BOARD of CHIROPRACTIC EXAMINERS
STATE OF CALIFORNIA

State of California
Edmund G. Brown Jr., Governor

NOTICE OF TELECONFERENCE
LICENSING, CONTINUING EDUCATION & PUBLIC RELATIONS COMMITTEE MEETING

May 14, 2015
1:00 p.m.

One or more Committee Members will participate in this meeting at the teleconference sites listed below. Each teleconference location is accessible to the public and the public will be given an opportunity to address the Licensing, Continuing Education and Public Relations Committee at each teleconference location. The public teleconference sites for this meeting are as follows:

Teleconference Meeting Locations:

Corey Lichtman, DC
538 Stevens Ave.
Solana Beach, CA 92075
(858) 481-1889

Heather Dehn, DC
John Roza, Jr., DC
901 P St, #142A
Sacramento, CA 95814
(916) 263-5355

AGENDA

1. **Call to Order**

2. **Approval of Minutes**
   March 19, 2015

3. **Review and Discussion on Possible Revisions to the Continuing Education Regulations for Approving Continuing Education Providers.**

4. **Review and Discussion of Proposed Language to add CPR as a Mandatory Continuing Education Course. (CCR § 361)**

5. **Review and Discussion Regarding Lapel Pins for BCE Board Members.**

6. **Update Regarding Outreach Publications**
   - About the Board
   - A Consumer's Guide to Chiropractic

7. **Public Comment**
   Note: The Committee may not discuss or take action on any matter raised during this public comment section that is not included on this agenda, except to decide whether to place the matter on the agenda of a future meeting. [Government Code Sections 11125, 11125.7(a).] Public comment is encouraged; however, if time constraints mandate, comments may be limited at the discretion of the Chair.

8. **Future Agenda Items**

9. **Adjournment**

LICENSING, CONTINUING EDUCATION & PUBLIC RELATIONS COMMITTEE

Heather Dehn, D.C., Chair
John Roza Jr., D.C.
Corey Lichtman, D.C.

Meetings of the Board of Chiropractic Examiners' Committee are open to the public except when specifically noticed otherwise in accordance with the Open Meeting Act. Public comments will be taken on agenda items at the time the specific item is raised. The Board's Committee may take action on any item listed on the agenda, unless listed as informational only. All times are approximate and subject to change. Agenda items may be taken out of order to accommodate speakers and to maintain a quorum. The meeting may be cancelled without notice. For verification of the meeting, call (916) 263-5355 or access the Board's Web Site at www.chiro.ca.gov.

The meeting facilities are accessible to individuals with physical disabilities. A person who needs a disability-related accommodation or modification in order to participate in the meeting may make a request by contacting Marlene Valencia at (916) 263-5355 ext. 5363 or e-mail marlene.valencia@chiro.ca.gov or send a written request to the Board of Chiropractic Examiners, 901 P Street, Suite 142A, Sacramento, CA 95814. Providing your request at least five (5) business days before the meeting will help to ensure availability of the requested accommodation.

Board of Chiropractic Examiners
TELECONFERENCE MEETING MINUTES
Licensing, Continuing Education & Public Relations Committee
March 19, 2015
901 P Street, Suite 142A
Sacramento, CA 95814

Teleconference Locations with Public Access

Corey Lichtman, DC
538 Stevens Ave
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Committee Members Present
Heather Dehn, D.C., Chair
John Roza Jr., D.C.
Corey Lichtman, D.C.

Staff Present
Robert Puleo, Executive Officer
Dixie Van Allen, Policy Analyst
Brianna Lauziere, Staff Services Analyst

Call to Order
Dr. Dehn called the meeting to order at 1:52 P.M.

Roll Call
Dr. Roza called roll. All Board members were present.

Approval of Minutes

MOTION: DR. DEHN MOVED TO APPROVE THE MINUTES OF THE FEBRUARY 26, 2015 LICENSING, CONTINUING EDUCATION & PUBLIC RELATIONS COMMITTEE WITH AMENDENTS TO CHANGE THE SPELLING ON PAGE 3, PARAGRAPH 12, LINE 2 REPLACE "CREATING" WITH "CONDUCTING", AND LINE 3 REPLACE "AFTER" WITH "BEFORE".
SECOND: DR. ROZA SECONDED THE MOTION
VOTE: 3-0
MOTION CARRIED

Review and Discussion on Possible Revisions to the Continuing Education Regulations for Approving Continuing Education Providers and/or Recognizing Accrediting Agencies.

Dr. Dehn reviewed the material in the packet and asked the committee for comments.

In reviewing the ACCME standards, Dr. Dehn asked if they would assess the providers or medical organizations. Dr. Dehn does not want to turn over our CE providers to the medical organization.

The committee agreed the language in ACCME standards would be a great example for possible regulation changes. Dr. Dehn stated the ACCME and PACE information can help us figure out our new guidelines.

Dr. Dehn got feedback from Dr. Marcus Strutz, a CE provider for Back to Chiropractic who suggested providers go through an apprenticeship with the Chiropractic schools or associations to gain professional experience. This would permit the provider to work under an instructor for a certain amount of time to become proficient enough to run a successful CE course.

Jacob Coverstone with Life Chiropractic College West mentioned the California standard used to require a 5-year instructor experience. In order to meet the standards of the Board we must oversee the quality. When working on the language for the new guidelines, he encourages the Board to state that these agencies have the ability to approve CE providers versus the schools and associations acting as approvers.

Dr. Dehn wants the Board to continue to approve the CE courses. CE provider applicants will also be held to the Board standards instead of the standards of the schools and associations.

Dr. Dehn stated the schools and associations are CE providers. Applicants have the choice to go to the schools, associations or private accrediting agencies. One of those three entities will submit provider approval to the Board.

Dr. Dehn would like to consider the idea of having a CE provider apprenticeship because it creates a seasoned instructor.

There was a discussion regarding whether measuring the Board's CE provider standards by creating a survey for the attendees could help measure the effectiveness of the CE provider. The survey could have questions about the course, what they learned, and what handouts were provided.

Mr. Coverstone stated that the CE providers could issue a survey and then submit the results to the Board for review.

Dr. Dehn explained the burden the Board would have reviewing CE course surveys.

Mr. Coverstone suggested maintaining a record of the survey results for Board audits to avoid the work overload for staff.

Dr. Dehn clarified that the survey would act as an "outcome report".

Mr. Coverstone explained the survey would hold the CE providers accountable. The attendees could explain what they learn in the course.

Dr. Dehn suggested that the attendees be required to complete a course survey in order to get their certificate of completion.

Mr. Coverstone talked about measuring the effectiveness of a CE course by using a "Likert scale". The Likert scale contains questions on a 1 to 5 scale from strongly agree to strongly disagree. Questions that would be important to ask are, "Are you competent to perform what you learned?" By using subjective evaluation CE providers can see what changes need to be made to the course to become more effective.

Mr. Puleo explained how Dixie Van Allen, our policy analyst needs to add justification for all regulation changes the committee wants to make.

Mr. Coverstone stated the justification for having a course evaluation can easily be explained through public safety and quality of content. It is necessary to have each course evaluated for effectiveness and impact on licensees.

Mrs. Van Allen asked Mr. Coverstone if ACCME accreditation could provide similar questions for our surveys that have been recognized to measure what the Board is looking for.

There was a discussion about prescriptive standards versus performance standards. Mrs. Van Allen explained a scenario for prescriptive standards where an organization was told to inform the public of new information using a specific font, text size and color. Performance standards would allow the organization to distribute the information it in any format they choose.

Dr. Dehn summarized the options the committee has discussed for approving CE providers. First, option (a): make no changes to CE provider process but change the regulations to have the authority to observe and audit CE courses. Option (b): change regulations and require CE provider applicants to go to the schools and associations for accreditation. And option (c): include accreditation from schools, associations and adds an apprenticeship where CE provider applicants can work under a Board approved provider for a certain amount of time for accreditation.

Dr. Lichtman commented on option (c) using an apprenticeship program will allow CE providers to learn how to become an educator.

Dr. Dehn clarified that CE providers will still submit course material to the Board for approval.

Mrs. Van Allen asked if the CE providers that become accredited by going through an apprenticeship could also serve as an accrediting CE provider for incoming applications.

Mr. Puleo suggested that independent providers could serve as sponsors for new providers after they have fulfilled 5 years of experience as an independent provider.

Dr. Dehn would like to continue discussions about this subject.

Mr. Coverstone suggested adding a re-approval process to the regulations. For example, after 5 years, the CE provider must be audited and in good standing to proceed as an independent CE provider with no complaints and Board approval.

Mr. Puleo talked about adding new titles and fees to the regulations for different levels of providers (CE instructor, Apprentice, Independent CE provider, Accredited CE provider).

Dr. Dehn announced that the committee is in favor of option (c), creating an apprenticeship and would like to move forward on creating new language for the regulations.

Mrs. Van Allen discussed areas of regulations that we will have to change, such as the maximum amount of CE hours that can be completed through outside agencies.

Dr. Dehn states right now the Board does not have the authority to audit the quality of a course. We would like to know how long the course lasted, what materials were provided, was there a check-in sheet, etc.

Mr. Coverstone recommended that the Board regulate CE providers to evaluate their courses to the Boards standards. The next step would be to create a structure for providers to follow.

Dr. Dehn would like for the committee to come up with ideas of what they want to see added or changed in the continuing education regulations.

Review and Discussion Regarding the Possibility of Requiring Licensees to Complete a Mandatory Continuing Education Course in Cardio Pulmonary Resuscitation (CPR) as Part of their Licensure Renewal Requirements.
Mrs. Van Allen informed the committee that the CPR requirement was repealed by the Board in 2007.

Currently most California healthcare boards do not require their licensees to take a CPR course or be CPR certified because it is already required by their employer.

Dr. Dehn believes chiropractors should be CPR certified because the majority work as sole proprietors and they should know the proper procedures in case of an emergency.

Dr. Lichtman agrees we should bring back the CPR requirement for public safety reasons.

Review and Discussion Regarding Proposed Outreach Publications
The Licensing/Continuing Education/Public Relations committee reviewed the corrections made to the publications from the last meeting.

The committee made changes to paragraphs in "A Consumer's Guide to Chiropractic Care".

Dr. Dehn requested to have a mockup of the two publications to share with the Board members at the upcoming Board meeting in April.

Public Comment
No public comment.

Future Agenda Items
Dr. Dehn would like to continue the discussion about possible revisions to the continuing education regulations to establish guidelines for auditing continuing education courses, approving continuing education providers and begin to review the current regulations at the next committee meeting.

Adjournment
Dr. Dehn adjourned the meeting at 4:00 P.M.

(5) National Board status means attainment of passing scores on the National Board Parts I, II, III, IV, and Physiotherapy examinations.

(6) The California Chiropractic Board examination means the examination developed by the Board of Chiropractic Examiners or an agency designated by the board. This California Chiropractic Board examination shall cover California laws and regulations governing the practice of chiropractic, and/or other subjects as taught in chiropractic schools or colleges, and must be taken after the candidate has graduated from chiropractic college.

§354. Successful Examination.

Notwithstanding Section 312, applicants who are notified in writing by the Board of the successful completion of the Board examination, may immediately commence the practice of chiropractic in California pending the receipt of their certificate.

Article 6. Continuing Education

§360. Continuing Education Fees.

The following represents fees for continuing education:

(a) Continuing Education Provider Application Fee: $75

(b) Biennial Continuing Education Provider Renewal Fee: $50

(c) Continuing Education Course Application Fee: $50 per course. A course is defined in Section 363.

§361. Continuing Education Requirements.

(a) For purposes of this section, "implementation date" means two years following June 8, 2011.

(b) For license renewals that expire on or after the implementation date, the number of required hours of continuing education courses shall be twenty-four (24). For license renewals that expire prior to the implementation date, the number of required hours of continuing education courses shall be twelve (12).

(c) For license renewals that expire on or after the implementation date, a maximum of twelve (12) continuing education hours may be completed through distance learning as defined in Section 363.1. For license renewals that expire prior to the implementation date, a maximum of six (6) continuing education hours may be completed through distance learning as defined in Section 363.1.

(d) Any continuing education hours accumulated before June 8, 2011 that meet the requirements in effect on the date the hours were accumulated, will be accepted by the board for license renewals.

(e) On or after the implementation date, licensees shall complete a minimum of two (2) hours in subdivision (g)(11) - Ethics and Law, a minimum of four (4) hours in any one of, or a

combination of, the subject areas specified in subdivision (g)(3) - History Taking and Physical Examination Procedures, subdivision (g)(5) - Chiropractic Adjustive Techniques or Chiropractic Manipulation Techniques, or subdivision (g)(10) - Proper and Ethical Billing and Coding.

(f) With the exception of the mandatory hours referenced in subdivision (e), the remaining eighteen (18) hours of additional continuing education requirements may be met by taking courses in any of the subject areas listed in subdivision (g) or courses taken pursuant to subdivision (h). The eighteen (18) hours may include any combination of continuing education courses in subject areas specified in either subdivision (g) or approved by agencies specified in subdivision (h). By way of example, a licensee may take eight (8) hours of continuing education courses in subject areas listed in subdivision (g), that are approved by the board, and ten (10) hours of continuing education courses that are approved by the California Department of Industrial Relations, Division of Workers Compensation pursuant to subparagraph (1) of subdivision (h).

(g) Courses approved by the board shall be limited to the following subject areas:

1. Philosophy of chiropractic, including the historical development of chiropractic as an art and science and health care approach; the vertebral subluxation complex and somato-visceral reflexes including their relationships between disease and health; and other chiropractic theory and philosophy.

2. Instruction in basic sciences of anatomy, histology, neurology, physiology, nutrition, pathology, biochemistry or toxicology.

3. Instruction in various basic to comprehensive history taking and physical examination procedures, including but not limited to orthopedic, neurological and general diagnosis related to evaluation of the neuro-musculoskeletal systems, and includes general diagnosis and differential diagnosis of all conditions that affect the human body.

4. Diagnostic testing procedures, interpretation and technologies that aid in differential diagnosis of all conditions that affect the human body.

5. Chiropractic adjustive techniques or chiropractic manipulation techniques.

6. Pain management theory, including, but not limited to, current trends in treatment and instruction in the physiology and anatomy of acute, sub-acute and chronic pain.

7. Physiotherapy.

8. Instruction in Manipulation Under Anesthesia including the safe handling of patients under anesthesia.

9. Instruction in the aspects of special population care, including, but not limited to, geriatric, pediatric, and athletic care as related to the practice of chiropractic.

10. Instruction in proper and ethical billing and coding, including accurate and effective record keeping and documentation of evaluation, treatment and progress of a patient. This is not to include practice building or patient recruitment/retention or business techniques or principles that teach concepts to increase patient visits or patient fees per case.

11. Ethics and law: including but not limited to: truth in advertising; professional boundaries; mandatory reporting requirements for child abuse/neglect, elder abuse/neglect; spousal or cohabitant abuse/neglect; sexual boundaries between patient and doctors; review of the specific laws, rules and regulations related to the practice of chiropractic in the State of California.

12. Adverse event avoidance, including reduction of potential malpractice issues.

13. Pharmacology, including side effects, drug interactions and the pharmodynamics of various commonly prescribed and over-the-counter drugs; drug reactions and interactions with herbs, vitamins and nutritional supplements; blood and urinalysis testing used in the diagnosis and detection of disease, including use of and interpretation of drug testing strips or kits utilizing urinalysis, saliva, hair and nail clippings.

14. A licensee may earn up to a maximum of two (2) hours of continuing education credit in cardiopulmonary resuscitation, basic life support or use of an automated external defibrillator.

15. Board Meeting: A licensee may earn a maximum of four (4) hours of continuing education credit per renewal period for attending a full board meeting that includes the hearing of cases related to petitioners seeking the reinstatement of revoked licenses or early termination of probationary licenses. A petitioner may not earn any continuing education hours for attending a board meeting on the same day in which said petitioner's hearing is conducted. The attendance of a licensee at a board meeting under this subparagraph shall be monitored and confirmed by board staff designated by the Executive Officer.

16. Any of the following as related to the practice of chiropractic:

(A) Principles of practice.

(B) Wellness. (prevention, health maintenance)

(C) Rehabilitation.

(D) Public health.

(h) With the exception of the mandatory courses specified in subdivision (e), the remaining continuing education requirements may be met by taking continuing education courses, including distance learning, that are approved by either of the following:

(1) The California Department of Industrial Relations, Division of Workers Compensation.

(2) Any Healing Arts Board or Bureau within Division 2 of the Business and Professions Code or approved by any organization authorized to approve continuing education by any Healing Arts Board or Bureau in Division 2 of the Business and Professions Code.

(i) The continuing education providers and courses referenced in subdivision (h) do not need to be approved by the Board for credit to be granted nor do they need to meet the requirements contained in Sections 362, 363, and 363.1.

§362. Continuing Education Provider Approval, Duties, and Responsibilities.

(a) CONTINUING EDUCATION PROVIDER DENIAL AND APPEAL PROCESS: If an application is denied under this section, the applicant shall be notified in writing of the reason(s) for the denial. The applicant may request an informal hearing with the Executive Officer regarding the reasons stated in the denial notification. The appeal must be filed within 30 days of the date of the denial notification.

The Executive Officer shall schedule the informal hearing within 30 days of receipt of the appeal request. Within 10 days following the informal hearing, the Executive Officer shall provide written notification of his or her decision to the denied applicant. If the Executive Officer upholds a denial under this section, the applicant may, within 30 days of the date of the Executive Officer's denial notification, request a hearing before the board to appeal the denial. The Executive Officer shall schedule the requested hearing at a future board meeting but not later than 180 days following receipt of the request. Within 10 days of the hearing before the board, the Executive Officer shall provide written notification of the board's decision to the applicant. The board's decision shall be the final order in the matter.

(b) As used in this section, a provider is an individual, partnership, corporation, professional association, college or any other entity approved by the board to offer board approved continuing education courses to licensees to meet the annual continuing education requirements set forth in Section 361 of these regulations.

(c)(1) To apply to become an approved provider, an applicant shall complete and submit a "Continuing Education Provider Application" form (Revision date 02/10) which is hereby incorporated by reference, and pay the fee specified in Section 360(a). Applications for approval shall be submitted to the board office at least 30 days prior to a scheduled board meeting. Providers with applications that are incomplete will be notified of the deficiencies in writing within three (3) weeks from the date of receipt. Complete applications will be reviewed at the scheduled board meeting and notification of the board's decision will be provided in writing within two (2) weeks following the board meeting.

(2) The approval of the provider shall expire two (2) years after it is issued by the board and may be renewed upon the filing of the "Continuing Education Provider Application" form (Revision date 02/10) and fee specified in Section 360(b).

(3) Providers who were approved by the board prior to the effective date of this regulation shall renew their provider status two years from June 8, 2011 by filing of the "Continuing Education Provider Application" form (Revision date 02/10) and fee specified in Section 360(b).

(4) The board will not process incomplete applications nor applications that do not include the correct application fee.

(d) Providers shall:

(1) Identify an individual responsible for overseeing all continuing education activities of the provider.

(2) Provide a course roster to the board, within 30 days, upon written request. Course rosters shall include the names of all licensees, license numbers, and e-mail addresses if available. Failure to submit the roster upon written request within thirty (30) days may result in the withdrawal or denial of previous course approval and withdrawal of provider status. Providers shall maintain the course roster for four (4) years from the date of completion of the course.

(3) Maintain course instructor curriculum vitae or resumes for four (4) years.

(4) Disclose to prospective participants the names of the individuals or organizations, if any, who have underwritten or subsidized the course. Providers may not advertise, market, or display materials or items for sale inside the room while the actual instruction is taking place. Nothing in this section shall be interpreted to prohibit a provider from mentioning a specific product or service solely for educational purposes.

(5) Inform the board in writing immediately of any change to the date, time or location of the course.

(6) Provide a certificate of completion to licensees within 30 days following completion of the continuing education course. Providers shall retain records of course completion for four (4) years from the date of completion and provide records of completion to the Board within thirty (30) days, upon written request. The certificate shall include the following information:

(A) Name and address of provider.

(B) Course title.

(C) Course approval number.

(D) Date(s) and location of course.

(E) Licensee name.

(F) License number.

(G) Printed name and signature of the provider's designated representative.

(H) Number of hours the licensee earned in continuing education, including the type of mandatory hours, and whether the hours were obtained in classroom instruction or distance learning.

(e) The Executive Officer, after notification, may withdraw approval of any continuing education provider for good cause, including, but not limited to, violations of any provision of the regulation or falsification of information, and shall provide written notification of such action to the provider. The provider may request an informal hearing with the Executive Officer regarding the reasons for withdrawal of approval stated in the Executive Officer's notification. The appeal must be filed within 30 days of the date of the notification. The Executive Officer shall schedule the informal hearing within 30 days of receipt of the appeal request. Within 10 days following the informal hearing, the Executive Officer shall provide written notification of his or her decision to the provider. If the Executive Officer upholds his or her decision under this subsection, the provider may, within 30 days of the date of the Executive Officer's notification, request a hearing before the board to appeal the Executive Officer's decision. The Executive

Officer shall schedule the requested hearing at a future board meeting but not later than 180 days following receipt of the request. Within 10 days of the hearing before the board, the Executive Officer shall provide written notification of the board's decision to the provider. The board's decision shall be the final order in the matter.

§363. Approval of Continuing Education Courses.

(a) Providers must complete and submit a "Continuing Education Course Application" form (Revision date 02/10) which is hereby incorporated by reference, and pay the non-refundable application fee as provided by Section 360(c) at least 45 days prior to the date of the course. Providers shall submit and complete one application for each continuing education course being offered.

(b) A "course" is defined as an approved program of coordinated instruction in any one of the subject areas as defined in Section 361(g) and given by an approved Provider. Once approved, a course may be given any number of times for one year following approval, with the single continuing education course fee paid one time annually by the provider. A course may not consist of more than one subject area as defined in Section 361(g).

(c) The following documentation shall be submitted with each Continuing Education Course Application:

(1) An hourly breakdown of the continuing education course;

(2) A final copy of the syllabus/course schedule including seminar name, date and location of seminar, instructor(s) name, course description, educational objectives, teaching methods, course schedule/outline, recommended reading, disclosure of expenses underwritten or subsidized by vendors of any goods, and supplies or services;

(3) A copy of the course brochure and all other promotional material to be used;

(4) A curriculum vitae for each instructor including the instructor's name and address; the type of educational degree including the name of the college and year the degree was received; license information including status and name of licensing agency; certification including status and name of certifying agency; the type, location and years of practical experience; the type, location and years of teaching experience; the type, location and years of research experience; the type, location and years of other relevant experience; and the title, journal, and date of publications.

(d) DENIAL AND APPEAL PROCESS: If a course application is denied under this section, the applicant shall be notified in writing of the reason(s) for the denial. The applicant may request an informal hearing regarding the reasons stated in their denial notification, with the Executive Officer. The appeal must be filed within 30 days of the date of the denial notification.

The Executive Officer shall schedule the informal hearing within 30 days of receipt of the appeal request. Within 10 days following the informal hearing, the Executive Officer shall provide written notification of his or her decision to the denied applicant. If the Executive Officer upholds a denial under this section, the applicant may, within 30 days of the date of the Executive Officer's denial notification, request a hearing before the board to appeal the denial. The Executive Officer shall schedule the requested hearing at a future board meeting but not later than 180 days following receipt of the request.

Within 10 days of the hearing before the board, the Executive Officer shall provide written notification of the board's decision to the applicant. The board's decision shall be the final order in the matter.

(e) Only those courses that meet the following shall be approved:

(1) No more than twelve (12) hours of continuing education credit shall be awarded to an individual licensee for coursework completed on a specific date.

(2) Each hour of continuing education credit shall be based on at least fifty (50) minutes of participation in an organized learning experience. Class breaks shall be at the discretion of the instructor and shall not count towards a course hour. Providers shall furnish a sign-in sheet that contains the course date(s), each licensee's name, license number, and designated space for each licensee to sign in at the beginning and conclusion of the course each day. Furthermore, the form shall state that a licensee by signing their name on that sheet, is declaring under penalty of perjury, that they personally attended the stated course, on the listed date(s) and they personally attended the listed hours of course work. Each licensee shall be responsible for signing the "sign-in sheet" at the start and conclusion of each day's coursework, and failure to do so may invalidate credit for that day's coursework. Providers shall retain sign-in sheets for four (4) years from the date of course completion and shall provide copies to the Board within thirty (30) days upon written request.

(f) The board shall not approve the following subjects for continuing education courses: financial management, income generation, practice building, collections, self-motivation, and patient recruitment.

(g) If a provider makes a substantive change in content of an approved course, he or she shall notify the board as soon as possible of the changes prior to giving the course. A new application may be required as determined by the Executive Officer.

(h) The Executive Officer, after notification, may withdraw approval of any continuing education course for good cause, including, but not limited to, violations of any provision of this regulation or falsification of information and shall provide written notification of such action to the provider. The provider may request an informal hearing with the Executive Officer regarding the reasons for withdrawal of approval stated in the Executive Officer's notification. The appeal must be filed within 30 days of the date of the notification. The Executive Officer shall schedule the informal hearing within 30 days of receipt of the appeal request. Within 10 days following the informal hearing, the Executive Officer shall provide written notification of his or her decision to the provider. If the Executive Officer upholds his or her decision under this subsection, the provider may, within 30 days of the date of the Executive Officer's notification, request a hearing before the board to appeal the Executive Officer's decision. The Executive Officer shall schedule the requested hearing at a future board meeting but not later than 180 days following receipt of the request. Within 10 days of the hearing before the board, the Executive Officer shall provide written notification of the board's decision to the provider. The board's decision shall be the final order in the matter.

§363.1. Distance Learning Courses.

In addition to the applicable requirements of Sections 362 and 363, providers of continuing education courses offered through distance learning formats, including, but not limited to, computer, Internet, manuals, compact disks, digital video, versatile discs, and audio and video

tapes, shall meet all of the following:
(a) Disclose course instructors' curriculum vitae or resumes.

(b) Explain the appropriate level of technology required for a student licensee to successfully participate in the course.

(c) Make available technical assistance as appropriate to the format.

(d) Contain security measures to protect the learner's identity, course and related content from unauthorized access.

(e) Establish a deadline for completion.

(f) Review instructional materials annually to ensure the content is current and relevant.

(g) The continuing education provider shall notify the licensee when he or she is leaving a continuing education site and directed to a promotional or sponsored site. Course material may not endorse manufacturers, distributors, or other sellers of chiropractic products or services. Nothing in this section shall be interpreted to prohibit a provider from mentioning a specific product or service solely for educational purposes.

§364. Exemptions and Reduction of Requirement.

A licensee may qualify for a full or partial exemption, from the continuing education requirements of Section 361 if a licensee meets any of the criterion listed below:

(a) A licensee who holds a license on inactive status is not required to complete continuing education on an annual basis; however, they must provide proof of completion of the required continuing education hours prior to activating their license as specified in Section 371(f);

(b) A new licensee is exempt from continuing education requirements in the year of initial licensure;

(c) An instructor who has taught for one (1) year and currently teaches core curriculum courses for more than eight (8) credit hours per week at any Council on Chiropractic Education accredited college for at least six (6) months during any license renewal period year shall be exempt from continuing education.

(d) A licensee who teaches a board-approved continuing education course may earn one (1) hour of continuing education credit for each hour of lecture up to 24 hours per year.

(e) Notwithstanding Section 361(c), a licensee who is unable to attend continuing education courses due to a physical disability and provides written certification from a primary health care provider may earn all 24 hours of continuing education credits for the period of the license renewal through Board-approved distance learning courses as defined in Section 363.1.

(f) A licensee who participates as an examiner for the entire part four portion of the National Board of Chiropractic Examiners (NBCE) examinations shall receive a maximum of six (6) hours of continuing education credit for each examination period conducted by the NBCE during the license renewal period. The licensee must provide written certification from the NBCE confirming the licensee has met the requirements of this subsection.

(g) An active Board Member. A professional board member who has served one full year on the Board of Chiropractic Examiners shall be exempt from the continuing education requirement in each year of board member service.

(h) Notwithstanding Section 361(c), a licensee on active duty with a branch of the armed forces of the United States shall be permitted to take all twenty-four (24) hours of required continuing education through board-approved distance learning courses as defined in Section 363.1.

§365. Revoked Licenses.

Any person making application for reinstatement or restoration of a license which has been revoked shall be required to fulfill the continuing education requirements for each year the license was revoked and may be required to complete an approved course of continuing education, or to complete such study or training as the board deems appropriate.

§366. Continuing Education Audits.

The Board shall conduct random audits to verify compliance with Continuing Education requirements of active licensees. Licensees shall secure and retain certificates of completion issued to them at the time of attendance of approved Continuing Education courses for a period of four (4) years from their last renewal and shall forward these documents to the Board upon request.

Licensees who fail to retain certificates of completion shall obtain duplicate certificates, from approved Continuing Education providers, who shall issue duplicates only to licensees whose names appear on the providers' rosters of course attendees. The certificates of completion shall be clearly marked "duplicate" and shall contain the information specified in Section 362(d)(6).

Licensees who furnish false or misleading information to the Board regarding their Continuing Education hours shall be subject to disciplinary action. Providers who provide false or inaccurate verification of a licensee's participation may lose their provider status for up to ten (10) years, at the discretion of the Executive Officer. The full board's ruling, as described in Section 362(e), shall be the final order on the matter.

The board or its designee shall not be restricted from inspecting, observing, or auditing any approved chiropractic course in progress, at no charge.

The board, at its discretion, may contact attendees after a continuing education course as part of the board's auditing process to obtain information regarding the quality and content of the course.

Article 7. Chiropractic Corporations

§367.1. Citation of Rules.

These rules may be cited and referred to as "Chiropractic Corporation Rules." They are subject to amendment, modification, revision, supplement, repeal, or other change by appropriate action in the future.

Section 356.1 Cardiopulmonary Resuscitation/Basic Life Support Training

As a condition of licensure and license renewal, all licensees are required to maintain current certification in cardiopulmonary resuscitation (CPR) or basic life support (BLS) from the American Red Cross, American Heart Association, or other associations approved by the Board. Training required for the CPR/BLS certification shall not be credited toward the requirements set forth in section 356. Exemptions will be made for licensees as the Board, in its discretion, determines were unable to maintain current CPR/BLS certification due to physical impairment, illness, incapacity or other unavoidable circumstances.

Note: Authority cited: Section 1000-4(b), Business and Professions Code (Chiropractic Initiative Act of California, Stats. 1923 p. lxxxvii).

Reference: Section 1000-4(e), Business and Professions Code (Chiropractic Initiative Act of California, Stats. 1923, p. lxxxvii).

(5) National Board status means attainment of passing scores on the National Board Parts I, II, III, IV, and Physiotherapy examinations.

(6) The California Chiropractic Board examination means the examination developed by the Board of Chiropractic Examiners or an agency designated by the board. This California Chiropractic Board examination shall cover California laws and regulations governing the practice of chiropractic, and/or other subjects as taught in chiropractic schools or colleges, and must be taken after the candidate has graduated from chiropractic college.

§354. Successful Examination.

Notwithstanding Section 312, applicants who are notified in writing by the Board of the successful completion of the Board examination, may immediately commence the practice of chiropractic in California pending the receipt of their certificate.

Article 6. Continuing Education

§360. Continuing Education Fees.

The following represents fees for continuing education:

(a) Continuing Education Provider Application Fee: $75

(b) Biennial Continuing Education Provider Renewal Fee: $50

(c) Continuing Education Course Application Fee: $50 per course. A course is defined in Section 363.

§361. Continuing Education Requirements.

(a) For purposes of this section, "implementation date" means two years following June 8, 2011.

(b) For license renewals that expire on or after the implementation date, the number of required hours of continuing education courses shall be twenty-four (24). For license renewals that expire prior to the implementation date, the number of required hours of continuing education courses shall be twelve (12).

(c) For license renewals that expire on or after the implementation date, a maximum of twelve (12) continuing education hours may be completed through distance learning as defined in Section 363.1. For license renewals that expire prior to the implementation date, a maximum of six (6) continuing education hours may be completed through distance learning as defined in Section 363.1.

(d) Any continuing education hours accumulated before June 8, 2011 that meet the requirements in effect on the date the hours were accumulated, will be accepted by the board for license renewals.

(e) On or after the implementation date, licensees shall complete a minimum of two (2) hours in subdivision (g)(11) - Ethics and Law, a minimum of four (4) hours in any one of, or a

combination of, the subject areas specified in subdivision (g)(3) - History Taking and Physical Examination Procedures, subdivision (g)(5) - Chiropractic Adjustive Techniques or Chiropractic Manipulation Techniques, or subdivision (g)(10) - Proper and Ethical Billing and Coding.

(f) With the exception of the mandatory hours referenced in subdivision (e), the remaining eighteen (18) hours of additional continuing education requirements may be met by taking courses in any of the subject areas listed in subdivision (g) or courses taken pursuant to subdivision (h). The eighteen (18) hours may include any combination of continuing education courses in subject areas specified in either subdivision (g) or approved by agencies specified in subdivision (h). By way of example, a licensee may take eight (8) hours of continuing education courses in subject areas listed in subdivision (g), that are approved by the board, and ten (10) hours of continuing education courses that are approved by the California Department of Industrial Relations, Division of Workers Compensation pursuant to subparagraph (1) of subdivision (h).

(g) Courses approved by the board shall be limited to the following subject areas:

1. Philosophy of chiropractic, including the historical development of chiropractic as an art and science and health care approach; the vertebral subluxation complex and somato-visceral reflexes including their relationships between disease and health; and other chiropractic theory and philosophy.

2. Instruction in basic sciences of anatomy, histology, neurology, physiology, nutrition, pathology, biochemistry or toxicology.

3. Instruction in various basic to comprehensive history taking and physical examination procedures, including but not limited to orthopedic, neurological and general diagnosis related to evaluation of the neuro-musculoskeletal systems, and includes general diagnosis and differential diagnosis of all conditions that affect the human body.

4. Diagnostic testing procedures, interpretation and technologies that aid in differential diagnosis of all conditions that affect the human body.

5. Chiropractic adjustive techniques or chiropractic manipulation techniques.

6. Pain management theory, including, but not limited to, current trends in treatment and instruction in the physiology and anatomy of acute, sub-acute and chronic pain.

7. Physiotherapy.

8. Instruction in Manipulation Under Anesthesia including the safe handling of patients under anesthesia.

9. Instruction in the aspects of special population care, including, but not limited to, geriatric, pediatric, and athletic care as related to the practice of chiropractic.

10. Instruction in proper and ethical billing and coding, including accurate and effective record keeping and documentation of evaluation, treatment and progress of a patient. This is not to include practice building or patient recruitment/retention or business techniques or principles that teach concepts to increase patient visits or patient fees per case.

11. Ethics and law: including but not limited to: truth in advertising; professional boundaries; mandatory reporting requirements for child abuse/neglect, elder abuse/neglect; spousal or cohabitant abuse/neglect; sexual boundaries between patient and doctors; review of the specific laws, rules and regulations related to the practice of chiropractic in the State of California.

12. Adverse event avoidance, including reduction of potential malpractice issues.

13. Pharmacology, including side effects, drug interactions and the pharmodynamics of various commonly prescribed and over-the-counter drugs; drug reactions and interactions with herbs, vitamins and nutritional supplements; blood and urinalysis testing used in the diagnosis and detection of disease, including use of and interpretation of drug testing strips or kits utilizing urinalysis, saliva, hair and nail clippings.

14. A licensee may earn up to a maximum of two (2) hours of continuing education credit in cardiopulmonary resuscitation, basic life support or use of an automated external defibrillator.

15. Board Meeting: A licensee may earn a maximum of four (4) hours of continuing education credit per renewal period for attending a full board meeting that includes the hearing of cases related to petitioners seeking the reinstatement of revoked licenses or early termination of probationary licenses. A petitioner may not earn any continuing education hours for attending a board meeting on the same day in which said petitioner's hearing is conducted. The attendance of a licensee at a board meeting under this subparagraph shall be monitored and confirmed by board staff designated by the Executive Officer.

16. Any of the following as related to the practice of chiropractic:

(A) Principles of practice.

(B) Wellness. (prevention, health maintenance)

(C) Rehabilitation.

(D) Public health.

(h) With the exception of the mandatory courses specified in subdivision (e), the remaining continuing education requirements may be met by taking continuing education courses, including distance learning, that are approved by either of the following:

(1) The California Department of Industrial Relations, Division of Workers Compensation.

(2) Any Healing Arts Board or Bureau within Division 2 of the Business and Professions Code or approved by any organization authorized to approve continuing education by any Healing Arts Board or Bureau in Division 2 of the Business and Professions Code.

(i) The continuing education providers and courses referenced in subdivision (h) do not need to be approved by the Board for credit to be granted nor do they need to meet the requirements contained in Sections 362, 363, and 363.1.

Examples for CPR Requirement

North Carolina State Board of Dental Examiners

"CPR certification" means that the licensee has successfully completed a CPR course that meets American Red Cross or American Heart Association standards for certification and that provides manikin testing on the subjects of cardio-pulmonary resuscitation. The course must also cover the use of an automatic external defibrillator, unconscious and conscious choking and rescue breathing, provided that the foregoing requirements shall not be interpreted in any way that violates the Americans with Disabilities Act. The manikin testing must be provided by an instructor who is physically present with the students.

CPR does not have to be repeated annually, if a 2 year certification is achieved; however the certification must always be current.

.Code of Maryland Regulations

10.43.11 *Chiropractic* — Continuing Education Requirements

04 Accreditation.

H. In addition to the 48 hours of continuing education, a licensee shall maintain a current CPR certification at the healthcare provider level from a Board-approved CPR provider for each renewal period

Delaware Regulations : Administrative Code : Title 24

6.0 Continuing Professional Education (CPE) and Renewal

6.3 Continuing Education. All persons licensed to practice dentistry in the State of Delaware shall be required to acquire fifty (50) hours of continuing professional education (CPE) credit every two (2) years. Two (2) of the 50 credit hours shall be obtained in courses covering infection control. In addition to the CPE, licensees must provide evidence that they have successfully completed a current course in cardiopulmonary resuscitation (CPR) every two (2) years. The CPR course must encompass hands on clinical participation. On-line courses will not be accepted to satisfy the CPR requirement. Examples of acceptable courses include, but are not limited to, courses offered by the American Red Cross and the American Heart Association and courses offered or approved by any of the organizations listed in 6.5.1.1 through 6.5.1.4 of these regulations. All dentists, upon initial licensure in Delaware and prior to registration renewal, shall be given a written notice of these CPE requirements.

SOUTH CAROLINA BOARD OF DENTISTRY

POLICY/PROCEDURE

CE / CPR REQUIREMENTS for LICENSE RENEWAL

Pursuant to S.C. Code Ann. Section 40-1-100(A) Supp. 1996 and Board Regulation 39-5.F.

POLICY

Board Regulation 39-5.F. requires completion of continuing education requirements as a requirement for license/certificate renewal. Whether an individual practices part time or full time, or lives in another state, he/she holds a license with a privilege to provide a regulated service to the public and, therefore, must complete all continuing education requirements. Maintaining this privilege requires continuing education as required in Board regulations. Failure to complete all hours of mandatory continuing education shall serve as grounds to deny the renewal of a license and may result in disciplinary action against the licensee.

Licensee/registrant shall certify on the reregistration form that he/she has taken and can verify the required number of hours specified in the regulation. Verification shall be in the form of a record of courses taken, CE hours earned, date, sponsor and subject matter of the courses. This material shall be maintained for a period of three years from the date of course attendance. Study clubs and local associations that provide CE courses for their members should develop formal certificates or documentation. This will ensure that participants are given proper credit for the CE earned and documentation to substantiate that they completed the course work. A handwritten list of courses does not suffice as "official documentation of attendance," nor does a copy of a registration badge, a meeting program, or a cancelled check. Fifty percent (50%) may be completed via approved online courses.

Licensees shall earn CE credits at the rate of one (1) CE credit hour for each one (1) contact hour of instruction. New licensees are exempt from the mandatory CE requirements for the first full two (2) year renewal period following initial licensure.

Organizations and agencies approved as sponsors of C.E. include: **1)** American Dental Association (ADA); National Dental Association (NDA); Academy of General Dentistry; American Dental Hygienists' Association; American Dental Assistants' Association; National Association of Dental Laboratories, or their local societies and associations; **2)** National, state, local, district dental specialty organizations recognized by the ADA and NDA; **3)** Dental colleges or schools accredited by the ADA; **4)** American Red Cross; American Heart Association;

Continuing Education includes: **1)** Attendance at lectures, study clubs, college and postgraduate courses, or scientific sessions of conventions; **2)** Research, graduate study, or teaching; **3)** Hours obtained by correspondence or on-line / computerized courses are acceptable, however, limited to fifty percent (50%) of the total hours required. The course should include a test at its conclusion and provide a certificate of completion.

Continuing Education subjects approved by the Board include: **1)** Medical emergencies; **2)** Addiction to controlled substances, alcohol or nicotine; **3)** Anesthesia and pain control; **4)** Basic sciences; **5)** CPR, diet and nutrition; **6)** Conscious sedation; **7)** General anesthesia; **8)** Cardiopulmonary resuscitation; **9)** Child abuse identification and reporting; **10)** Dentistry for the handicapped; **11)** Infection control; **12)** Pharmacology; **13)** Practice management and patient

relations; **14)** Preventive dentistry; **15)** Problems with the Temporomandibular Joint; **16)** Radiology and diagnosis; **17)** Risk management; **18)** Treating medically compromised; **19)** Endodontics; Fixed Prosthodontics; Removable Prosthodontics; Forensic Dentistry; Geriatric Dentistry; Hospital Dentistry; Occlusion; Operative Dentistry; Oral Surgery; Orthodontics; Pediatric Dentistry; Periodontics.

Continuing Education subjects not approved by the Board include: 1) Business seminars; **2)** Marketing meetings; **3)** Courses dealing with personal life; **4)** Retirement

CPR

Current certification in CPR is a condition for license renewal for all dentists and dental hygienists. Board Regulation 39-5.F.(3) states, "All dentists and dental hygienists must have completed an approved CPR course within three (3) years of licensure or renewal. Thereafter, all dentists and dental hygienists must be recertified in CPR once every three years. Yearly recertification is not required, but can be used as continuing education hours any time."

All dentists and dental hygienists must have, at a minimum, Level II CPR; however, Level III CPR is recommended for all licensed healthcare providers by the American Red Cross and the American Heart Association. The Board feels it necessary that dentists and dental hygienists have adult/child CPR, one-person or two-person, depending on the needs of the particular office.

CPR courses approved by the Board include: 1) "Community CPR" (Level II course - American Red Cross); **2)** "Heartsaver CPR" (Level II course - American Heart Association); **3)** "CPR for the Professional Rescuer" (Level III course - American Red Cross); **4)** "BLS Healthcare Provider" (Level III course - American Heart Association).

A dentist or dental hygienist with a physical handicap or limitation who is unable to administer CPR or to become CPR certified may request a waiver of CPR requirements by checking the appropriate box on the annual license renewal form. An "Application for Waiver or Extension of CE and CPR Requirements" will be mailed to the licensee to complete and submit to the Board office. A waiver may be granted provided 1) licensee provides documentation from a licensed physician of physical disability; and 2) licensee maintains presence of an individual certified in CPR At all times when patient care is rendered in the dental office.

REQUIREMENTS FOR WAIVER OR EXTENTION OF CE AND CPR

39-5.F.(7) authorizes the Board to "waive, modify or extend all or any part of the CE requirements, in individual cases involving extraordinary hardship or extenuating circumstances, disability or illness. Any applicant shall be eligible for waiver or extension who, upon written application to the Board and for good cause shown, demonstrates that they are unable to participate in a sufficient number of regular CE programs for licensure/registration.

Waiver: A licensee may request a waiver of CE and/or CPR if licensee is fully retired from active practice or temporarily or permanently disabled and unable to practice. The Board has determined that licensees who have retired from active practice, but who wish to maintain an active license, should be granted a waiver of the CE and CPR requirements provided an agreement is executed to

provide assurance that the licensee will not resume active practice without first fulfilling all CE and other requirements owed during the period of retirement.

Extension: A licensee may request an extension of the CE and/or CPR requirements provided licensee is able to demonstrate that he/she is unable to participate in a sufficient number of regular CE programs for licensure/registration.

PROCEDURES for REQUESTING WAIVER OR EXTENSION:

1. A licensee who wishes to request a waiver or extension of the continuing education or CPR requirements shall, by marking the appropriate box on the annual license renewal form, request an "Application for Waiver or Extension of CE and CPR Requirements" from the Board office.

2. Applicant must complete the application for waiver or extension and submit it to the Board office on or before March 1. Any application for waiver or extension received in the Board office after March 1 will not be considered.

3. The CE Review Committee, in its discretion, shall determine whether a licensee qualifies for a waiver or extension under the Regulation.

4. If a **waiver** is granted, the licensee will be so notified in writing and required to sign an "Agreement" affirming that he/she will not resume active practice without first fulfilling all CE and other requirements owed during the period of retirement. Further, the licensee will acknowledge that his/her license will be automatically temporarily suspended if the Agreement is violated.

   The Agreement shall be in a form approved by the Office of General Counsel and may not be modified without approval of the Office of General Counsel. Upon executive of the signed Agreement, staff will forward the original to the President for review and signature. The fully executed original Agreement shall be filed by staff. A copy of the fully executed Agreement shall be sent to the licensee for his/her records, along with a cover letter explaining the terms and conditions of the Agreement. A licensee granted a waiver of CE and CPR requirements is not exempt from all other annual renewal requirements, including the payment of the annual renewal of license fee.

5. If an **extension** is granted, the licensee will be so notified in writing. The extension allows the licensee until such time as the next year's renewal notices are mailed out from the Board office, on or about October 15, in which to complete all requirements. Upon completion of CE and CPR requirements, prior to October 15, licensee is required to submit satisfactory proof of compliance in the form of a record of courses taken, CE hours earned, date, sponsor and subject matter of course.

PENALTIES FOR NON-COMPLIANCE

If a licensee fails to meet the continuing education requirements, he/she will not be eligible to apply for the renewal of his/her license for the next renewal year until such time as the Board is satisfied that the requirements for the previous reporting period have been met. In lieu of a

reregistration application, licensee will receive official notice from the Board office that the renewal of his/her license is pending completion of the required number of continuing education hours. Licensee may continue to practice while earning the continuing education hours in accordance with the requirements below.

1. If documentation of completion of continuing education requirements is provided before December 31st, licensee will be allowed to renew by completing a current reregistration application form, and paying the current reregistration fee before December 31st.

2. If documentation of completion of continuing education requirements is provided during the month of January, licensee will be allowed to renew by completing a current reregistration application form, and paying a doubled reregistration fee.

3. If documentation of completion of continuing education requirements is provided during the month of February, licensee will be allowed to renew by completing a current reregistration application form, and paying a doubled reregistration fee plus $5.00 per day until paid.

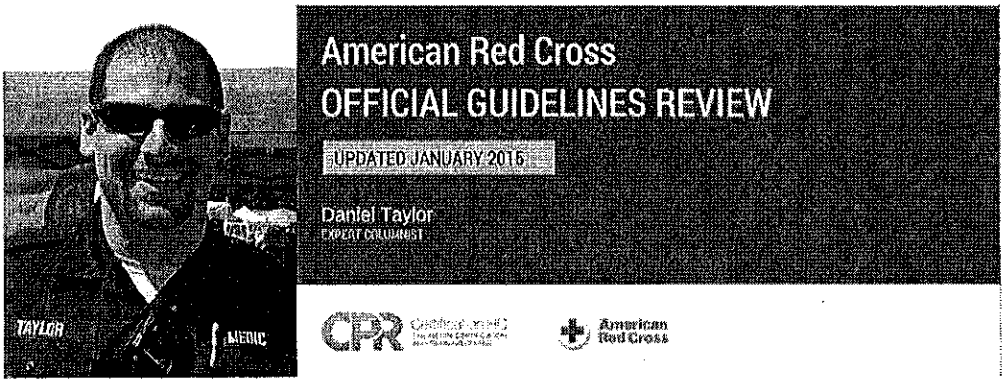
4. If a licensee fails to provide documentation of completion of continuing education requirements by March 1st, his/her license/certificate will EXPIRE as of March 1st and practice must cease.

5. An individual whose license/certificate expires on March 1st and who wishes to have his/her license/certificate REINSTATED, must contact the Board office, request an application for reinstatement, and follow all procedures for the reinstatement of license/certificate, including payment of fees, appearance before the Board, completion of the jurisprudence examination, continuing education, and any other conditions set forth by the Board.

Revised / Approved by the Board: April 10, 2009 By: _____

Veronica Reynolds, Administrator

2015 Review of the American Red Cross CPR Guidelines -



Based on the latest curriculum published by the American Red Cross

American Red Cross. (2014, January 1). American Red Cross First Aid/CPR/AED Participant's Manual. Retrieved January 28, 2015 *

1 CPR Practice Test
2 Red Cross CNA Class
3 CPR Training Video
4 BLS Certification Online
5 American CPR Training

The American Red Cross (ARC), American Heart Association (AHA), American Safety and Health Institute (ASHI), as well as most other organizations that create CPR courses base their programs on the Consensus on Science for CPR and Emergency Cardiovascular Care which was last published in 2010. It is expected that a revised version will be released in 2015 or 2016 which may cause changes for all CPR courses. Despite each of the major organizations using the same body of research for their courses there are still slight differences based on the individual recommendations of the organizations subject matter experts most of whom are Doctors, Paramedics, and Nurses. The purpose of this review is to outline the approach dictated by the American Red Cross.

Cardiac Chain of Survival

To have the best chance of recovering from a cardiac arrest the ARC advises that individuals should follow the Cardiac Chain of Survival. The chain starts with early recognition of cardiac arrest and immediately upon recognition activation of Emergency Medical Services with a rapid response from them. The second link in the chain is CPR provided by those on scene with the victim immediately at the time of collapse. The third link is early defibrillation, when appropriate, by quick use of an AED by bystanders. The final link is early advanced care as provided by Emergency Medical Services and then a hospital with the capability of correcting the problem which led to the cardiac arrest.

Time is critical in a cardiac arrest because each minute that someone goes without CPR and use of an AED their best chance of survival decreases by 10%.

Recognition

The signs of cardiac arrest which the ARC teaches people to recognize are unconsciousness and an absence of

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breathing. This is a notable difference between the ARC and the AHA who also teach that any abnormal breathing, such as the gasping breaths that occur shortly before death, are also signs of cardiac arrest and need to be treated accordingly. Research has shown that bystanders mistake abnormal but inadequate breathing for acceptable breathing and do not identify the victim as being in cardiac arrest.

Responding

The ARC uses the mnemonic "Check, Call, Care" for their process of aiding an individual who has collapsed. The process begins with checking the scene for safety and checking the victim to see if they are in fact unconscious. The next step is to call for emergency medical services, then to check for breathing, then check for severe bleeding, then provide care in the form of CPR for someone who is not breathing.

Providing CPR

CPR begins with moving the victim to a firm flat surface, if they are not already on one, and then kneeling beside the victims upper chest while placing your hands on the breast bone and beginning compressions.

Compressions can be given with or without breathing. It is best to breathe for the patient but if you are unable or unwilling to do so it is acceptable to provide high quality compressions only. Regardless of if you decide to breath for the patient or not the process of providing compressions is the same. One hand should be placed on the breast bone in the center of the chest, your second hand should be placed on your first while keeping your fingers off the chest, and maintaining your shoulders in position over your hands. When you push down you should do so at a smooth and steady rate of at least 100 compressions per minute. For adults your compressions should go down at least 2" using the weight of your upper body to make this possible. Using your arms only will result in rapid fatigue and poor compressions.

Rescue Breathing

If you will be breathing for the patient provide 2 breaths after giving 30 compressions. Start by tilting the head back and lifting the chin to open the victim's airway and then provide the first breath over 1 second looking to see the victim's chest rise. If the chest does not rise with the first breath re-tilt the head and give a second breath. If this fails as well provide another 30 compressions after which open the victims mouth and look to see if there is a foreign object blocking the airway. If you see the object attempt to remove it and then provide another two breaths still looking for chest rise as the indicator you were successful.

Your cycle of 30 compressions and 2 breaths will continue until the victim shows obvious signs of life such as breathing (or the victim complaining about you doing compressions), a higher trained responder or professional rescuer takes over, you become too exhausted to continue and there is no one else there to assist, or should the scene become unsafe. If an AED becomes available that should be used immediately while minimizing the interruption in CPR.

CPR for an Infant

If providing CPR for an infant the ratio of compressions to breaths remains the same but the method of performing compressions changes. For an infant you should use 2-3 fingers in the center of the chest on the lower half of the breast bone to compress the chest about 1 ½". Effective rescue breaths are still indicated by chest rise but remember you may need to use much less air to achieve the same effect in an infant.

Automatic External Defibrillator (AED)

Using an AED is an important part of the cardiac chain of survival. High quality CPR will ensure that oxygen continues to get to the brain but will not restart the heart. An AED may be reorganize the electrical activity in the heart and help it start beating again. An AED is a sophisticated computer which analyzes the heart to see if it will benefit from an electrical shock. The way the AED is able to analyze and shock the heart is through patches that the rescuer must apply to the victims bare chest. Rescuers should ensure that the chest is dry and if there is a medication patch on the chest it should be removed with a gloved hand. Ideally a second bystander will be able to use the AED while the first bystander continues CPR. Whoever is using the AED should place it next to the victim,

turn it on and listen to the voice prompts that will follow. The AED will advise you to apply the patches, connect them to the AED, and stand clear to allow the AED to analyze the heart. During analysis CPR and any other movement must be stopped. The AED will state that either a shock is advised or it is not. If it is not advised immediately start CPR again but if a shock is advised ensure that you and all other bystanders are not touching the victim.

Being in contact with a person while they are defibrillated could result in a shock being conducted to the rescuer. As soon as the shock has been delivered CPR should be immediately started. There is no risk to the rescuer after the shock has been delivered, only while the shock is being delivered. Some AEDs will have patches for adults and for children. The patches are clearly marked and only adult pathches should be used on adult patients. Patches for children are not only physically smaller but actually tell the AED to deliver a smaller shock which may not be beneficial for an adult. Child patches should be used on those 8 years or younger or weighing less than 55lbs.

By following the guidelines set forth by the American Red Cross you can help save someone's life should they suffer a cardiac arrest. Remember "Check, Call, Care".

Check the scene and the victim

Call for Emergency Medical Services

Check for breathing

Check for severe bleeding

Care for the victim

Seek out your local CPR training center to get a hands on class to better learn CPR and watch for changes in CPR within the next year or two.

	Adult	Child	Infant
Hand Position	2 hands center of chest, lower half of breast bone	2 hands center of chest, lower half of breast bone	2-3 fingers in the center of the chest, lower half of the breast bone
Compression Depth	At least 2"	About 2"	About 1 ½"
Breathing	Look for Chest RiseDeliver breaths over 1 second	Look for Chest RiseDeliver breaths over 1 second	Look for Chest RiseDeliver breaths over 1 second
Compressions to Breaths	30:2	30:2	30:2
Compression Rate	100/minute	100/minute	100/minute

*American Red Cross First Aid/CPR/AED Participant's Manual

**Read Dan's review of American Heart Association CPR Guidelines 2015

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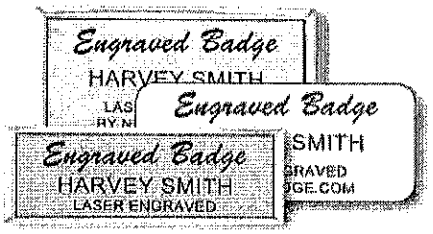
Engraved Name Badges

Custom Laser Engraved Badges



No Setup Fees!

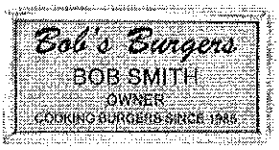
Up to four lines engraved.

Choose from thirty-six fonts, and twenty-one plastic colors.

Free Premium Name Badge Fasteners!
Add a magnetic or pocket fastener to your badge at no extra cost (normally $2.00 extra).

Save Money with Quantity Based Discounts

Qty	2	3	4	5	6	12-24	25-49	50-99	100-499	500-999	1000+
Discount	15%	25%	35%	40%	45%	50%	55%	60%	65%	70%	75%



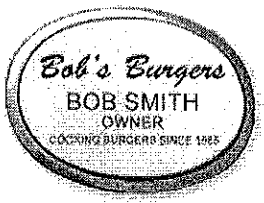
Engraved Badge with Gold Metal Frame
$15.95

Engraved Badge with Silver Metal Frame
$15.95

Engraved Badge with Small Gold Metal Frame
$15.95

Engraved Badge with Small Silver Metal Frame
$15.95

Engraved Oval Badge with Gold Metal Frame
$15.95



Engraved Oval Badge with Silver Metal Frame
$15.95

Engraved Badge with Round Corners
$14.95

Engraved Badge with Square Corners
$14.95

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