverse outcomes and medication errors in patients, including possible death and other harm. I respectfully request that the Colorado Board of Chiropractic Examiners not adopt the new proposed rule 7C.

Respectfully submitted,

A handwritten signature in black ink, appearing to read "Patty Skolnik". The signature is fluid and cursive, with the first name "Patty" and last name "Skolnik" clearly distinguishable.

Patty Skolnik





# Colorado Medical Society

"Advocating excellence in the profession of medicine"

P.O. Box 17550 • Denver, CO 80217-0550 • 720-859-1001 or 800-654-5653 • fax 720-859-7509 • [www.cms.org](http://www.cms.org)

August 24, 2012

Nancy Werner  
Program Specialist  
Colorado Department of Regulatory Agencies  
Division of Professions and Occupations  
1560 Broadway, Suite 1350  
Denver, Colorado 80202

Re: Proposed Rulemaking 3 Colo. Code Regs. Section 707-1, Rule 7C-  
Supplemental Submission of Statement from Alan Aboaf, MD

The Colorado Board of Chiropractic Examiners has issued new proposed rule changes to the above referenced rule. The Colorado Medical Society hereby submits this supplemental submission and incorporates by reference CMS' original and supplemental submissions.

The new proposed rule by the Colorado Board of Chiropractic Examiners seeks to expand Rule 7C by adding this additional language:

"Administer means by Oral Topical Inhalation and Injection.

All chiropractors that choose to administer homeopathic and botanical medicines, vitamins, and minerals. phytonutrients, antioxidants, enzymes and glandular extracts by means of injectable procedures shall be certified by the board. Applications for certification in Injectables shall be made in a manner approved by the Board. Certification in Injectables by the State Board of Chiropractic Examiners may be obtained by complying with the following:

1. Successfully complete a minimum of a combined total of 24 hours of theoretical study and supervised clinical instruction obtained from a college of chiropractic approved by the Council on Chiropractic Education (CCE) or

the equivalent hours of study and clinical supervision obtained from an instructor recognized by the postgraduate faculty of a chiropractic institution or approved by CCE to teach this course and  
2. Passing a nationally recognized Injectable certification examination recognized by a CCE accredited chiropractic college."

I submit this letter in opposition to the new proposed rule. I am Board Certified in Internal Medicine and licensed to practice as a physician in the State of Colorado. I am very concerned about the patient safety risks associated with allowing chiropractors to inject nutritional remedial measures into patients.

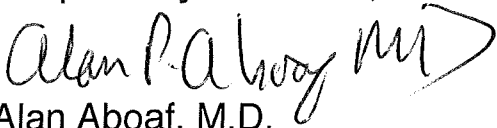
Injecting these substances into a patient may cause serious adverse outcomes associated with interactions with other drugs the patient may be taking for serious health conditions. It is imperative to the safety of patients that injections/drugs should not be given without understanding the interactions it could have with other medications

The patient could have a side effect or allergic reaction, including anaphylactic or anaphylactic-like reactions, both of which could be life-threatening. These types of reactions are emergent and need immediate medical management.

It is also imperative to understanding drug metabolism by the liver and kidney when giving drugs as they may be eliminated at variable rates and create situations for unanticipated toxicity.

In my opinion, chiropractors do not have sufficient training and education about medication administration, drug interactions, side effects, and the medical management of complications to inject patients safely.

Respectfully submitted,

  
Alan Aboaf, M.D.



# Colorado Medical Society

"Advocating excellence in the profession of medicine"

P.O. Box 17550 • Denver, CO 80217-0550 • 720-859-1001 or 800-654-5653 • fax 720-859-7509 • [www.cms.org](http://www.cms.org)

August 24, 2012

Nancy Werner  
Program Specialist  
Colorado Department of Regulatory Agencies  
Division of Professions and Occupations  
1560 Broadway, Suite 1350  
Denver, Colorado 80202

Re: Proposed Rulemaking 3 Colo. Code Regs. Section 707-1, Rule 7C-  
Supplemental Submission of Statement from Cinthia Bateman, MD

The Colorado Board of Chiropractic Examiners has issued new proposed rule changes to the above referenced rule. The Colorado Medical Society hereby submits this supplemental submission and incorporates by reference CMS' original and supplemental submissions.

The new proposed rule by the Colorado Board of Chiropractic Examiners seeks to expand Rule 7C by adding this additional language:

"Administer means by Oral Topical Inhalation and Injection.

All chiropractors that choose to administer homeopathic and botanical medicines, vitamins, and minerals. phytonutrients, antioxidants, enzymes and glandular extracts by means of injectable procedures shall be certified by the board. Applications for certification in Injectables shall be made in a manner approved by the Board. Certification in Injectables by the State Board of Chiropractic Examiners may be obtained by complying with the following:

1. Successfully complete a minimum of a combined total of 24 hours of theoretical study and supervised clinical instruction obtained from a college of chiropractic approved by the Council on Chiropractic Education (CCE) or the equivalent hours of study and clinical supervision obtained from an instructor recognized by the postgraduate facility of a chiropractic institution or approved by CCE to teach this course and
2. Passing a nationally recognized Injectable certification examination recognized by a CCE accredited chiropractic college."

I submit this letter in opposition to the new proposed rule. I am Board Certified in

Cardiology and licensed to practice as a physician in the State of Colorado. I am very concerned about the patient safety risks associated with allowing chiropractors to inject nutritional remedial measures into patients.

As a cardiologist, I get asked many times from anesthesiologists, orthopedics and dentists about whether or not spinal, joint or gum injections are safe for our cardiac patients; and this is with the use of FDA approved medications. The doctors asking me these questions understand the effects of these medications because the effects have been well studied and documented. In addition, these physicians have been trained through medical school and residency on how to perform procedures and understand what to do if a side effect occurs.

I am very uncomfortable with allowing procedures to be performed on any patient with someone who has not been trained, and with compounds that have not been well studied, especially with cardiac patients.

I worry about possible effects on the heart including potential of arrhythmias. Many drugs can cause prolongation of the qt interval causing increased susceptibility to ventricular arrhythmias; combining certain medications or herbal compounds can be potentially dangerous. Other possible effects could be spasm of the coronary arteries, myocardial infarction, congestive heart failure. We don't have a complete understanding of homeopathic or herbal compounds; we do not always know how they will interact with other medications. I would tell my cardiac patients to avoid any injections performed using substances, like remedial nutritional measures, that have not been through the research to ensure both safety and efficacy.

Respectfully submitted,



Cinthia Bateman, M.D.

**COLORADO BOARD OF CHIROPRACTIC EXAMINERS**

**RULEMAKING HEARING MINUTES**

**August 9, 2012**

One Civic Center Plaza  
1560 Broadway, Suite 110 D  
Denver, CO 80202  
[www.dora.state.co.us/chiropractic](http://www.dora.state.co.us/chiropractic)

**WELCOME AND ATTENDANCE**

The Colorado State Board of Chiropractic Examiners Rulemaking Hearing pursuant to section 12-33-107(1)(a) of the Colorado Revised Statutes (C.R.S.) convened at 9:08 A.M. Those in attendance were:

**Board Members:**

Chad Abercrombie, Professional Member – Board President  
Marshall Snider, Public Member – Vice President  
Julie Scott, Professional Member – Secretary  
John Hanks, Professional Member  
Richelle Knowles, Professional Member

**DORA staff and council present:**

Deann Conroy, Program Director  
Mo Miskell, Program Director  
Tanya Light, Assistant Attorney General  
Russell Klein, First Assistant Attorney General  
Lisa Hill, Program Manager  
Nancy Werner, Program Specialist

**Public Attendees Who Signed In:**

Vineta Campau, Executive Director, Colorado Chiropractic Association (CCA)  
James Thatch, Individual  
Susan Koontz, General Counsel for the Colorado Medical Society (CMS)  
Robert C. Nelson, Nelson Chiropractic  
Larry Morries, First Chiropractic  
Mark Wolff, Green Mountain Chiropractic  
Dan Peterson, Premier Chiropractic Medicine  
Randy Knoche, Springs Chiropractic  
Valerie Hobbs, Acupuncture Association of Colorado



Kelvin, Washington, Colorado Chiropractic Association (CCA)  
David McClain, Colorado Chiropractic Association (CCA)  
Tim Ray, Tim Ray D. C.  
Reiner Kremer  
Mike Simone, American Chiropractic Association (ACA)  
Robert Masteller  
Shad Sutton  
Roberta Johnson, American Chiropractic Association (ACA)  
Les Butler, Colorado Chiropractic Association (CCA)

### **RULEMAKING HEARING**

Rules 6, 7, 8, 26, 28, and 29 were addressed at the hearing and comments were submitted and testimony was heard.

The Rulemaking Hearing Adjourned at 10:50 A.M.

### **EXECUTIVE SESSION**

Upon motion and duly seconded, the Board entered into Executive Session AT 10:50 A.M. pursuant to §24-6-402(4)(c), C.R.S. and the general public was dismissed from the room.

President Abercrombie adjourned the Board from Executive Session at 11:16 A.M.

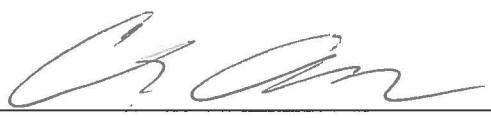
### **OPEN BOARD RULEMAKING DELIBERATION**

The Board reconvened for open Board deliberation at 11:16 A.M.

### **BOARD RULEMAKING**

- Upon motion duly seconded, Rule 6, was postponed until an upcoming Board meeting.
- Upon motion duly seconded, Rule 7, was postponed until an upcoming Board meeting.
- Upon motion duly seconded, Rule 8, was adopted as amended.
- Upon motion duly seconded, Rule 26, was repealed.
- Upon motion duly seconded, Rule 28, was adopted.
- Upon motion duly seconded, Rule 29, was postponed until an upcoming Board meeting.

### **THE RULEMAKING HEARING ADJOURNED AT 12:15 P.M.**

  
Chad Abercrombie, DC –President

11-18-18  
Date