



# ACADEMY OF CHIROPRACTIC ARTS & SCIENCES

## Distance Learning **12 HOUR** CEU Option B PACKAGE Quiz/Course Evaluation Form

The date on this completed evaluation is your course completion date.

Complete the information below and EMAIL this completed & signed form to [ACASCEU1@gmail.com](mailto:ACASCEU1@gmail.com).

Your Distance Learning Certificate of Completion will be *emailed* to you within 14 days.

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
 Date of Birth: \_\_\_\_\_ Chiro License #: \_\_\_\_\_  
 Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_  
 Email Address: \_\_\_\_\_ Phone Number: \_\_\_\_\_

**Completion of this Quiz & Evaluation is Mandatory.** To receive continuing education credit, please answer all of the following questions and provide your signature under penalty of perjury at the bottom of this page.

Complete the quiz below by selecting the correct answer :

1. **Who is the Chiropractic Radiologist Featured ?**  
 A) David Gendreau      B) Terry Yochum      C) James Parker
2. **Who is the MEDICAL Radiologist Featured?**  
 A) Marcus Welby, M.D.      B) Doggie Houser, M.D.      C) Sana Khan, M.D.
3. **What NBA Player was treated as a Chiropractic Patient in the video?**  
 A) Bill Walton      B) John Stockton      C) Shaq
4. **What Olympic Sport was featured as Chiropractic Patients?**  
 A) Swimming      B) Gymnastics      C) Downhill Skiing
5. **What is the Chiropractic Technique discussed?**  
 A) Applied Kinesiology      B) Gonstead      C) Thompson      D) SOT

**After Completing the 12 Hours Distance Learning Courses, I am able to :**

- |   |                    |
|---|--------------------|
| 1 – Discuss Ethics / Philosophy in relation to Chiropractic Practice                    | 1. [ ] Yes [ ] No  |
| 2 – Explain indications and contraindications of Ethical decision making                | 2. [ ] Yes [ ] No  |
| 3 – Identify the common Ethical Challenges in Private Practice                          | 3. [ ] Yes [ ] No  |
| 4 – Describe trends associated with Chiropractic Radiology                              | 4. [ ] Yes [ ] No  |
| 5 – Discuss Bone Cancer Epidemiology, risk factors, prevention and detection strategies | 5. [ ] Yes [ ] No  |
| 6 – Discuss the physiological concerns that may accompany diagnostic use of X-Ray       | 6. [ ] Yes [ ] No  |
| 7 – Discuss Chiropractic Philosophy   | 7. [ ] Yes [ ] No  |
| 8 – Explain Chiropractic Clinical terms using patient friendly terminology              | 8. [ ] Yes [ ] No  |
| 9 – The course materials were presented in a well-organized and clearly written manner  | 9. [ ] Yes [ ] No  |
| 10 – Explain indications and contraindications of Chiropractic Adjustments              | 10. [ ] Yes [ ] No |

☐ I declare to the California Chiropractic Board of Chiropractic Examiners **UNDER THE PENALTY OF PERJURY** that I personally viewed, listened to, and studied the entire course and hours as indicated above.

☐ I certify that I studied **12 HOURS** of Distance Learning INCLUDING RADIOLOGY CREDIT

Signature: \_\_\_\_\_

Date: \_\_\_\_\_