

Appendix A

Please complete this form for each of ten patients. (ONLY the doctor is to complete the form.)

PRACTICE MODEL LOG

April 17, 1990

<p><u>AGE</u></p> <p><input type="checkbox"/> 17 years or under</p> <p><input type="checkbox"/> 18 to 30 years</p> <p><input type="checkbox"/> 31 to 50 years</p> <p><input type="checkbox"/> 51 to 64 years</p> <p><input type="checkbox"/> 65 years or older</p>	<p><u>SEX</u></p> <p><input type="checkbox"/> MALE</p> <p><input type="checkbox"/> FEMALE</p>	<p><u>RACE</u></p> <p><input type="checkbox"/> White/Caucasian</p> <p><input type="checkbox"/> Black/Negro</p> <p><input type="checkbox"/> Asian/Oriental</p> <p><input type="checkbox"/> Native American</p> <p><input type="checkbox"/> Other _____</p>
<p><u>OCCUPATION</u></p> <p><input type="checkbox"/> Physical labor</p> <p><input type="checkbox"/> Clerical/Secretarial</p> <p><input type="checkbox"/> Executive/Professional</p> <p><input type="checkbox"/> Teacher</p> <p><input type="checkbox"/> Student</p> <p><input type="checkbox"/> Homemaker</p> <p><input type="checkbox"/> Athlete</p> <p><input type="checkbox"/> Other _____</p>	<p><u>PATIENT SOURCE</u></p> <p><input type="checkbox"/> Referred by a medical physician</p> <p><input type="checkbox"/> Referred by another chiropractor</p> <p><input type="checkbox"/> Referred by other health practitioner</p> <p><input type="checkbox"/> Referred by another patient</p> <p><input type="checkbox"/> Self referred or advertisement</p> <p><input type="checkbox"/> Other _____</p>	
<p><u>PLACE OF PATIENT VISIT</u></p>		
<p><input type="checkbox"/> Doctor's office</p>	<p><input type="checkbox"/> Hospital</p>	<p><input type="checkbox"/> Other than office or hospital</p>
<p><u>TYPE OF PATIENT VISIT</u></p>		
<p><input type="checkbox"/> Initial/New patient visit</p>	<p><input type="checkbox"/> Returning patient visit</p>	<p><input type="checkbox"/> Reactivated patient</p>
<p><u>REASON FOR CARE/VISIT</u></p>		
<p><input type="checkbox"/> Injury</p>	<p><input type="checkbox"/> Illness</p>	<p><input type="checkbox"/> Health Improvement</p>
		<p><input type="checkbox"/> Maintenance</p>
		<p><input type="checkbox"/> Second opinion</p>
<p><u>PRIMARY SYSTEM OF INVOLVEMENT</u></p>		
<p><input type="checkbox"/> Musculoskeletal</p>	<p><input type="checkbox"/> Gastrointestinal</p>	
<p><input type="checkbox"/> Central nervous system (brain, spinal cord)</p>	<p><input type="checkbox"/> Genitourinary/reproductive</p>	
<p><input type="checkbox"/> Peripheral nervous system (spinal nerves, autonomic nerves)</p>	<p><input type="checkbox"/> Hemopoietic/immune</p>	
<p><input type="checkbox"/> Respiratory</p>	<p><input type="checkbox"/> Metabolic/endocrine</p>	
<p><input type="checkbox"/> Cardiovascular</p>	<p><input type="checkbox"/> Other _____</p>	

Practice Model Log (Continued on next page)

Appendix A

<u>PRELIMINARY PROCEDURES PERFORMED/ORDERED</u>	
<u>CASE HISTORY</u>	<u>PHYSICAL EXAMINATION</u>
<input type="checkbox"/> Complete	<input type="checkbox"/> Complete
<input type="checkbox"/> Partial	<input type="checkbox"/> Partial
<input type="checkbox"/> Pertaining only to complaint	<input type="checkbox"/> Pertaining only to complaint
<input type="checkbox"/> Update of clinical notes	<input type="checkbox"/> Vital signs only
<u>ORTHOPEDIC EXAMINATION</u>	<u>NEUROLOGICAL EXAMINATION</u>
<input type="checkbox"/> Complete	<input type="checkbox"/> Complete
<input type="checkbox"/> Partial	<input type="checkbox"/> Partial
<input type="checkbox"/> Pertaining only to complaint	<input type="checkbox"/> Pertaining only to complaint
<input type="checkbox"/> Recheck of one or two tests	<input type="checkbox"/> Recheck of one or two tests
<u>X-RAY EXAMINATION</u>	<u>LABORATORY TESTS</u>
<input type="checkbox"/> Full spine/postural study	<input type="checkbox"/> Complete blood count
<input type="checkbox"/> Area studies/more than one area of spine	<input type="checkbox"/> Serum chemistry
<input type="checkbox"/> Area study/only area of complaint	<input type="checkbox"/> Urinalysis
<input type="checkbox"/> Extremity study	<input type="checkbox"/> Other _____
<input type="checkbox"/> Chest	
<input type="checkbox"/> Other _____	
<u>SPECIAL STUDIES</u>	
<input type="checkbox"/> CT scan	<input type="checkbox"/> Thermography
<input type="checkbox"/> MRI	<input type="checkbox"/> Other _____
<input type="checkbox"/> Doppler ultrasound	
<u>REFERRAL FOR SECOND OPINION OR ALTERNATIVE TREATMENT</u>	
<input type="checkbox"/> YES	
<input type="checkbox"/> NO	
<u>CHIROPRACTIC PROCEDURES PERFORMED</u>	
<u>SPINAL ANALYSIS</u>	<u>SPINAL ADJUSTMENT/CORRECTIVE TECHNIQUES</u>
<input type="checkbox"/> Motion and/or static palpation	<input type="checkbox"/> Spinal or pelvic adjustment
<input type="checkbox"/> Postural and/or plumb-line analysis	<input type="checkbox"/> Extremity or other adjustment
<input type="checkbox"/> Kinesiology/muscle testing	<input type="checkbox"/> Pressure point technique
<input type="checkbox"/> Leg length check	<input type="checkbox"/> Pelvic blocking
<input type="checkbox"/> Skin temperature instrumentation	<input type="checkbox"/> Activator
<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____

Practice Model Log (Continued on next page)

Appendix A

NATURE OF PRIMARY CONDITION/COMPLAINT TREATED

- | | |
|--|---|
| <input type="checkbox"/> Asymptomatic with spinal subluxation | <input type="checkbox"/> Cardiovascular complaint |
| <input type="checkbox"/> Asymptomatic without spinal subluxation | <input type="checkbox"/> Gastrointestinal complaint |
| <input type="checkbox"/> Neck or back pain without radiation of pain | <input type="checkbox"/> Genitourinary/reproductive complaint |
| <input type="checkbox"/> Neck or back pain with radiation of pain | <input type="checkbox"/> Hemopoietic/immune dysfunction |
| <input type="checkbox"/> Extremity pain | <input type="checkbox"/> Metabolic/endocrine dysfunction |
| <input type="checkbox"/> Headache | <input type="checkbox"/> Skin disorder |
| <input type="checkbox"/> Primary neurological disorder | <input type="checkbox"/> Psychological disorder |
| <input type="checkbox"/> Respiratory complaint | <input type="checkbox"/> Other _____ |

SUPPORTIVE TECHNIQUES OR THERAPIES

- | | |
|--|--|
| <input type="checkbox"/> Ice/cold pack | <input type="checkbox"/> Diathermy |
| <input type="checkbox"/> Hot pack/moist heat | <input type="checkbox"/> Traction |
| <input type="checkbox"/> Infrared or other form of direct heat | <input type="checkbox"/> Electrical stimulation |
| <input type="checkbox"/> Orthopedic support/brace | <input type="checkbox"/> Ultraviolet |
| <input type="checkbox"/> Orthotics | <input type="checkbox"/> Rehabilitative exercise |
| <input type="checkbox"/> Ultrasound | <input type="checkbox"/> Other _____ |

MISCELLANEOUS TECHNIQUES

- | | |
|---|---|
| <input type="checkbox"/> Acupuncture | <input type="checkbox"/> Back school/exercise, spinal hygiene instruction |
| <input type="checkbox"/> Nutritional counseling/therapy | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> Psychological counseling/therapy | |

Appendix B



Executive Offices: 901 54th Avenue • Greeley, Colorado 80634 • (303) 356-9100

June 26, 1991

Dear Colleague:

As a practicing chiropractor, you are aware of the tremendous importance of the licensing process for the Chiropractic Profession. Presently, the requirements for licensure as a chiropractor are established to protect the public by providing assurance that licensed chiropractors possess the knowledge and skills needed for safe and effective practice. In order to provide adequate protection to the public, and to be fair to applicants for chiropractic licensure, the content of the clinically oriented NBCE examinations should reflect activities performed by licensed chiropractors in their practices.

The National Board of Chiropractic Examiners is currently conducting a Survey of Chiropractic Practice to obtain accurate information about the practices of licensed chiropractors across the United States. You have been selected to participate in a field-trial of this survey instrument as a representative of the doctors practicing in your area. Your responses to the questionnaire will be evaluated, along with the responses of a number of other doctors selected for this important project, to determine if the survey will provide the information necessary to describe the practice of chiropractic in offices throughout the country. Eventually, the NBCE will mail this survey to approximately 5000 practicing chiropractors.

The National Board of Chiropractic Examiners will use this study to compare the content of the current NBCE examinations to the requirements of entry-level practice of chiropractors, and as a basis for future NBCE examinations. However, the benefits to the Chiropractic Profession will be far greater than this simple application. This is the first time that our profession has attempted to define chiropractic practice by using the input from our own professionals in the field.

Congratulations on being selected to participate in this milestone study of Chiropractic. If you have any questions, please call Dr. Mark Christensen or Dr. Paul Townsend of the NBCE at (303) 356-9100. We sincerely appreciate your contribution to this important research study.

Sincerely,

Horace C. Elliott
Executive Director

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Horace C. Elliott, Executive Director

Field Test Letter

Appendix C

NATIONAL BOARD OF CHIROPRACTIC EXAMINERS



Executive Offices: 901 54th Avenue • Greeley, Colorado 80634 • (303) 356-9100

April 20, 1992

Dear Colleague:

You have been selected as a member of a representative sample of chiropractors to participate in a milestone study of chiropractic practice. For the first time in the history of the chiropractic profession, a scientific study has been designed to document the tasks, duties, and professional responsibilities of chiropractic practitioners.

Your participation in this study will consist of completing a questionnaire and returning it to the National Board of Chiropractic Examiners. Results of the study will be used to prepare a comprehensive report describing the chiropractic profession and to document future examination needs.

In order that results of this project reflect the practice of chiropractors across a wide range of practice settings, it is important that you return a completed questionnaire. In a few days, you will be receiving your survey form. We look forward to your response.

Sincerely,

Titus Plomaritis, D.C., NBCE President

D. Brent Owens, D.C., Chairman
NBCE Job Analysis Steering Committee

TP/DBO/raa

cc: Dr. Andre Audette, President
Canadian Federation of Chiropractic Regulatory Boards

Dr. Douglas M. Lawson, Chairman
Canadian Chiropractic Examining Board

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Horace C. Elliott, Executive Director

Pre-Survey Letter

Appendix D

NATIONAL BOARD OF CHIROPRACTIC EXAMINERS



Executive Offices: 901 54th Avenue • Greeley, Colorado 80634 • (303) 356-9100

May 20, 1992

Dear Colleague:

As stated in a letter sent to you a few days ago, you have been selected as a representative of chiropractors in your geographic area to participate in a milestone study of chiropractic practice.

Data from the enclosed questionnaire will serve to document what chiropractors across Canada are doing in their practices. Results of the survey will be used to prepare a comprehensive report describing the chiropractic profession and documenting future examination needs. No individual responses will be reported; responses will be reported on a group basis only.

As you are aware, a project of this magnitude will involve several weeks of analyses and reporting after all survey forms are returned to the National Board. Every effort will be made to provide you with a report indicating the results of this survey.

If you have any questions, please feel free to call Paul D. Townsend, D.C., NBCE Chiropractic Consultant, Mark G. Christensen, Ph.D., NBCE Assistant Executive Director and Director of Testing & Evaluation, or me at 1-303-356-9100.

Your response is critical to the success of this important study. Please return your completed survey instrument to the National Board by June 10, 1992, in the enclosed self-addressed, postage-paid envelope.

Sincerely,

Horace C. Elliott
Executive Director

HCE:gc
Enclosures
cc: NBCE Board of Directors

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D. Brent Owens, D.C.
Jay H. Perreten, D.C.
Carroll H. Winkler, D.C.
Horace C. Elliott, Executive Director

Survey Cover Letter

Survey of Chiropractic Practice

This questionnaire is part of a comprehensive study of chiropractic practice being conducted by the National Board of Chiropractic Examiners.

Please use a soft (No. 1 or No. 2) lead pencil. **DO NOT** use a ball-point pen, nylon-tip or felt-tip pen, fountain pen, marker, or colored pencil. Be careful to avoid making stray marks on the form.

Most questions have several alternative answers. Choose the answer that best applies to your practice and blacken the circle beside it. To change your answer, erase your first mark completely and then blacken the correct circle.

A few questions ask you to write in information. Print your answer in the space following the question. Be careful to print legibly in the space provided.

Your answers will be kept confidential. Your individual responses to the questions will not be released.

1. What trends or developments during the next decade would be most **beneficial** to the chiropractic profession?

2. What trends or developments during the next decade would be most **detrimental** to the chiropractic profession?

3. Have you ever worked full-time in an occupation other than chiropractic?

☐ Yes
☐ No

4. Are you currently in active full-time chiropractic practice?

☐ Yes
☐ No

If you answered "No" to question 4, don't answer any further questions. Simply return the questionnaire in the postage-paid envelope. **It's very important that you return the questionnaire.** Please put it in the mail today.

5. How many hours per week do you practice chiropractic?

_____ (Hours per week)

6. The final report describing the study will include a list of individuals who responded to this survey.

Would you like us to include your name in the list?

☐ Yes
☐ No

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NATIONAL BOARD OF CHIROPRACTIC EXAMINERS
901 54th Avenue
Greeley, Colorado 80634



PLEASE DO NOT MARK IN THIS AREA

009920

DEMOGRAPHIC DATA

In this section you are asked to provide background information that will be summarized to describe the group that completed this questionnaire. **No individual responses will be reported.**

1. **Sex**
 - ☐ Male
 - ☐ Female
2. **Place of birth**
 - ☐ Canada
 - ☐ U.S.A.
 - ☐ Britain
 - ☐ France
 - ☐ Belgium
 - ☐ Switzerland
 - ☐ Australia
 - ☐ New Zealand
 - ☐ Other _____
3. **Highest level of non-chiropractic education attained:**
 - ☐ High School Diploma
 - ☐ Associate Degree
 - ☐ Baccalaureate Degree
 - ☐ Master's Degree
 - ☐ Doctoral Degree
 - ☐ Other _____
4. **Post-graduate chiropractic specialty board eligibility or certification:**
 - ☐ None/Does not apply
 - ☐ American Chiropractic Board of Sports Physicians
 - ☐ American Board of Chiropractic Orthopedists
 - ☐ American Chiropractic Academy of Neurology
 - ☐ American Chiropractic Board of Radiology
 - ☐ Chiropractic Rehabilitation Association
 - ☐ American Chiropractic Board of Nutrition
 - ☐ American Board of Chiropractic Internists
 - ☐ ICA College on Chiropractic Imaging
 - ☐ ICA College of Thermography
 - ☐ ICA Council on Applied Chiropractic Sciences
 - ☐ Other _____
5. **Institution that conferred Doctor of Chiropractic Degree:**
 - ☐ Anglo-European College of Chiropractic
 - ☐ Canadian Memorial Chiropractic College
 - ☐ Cleveland Chiropractic College, Kansas City
 - ☐ Cleveland Chiropractic College, Los Angeles
 - ☐ Institut Francais de Chiropractie
 - ☐ Life College, School of Chiropractic
 - ☐ Life Chiropractic College, West
 - ☐ Logan College of Chiropractic
 - ☐ Los Angeles College of Chiropractic
 - ☐ National College of Chiropractic
 - ☐ New York Chiropractic College
 - ☐ Northwestern College of Chiropractic
 - ☐ Palmer College of Chiropractic
 - ☐ Palmer College of Chiropractic, West
 - ☐ Parker College of Chiropractic
 - ☐ Pennsylvania College of Straight Chiropractic
 - ☐ Phillip Institute of Technology, School of Chiropractic
 - ☐ Sherman College of Straight Chiropractic
 - ☐ Southern California College of Chiropractic
 - ☐ Sydney College of Chiropractic
 - ☐ Texas Chiropractic College
 - ☐ Western States Chiropractic College
 - ☐ Other _____

WORK ENVIRONMENT

1. Which of the following best describes your position in the office where you work?
☐ Individual practitioner/only doctor in office
☐ One of two or more doctors in office
☐ Junior associate or examining doctor
☐ Other _____
2. Do you practice in more than one office location?
☐ Yes
☐ No
3. Do you delegate some of your patient care, such as case history taking, the taking or developing of X-rays, or the administration of therapy, to a chiropractic assistant?
☐ Yes
☐ No
4. Do you ever deliver chiropractic care outside an office setting, such as in a patient's home?
☐ Yes
☐ No
5. Do you have staff privileges at a hospital?
☐ Yes
☐ No
6. Have you received patient referrals from medical practitioners in the past two years?
☐ Yes
☐ No

EXPERIENCE AND ORIENTATION

1. How long have you been practicing in the state in which you are currently located?
☐ less than 2 years
☐ 2-4 years
☐ 5-15 years
☐ more than 15 years
2. How long have you been in practice altogether, including your current state and other states or countries?
☐ less than 2 years
☐ 2-4 years
☐ 5-15 years
☐ more than 15 years
3. What kind of clinical orientation did you receive in your first field practice setting?
☐ No formal orientation
☐ A preceptorship/field internship
☐ An associateship
☐ A state-mandated training program
☐ Other _____
4. Approximately what percentage of your time is spent on each of the following functions during a typical week?

76-100%	_____	_____	_____	_____	_____
51-75%	_____	_____	_____	_____	_____
26-50%	_____	_____	_____	_____	_____
1-25%	_____	_____	_____	_____	_____
0	_____	_____	_____	_____	_____
Business management	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Direct patient care	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Patient education	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Research	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

TYPES OF PATIENTS

For every 100 patients that you see in your practice, how many of these patients are from each of the following sex, age, ethnic, and occupational categories?

4 = MOST/ALL (76-100%)

3 = MORE THAN HALF (51-75%)

2 = HALF OR LESS (26-50%)

1 = FEW/SOME (1-25%)

0 = NONE (0)

0 1 2 3 4

SEX

- MALE
- FEMALE

	0	1	2	3	4
MALE	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
FEMALE	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

AGE

- 17 or younger
- 18 to 30
- 31 to 50
- 51 to 64
- 65 or older

	0	1	2	3	4
17 or younger	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
18 to 30	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
31 to 50	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
51 to 64	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
65 or older	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

PLACE OF BIRTH

- Canada
- U.S.A.
- Britain
- France
- Belgium
- Switzerland
- Australia
- New Zealand
- Other _____

	0	1	2	3	4
Canada	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
U.S.A.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Britain	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
France	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Belgium	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Switzerland	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Australia	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
New Zealand	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Other	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

OCCUPATION

- Executive/Professional
- White collar/Secretarial
- Professional/Amateur athlete
- Tradesman/Skilled Labor
- Unskilled Labor
- Homemaker
- Student
- Retired or other

	0	1	2	3	4
Executive/Professional	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
White collar/Secretarial	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Professional/Amateur athlete	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Tradesman/Skilled Labor	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Unskilled Labor	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Homemaker	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Student	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Retired or other	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

TYPES OF CONDITIONS

During the past two years in your practice, how often have you seen patients with the following presenting or concurrent conditions?

4 = ROUTINELY (Daily)

3 = OFTEN (1 or 2 per week)

2 = SOMETIMES (1 or 2 per month)

1 = RARELY (1 or 2 per year)

0 = NEVER

	0	1	2	3	4
4 = ROUTINELY (Daily)					
3 = OFTEN (1 or 2 per week)					
2 = SOMETIMES (1 or 2 per month)					
1 = RARELY (1 or 2 per year)					
0 = NEVER					

ARTICULAR/JOINT

- spinal subluxation/joint dysfunction
- extremity subluxation/joint dysfunction
- sprain or dislocation of any joint
- vertebral facet syndrome
- intervertebral disc syndrome
- thoracic outlet syndrome
- hyperlordosis of cervical or lumbar spine
- kyphosis of thoracic spine
- aseptic necrosis or epiphysitis
- scoliosis
- congenital/developmental anomaly
- osteoarthritis/degenerative joint disease
- systemic/rheumatoid arthritis or gout
- bacterial infection of joint
- bursitis or synovitis
- carpal or tarsal tunnel syndrome
- TMJ syndrome
- joint tumor or neoplasm
- spinal canal stenosis

	0	1	2	3	4
• spinal subluxation/joint dysfunction	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
• extremity subluxation/joint dysfunction	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
• sprain or dislocation of any joint	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
• vertebral facet syndrome	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
• intervertebral disc syndrome	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
• thoracic outlet syndrome	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
• hyperlordosis of cervical or lumbar spine	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
• kyphosis of thoracic spine	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
• aseptic necrosis or epiphysitis	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
• scoliosis	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
• congenital/developmental anomaly	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
• osteoarthritis/degenerative joint disease	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
• systemic/rheumatoid arthritis or gout	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
• bacterial infection of joint	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
• bursitis or synovitis	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
• carpal or tarsal tunnel syndrome	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
• TMJ syndrome	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
• joint tumor or neoplasm	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
• spinal canal stenosis	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

NEUROLOGICAL

- headaches
- peripheral neuritis or neuralgia
- ALS, multiple sclerosis or Parkinson's
- tearing or rupture of nerve/plexus
- stroke or cerebrovascular condition
- vertebrobasilar artery insufficiency
- cranial nerve disorder
- radiculitis or radiculopathy
- loss of equilibrium
- brain or spinal cord tumor

	0	1	2	3	4
• headaches	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
• peripheral neuritis or neuralgia	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
• ALS, multiple sclerosis or Parkinson's	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
• tearing or rupture of nerve/plexus	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
• stroke or cerebrovascular condition	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
• vertebrobasilar artery insufficiency	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
• cranial nerve disorder	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
• radiculitis or radiculopathy	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
• loss of equilibrium	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
• brain or spinal cord tumor	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

(During the past two years)

4 = ROUTINELY (Daily)

3 = OFTEN (1 or 2 per week)

2 = SOMETIMES (1 or 2 per month)

1 = RARELY (1 or 2 per year)

0 = NEVER

SKELETAL

- fracture
- osteoporosis/osteomalacia
- congenital/developmental anomaly
- endocrine or metabolic bone disorder
- bone tumor

0	1	2	3	4
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

MUSCULAR

- muscular strain/tear
- tendinitis/tenosynovitis
- muscular dystrophy
- muscular atrophy
- muscle tumor

0	1	2	3	4
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

CARDIOVASCULAR

- high or low blood pressure
- angina or myocardial infarction
- arterial aneurysm
- peripheral artery or vein disorder
- murmur or rhythm irregularity
- congenital anomaly

0	1	2	3	4
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

RESPIRATORY

- viral or bacterial infection
- asthma, emphysema or COPD
- occupational or environmental disorder
- atelectasis or pneumothorax
- tumor of lung or respiratory passages

0	1	2	3	4
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

INTEGUMENT

- acne, dermatitis or psoriasis
- bacterial or fungal infection
- herpes simplex or zoster
- pigment disorders
- skin cancer

0	1	2	3	4
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

(During the past two years)

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0 = NEVER

GASTROINTESTINAL

- bacterial or viral infection
- appendicitis, cholecystitis or pancreatitis
- ulcer of stomach, intestine or colon
- hiatus or inguinal hernia
- colitis or diverticulitis
- hemorrhoids
- tumor of gastrointestinal tract

<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

RENAL/UROLOGICAL

- infection of kidney or urinary tract
- kidney stones
- chronic kidney disease or failure
- tumor of the kidney or bladder

<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

MALE REPRODUCTIVE

- male infertility or impotency
- prostate disorder
- congenital anomaly
- tumor of reproductive system

<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

FEMALE REPRODUCTIVE OR BREAST

- female infertility
- pregnancy
- menstrual disorder
- non-cancerous disorder of breast
- tumor of breast or reproductive system

<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

HEMATOLOGICAL/ LYMPHATIC

- anemia
- immunological disorder
- hereditary disorder
- polycythemia
- cancer of the marrow or lymphatic system

<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

(During the past two years)

4 = ROUTINELY (Daily)

3 = OFTEN (1 or 2 per week)

2 = SOMETIMES (1 or 2 per month)

1 = RARELY (1 or 2 per year)

0 = NEVER

	0	1	2	3	4
4 = ROUTINELY (Daily)					
3 = OFTEN (1 or 2 per week)					
2 = SOMETIMES (1 or 2 per month)					
1 = RARELY (1 or 2 per year)					
0 = NEVER					

ENDOCRINE / METABOLIC

- obesity
- thyroid or parathyroid disorder
- adrenal disorder
- pituitary disorder
- thymus or pineal disorder
- diabetes
- endocrine tumor

	0	1	2	3	4
obesity	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
thyroid or parathyroid disorder	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
adrenal disorder	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
pituitary disorder	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
thymus or pineal disorder	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
diabetes	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
endocrine tumor	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

CHILDHOOD DISORDERS

- upper respiratory or ear infection
- measles/German measles
- mumps
- chickenpox
- whooping cough
- parasitic

	0	1	2	3	4
upper respiratory or ear infection	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
measles/German measles	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
mumps	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
chickenpox	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
whooping cough	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
parasitic	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

VENEREAL

- herpes II
- gonorrhea
- chlamydia
- venereal warts
- syphilis

	0	1	2	3	4
herpes II	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
gonorrhea	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
chlamydia	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
venereal warts	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
syphilis	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

EENT

- eye or vision disorder
- ear or hearing disorder
- disorder of nose or sense of smell
- disorder of throat or larynx
- tumor of eye, ear, nose or throat

	0	1	2	3	4
eye or vision disorder	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
ear or hearing disorder	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
disorder of nose or sense of smell	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
disorder of throat or larynx	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
tumor of eye, ear, nose or throat	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

MISCELLANEOUS

- allergies
- nutritional disorders
- eating disorders
- psychological disorders
- AIDS-related complex

	0	1	2	3	4
allergies	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
nutritional disorders	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
eating disorders	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
psychological disorders	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
AIDS-related complex	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

ACTIVITIES PERFORMED

INSTRUCTIONS: This section contains a list of activities that chiropractors may perform in their practices. Some of these activities may not apply to your practice. Please respond to the statements in terms of what you are now doing or have been doing over the **past two years** in your practice.

Using the rating scale

For each item in this inventory, you are asked to make two judgments using the **FREQUENCY** and **RISK FACTOR** rating scales presented below.

FREQUENCY: How often do you perform the activity in a **typical series of 100 patients** or in a group of the type of patients specified?

- 0 Never (does not apply to my practice)
- 1 Rarely (1-25%)
- 2 Sometimes (26-50%)
- 3 Frequently (51-75%)
- 4 Routinely (76-100%)

RISK FACTOR: In your opinion, what would be the risk factor to public health or patient safety of **poor performance** or **omission** of the activity by a chiropractor?

- 0 No risk
- 1 Little risk
- 2 Some risk
- 3 Significant risk
- 4 Severe risk

0 Never (does not apply)
1 Rarely (1-25%)
2 Sometimes (26-50%)
3 Frequently (51-75%)
4 Routinely (76-100%)

0 No risk
1 Little risk
2 Some risk
3 Significant risk
4 Severe risk

EXAMPLES	FREQUENCY					RISK FACTOR				
	0	1	2	3	4	0	1	2	3	4
1. Order or perform an electrocardiogram as part of an initial or routine physical examination.	●	○	○	○	○	○	●	○	○	○
2. Order an electrocardiogram or refer a patient with a suspected heart problem to a cardiologist.	○	○	○	○	●	○	○	○	○	●
3. Determine the appropriate placements of chest leads for an EKG.	●	○	○	○	○	●	○	○	○	○
4. Interpret an EKG tracing.	○	●	○	○	○	○	○	○	●	○

NOTE: You may perform a procedure rarely, but the risk factor may be significant if performed poorly or omitted. Conversely, you may perform a procedure frequently, but omission of the activity may not necessarily present a significant risk to public health or patient safety.

These examples are hypothetical and are not intended to influence your rating of the procedures.

ACTIVITIES

Using the rating scale

For each item in this inventory, you are asked to make two judgments using the rating scales presented. In the column labeled "**FREQUENCY**," use the scale provided to indicate how often you perform the activity in a **typical series of 100 patients** or in a group of the **type of patients specified**. In the column labeled "**RISK FACTOR**," use the scale to provide your opinion of what would be the risk to public health or patient safety of **poor performance** or **omission** of the activity by a chiropractor.

0 Never (does not apply)
1 Rarely (1-25%)
2 Sometimes (26-50%)
3 Frequently (51-75%)
4 Routinely (76-100%)

0 No risk
1 Little risk
2 Some risk
3 Significant risk
4 Severe risk

CASE HISTORY	FREQUENCY					RISK FACTOR				
	0	1	2	3	4	0	1	2	3	4
1. Take an initial case history from a new patient.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2. Identify the nature of a patient's condition using the information from the case history.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
3. Perform a focused case history in order to determine what additional examination procedures or tests may be needed.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4. Take S.O.A.P. notes or case progress notes on subsequent patient visits.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
5. Determine the appropriate technique or case management procedure using the information from the S.O.A.P. notes or case progress notes.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
6. Update case history for a patient whose condition has changed or who presents with a new condition.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
PHYSICAL EXAMINATION	FREQUENCY					RISK FACTOR				
	0	1	2	3	4	0	1	2	3	4
7. Perform a physical examination on a new patient.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
8. Assess the patient's general state of health using the information from the physical examination.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
9. Perform a regional physical examination to further define the nature of the patient's presenting complaint, or to determine what, if any, further testing procedures may be indicated.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
10. Update certain physical examination procedures periodically or when patient's condition changes.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

0 Never (does not apply)
1 Rarely (1-25%)
2 Sometimes (26-50%)
3 Frequently (51-75%)
4 Routinely (76-100%)

0 No risk
1 Little risk
2 Some risk
3 Significant risk
4 Severe risk

NMS EXAMINATION	FREQUENCY					RISK FACTOR				
	0	1	2	3	4	0	1	2	3	4
11. Perform a general orthopedic and/or neurological examination on a new patient.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
12. Perform a focused orthopedic and/or neurological examination based on the findings from the orthopedic and/or neurological survey.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
13. Determine the nature of a patient's condition using information from the orthopedic and/or neurological examination.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
14. Determine what additional laboratory, X-ray, special study, and/or referral may be indicated using information from the orthopedic and/or neurological examination.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
15. Update appropriate orthopedic and/or neurological tests periodically or as patient's condition changes.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
X-RAY EXAMINATION	FREQUENCY					RISK FACTOR				
	0	1	2	3	4	0	1	2	3	4
16. Perform an X-ray examination on new patients, and develop X-rays, either manually or with automatic processor.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
17. Determine the presence of pathology, fracture, dislocations or other significant findings using information from an X-ray examination.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
18. Determine areas of instability or dynamic joint dysfunction using information from a stress X-ray.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
19. Determine the possible presence of a subluxation or a spinal listing using findings from an X-ray examination.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
20. Update the X-ray examination or perform new X-rays on a patient whose condition has changed or who has a new condition.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
LABORATORY AND SPECIAL STUDIES	FREQUENCY					RISK FACTOR				
	0	1	2	3	4	0	1	2	3	4
21. Draw blood, collect urine, or perform laboratory or other specialized procedures in your office.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
22. Order laboratory tests from hospital or private laboratory.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
23. Refer patients for MRI, CT scan, EKG or other specialized procedure.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
24. Confirm a diagnosis or rule out health-threatening conditions using information from laboratory or specialized studies.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
25. Augment history, examination or X-ray findings using information from laboratory or specialized studies.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

0 Never (does not apply)
 1 Rarely (1-25%)
 2 Sometimes (26-50%)
 3 Frequently (51-75%)
 4 Routinely (76-100%)

0 No risk
 1 Little risk
 2 Some risk
 3 Significant risk
 4 Severe risk

DIAGNOSIS	FREQUENCY					RISK FACTOR				
	0	1	2	3	4	0	1	2	3	4
26. Relate problems identified in the history and examination findings to a pathologic, pathophysiologic, or psychopathologic process.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
27. Distinguish between life- or health-threatening conditions and less urgent conditions using information from the history and examination findings.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
28. Predict the effectiveness of chiropractic care for the individual patient using information from the history and examination findings.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
29. Refer patients to other health care practitioners based on information from the history and examination findings.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
30. Arrive at a diagnosis or clinical impression on the basis of history and examination findings.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
CHIROPRACTIC TECHNIQUE	FREQUENCY					RISK FACTOR				
	0	1	2	3	4	0	1	2	3	4
31. Perform specific chiropractic examination procedures on patients with spinal or extra-spinal joint conditions.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
32. Utilize instruments unique to chiropractic or primarily in the chiropractic domain as part of the patient examination.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
33. Determine the appropriate chiropractic case management or technique using information from a chiropractic examination.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
34. Perform chiropractic adjustive techniques.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
35. Update chiropractic examination procedures on subsequent visits to determine appropriate use of technique or case management.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
SUPPORTIVE TECHNIQUE	FREQUENCY					RISK FACTOR				
	0	1	2	3	4	0	1	2	3	4
36. Evaluate the patient's condition to determine if procedures other than adjustive techniques may be indicated.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
37. Determine indications or contraindications for the use of a supportive technique.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
38. Perform treatment procedures other than adjustive techniques in the management of patient care.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
39. Refer patients to a physical therapist, massage therapist, nutritionist or other health care practitioner based on patient's condition.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
40. Monitor the effectiveness of non-adjustive techniques or therapeutic procedures.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

- 0 No risk
1 Little risk
2 Some risk
3 Significant risk
4 Severe risk

OTHER ESSENTIAL ACTIVITIES

NBCE SURVEY OF CHIROPRACTIC PRACTICE

TREATMENT PROCEDURES

Please indicate the **primary technique approach** that you use in your practice.

- ☐ Upper cervical
☐ Full spine
☐ Other _____

Please indicate whether or not you have used the following **adjustive techniques** in your practice during the past two years.

YES	NO	ADJUSTIVE TECHNIQUE
<input type="radio"/>	<input type="radio"/>	Activator
<input type="radio"/>	<input type="radio"/>	Applied kinesiology
<input type="radio"/>	<input type="radio"/>	Barge
<input type="radio"/>	<input type="radio"/>	Cox/Flexion-Distracton
<input type="radio"/>	<input type="radio"/>	Cranial
<input type="radio"/>	<input type="radio"/>	Diversified
<input type="radio"/>	<input type="radio"/>	Gonstead
<input type="radio"/>	<input type="radio"/>	Grostick
<input type="radio"/>	<input type="radio"/>	Life upper cervical
<input type="radio"/>	<input type="radio"/>	Logan Basic
<input type="radio"/>	<input type="radio"/>	Meric
<input type="radio"/>	<input type="radio"/>	NIMMO/Tonus receptor
<input type="radio"/>	<input type="radio"/>	NUCCA
<input type="radio"/>	<input type="radio"/>	Palmer upper cervical/HIO
<input type="radio"/>	<input type="radio"/>	Pettibon
<input type="radio"/>	<input type="radio"/>	Pierce-Stillwagon
<input type="radio"/>	<input type="radio"/>	SOT
<input type="radio"/>	<input type="radio"/>	Thompson
<input type="radio"/>	<input type="radio"/>	Toftness
<input type="radio"/>	<input type="radio"/>	Other _____

Please indicate whether or not you have used the following non-adjustive supportive techniques in your practice during the past two years.

YES	NO	NON-ADJUSTIVE TECHNIQUE
<input type="radio"/>	<input type="radio"/>	Acupressure or meridian therapy
<input type="radio"/>	<input type="radio"/>	Acupuncture
<input type="radio"/>	<input type="radio"/>	Biofeedback
<input type="radio"/>	<input type="radio"/>	Bedrest
<input type="radio"/>	<input type="radio"/>	Bracing with lumbar support, cervical collar, etc.
<input type="radio"/>	<input type="radio"/>	Casting or athletic taping/strapping
<input type="radio"/>	<input type="radio"/>	Corrective or therapeutic exercise
<input type="radio"/>	<input type="radio"/>	Diathermy - shortwave or microwave
<input type="radio"/>	<input type="radio"/>	Direct current, electrodiagnosis or iontophoresis
<input type="radio"/>	<input type="radio"/>	Electrical stimulation - TENS, high-volt, low-volt, EMS
<input type="radio"/>	<input type="radio"/>	Foot orthotics or heel lifts
<input type="radio"/>	<input type="radio"/>	Homeopathic remedies
<input type="radio"/>	<input type="radio"/>	Hot pack/moist heat
<input type="radio"/>	<input type="radio"/>	Ice pack/cryotherapy
<input type="radio"/>	<input type="radio"/>	Infrared - baker, heat lamp or hot pad
<input type="radio"/>	<input type="radio"/>	Interferential current
<input type="radio"/>	<input type="radio"/>	Massage therapy
<input type="radio"/>	<input type="radio"/>	Nutritional counseling, therapy or supplements
<input type="radio"/>	<input type="radio"/>	Paraffin bath
<input type="radio"/>	<input type="radio"/>	Traction
<input type="radio"/>	<input type="radio"/>	Ultrasound
<input type="radio"/>	<input type="radio"/>	Ultraviolet therapy
<input type="radio"/>	<input type="radio"/>	Vibratory therapy
<input type="radio"/>	<input type="radio"/>	Whirlpool or hydrotherapy
<input type="radio"/>	<input type="radio"/>	Other _____

THANK YOU very much for your contribution to this important research study. If you wish to make any comments or suggestions, please use the space below.

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

Appendix H

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Appendix F

Listing of Survey Participants

The names of those job analysis survey participants who authorized their inclusion in this report appear below. A complete listing of participants is on file at NBCE headquarters.

ALBERTA

ALAN E ALTO D C
 THOMAS E AMAOLO D C
 ANDERS ANDERSON D C
 ROBERT S ANNIS D C
 RONALD L ARMSTRONG D C
 DANA K BALL D C
 JANET M BECKHUSON D C
 DENNIS G BECKLUND D C
 JOHN G BICKERT D C
 PERCY W BOYKO D C
 DONALD J BRADLEY D C
 KRISTINE A BRIGHT D C
 DAVID L BROSZ D C
 WILLIAM S BURNS D C
 KENNETH K BUTLER D C
 C DAN CAMPBELL D C
 PATRICIA CHAMBERS D C
 FREDERICK CHAN D C
 GLENN S CHIDLOW D C
 ALAN M CHONG D C
 JAMES R CHURCH D C
 DONALD S COOK D C
 THOMAS J COOPER D C
 ROBERT E CORBETT D C
 ANDRE L COURTEAU D C
 DARYL R CROXALL D C
 KEVIN K D'AMICO D C
 LESLIE J DAVIDSON D C
 ROBERT G DOBIE D C
 JOHN D EATON D C
 RICHARD W FARNALLS D C
 WILFRED B FOORD D C
 JUDY A FORRESTER D C
 AUBREY J FRIEDENBERG D C
 BRIAN A M GALAS D C
 TANIS GEHRKE D C
 RAY G GRAHAM D C
 COLLEEN M GREER D C
 BRIAN D GUSHATY D C
 DOUGLAS R HALL D C
 KEITH G HARPER D C
 GEORGE R HERMAN D C
 JOHN F HUNTER D C
 WALLACE A JANS D C
 HEINZ P JEPP D C
 LANDELIN J JOHNSON D C
 A CAMPBELL JONES D C
 ROGER G JONES D C
 RICHARD S KANE D C
 GREGORY N KAWCHUK D C
 JAN R KLESKO D C

THOMAS J KORSH D C
 IVAR J KRISTIANSON D C
 JOHN S KUCHERAN D C
 LARRY C LAPOINTE D C
 RONALD H LATCH D C
 STANLEY B C LEE D C
 RYAN A LEES D C
 GEORGE M LISCOMBE D C
 THOMAS J LISCOMBE D C
 JOHN H LOVE D C
 PHILIP E LYALL D C
 SEEM L MA D C
 JANET E MAJOR D C
 LOREN MATHES D C
 D COURT MCAULEY D C
 MARK MCCULLOCH D C
 RODERICK B MCDUGALL D C
 CAMERON J MCGINNIS D C
 KEVIN D MCKENZIE D C
 DWIGHT M MCLELLAND D C
 DANIEL MIGLIARESE D C
 J RICHARD MOZELL D C
 FREDERICK R MURRAY D C
 V BARRY NESBITT D C
 HUBERT NG D C
 L DREW OLIPHANT D C
 STUART G PATERSON D C
 BRUCE W PEDERSEN D C
 DAVID E PETERSON D C
 ROSS J PINDER D C
 C ALAN POYTRESS D C
 VIOLA F PRESTON D C
 TERENCE D PROCYSHEN D C
 ANNE E RAWLEK D C
 DOUGLAS O REID D C
 WAYNE A ROWE D C
 ELLIS E SABO D C
 EDWARD W SANDS D C
 MURRAY SCHNEIDER D C
 DEBORAH A SCHREINER D C
 KYU S SEUNG D C
 LESLIE D SHAW D C
 JAMES H F SIE D C

BRITISH COLUMBIA

BLAKE ALDERSON D C
 RICHARD G BARWELL D C
 DAVID J BELL D C
 CONDREN BERRY D C
 PATRICK G BICKERT D C
 DARYL BOURKE D C

MICHAEL BUNA D C
 ROY G CANIL D C
 JACK CHIN D C
 RICHARD G COCKWILL D C
 DENI CORTESE D C
 B THOMAS COUTTS D C
 BARRY J CURRAN D C
 STEVEN R DOW D C
 LINDA A DRAKE D C
 GARTH T EDGAR D C
 JAMES K ELDER D C
 DAN L ERICKSON D C
 RON P GIESBRECHT D C
 R DALE GREENWOOD D C
 PETER L GROVE D C
 DAVID W HANNAH D C
 RICHARD O HARGREAVES D C
 PAUL G HOLDSWORTH D C
 RICHARD D HUNTER D C
 SHIVRAJ S JOHAL D C
 RUSSELL M KANG D C
 BRAD KARSE D C
 GARY E KEMBLE D C
 KENNETH F KICIA D C
 LARRY G KOZUBACK D C
 RICHARD A KRISTIANSON D C
 J DEREK LAURILLARD D C
 BRIAN D LITTLEJOHN D C
 WA KIN LO D C
 ARTHUR A LOPES D C
 RICHARD LUTZ D C
 DAVID A MACINTOSH D C
 GORDON W MACLEOD D C
 KENNETH V MARSHALL D C
 CHRISTOPHER L MARTIN D C
 STEPHEN A MASKALL D C
 KARIN L MATTERN D C
 DOROTHEA MCCALLUM D C
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ERNIE VON SCHILLING D C
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GORDON F PARTRIDGE D C
GENE E R PLEWES D C
MIKE G W PLUESCHOW D C
CLARK PODAIMA D C
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PIERRE LEVESQUE D C
PETER G MAGEE D C
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J WAYNE REDSTONE D C
LANGIS ROBICHAUD D C

NEW FOUNDLAND

KENNETH BEATTY D C
MONTY E BURN D C
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LAURIE GOYECHÉ D C
SHARON G HYNES D C
STEPHEN H JOYCE D C
DOUGLAS V MALLETT D C
PAUL G WOOLFREY D C

NOVA SCOTIA

ROBERT O ANCTIL D C
GARY CERE D C
CHARLES DANIELS D C
DOUGLAS MACNEIL D C
MARY I PARKER D C
G ROBERT THARP D C

ONTARIO

PETER AMBOS D C
ELIZABETH S ANDERSON D C
RONALD J BATTE D C
DAVID F BERG D C
DONALD M BERRY D C
GARY BOVINE D C

JEREMY R BROWN D C
RAYMOND A BRUCE D C
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MICHAEL A CAUSYN D C
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WILLIAM R COLUMBUS D C
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DARRELL J DAILEY D C
LESLEY DOUGLAS D C
PETER FERA D C
JILL D GAMMIE D C
GARY T GOODYEAR D C
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JACOB SCHEER D C
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ROBERT D WILLSON D C
ROBERT M WINGFIELD D C

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QUEBEC

DICKIE ABBOTT D C
NORMAND ALGUIRE D C
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DONALD ZEMEN D C

Epilogue

It is common for an abundance of newly acquired information to produce a proportionate number of questions. Given this trend, the questions raised by the NBCE *Job Analysis of Chiropractic in Canada* data came as no surprise.

These questions include the obvious: “Who might use this new data, and how might it appropriately be applied?” Those closely connected with the study additionally asked such questions as, “Have we accomplished our objectives?” “What are the limitations of the data gathered?” and “Would we want to make any procedural modifications in similar studies conducted in the future?”

To a very large degree, the applications of the data will remain fluid, to be considered, weighed and imposed according to a broad set of needs found in disparate corners of society. Academicians may find the job analysis data useful for one purpose, while provincial licensing authorities may find it useful for another. Individual health care providers may benefit by comparing the data to their own habits and knowledge.

In exploring the possibilities of further data applicability, the following criteria should be acknowledged: 1) the elements which were measured, and 2) the methods by which those elements were rated. The job analysis sought to determine the conditions the chiropractor typically encounters, the treatment he/she is likely to administer or recommend, and the risk associated with rendering this treatment.

A job analysis is equipped to provide information about the conditions and activities licensed chiropractic practitioners should be best prepared to handle -- those they encounter most often, and those which are accompanied by the greatest risk. This information can be quite valuable. For example:

- Chiropractic colleges typically seek to teach and thoroughly test student proficiency in the activities chiropractors will be called upon to perform routinely, particularly those which are performed most frequently and those which carry a significant degree of risk.

- Licensing authorities typically endeavor to assess licensure candidates' knowledge and skills in areas that they as practitioners are likely to encounter, particularly those which carry a significant degree of risk.

As stated at the beginning of this report, the NBCE "sought to provide the health care field with the most credible, relevant, and accurate reference possible, one which documents chiropractic as it is defined by those who practice it as a full-time profession." Those who guided and conducted the job analysis project firmly believe this objective has been achieved.

It was not the NBCE's objective to define a chiropractic scope of practice; this is determined legislatively on a province-by-province basis. Nor was it the intention of the NBCE to establish guidelines for practice, to promote any particular philosophical doctrine, or to in any way infer judgments.

In evaluating the limitations of this study, several areas surfaced during the project. Some of these --such as the accuracy of licensee lists provided by the provinces, the recollections of the respondents who provided information, and the number of individuals (approximately 30%) who failed to respond to the survey -- were largely outside NBCE control.

In other areas, the NBCE proceeded on the basis of job analysis research and procedural precedent. Areas inevitably accompanied by the possibility of imprecision included: the survey text upon which the resulting data hinged; the supposition that all respondents would similarly interpret the survey's rating scales and terms; and the interpretation of the importance factor within the study.

A wealth of information beyond that published in this text still lies within the data amassed by the NBCE job analysis survey instrument. Time, staff, and funding limitations dictated that this publication report the project findings in an abbreviated or summarized version.

The NBCE conducted similar job analyses in the United States, Australia, and New Zealand, as requested by the licensing agencies in those countries. The United States job analysis report is currently available by contacting the NBCE. Upon completion of statistical tabulation and analyses, a United States state-by-state data analysis, and the Australian and New Zealand reports will also be published by the NBCE.

Appendix G

Glossary of Terms or References

activator technique

A system of adjustment using a hand held, manually assisted, spring activated device which delivers a controlled thrust.

acupressure/Meridian therapy

The practice of applying digital pressure to stimulate certain sites on the skin to affect distant functional mechanisms of the body. This therapy is based on the belief that these sites are organized along meridians which carry the life force that innervates the body.

acupuncture

The practice of insertion of needles into specific exterior body locations to relieve pain, to induce surgical anesthesia, and for therapeutic purposes.

adjustment

A forceful thrust which is meticulously controlled as to its direction, amount of force employed, and the quickness with which it is applied.

adrenal disorder

A dysfunction of the adrenal gland which is located near the kidney.

AMA

American Medical Association

amyotrophic lateral sclerosis (ALS), multiple sclerosis or Parkinson's disease

Nervous system disorders characterized by demyelination and degeneration of neural tissue.

angina pectoris

A condition marked by recurrent pain in the chest or left arm, caused by an inadequate blood supply to the heart muscle.

APA

American Psychological Association

applied kinesiology

The dynamics of smooth and striated muscle and the impact of these tissues on body structure, healing processes, and disease processes. In particular, applied kinesiology focuses on the identification and correction of proprioceptive dysfunction of ligaments and of the muscle spindle cells and golgi tendons. In addition, applied kinesiology is concerned with the vascular, lymphatic, and other systems supporting proper muscle dynamics.

arterial aneurysm

An enlargement of one aspect of an artery caused by weakness in the arterial wall.

aseptic necrosis

A condition which is not a specific disease entity but caused by disruption in normal circulation to the involved bone. It can result in pain, loss of bone density, bone collapse or fracture. Some possible areas of involvement include the hip, shoulder, elbow, wrist, knee, or heel.

associateship

A practice arrangement between two or more chiropractors. Commonly entered into by some recent chiropractic college graduates in order to gain clinical practice experience.

asthma

A condition marked by recurrent attacks of wheezing due to spasmodic contraction of the bronchi in the lungs.

atelectasis or pneumothorax

Collapse of a part or the whole of the lungs due to absence of gas in the lung cavity or the presence of

air or gas in the pleural cavity located between the lung and chest wall.

Barge technique

A system of x-ray analysis, palpation, and adjusting procedures directed at correcting vertebral misalignments involving a shifting of the nucleus pulposus.

B.E.S.T. Technique

Bio-Energetic Synchronization Technique.

biofeedback

A training technique designed to enable an individual to gain some element of control over autonomic body functions. The technique is based on the learning principle that a desired response is learned when received information (feedback) indicates that a specific thought complex or action has produced the desired response.

bursitis or synovitis

Inflammation of the bursa or synovial membrane. Bursitis is occasionally accompanied by a calcific deposit in the underlying supraspinatus tendon.

carpal or tarsal tunnel syndrome

Peripheral nerve compression syndromes; carpal tunnel syndrome affects the median nerve in the carpal tunnel of the wrists; and tarsal tunnel syndrome affects the posterior tibial nerve or plantar nerves in the tarsal tunnel of the foot.

CCA

Canadian Chiropractic Association

CCE

Council on Chiropractic Education

CCEB

Canadian Chiropractic Examining Board

CCR

Consortium for Chiropractic Research

cervical spine

The first seven vertebra, the first of which articu-

lates with the base of the cranium, and the seventh articulates with the uppermost vertebra of the thorax.

certification

A voluntary program that typically recognizes individuals that have the education or training beyond the basic level of competency necessary to practice in a profession.

chiropractic

Chiropractic is a branch of the healing arts which is concerned with human health and disease processes. Doctors of chiropractic are physicians who consider man as an integrated being, but give special attention to spinal mechanics, musculoskeletal, neurological, vascular, nutritional, and environmental relationships.

chlamydia

A sexually transmitted disease caused by the bacteria of the family chlamydiaceae.

CMCC

Canadian Memorial Chiropractic College

colitis or diverticulitis

Inflammation of the colon or the diverticulum.

concurrent condition

A bodily condition which may include illness, malfunction, or disease for which the patient is not reporting to the chiropractor for care. The condition is called "concurrent" because it is present with another condition for which the person is seeking care.

congenital/developmental anomaly

An abnormality that is present at birth or appears in later development.

content-related evidence of validity

Evidence that shows the extent to which the content domain of a test is appropriate relative to its intended purpose. Such evidence is used to establish that the test includes a representative or critical sample of the relevant content domain and that it excludes content outside that domain.

COPD

Chronic Obstructive Pulmonary Disease. Generalized airway obstruction, particularly of small airways, associated with combinations of chronic bronchitis, asthma, and emphysema.

correlation coefficient

An index which can range from -1.00 through 0 to +1.00, indicating the extent that two variables relate.

Cox/Flexion-Distractive technique

A system of procedures using distraction, or doctor-controlled tractive forces applied to a specific level of the spine with or without articular facet adjustment.

cranial nerve disorder

A condition affecting one or more of the twelve pairs of cranial nerves.

cranial technique

A technique to correct immobilities and asymmetries of the cranial bones.

cryotherapy

The use of cold as a treatment modality.

CT scan

Computed tomograms combine the use of computers with advances in X-ray technology to produce sectional images in almost any anatomical plane of the body.

D.C.

Doctor of Chiropractic

Delphi study

A method of study originally developed by the RAND Corporation to arrive at reliable predictions about the future of technology. Widely used when convergence of opinion through group consensus is needed.

dermatitis

Inflammation of the skin.

diathermy

Therapeutic use of high-frequency electric current to produce a thermal effect (heat) in the deep tissues of the body.

direct current

An electrical current which flows in one direction only. When used medically it is called the galvanic current; this current has distinct and marked polarity and marked secondary effects. These secondary effects include thermal changes and pain control. Galvanic stimulation may also be used to move fluids, exercise muscles, and relax spasticity.

diversified technique

Full spine chiropractic adjustive technique designed to correct vertebral malpositions and fixations in the most efficacious manner possible with respect to the clinical circumstances. In general, each college teaches its own diversified technique.

electrical stimulation

The use of an electrical current in the 1-4000Hz range to elicit a desired physiologic response.

emphysema

A pathological accumulation of air in tissues or organs; applied especially to swelling of the alveoli or of the tissue connecting the alveoli in the lungs, accompanied by tissue atrophy and breathing impairment.

endocrine or metabolic bone disorder

Condition of the endocrine or metabolic system that produces a pathological effect on bone tissue.

epiphysitis

Inflammation of an epiphysis or of the cartilage that separates it from the main bone.

extra-spinal joint conditions

Conditions involving the joints not of the spinal column, ie. ankle, knee, shoulder, fingers, etc.

extremity subluxation/joint dysfunction

Refers to an incomplete or partial dislocation in

which the articular surfaces have not lost contact. A certain degree of joint fixation exists which prevents normal joint motion and a return of the joint to its normal juxtaposition. Extremity subluxation may involve static properties (malposition) and/or dynamic properties (joint fixation) both of which result in joint dysfunction.

FCER

Foundation for Chiropractic Education and Research

FCLB

Federation of Chiropractic Licensing Boards

field internship

Practicing under the license and/or direct supervision of one or more physicians in an existing fee-for-service practice.

field test

A trial test of the survey of chiropractic given to 30 practitioners. Used to identify and modify any problems participants may have had in understanding and completing the survey.

finite population correction term

A factor included in the standard error formula which reduces the standard error as the proportion of the population sampled increases.

frequency factor

The estimated number of times the practitioner completing the survey performed the specified activity.

full spine

A chiropractic treatment approach which assesses all spinal levels as compared to approaches which focus on selected areas of the spine.

Gonstead technique

A "full spine" chiropractic method developed by Dr. Clarence Gonstead which utilizes radiographic analysis, instrumentation, and palpation to locate and specifically determine the malposition of subluxated vertebrae, which are then corrected manually.

Grostick technique

An upper cervical technique developed by Dr. John D. Grostick, Sr. that utilizes a specific measured analysis of the cervical spine together with manual adjusting to re-establish biomechanical balance of the spine.

hiatus or inguinal hernia

The protrusion of a loop or a part of an organ or tissue through an abnormal opening.

HMO

Health Maintenance Organizations

homeopathic remedies

Substances which are capable of producing in healthy persons symptoms like those of the disease being treated. Extremely small dosages are used to stimulate the body's natural defenses against the disease.

hyperlordosis of cervical or lumbar spine

Increased anterior curvature of cervical or lumbar spine.

iatrogenic

A result of treatment by a doctor

ICA

International Chiropractic Association

impairment evaluation

An evaluation to determine if there is an impairment of a body part.

immunological disorder

Disorder of the immune system.

importance

In the analysis of the survey, Frequency and Risk were multiplied together and the resultant product was labeled "importance".

interferential current

A physiotherapy modality which consists of two medium frequency currents that cross deep within a body part, and in so doing, trigger the formation of a third current that radiates from the inside to the

outside of the target tissue, providing therapeutic treatment to the tissues.

infrared baker lamp

A source of superficial heat utilizing radiation with a wave length between 7,700 and 14,000 Angstroms. Units are generally classified as either luminous or nonluminous.

integument

The skin as the covering of the body. Also known as integumentum.

interim survey form

The survey form administered to a small sampling of chiropractors and used to refine the form used for the study called "Survey of Chiropractic Practice".

intervertebral disc syndrome

A conglomeration of signs and symptoms usually consisting of episodic low back pain with possible symptoms of unilateral sciatic pain, progressive buttock, thigh, calf, and heel pain. There may also be a "C" scoliosis away from the side of pain, splinting, and a flattening of the lumbar spine. Weakness, numbness, and decreased reflexes may be noted in the involved extremity. This is a clinical diagnosis of disc herniation not verified by surgical intervention.

job analysis

Any of several methods of identifying the tasks performed on a job or the knowledge, skills and abilities required to perform that job.

job inventory

A list of tasks and functions performed on a job. The basis for forming a job analysis.

kyphosis of thoracic spine

Increased posterior convexity of the thoracic spine.

LBP

Low back pain

licensure

The process of obtaining a license which is re-

quired by law in order to enter a profession. It is the most restrictive form of occupational regulation because it prohibits anyone from engaging in the activities covered by the scope of practice without permission from a regulatory agency.

Life upper cervical technique

An upper cervical technique that utilizes a specific measured analysis of the cervical spine and a mechanical adjusting instrument to re-establish biomechanical balance of the spine.

Logan basic

A full spine technique that utilizes a system of body mechanics and adjusting procedures developed by Dr. Hugh B. Logan.

lumbar spine

The portion of the spine between the thorax and pelvis; ie. low back vertebrae.

manipulation

The therapeutic application of manual force. Spinal manipulative therapy broadly defined includes all procedures in which the hands are used to mobilize, adjust, manipulate, apply traction, massage, stimulate, or otherwise influence the spine and paraspinal tissues with the aim of influencing the patient's health.

Maritime

Refers to the Canadian provinces of New Brunswick, Newfoundland, Nova Scotia, and Prince Edward Island collectively.

mean

Arithmetic average.

Meric technique

A system of analysis and adjusting in which the body is divided into zones.

methodology

The design of a study or procedures utilized in a study.

MRI

Magnetic Resonance Imaging. A diagnostic imaging modality that uses a magnet, radio frequency transmission and reception, and has the ability to discriminate the location of a signal arising from the body of a patient in a three-dimensional coordinate system.

muscular atrophy

Wasting away of muscle tissue.

muscular dystrophy

Degenerative genetic disease characterized by weakness and atrophy of muscles.

muscular strain/tear

Injury caused by an over-exertion or over-stretching of some part of the musculature and ligamentous structures.

National Advisory Committee

Committee composed of representatives from state examining boards, chiropractic educators, and private practitioners to offer guidance to the job analysis project.

National Board of Chiropractic Examiners (NBCE)

National testing agency for the chiropractic profession.

NBCE Job Analysis Steering Committee

Committee composed of representatives of the Board of Directors of the National Board of Chiropractic Examiners, given the responsibility of guiding the job analysis project.

neuralgia

Pain which extends along the course of one or more nerves.

neurological exam

Examination of the nervous system.

neuromusculoskeletal examination (NMS)

A series of specific tests performed to determine the structural integrity and functional capacity of the bones, muscles, and nerves of the body.

NIMMO/Tonus receptor technique

System of deep connective tissue and fascial manipulation developed by Dr. Raymond Nimmo.

NUCCA technique

An upper cervical technique developed and endorsed by the National Upper Cervical Chiroprac-

tic Association; the objective of this technique is to balance the pelvis and spinal column to the body's vertical axis.

objective structured clinical examination

An examination characterized by the use of standardized patients who are extensively trained to reliably portray a health condition.

orthopedic exam

Examination of structures involved in locomotion including joints, muscles, ligaments and connective tissue.

orthotics

An orthopedic appliance or apparatus used to support, align, prevent, or correct deformities or to improve the function of parts of the body.

osteoarthritis/degenerative joint disease

A disease occurring primarily in older people, characterized by degeneration of the cartilage and hypertrophy of bone. Generally accompanied by pain and stiffness.

osteopath

A healthcare practitioner whose treatment is based on the theory that the body is capable of making its own remedies against disease and other toxic conditions. Osteopaths utilize generally accepted physical, medicinal, and surgical methods of diagnosis and therapy, while placing emphasis on the importance of normal body mechanics and manipulative methods of detecting and correcting faulty structure.

osteoporosis/osteomalacia

Conditions marked by softening or degenerating of the bone mass sometimes accompanied by pain, tenderness, muscular weakness, leading to bone fractures with minimal trauma.

Palmer upper cervical/HIO technique

A technique that utilizes specific x-ray analysis and adjusting procedures developed by Dr. B.J. Palmer for correction of subluxations in upper cervical vertebrae only.

paraffin bath

The therapeutic application of melted paraffin wax that has been diluted with mineral oil in a predetermined ratio (eg. 4:1). A form of superficial heat transferred by conduction.

pathology

The structural and functional manifestations of disease.

PEI

Prince Edward Island

peripheral neuritis

Inflammation, pain, and tenderness of a peripheral nerve.

Pettibon technique

An upper cervical technique that is based on spinal biomechanics and engineering physics theories developed by Dr. Burl Pettibon. The technique utilizes specific x-ray analysis and manual adjusting techniques as well as a mechanical adjusting instrument.

Pierce-Stillwagon technique

A full spine technique that utilizes specific x-ray analysis procedures, instrumentation procedures and adjusting procedures developed by Dr. Walter Pierce and Dr. Glenn Stillwagon.

pigment disorders

Abnormal skin coloring.

pilot test

A preliminary survey conducted by the NBCE to help determine the appropriate format and content of the Survey of Chiropractic Practice.

pituitary disorder

A disorder of the pituitary gland most commonly originating in the anterior lobe of the pituitary gland or in the neurohypophysis.

polycythemia

An increase above normal in the number of red cells in the blood.

practical exam

An exam that requires licensure candidates to perform tasks or procedures which might commonly be required in practice.

Practice Model Log

An instrument developed for self-administration by practicing chiropractors. Doctors provided information on each of 10 consecutive patient visits. Data from the survey were used as an additional source of information about the profession as well as a basis for developing the Interim Survey Form.

preceptorship

Undergraduate and graduate programs in which the chiropractic college may place a student chiropractor or a recent graduate in a licensed chiropractor's office to learn clinical procedures and patient management methods under guidelines established by the sponsoring chiropractic college.

presenting condition

One or more symptoms or other concerns for which the patient is seeking care or advice.

proportional sampling

A form of sampling in which the number selected is a percent of the population.

psoriasis

A condition which produces dry, scaling patches of skin sometimes associated with a distinctive arthritis.

radiculitis or radiculopathy

Inflammation or disease of the root of the spinal nerve.

RAND

A nonprofit institution that seeks to improve public policy through research and analysis.

rating scales

Rating scales attempt to obtain appraisals on a common set of attributes for all raters and ratees and to have these expressed on common quantitative and qualitative scales.

reliability

The degree to which test scores are free of errors of measurement.

return rate

Percent of practitioners selected to complete the Survey of Chiropractic Practice who either returned the survey form or who were accounted for in another manner.

research protocols

Procedures to be followed in a research study.

risk factor

The degree of risk to public health or patient safety perceived by survey respondents relative to omission or poor performance of 45 activities listed in the Survey of Chiropractic Practice.

roentgenology

The branch of radiology that deals with the diagnostic and therapeutic use of roentgen rays.

sampling design

The specified method by which individuals are selected to be surveyed.

SMT

Spinal manipulative treatment

S.O.A.P.

Subjective, Objective, Assessment Plan/Procedure. A method of recording information in a patient's record based on a problem-oriented clinical approach.

S.O.T. technique

A system of soft tissue, reflex, diagnostic and adjusting techniques developed by Dr. M.D. DeJarnette; this technique emphasizes the close physiological and biomechanical relationships between the sacrum and the occiput.

SPEC

Special Purposes Examination for Chiropractic. The SPEC is designed to assess licensed or previ-

ously licensed chiropractic practitioners in areas reflecting clinical conditions encountered in general practice. Available beginning March 1993.

spinal adjustment

The art of replacement to their normal position of subluxated vertebrae for the purpose of relieving impingement of the structures transmitted by the intervertebral foramen, thus restoring to the parts supplied by these nerves their normal innervation. This replacement of subluxated vertebrae usually is accomplished by the application of a definite thrust by the hands of the chiropractor in contact with the subluxated vertebra.

spinal canal stenosis

A significant reduction in diameter of the spinal canal which may result in symptoms of spinal cord or nerve root compression.

standard deviation

The standard deviation is a measure of variability, spread or dispersion of a set of scores around their mean value.

standard error

This is an abbreviation for standard error or estimate, which indicates the accuracy of a score. The standard error of estimate is the standard deviation divided by the square root of the sample size, and corrected for sampling from a finite population.

subluxation

A subluxation is the alteration of the normal dynamics, anatomical, or physiological relationship of contiguous articular structures.

survey instrument

Refers to the questionnaire developed by the NBCE for the Survey of Chiropractic Practice job analysis.

systemic/rheumatoid arthritis or gout

Inflammation of the joints which tends to be chronic and progressive, leading to deformities and disability.

“t-test”

A statistical procedure used to determine whether two means (arithmetic averages) differ significantly from each other.

tendinitis/tenosynovitis

Inflammation of a tendon or inflammation of a tendon and its enveloping sheath.

Thompson technique

A system of analytical and adjusting techniques developed by Dr. J. Clay Thompson that emphasizes the use of a Thompson terminal point adjusting table.

thoracic outlet syndrome

Compression of the brachial plexus or subclavian artery by attached muscles in the region of the first rib and clavicle.

thymus or pineal disorder

The thymus gland is associated with cell-mediated immunity. Pineal gland dysfunction may be responsible for some cases of hypo or hypergonadism but speculation as to the gland's actual function still exists.

thyroid or parathyroid disorder

Dysfunction of the thyroid or parathyroid glands, producing abnormally high or low concentrations of the circulating hormone levels which control the body's metabolic functions.

TMJ syndrome

Those various symptoms of discomfort, pain, or pathosis stated to be caused by loss of vertical dimension, lack of posterior occlusion, or other malocclusion, trismus, muscle tremor, arthritis, or direct trauma to the temporomandibular joint.

Toftness technique

A system of analysis and adjustment of the spine developed by Dr. I.M. Toftness.

traction

Therapeutic technique utilizing axial tension applied to a body segment.

ulcer of stomach, intestine or colon

A lesion on the inner mucous surface of the digestive tract caused by superficial loss of tissue, usually with inflammation.

ultrasound

Therapeutic technique that utilizes high frequency sound waves to produce micromassage and deep heating effects in a body segment.

ultraviolet therapy

Modality that produces radiation with strong actinic properties and is used to produce photochemical effects.

upper cervical vertebrae

The most superiorly located bones of the spine, usually referring to the first and second cervical vertebrae.

validity

The degree to which inferences from test scores are appropriate, meaningful or useful.

vertebral facet syndrome

A condition in which symptoms arise from inflamed, damaged, or dysfunctional vertebral facets; often accompanies increased spinal lordosis and may be secondary to intervertebral disc failure or degeneration.

vertebrobasilar arterial insufficiency

Lack of adequate blood flow through the vertebral arteries or their union which forms the basilar artery, ultimately resulting in cerebral ischemia or decreased blood flow to the brain.

vibratory therapy

The use of fingers or a mechanical device to produce oscillations in body tissues or to stimulate proprioceptive nerve functions.

weighting factor

A number used when aggregating data from individuals or subgroups such that the aggregated sample accurately represents the population.

whirlpool/hydrotherapy

Modality that may utilize cold or heated water to produce various mechanical and/or physiological effects on the body or a portion of the body.

Appendix I

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