

# Academy of Chiropractic's Hospital Qualification

I certify by checking off the following that I have completed the following courses:

1. Inter-professional-Based Spine Care - 2.5 Hours
2. MRI Spine Credentialing: 25 Hours
3. Triage Trauma Patients [Personal Injury Bootcamp]: 9 Hours
4. Spinal Biomechanical Engineering: 16 Hours
5. Spinal Trauma Pathology - 9 Hours
6. Spinal Disc and Ligament Neurology and Pathology – 7 Hours
7. Concussion; TBI-mTBI-PTSD Testing and Diagnosis - 10 Hours
8. Stroke Anatomy & Evaluation for Chiropractors and Manual Medicine Specialists: 8 Hours
9. Primary Spine Care 12 – 20 Hours

NAME:

ADDRESS:

ZIP CODE:

PHONE:

Credit Card #:

Exp. Date

Banking Debit -Routing #:

Account #:

State(s) and License(s) #'s:

Malpractice/Licensure actions against your license [explained on the reverse page. We will verify this with your licensure board].

None \_\_\_\_\_ (please initial)

**Please send via email to: [DrMark@AcademyOfChiropractic.com](mailto:DrMark@AcademyOfChiropractic.com)**

## Credentialing Fee \$500

**Recognized by:**

**Cleveland University-Kansas City, College of Chiropractic**

**PLEASE ALLOW 5 BUSINESS DAYS FOR PROCESSING**