

**IOWA BOARD OF CHIROPRACTIC EXAMINERS
POLICY STATEMENT ON NEEDLE EMG IN CHIROPRACTIC PRACTICE**

Adopted by the Iowa Board of Chiropractic Examiners on October 12, 2005

Chiropractic care in the state of Iowa primarily deals with the neuromusculoskeletal system and employs differential diagnoses and procedures. Chiropractic physicians must be properly trained and demonstrate proficiency to perform appropriate procedures. (Iowa Code 151.1 and 151.8)

The Iowa Board of Chiropractic Examiners (IBCE) recognizes electrodiagnostic procedures including needle electromyography (needle EMG) as falling within the scope of chiropractic practice in Iowa. Needle EMG is performed to exclude, diagnose, describe and follow diseases of the peripheral nervous system and muscle, and is normally performed as part of an electrodiagnostic evaluation. Needle EMG refers to the recording and study of electrical activity of muscle using a needle electrode. Needle EMG assesses the integrity of the upper motor neurons, lower motor neurons, neuromuscular junction and the muscle itself. The procedure is seldom diagnostic for a particular disease entity. The major use is differentiating between diseases of muscle, peripheral motor neurons and neuromuscular junction.

A typical electrodiagnostic evaluation for the investigation of peripheral nerve or muscle disorders includes:

1. Development of a differential diagnosis by the physician performing the testing, based on an appropriate history and physical examination.
2. The decision to perform an electrodiagnostic evaluation, based on the history and physical examination finding obtained prior to the performance of the procedure and evident in the individual's record.
3. Nerve conduction studies (NCS) of appropriate nerves.
4. Completion of indicated needle EMG studies to evaluate the differential diagnosis and complement the NCS. Use of invasive needle electrode requires the skill of a chiropractic physician trained and certified in the technique, safety and interpretation of this special testing.
5. Electrodiagnostic testing specifically designed for each individual patient. It is often necessary to modify or add to the procedure during the examination, depending on the findings. For this reason, collection of clinical and electrophysiological data must be entirely supervised by a physician physically present in the facility in which the studies are performed, and actively involved with the examination findings.
6. Motor, sensory and mixed nerve conduction studies, and late responses such as F-wave and H-reflex studies that are frequently complementary and performed during the same evaluation.

Council on Chiropractic Education (CCE)-approved chiropractic college curriculum provides training in the basic sciences and skills relevant to electrodiagnostic testing, but additional training and testing is required to meet the appropriate standard. The IBCE recognizes that it is the position of the American Chiropractic Neurology Board that electrodiagnostic evaluation and interpretation in the assessment of neurological disorders should be performed by a board-eligible or board-certified chiropractic neurologist. It is the position of the IBCE that doctors of chiropractic performing needle EMGs in Iowa, must meet the following minimum eligibility requirements:

1. Completion of 120 approved hours of electrodiagnostic training that includes:
 - History and physical examination procedures appropriate to determining a differential diagnosis involving diseases of upper motor neurons, lower motor neurons, neuromuscular junction and muscle;
 - Hands-on technique experience for needle EMG, NCS and complementary studies;
 - Experience in interpretation and formulating appropriate treatment and referral for a broad scope of neurological disorders;
 - Training in safe and sterile technique;
 - Available documentation of sponsoring institution, instructor credentials, syllabus and verification of attendance; and
 - Passage of a certification exam following course completion.
2. Board certification in chiropractic neurology must be active and in good standing with either the American Chiropractic Neurology Board or the International Academy of Chiropractic Neurology.
3. While not required in rule, IBCE recommends that doctors of chiropractic performing needle EMGs in Iowa, obtain 15 hours of CCE-approved continuing education in electrodiagnostics, including needle EMG. IBCE recommends that the continuing education be in addition to the 60 hours of continuing education required for all licensees.

This policy statement is not a legally binding opinion of IBCE, but is intended to provide guidance to the doctors of chiropractic and to the public. Formal policy may be made only through administrative rules, declaratory orders or contested case decisions.