

**TITLE 16            OCCUPATIONAL AND PROFESSIONAL LICENSING**  
**CHAPTER 4        CHIROPRACTIC PRACTITIONERS**  
**PART 18           PRACTICE PROCEDURES**

**16.4.18.1           ISSUING AGENCY:** New Mexico Chiropractic Board, PO Box 25101, Santa Fe, New Mexico 87504.

[16.4.18.1 NMAC - Rp 16 NMAC 4.18.1, 8/10/2019]

**16.4.18.2           SCOPE:** All chiropractic physicians.

[16.4.18.2 NMAC - Rp 16 NMAC 4.18.2, 8/10/2019]

**16.4.18.3           STATUTORY AUTHORITY:** These rules of practice and procedure govern the practice of chiropractic in New Mexico and are promulgated pursuant to and in accordance with the Chiropractic Physician Practice Act, Subsection F of 61-4-3 NMSA 1978, Subsection D of 61-4-6 NMSA 1978, and Subsection B of 61-4-9 NMSA 1978.

[16.4.18.3 NMAC - Rp 16 NMAC 4.18.3, 8/10/2019]

**16.4.18.4           DURATION:** Permanent.

[16.4.18.4 NMAC - Rp 16 NMAC 4.18.4, 8/10/2019]

**16.4.18.5           EFFECTIVE DATE:** August 10, 2019, unless a later date is cited at the end of a section.

[16.4.18.5 NMAC - Rp 16 NMAC 4.18.5, 8/10/2019]

**16.4.18.6           OBJECTIVE:** To establish practice procedures to include diagnostic procedures, meridian therapy, obstetrics, invasive therapeutic procedures, imaging examinations, chiropractic rehabilitation of the neuromusculoskeletal system, manipulation under anesthesia and spinal manipulation.

[16.4.18.6 NMAC - Rp 16 NMAC 4.18.6, 8/10/2019]

**16.4.18.7           DEFINITIONS:** (Refer to 16.4.1 NMAC).

[16.4.18.7 NMAC - Rp 16 NMAC 4.18.7, 8/10/2019]

**16.4.18.8           DIAGNOSTIC PROCEDURES:**

**A.** Chiropractic physicians being primary care providers are authorized to perform diagnostic procedures specified in this regulation, on the general population ranging from pediatrics through geriatrics, which shall include the authority to perform and take.

(1) Medical case history.

(2) Physical examination of all body systems including, but not limited to:

(a) skin, hair, nails, head, eyes, ears, nose, throat and teeth;

(b) cardio-vascular and respiratory system, including auscultation;

(c) thorax and abdomen, including breast and rectal examination, when clinically

appropriate;

(d) genito-urinary and reproductive system, to include vaginal and prostate examination, when clinically appropriate;

(e) musculo-skeletal system;

(f) neurological system.

**B.** Authority to order diagnostic procedures. Chiropractic physicians are authorized to order any diagnostic procedure reasonably necessary to clinically correlate a physical examination to a diagnostic impression, which shall include, but not be limited to:

(1) laboratory procedures involving the collection of human fluids such as saliva, blood, urine, vaginal and seminal fluids, hair, feces;

(2) EEG,EKG,ECG and surface or needle EMG;

(3) imaging procedures such as x-ray, CT scan, MRI, nuclear scans, PET scans, SPECT, ultrasonography, thermography or other pertinent diagnostic studies.

**C.** Authority to perform diagnostic procedures.

(1) Chiropractic physicians are required to perform appropriate diagnostic procedures reasonably necessary to clinically correlate a physical examination to a diagnostic impression, (excluding surgical

procedures and invasive procedures not herein specified), including but not limited to the collection and testing of human fluids, such as saliva, blood, urine, vaginal and seminal fluids, hair, feces, and conventional radiography.

(2) Chiropractic physicians who are trained in a course of doctoral or post-doctoral studies certified with an accredited institution recognized by the board are authorized to perform diagnostic procedures, including but not limited to MRI, CT, nuclear scans, ultrasonography; thermography, B.E.A.M., EEG, EKG, ECG and surface or needle EMG.

[16.4.18.8 NMAC - Rp 16 NMAC 4.18.8, 8/10/2019]

#### **16.4.18.9 MERIDIAN THERAPY:**

A. Chiropractors who practice meridian therapy must do so in conjunction with standard chiropractic adjusting and/or manipulative techniques.

B. Chiropractors who practice meridian therapy may not advertise or promote themselves in the media to be acupuncturists unless licensed pursuant to the Acupuncture Act.

C. Dry needling is a physical intervention that uses a filiform needle to stimulate trigger points, diagnose and treat neuromuscular pain and functional movement deficits; is based on the western medical concepts; requires an examination and diagnosis, and treats specific anatomic entities selected according to physical signs. Dry needling does not include the stimulation of auricular distal points.

[16.4.18.9 NMAC - Rp 16 NMAC 4.18.9, 8/10/2019]

#### **16.4.18.10 OBSTETRICS:**

A. No chiropractor shall undertake to deliver a human child or to assist the mother of the child during such delivery, except in cases of emergency or where another practitioner of the healing arts whose license authorizes him or her to deliver human children is present and actively participating in the delivery.

B. Nothing in this regulation shall preclude a chiropractor from undertaking to provide prenatal care to a pregnant woman provided that the chiropractor affirmatively advises the woman that it would be unlawful for the chiropractor to deliver the child and that the patient should make arrangements with another practitioner of the healing arts whose license authorizes him or her to deliver human children to attend the woman during her delivery; and provided further that during the course of the delivery the chiropractor refrains from any cutting of human tissues, including but not limited to the cutting of the umbilical cord.

C. Nothing in this regulation shall be construed to prevent a licensed chiropractor from obtaining a license in another healing arts profession which includes the delivery of human babies in the normal scope of its practice and from practicing obstetrics pursuant to such a second healing arts license.

[16.4.18.10 NMAC - Rp 16 NMAC 4.18.10, 8/10/2019]

#### **16.4.18.11 IMAGING EXAMINATION:**

A. The following requirements for imaging examination have been established because of concerns about over-radiation and unnecessary X-ray exposure. The following should appear on films:

- (1) patient's name and age;
- (2) doctor's name, facility name, and address;
- (3) date of study;
- (4) left or right marker;
- (5) other markers as indicated;
- (6) adequate collimation;
- (7) gonad shielding, where applicable.

B. Minimum of A-P and lateral views are necessary for any regional study unless clinically justified.

C. As clinical evidence indicates, it may be advisable to produce multiple projections where there is an indication of possible fracture, significant pathology, congenital defects, or when an individual study is insufficient to make a comprehensive diagnosis/analysis.

D. Each film should be of adequate density, contrast, and definition, and no artifacts should be present.

E. The subjective complaints, if any, and the objective findings substantiating the imaging study must be documented in the patient record.

F. These rules are intended to complement and not supersede those rules adopted by the environmental improvement board set forth in x-rays in the healing arts, 20.3.6 NMAC including but not limited to the requirement of certification.

[16.4.18.11 NMAC - Rp 16 NMAC 4.18.11, 8/10/2019]

**16.4.18.12 CHIROPRACTIC EXERCISE AND THERAPUTIC TREATMENT OF THE NEUROMUSCULOSKELETAL SYSTEM:** Chiropractic physicians may prescribe or administer all necessary mechanical, hygienic and sanitary measures incident to the care of the body including but not limited to air, sound, cold, diet, nutritional adjuncts, exercise, heat, light, massage, physical culture, rest, ultrasound, water, oxygen and electricity and other devices used for the delivery of chiropractic physiologic therapeutic procedures.  
[16.4.18.12 NMAC - Rp 16 NMAC 4.18.12, 8/10/2019]

**16.4.18.13 MANIPULATION UNDER ANESTHESIA:** Chiropractic physicians who can demonstrate training in a course of doctoral or post-doctoral studies certified within an accredited institution recognized by the board are authorized to perform manipulation under anesthesia, with that anesthesia administered by an appropriate, licensed provider.  
[16.4.18.13 NMAC - Rp 16 NMAC 4.18.13, 8/10/2019]

#### **HISTORY OF 16.4.18 NMAC:**

**PRE-NMAC History:** The material in this part was derived from that previously filed with the state records center and archives under:

BCE 69-1, Board Rules and Regulations, filed 9/30/1969.

BCE 80-1, Obstetrics (Rule 12.00), filed 7/11/1980.

Rule 9-87, Acupuncture, filed 1/28/1997.

Rule 12-87, Obstetrics, filed 1/28/1987.

Rule 9-91, Meridian Therapy, filed 8/6/1991.

Rule 9-92, Meridian Therapy, filed 4/2/1992.

Rule 15-93, Radiographic Examination, filed 3/18/1993.

Rule 15-94, Radiographic Examination, filed 1/7/1994.

Rule 16-94, Diagnostic Procedures, filed 4/4/1994.

**History of Repealed Material:** 16.4.18 NMAC, Practice Procedures filed 12/15/2004 Repealed effective 8/10/2019.

#### **Other History:**

Rule 9-92, Meridian Therapy (filed 4/2/1992); Rule 12-87, Obstetrics (filed 1/28/1987); Rule 15-94, Radiographic Examination (filed 1/7/1994); and Rule 16-94, Diagnostic Procedures (filed 4/4/1994) were all renumbered, reformatted, and replaced by 16 NMAC 4.18, Practice Procedures, effective 11/16/1997.

16 NMAC 4.18, Practice Procedures (filed 10/17/1997) was renumbered, reformatted, amended and replaced by 16.4.18 NMAC, Practice Procedures, effective 1/15/2005.

16.4.18 NMAC, Practice Procedures filed 12/15/2004 was replaced by 16.4.18 NMAC, Practice Procedures effective 8/10/2019.