



Nova Scotia College of Chiropractors

Board Policy: Temporary Registration / Special Event Conditional Licence

*Approved by
the Board of
the NSCC*

*Effective
April 24, 2004*

*Revised
April 30, 2011
February 25, 2017*

*Pages
2*

1. Application for Temporary Registration for Chiropractors who will be providing chiropractic services to a sports team or at a sporting event while in Nova Scotia.

Application for Temporary Registration requires the applicant to submit the following along with a copy of the attached application form to the NSCC office.

- a) Notarized application form and undertaking (see attached);
- b) Two (2) passport sized photographs which must be notarized;
- c) Provide proof of graduation from a CCEC approved program or its equivalent;
- d) A letter of good standing from the province or jurisdiction in which you currently hold a licence. If you hold a licence in more than one jurisdiction, you must submit a letter of good standing from each of those jurisdictions;
- e) Provide proof of sufficient malpractice insurance coverage (\$5 million per year and \$5 million per incident; NSCC Policy Prof-1);
- f) For chiropractors wishing to utilize acupuncture as part of their treatment plan, you must also submit with the application, proof of acupuncture certification and proof of sufficient liability insurance specific for acupuncture (as per NSCC policy Prof-3);
- g) Pay fee as prescribed by the Board of the College;
- h) Completion of any additional registration requirements as outlined by the Chiropractic Act, Regulations and Policies of the Board of the Nova Scotia College of Chiropractors.



Temporary Registration is offered as a form of Special Event Conditional Licensure under the Chiropractic Act (1999). A Special Event Conditional Licence will allow for the practice of Chiropractic in Nova Scotia with the following Conditions/Restrictions. Failure to comply with any of these conditions/restrictions may result in immediate suspension of the Conditional Licence, and may be subject to further action as deemed necessary by the Board of the Nova Scotia College of Chiropractors. Duration of the Conditional Licence is to be determined by the Board.

2. Conditions/ Restrictions

- a) As per the NSCC Regulations pursuant to the Chiropractic Act (1999), no persons shall be approved for temporary registration whose name has been removed from the register of a Board-approved chiropractic professional association or college by reason of the person's conduct or a disciplinary proceeding arising out of the person's conduct.
- b) For chiropractors who comprise part of a host medical team at an event:
 - registration is limited to the chiropractic management of the athletes, coaches, officials, volunteers, mission staff and those directly associated with the event itself;
 - no spectators may be treated at a sporting event.
- c) For chiropractors travelling with a specific team:
 - registration is limited to the chiropractic management of the athletes, coaches and those directly associated with that team;
 - no event officials, volunteers, or spectators may be treated at a sporting event.
- d) No charge is to be made to the patient for chiropractic services.
- e) Informed consent form approved by the CCPA must be used.
- f) Acupuncture may be used as an adjunctive therapy and not as a stand-alone treatment, as per NSCC Policy PROF-3.
- g) Temporary Registration will be granted at the discretion of the Registrar.



Nova Scotia College of Chiropractors

Form: Temporary Registration / Special Event Conditional Licence

General Information

Applicant Name: _____

Clinic Address: _____

Mailing Address (if different): _____

Clinic Telephone: _____ Clinic Fax: _____

Clinic Email: _____ Clinic Website: _____

Jurisdictions in which a Chiropractic Licence is currently held (please list all that apply):

	REGION	LICENCE #	CONTACT PERSON	PHONE
1.	_____	_____	_____	_____
2.	_____	_____	_____	_____
3.	_____	_____	_____	_____

Name of Event: _____

Event Date (s): _____

Event Location: _____

Duration of Requested Licensure: *from* _____ *to* _____

Reason for Temporary Licence: _____

Name of Organization/Sports Team (if applicable): _____

Team Contact info (if applicable): _____

Number of Team Members (if applicable): _____



Please return to:

Nova Scotia College of Chiropractors

Attention: Registrar

502-5657 Spring Garden Road, Box 142

Halifax, NS B3J 3R4

Phone: 902-407-4255 | Fax: 902-425-2441 | email: inquiries@chiropractors.ns.ca