COURSE TITLE

Date: Location: Instructor: Hours:

PROGRAM DESCRIPTION

Provide a brief overview of what registrants can expect from the program.

PROGRAM GOALS & OBJECTIVES

Upon successful completion of this program, the registrant will be able to:

- 1.
- 2.
- 3.

PROGRAM TOPICS

Please select which of the following topics your program covers:

□ Ethics □ Proper & Ethical Billing and Coding □ Adjustive Technique □ Differential Diagnosis

□ Documentation/ Record Keeping □ Rehabilitation □ Nutrition □ Risk Management

FORMAT

List methods of instruction used. Example: PowerPoint, lecture, hands-on training.

OUTLINE

Provide a course outline detailing the material covered. State boards will require 3-5 bullet points of content for each credit hour.

Example:

8:00am-9:30am

- Body composition testing
- Literature review
- Clinical application and interpretation

REFERENCES

(List sources utilized in assembling session information to include journals, textbooks, publications, etc.)

Example: Principles of Neural Science, 4th ed., McGraw-Hill, New York Functional Neurology for Practitioners of Manual Therapy by Randy Beck, DC, PhD

* If a comprehensive, hour-by-hour outline of your program already exists, we can confirm if it would be sufficient for submission to state boards.