



## PRECEPTORSHIP POLICY

Preceptorships are being offered at various chiropractic educational institutions. A policy for guidelines as to the responsibilities of the licensed chiropractor, as well as the permissible acts allowed by the preceptor, was developed, and adopted by the Board in 2000 (updated in 2018). The New Brunswick Chiropractors' Association (NBCA) reserves the right, without notice, to change, revise, or eliminate any information in this policy. Revised information may supersede, modify, or eliminate existing information. An up-to-date version of the most current policy will be maintained in the Association's office and the Registrar. It is the responsibility of program participants to familiarize themselves with, and to ensure following, the most up-to-date policy.

### Preceptorships

A registered NBCA member, in good standing, who meets the requirements of an accredited chiropractic educational institution's preceptorship program, may provide a clinical opportunity to a student intern attending an accredited college program.

The NBCA licensed member agrees to:

- A. to provide to the NBCA detailed documentation of the intent to have a preceptor in their clinic which will include:
  - (i) The student's personal information such as name, address, expected date of graduation, etc.
  - (ii) the dates the preceptor student intern will present at their clinic,
  - (iii) the school that the student is attending at which the preceptorship is established, and
  - (iv) any other information that the Board may require.
- B. to provide verification that his/her liability insurance carrier and the educational institution will provide Liability insurance coverage within the parameters of the preceptorship,
- C. to assume responsibility for all actions of the preceptor student intern while in his/her clinic,
- D. to ensure that no money, goods or services are exchanged in return for supervision
- E. to release NBCA, its directors, employees and members from any and all special or expanded legal liability for injuries sustained or accidents incurred during the preceptorship,
- F. to identify the student intern to the patients in his/her office during the preceptorship program as an intern student, and not to imply they are a licensed member of the association,
- G. to sign the histories, examination forms, or clinical impressions documented by the student intern under his/her supervision, and assume the responsibility for them as a permanent part of the patient file,
- H. to retain all patient related records, in which the student intern was involved, for the same time period as required by provincial law, and
- I. to not leave the premises of the office or clinic while undertaking a preceptorship program with the student intern present.

While undertaking a preceptorship program in the office of a licensed member of the New Brunswick Chiropractors' Association, a preceptor student intern under the supervision of the licensed member, shall:

- A. be allowed to take x-rays or diagnostic imaging of a patient:
  - i. this does not preclude them from positioning the patient, cassette and buckey with supervision of the licensed chiropractor, or
  - ii. developing the films.
- B. adjust patients with a high velocity, low amplitude thrust directed at an articulation of the human body,

- C. apply electro-modalities and massage units to the patient,
- D. obtain the signature of the licensed chiropractor on any forms completed by them that include the taking of a patient history, examination, clinical impressions or other documentation that becomes a permanent part of the patient file,
- E. not accept money, goods, or services in exchange for services rendered as a preceptor,
- F. never imply that they are a licensed member of the New Brunswick Chiropractors' Association,
- G. not attend to patients without the licensed chiropractor present on the premises of the office or clinic,
- H. assumes the risk of any accident or injury to him/herself during the preceptorship period, and
- I. agree to release NBCA, its directors, employees and members from any and all special or expanded legal liability for injuries sustained or accidents incurred during or after the preceptorship,
- J. ensure appropriate permit(s) to work in Canada are secured (if applicable).

## NB Preceptorship Application

**The following documents must be filled out and signed by both the Chiropractor and Intern and returned to the NBCA prior to commencing.**

Student name:

Student intern at:  (Chiropractic Educational Institution)

DOB:

Expected date of graduation:

Address:

Address in NB (if different from above):

Telephone:

Expected dates of the preceptorship:

Clinic location(s):

## Agreement

Dr.  and Mr./Ms.

have read and understand the NBCA Preceptorship Policy. I, Dr.

understand that I am not to leave the premises (office or clinic) while undertaking a preceptorship program with

the student intern Mr./Ms.  in attendance.

I, Dr.  agree to release the NBCA, its directors, employees and

members from all special or expanded legal liability for injuries sustained or accidents incurred during or after the preceptorship.

Attached is proof of CCPA PLP coverage and documentation from  regarding the Student Intern.

\_\_\_\_\_  
Signature of Licensed chiropractor

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Student Intern

\_\_\_\_\_  
Date