# SUTIN THAYER SP BROWNE

# A PROFESSIONAL CORPORATION

#### **LAWYERS**

IRWIN S. MOISE (1906-1984) LEWIS R. SUTIN (1908-1992) FRANKLIN JONES (1919-1994) RAYMOND W. SCHOWERS (1948-1995) GRAHAM BROWNE (1935-2003)

SAUL COHEN (Of Counsel)

BENJAMIN ALLISON TIMOTHY J. ATLER PAUL BARDACKE ANNE P. BROWNE SUZANNE WOOD BRUCKNER RODINA C. CAVE SUSAN G. CHAPPELL MARIA MONTOYA CHAVEZ EDUARDO A. DUFFY MONICA C. EWING
MICHAEL J. GOLDEN
GAIL GOTTLIEB
SUSAN M. HAPKA
ROBERT G. HEYMAN
TRACY L. HOFMANN
CHRISTOPHER A. HOLLAND
HENRY A. KELLY
KERRY KIERNAN
PETER S. KIERST
RACHEL S. KING
TWILA B. LARKIN
DEREK V. LARSON
STEVAN DOUGLAS LOONEY
JEAN C. MOORE
LYNN E. MOSTOLLER
TIMOTHY J. MURPHY

SARITA NAIR
TRACI N. OLIVAS
MICHELLE K. OSTRYE
CHARLES J. PIECHOTA
JAY D. ROSENBLUM
SANDRA E. ROTRUCK
FRANK C. SALAZAR
JUSTIN R. SAWYER
RONALD SEGEL
ANDREW J. SIMONS
MARIPOSA PADILLA SIVAGE
TRAVIS R. STEELE
NORMAN S. THAYER
BENJAMIN E. THOMAS
HANNAH S. TURNER
CHRISTINA S. WEST

TWO PARK SQUARE
6565 AMERICAS PARKWAY, N.E.
ALBUQUERQUE, NEW MEXICO 87110
POST OFFICE BOX 1945
ALBUQUERQUE, NEW MEXICO 87103
505-883-2500
FAX 505-888-6565

317 PASEO DE PERALTA SANTA FE, NEW MEXICO 87501 POST OFFICE BOX 2187 SANTA FE, NEW MEXICO 87504 505-988-5521 FAX 505-982-5297

WWW.SUTINFIRM.COM

September 13, 2012

Gary K. King, Esq. New Mexico Attorney General Mary H. Smith, Esq. Assistant Attorney General 111 Lomas Blvd. NE, Suite 300 Albuquerque, NM 87102

Zachary A. Shandler, Esq. Assistant Attorney General P.O. Box 1508 Santa Fe. NM 87504

James Turner, Esq. Swankin & Turner 1400 16th Street NW, Suite 101 Washington, D.C. 20036 Daniel R. Rubin, Esq. Special Assistant Attorney General 2055 S. Pacheco, Bldg. 400 Santa Fe, NM 87505

Charles V. Garcia, Esq. Patrick Ortiz, Esq. Cuddy & McCarthy, LLP 7770 Jefferson Street, NE, Suite 305 Albuquerque, NM 87109

Re:

New Mexico Board of Pharmacy, et al. v. New Mexico Board of

Chiropractic Examiners, et al., New Mexico Court of Appeals No. 31,690

#### Dear Counsel:

We enclose the following pleadings:

- 1. An endorsed copy of the Motion of the American Chiropractic Association for Leave to File an Amicus Curiae Brief in Support of Appellee New Mexico Board of Chiropractic Examiners, filed on September 13, 2012; and
- 2. A copy of the Brief of Amicus Curiae American Chiropractic Association in Support of Appellee New Mexico Board of Chiropractic Examiner's Brief in Chief, which was conditionally filed with the Court, pursuant to Rule 12-215(A) NMRA.

# SUTIN THAYER & BROWNE A PROFESSIONAL CORPORATION LAWYERS

September 13, 2012 Page 2

SMH:kcj Enclosures 2483800.doc

Please contact me if you have any questions regarding this matter.

Very truly yours,

SUTIN, THAYER & BROWNE A Professional Corporation

Susan M. Hapka

Albuquerque Office

# IN THE COURT OF APPEALS OF THE STATE OF NEW MEXICO

NEW MEXICO BOARD OF PHARMACY, and NEW MEXICO MEDICAL BOARD,

Appellants,

٧.

No. 31,690

[Consolidated with No. 31,668]

NEW MEXICO BOARD OF CHIROPRACTIC EXAMINERS,

Appellee,

and

INTERNATIONAL CHIROPRACTORS ASSOCIATION,

Appellant,

٧.

NEW MEXICO BOARD OF CHIROPRACTIC EXAMINERS,

Appellee.

# MOTION OF THE AMERICAN CHIROPRACTIC ASSOCIATION FOR LEAVE TO FILE AN *AMICUS CURIAE* BRIEF IN SUPPORT OF APPELLEE NEW MEXICO BOARD OF CHIROPRACTIC EXAMINERS

Pursuant to Rule 12-215 NMRA, the American Chiropractic Association ("ACA") hereby respectfully requests that it be permitted to file an *Amicus Curiae* Brief in Support of Appellee New Mexico Board of Chiropractic Examiners. As grounds for this Motion, the ACA states as follows.



COURT OF APPEALS OF NEW MEXICO ALBUQUERQUE FILED

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- 1. The ACA represents over 13,000 doctors of chiropractic and chiropractic students across the nation. It is the largest professional association representing Doctors of Chiropractic and represents the views of the mainstream of the chiropractic profession.
- 2. The ACA promotes the highest standards of ethics and patient care, contributing to the health and well-being of millions of chiropractic patients. It provides a wide variety of active advocacy efforts on behalf of its members, focused on federal legislation, regulatory affairs, insurance matters, communications, member services, and legal initiatives.
- 3. The ACA seeks to file an *Amicus Curiae* Brief with the Court in order to outline the education, training and experience of Doctors of Chiropractic and how that education, training and experience supports allowing Doctors of Chiropractic, working in their own communities and States through their respective state legislatures and regulatory agencies, to determine their scope of practice.
- 4. The ACA has conditionally filed its brief with this Motion, as authorized by Rule 12-215(A) NMRA.
- 5. Counsel for the parties was contacted. Appellant New Mexico
  Medical Board, Appellant International Chiropractors Association and Appellee
  New Mexico Board of Chiropractic Examiners do not oppose this Motion.
  Appellant New Mexico Board of Pharmacy opposes this Motion.

Wherefore, the American Chiropractic Association respectfully requests that this Court grant it leave to file its Brief of Amicus Curiae in Support of Appellee New Mexico Board of Chiropractic Examiners.

Respectfully Submitted,

ODIN FELDMAN PITTLEMAN, P.C.

Thomas R. Daly

Attorney for Amicus Curiae

American Chiropractic Association

1775 Wiehle Avenue, Suite 400

Reston, VA 20190

Telephone: (703) 218-2110

Facsimile: (703) 218-2160

Admitted Pro Hac Vice

and

SUTIN, THAYER & BROWNE A Professional Corporation

Susan M. Hapka

Attorneys for Amicus Curiae

American Chiropractic Association

P. O. Box 1945

Albuquerque, New Mexico 87103

Telephone: (505) 883-2500

Facsimile: (505) 855-9572

### **CERTIFICATE OF SERVICE**

I hereby certify that a true and correct copy of the foregoing pleading was sent via first class mail, postage prepaid, to the following counsel of record this 13th day of September 2012.

Gary K. King, Esq. New Mexico Attorney General Mary H. Smith, Esq., Assistant Attorney General Attorneys for New Mexico Board of Pharmacy 111 Lomas Blvd. NE, Suite 300

Albuquerque, NM 87102 Telephone: (505) 222-9000 Facsimile: (505) 222-9006

Daniel R. Rubin, Esq. Special Assistant Attorney General Attorney for New Mexico Medical Board 2055 S. Pacheco, Bldg. 400 Santa Fe, NM 87505

Telephone: (505) 476-7233 Facsimile: (505) 476-7237

Zachary A. Shandler, Esq. Assistant Attorney General Attorney for New Mexico Board of Chiropractic Examiners P.O. Box 1508 Santa Fe, NM 87504

Telephone: (505) 827-6921 Facsimile: (505) 827-6478

Charles V. Garcia, Esq. Patrick Ortiz, Esq. Cuddy & McCarthy, LLP Attorneys for International Chiropractors Association 7770 Jefferson Street, NE, Suite 305 Albuquerque, NM 87109 Telephone: (505) 888-1335,

Facsimile: (505) 888-1369

James Turner, Esq.
Swankin & Turner
Attorney for the International Chiropractors Association
1400 16th St. NW, Suite 101
Washington, D.C. 20036
Telephone (202) 462-8800
Facsimile (202) 265-6564

SUTIN, THAYER & BROWNE

A Professional Corporation

By Susan MHaple

# IN THE COURT OF APPEALS OF THE STATE OF NEW MEXICO

NEW MEXICO BOARD OF PHARMACY, and NEW MEXICO MEDICAL BOARD,

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NEW MEXICO BOARD OF CHIROPRACTIC EXAMINERS,

Appellee,

and

INTERNATIONAL CHIROPRACTORS ASSOCIATION,

Appellant,

٧.

NEW MEXICO BOARD OF CHIROPRACTIC EXAMINERS,

Appellee.

# BRIEF OF AMICUS CURIAE AMERICAN CHIROPRACTIC ASSOCIATION IN SUPPORT OF APPELLEE NEW MEXICO BOARD OF CHIROPRACTIC EXAMINERS' BRIEF IN CHIEF

ODIN FELDMAN PITTLEMAN, P.C.

Thomas R. Daly

1775 Wiehle Avenue, Suite 400

Reston, VA 20190

Telephone: (703) 218-2110

Facsimile: (703) 218-2160

Admitted Pro Hac Vice

Attorneys for Amicus Curiae

American Chiropractic Association

SUTIN, THAYER & BROWNE

A Professional Corporation

Susan M. Hapka

P.O. Box 1945

Albuquerque, NM 87103

Telephone: (505) 883-2500

Facsimile: (505) 855-9572

Attorneys for Amicus Curiae

American Chiropractic Association

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ACA Master Plan, ratified by the House of Delegates June 1964, amended June 1979, June 1989, July 1994 and September 2000
ACA Master Plan, ratified by the House of Delegates June 1964, amended, June 1975
American Chiropractic Association, 2011 Annual Report
American Chiropractic Association, Chiropractic Specialty Programs approved by ACA (11/24/2011)
National Board of Chiropractic Examiners, Practice Analysis of Chiropractic 2010 6-7 (May 2010)
2010 IRS Form 990, Return of Organization Exempt from Income Tax of the American Chiropractic Association and the International Chiropractors Association

# I. NOTICE OF INTENT TO FILE AMICUS BRIEF

A Notice of Intent to File *Amicus Curiae* Brief by the American Chiropractic Association in Support of Appellee New Mexico Board of Chiropractic Examiners was filed on August 28, 2012 and served on all parties. All parties received timely notice of the intent to file the brief.

# II. SUMMARY OF PROCEEDINGS AND STANDARD OF REVIEW

The American Chiropractic Association incorporates by reference the Summary of Proceedings and Standard of Review set out in the Brief in Chief filed by Appellee New Mexico Board of Chiropractic Examiners.

#### III. ARGUMENT

A. Doctors of Chiropractic Are Highly Trained Health Care Providers Whose Professional Perspective Provided Through the Board of Chiropractic Examiners Should Be Afforded Equal Deference by the Court.

Chiropractic is a branch of the healing arts which is concerned with human health and disease processes. Doctors of Chiropractic are physicians who consider man as an integrated being and give special attention to the physiological and biochemical aspects including structural, spinal, musculoskeletal, neurological, vascular, psychological, nutritional, visceral, emotional and environmental relationships. They are trained in diagnosis so they may treat patients effectively and make timely referral to appropriate health care providers. ACA Master Plan,

ratified by the House of Delegates June 1964, amended June 1979, June 1989, July 1994 and September 2000.

The practice and procedures which may be employed by Doctors of Chiropractic (chiropractic physicians) are based on the academic and clinical training received in and through accredited chiropractic colleges and include, but are not limited to, the use of current diagnostic and therapeutic procedures. Such procedures specifically include the adjustment and manipulation of the articulations and adjacent tissues of the human body, particularly of the spinal column, and the treatment of intersegmental aberrations for alleviation of related functional disorders. ACA Master Plan, ratified by the House of Delegates June 1964, amended June 1979, June 1989, July 1994 and September 2000.

This academic and clinical training is both extensive and exhaustive and is very comparable to the level of the education and training received by medical doctors. According to the National Board of Chiropractic Examiners, "Government inquiries, as well as independent investigations by medical practitioners, have affirmed that today's chiropractic training is of equivalent standard to medical training in all pre-clinical subjects. (Chapman-Smith, 1988). A doctor of chiropractic's training generally requires a minimum of 7 academic years of college study and a clinical rotation before entering private practice.

In the United States, the Council on Chiropractic Education (CCE) is granted authority by the U.S. Department of Education to accredit chiropractic programs and institutions. Currently, 18 chiropractic training programs in the United States are accredited by the CCE. Twelve programs outside of the United States are accredited through affiliated chiropractic education councils: Australia (3), Canada (2), Denmark, France, Japan, New Zealand, South Africa, and the United Kingdom (2). Chiropractic educational programs in Japan, South Korea, and Spain are currently pursuing accreditation, while others — Brazil (2), Malaysia, Mexico (2), South Africa, and Switzerland — operate within locally-accredited university systems. Recent announcements of additional campuses for current programs as well as plans for new programs indicate that chiropractic education is continuing to expand globally.

To ensure that high standards in education are maintained, all accredited chiropractic colleges must meet stringent requirements. Among other goals, criteria address an on-going system of evaluation and planning, incorporation, governance, administration, faculty and staff, learning resources, finance, student services, and doctor of chiropractic degree program curricula. Each program's curriculum must be comprised of a minimum of 4,200 instructional hours of course credits; course offerings must address subjects specified by the CCE (2007).

Once accepted into an accredited program, the chiropractic student typically follows a curriculum that consists of either 4 or 5 academic years. In a typical trimester-based chiropractic program, a first-year chiropractic student can expect to study the following courses:

General Anatomy
Histology
Chiropractic Principles
Palpation
Human Physiology
Chiropractic Procedures
Embryology
Introduction to Physical Examination
Human Biochemistry
Clinical Chiropractic
Neuroanatomy and Neurophysiology
Normal Radiographic Anatomy
Fundamentals of Nutrition
Functional Anatomy/Biomechanics
Spinal Anatomy

Second-year coursework typically includes the following:

Pharmatoxicology
Pathology
Chiropractic Procedures
Clinical Orthopedics and Neurology
Community and Public Health
Clinical Nutrition
Practice Management
Differential Diagnosis
Emergency Care
Clinical Microbiology
Chiropractic Principles
Physics of Clinical Imaging
Nutritional Assessment
Physiological Therapeutics

Research Methods Imaging Interpretation Applied Clinical Chiropractic

Third-year coursework typically includes the following:

Integrated Chiropractic Clinical Application Chiropractic Principles Radiological Positioning and Technique Clinical Application of Manual Procedures Clinical Internship Clinical Psychology **Pediatrics** Clinical Laboratory Clerkship Original Research Project Physiological Therapeutics Practice Management Diagnostic Imaging Interpretation Differential Diagnosis Dermatology Obstetrics and Gynecology Geriatrics Ethics and Jurisprudence

The fourth year often consists of a clinical internship. In addition to treating patients under the supervision of an experienced chiropractor, many students experience a clinical rotation through an integrated healthcare facility such as a hospital or veterans clinic. The Doctor of Chiropractic (D.C.) degree is awarded upon graduation, signifying successful completion of the required program."

National Board of Chiropractic Examiners, Practice Analysis of Chiropractic 2010, 6-7 (May 2010).

A recent survey and comparison prepared by the Oregon Chiropractic

Association provide a very specific example of these requirements and the

comparable nature of chiropractic and medical education. The following

comparison outlines the class hours required in the doctor of chiropractic degree

program of the University of Western States and in the medical doctor degree

program at the Oregon Health Sciences University:

# Physician Comparison

Chiropractic Degree	<b>OHSU Medical Doctors Degree</b>	
Program	Program	
II. in a f Western States	Oregon Health Sciences	
University of Western States	University	

Course Title	Class Hours	Course Title	Class Hours	
Gross Anatomy I-III	288	Gross Anatomy	190	
Spinal Anatomy	24	Histology	84	
Histology 1, 11	144	Medical Biochemistry	145	
Biochemistry 1, 11	120	Human Physiology	149	
Physiology 1, 11	132	Developmental Biology	40	
Neurophysiology	72	Neuroanatomy	84	
Embryology	36	Nutrition	20	
Neuroanatomy	96	Ophthalmology	36	
Nutrition	48	Otolaryngology	72	
Clinical Nutrition	48	Medical Psychology	49	
Physical Diagnosis, 1, 11	144	Introduction to Psychiatry	43	
Clinical Psychology	36	General Pathology	68	
General Pathology 1, 11	120	Medical Genetics	32	
Clinical Pathology	36	Cardiopulmonary Resuscitation		
Genetics	48	Introduction of Medical Microbiology	90	
CPR/Emergency Care	12	Introduction to Public Health	26	
Microbiology & Public Health	72	Public Health and Epidemiology	40	

Clinical Micro. & Public Health	84	Immunology	35
Toxicology & Pharmacology	48	Pharmacology	72
Dermatology	24	Pathophysiology of Skin, Bone & C.T.	69
Clinical Lab	60	Blood/Reticuloendothelial Pathophysiology	117
Correlative & Differential Dx	48	Pathophysiology of the CNS/Muscle and	
Neuromusculoskeltal DX1TTX	276	Special Sensory Organs	158
Physiotherapy 1, 11	120	Neurology and Neurosurgery	216
Soft Tissue / Rehabilitation I, II	72	Gastrointestinal Pathophysiology	123
Gastroenterology Dx/Tx	36	Respiratory Pathophysiology	79
Cardiorespiratory Dxlrx	36	Cardiovascular Pathophysiology	117
Genitourinary Survey	60	Endocrine Pathophysiology	43
Obstetrics	24	Reproductive Pathophysiology	55
Jurisprudence & Ethics	24	Renal Pathophysiology	117
Radiographic Anatomy I – III	84	Law and Medicine	24
Bone Pathology I – IV	132	Radiographic Diagnosis	24
Soft Tissue Radiographic Interp.	24	Child Health (CON 620, lecture)	48
Radiographic Technique I – 111	108		
Minor Surgery/Proctology	24	TOTAL CLASS HOURS	2,465
Patient/Practice Management I-IV	96	Patient Evaluation (413,611)	192
Adjustive Technique I – X	444	Third-Year Medicine	432
Clinical Pediatrics	36	Child Health	384
Clinical Geriatrics	24	Psychiatry Clinical Clerkship	216
Biomechanics & Palpation I – IV	204	Obstetrics and Gynecology	216
Narrative Report Writing	12	Surgery	432
Clinical Research Methods 1,	60	Special Programmed Instruction	540
Principles of Chiro. Philosophy	96		
Clinical Topics	36		
Clinical Reasoning	12	TOTAL HOSPITAL HOURS	2,412

		TOTAL M.D. REQUIREMENT	4,877
TOTAL CLASS HOURS	3,780	Optional hours not included in totals.	
Clinic Phase I, II, III, IV – A, B, C	1,116		
TOTAL D.C. HOURS	1,116		
TOTAL D.C. REQUIREMENTS	4,896		

Postdoctoral training in the chiropractic profession is also widely available in a variety of clinical disciplines and specialties which include:

- 1. Chiropractic Diagnosis and Management of Internal Disorders:

  DABCI (Diplomate American Board Chiropractic Internists) Program

  administered by the American Chiropractic Association Council on Diagnosis and
  Internal Diseases;
- 2. Chiropractic Occupational Health & Applied Ergonomics: DACBOH (Diplomate American Chiropractic Board Occupational Health) Program administered by the American Chiropractic Association Council on Occupational Health;
- 3. Chiropractic Rehabilitation: DACRB (Diplomate American
  Chiropractic Rehabilitation Board) Program administered by the American
  Chiropractic Association Council on Chiropractic Physiological Therapeutics and
  Rehabilitation;

- 4. Chiropractic Diagnostic Imaging: DACBR (Diplomate American Chiropractic Board Radiology) Program administered by the American Chiropractic Association Council on Diagnostic Imaging;
- 5. Chiropractic Acupuncture: Program administered by The American Board of Chiropractic Acupuncture an autonomous credentialing agency maintained by the ACA Council of Chiropractic Acupuncture. It is recognized by the ACA as the sole authority for credentialing in chiropractic acupuncture, conferring the DABCA (Diplomate of the American Board of Chiropractic Acupuncture);
- 6. Chiropractic Nutrition: DCBCN (Diplomate Chiropractic Board of Clinical Nutrition). The CBCN was created and operates under the auspices of the ACA with full autonomy in the areas of testing standards and procedures; DACBN (Diplomate American Clinical Board of Nutrition) Program administered by the American Clinical Board of Nutrition and accredited by ICE/NCCA, an autonomous credentialing agency;
- 7. Chiropractic Orthopedics: DACO (Diplomate Academy of Chiropractic Orthopedists) and DABCO (Diplomate American Board of Chiropractic Orthopedics). The Academy of Chiropractic Orthopedists and the American Board of Chiropractic Orthopedics are the two autonomous certification boards recognized and approved by the American Chiropractic Association; FACO

(Fellow of the Academy of Chiropractic Orthopedists): Accepted after successful completion of DACO or DABCO board certification;

- 8. Chiropractic Forensic Sciences: DABFP (Diplomate American Board of Forensic Professionals) Educational programs administered by the Council of Forensic Sciences. The American Board of Forensic Professionals is an autonomous credentialing/certification board recognized and approved by the American Chiropractic Association;
- 9. Chiropractic Clinical Neurology: Program administered by The American Chiropractic Neurology Board, an autonomous credentialing agency maintained by the ACA Council on Neurology and accredited by NOCA/NCCA. It is recognized by the ACA as the sole authority for credentialing in neurology for chiropractors, conferring the DACNB (Diplomate American Chiropractic Neurology Board);
- 10. Chiropractic Sports Physician: DACBSP® (Diplomate American Chiropractic Board of Sports Physicians) Program administered by the American Chiropractic Board of Sports Physicians. Also, CCSP® (Certified Chiropractic Sports Physician) Program administered by the American Chiropractic Board of Sports Physicians;
- 11. Chiropractic Pediatrics: DICCP (Diplomate in Clinical Chiropractic Pediatrics) Program administered by the International College of Chiropractic

Pediatrics. American Chiropractic Association, Chiropractic Specialty Programs approved by ACA (11/24/2011).

The very capable members of the New Mexico Board of Chiropractic

Examiners are part of an esteemed profession with extensive academic and clinical training. The American Chiropractic Association would therefore respectfully submit that the Board's perspective should therefore be afforded equal deference by the Court.

B. The American Chiropractic Association is the Nation's Largest and Preeminent Chiropractic Professional Association Representing the Chiropractic Mainstream Whose Long Established Policy is to Recognize Local Doctors in Each State Are Best Equipped to Determine Matters of Scope of Practice.

The American Chiropractic Association represents over 13,000 doctors of chiropractic and chiropractic students across the nation. It provides a wide variety of active advocacy efforts focused on federal legislation, regulatory affairs, insurance matters, communications, member services, and legal initiatives.

American Chiropractic Association, 2011 Annual Report. The American Chiropractic Association is also approximately three times the size of the International Chiropractors Association in terms of revenue and budget. 2010 IRS Form 990, Return of Organization Exempt from Income Tax of the American Chiropractic Association and the International Chiropractors Association.

ACA policy has long held that since "the practice of chiropractic is regulated in all states, Puerto Rico, nine provinces in Canada, and a number of foreign countries, the present scope of practice is necessarily determined locally by existing statutory enactment and judicial determination in the separate jurisdictions." ACA Master Plan, ratified by the House of Delegates June 1964, amended, June 1975. Such policy is based on the belief that doctors, working in their own communities and states, are best equipped to determine matters of scope of practice through their respective state legislatures and regulatory agencies.

We therefore respectfully submit that the outside intervention of the International Chiropractors Association, in aligning itself with the views and actions of the New Mexico Medical Board and the New Mexico Board of Pharmacy in opposition to the New Mexico Board of Chiropractic Examiners, does not represent the views of the mainstream of the chiropractic profession.

#### IV. CONCLUSION

When deciding the issues on appeal, the ACA respectfully requests that the Court consider the education, training and experience of Doctors of Chiropractic and how that education, training and experience supports allowing Doctors of Chiropractic, working in their own communities and States through their respective state legislatures and regulatory agencies, to determine their scope of practice.

# Respectfully Submitted,

# ODIN FELDMAN PITTLEMAN, P.C.

Thomas R. Daly

Attorney for Amicus Curiae

American Chiropractic Association

1775 Wiehle Avenue, Suite 400

Reston, VA 20190

Telephone: (703) 218-2110

Facsimile: (703) 218-2160

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Susan M. Hapka

Attorneys for Amicus Curiae

American Chiropractic Association

P. O. Box 1945

Albuquerque, New Mexico 87103

Telephone: (505) 883-2500 Facsimile: (505) 855-9572

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Gary K. King, Esq.
New Mexico Attorney General
Mary H. Smith, Esq., Assistant Attorney General
Attorneys for New Mexico Board of Pharmacy
111 Lomas Blvd. NE, Suite 300
Albuquerque, NM 87102
Telephone: (505) 222-9000

Facsimile: (505) 222-9006

Daniel R. Rubin, Esq.
Special Assistant Attorney General
Attorney for New Mexico Medical Board
2055 S. Pacheco, Bldg. 400
Santa Fe, NM 87505
Telephone: (505) 476, 7233

Telephone: (505) 476-7233 Facsimile: (505) 476-7237

Zachary A. Shandler, Esq.
Assistant Attorney General
Attorney for New Mexico Board of Chiropractic Examiners
P.O. Box 1508
Santa Fe, NM 87504
Telephone: (505) 827-6921

Telephone: (505) 827-6921 Facsimile: (505) 827-6478

Charles V. Garcia, Esq.
Patrick Ortiz, Esq.
Cuddy & McCarthy, LLP
Attorneys for International Chiropractors Association
7770 Jefferson Street, NE, Suite 305
Albuquerque, NM 87109
Telephone: (505) 888-1335,
Facsimile: (505) 888-1369

James Turner, Esq. Swankin & Turner Attorney for the International Chiropractors Association 1400 16th St. NW, Suite 101 Washington, D.C. 20036 Telephone (202) 462-8800 Facsimile (202) 265-6564

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By Susan M