



## Prosperity Through Unity Exceptional Care for Idahoans

March 2024

The IACP News, Vol. 8, No. 3

### Health Policy Fellowship to educate doctors of chiropractic

The American Chiropractic Association (ACA) has launched a Health Policy Fellowship to educate doctors of chiropractic about health policy, coding and other complex issues and to prepare them to advocate on behalf of the chiropractic profession in the future.

ACA members selected to participate in the fellowship's first cohort are: Cynthia Chapman, DC, MPH, of Occoquan, Va., Della M. Schmid, DC, MS, of Newtown, Conn., and Morgan Price, DC, of Seattle, Wash.

"This is an opportunity for members to develop knowledge

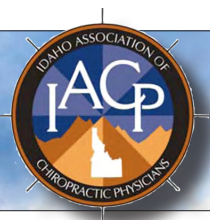
and skills that will expand ACA's capacity to influence policymaking at the national level," said ACA President Leo Bronston, DC, MAppSc, who has been active in health policy and coding initiatives at ACA for more than 10 years and was recently appointed to the American Medical Association's CPT® Editorial Panel.

The one-year fellowship will begin with an orientation period, after which participants will gain first-hand experience in AMA's procedures for developing and valuing physical medicine codes by regularly attending CPT meetings

*Continued on page 7*



**2024 IACP Annual Convention, April 26 - April 28, 2024**



# IACP

*The mission of the Idaho Association of Chiropractic Physicians (IACP) is to act as the unified voice, leader and stalwart supporter of the individual licensed doctors of chiropractic and supporting associates who provide exceptional health care and wellness to the patients and communities of Idaho. In supporting our Idaho chiropractic physicians, the IACP will work diligently to protect, enhance and build opportunities for the chiropractic industry and increase public access to chiropractic care.*

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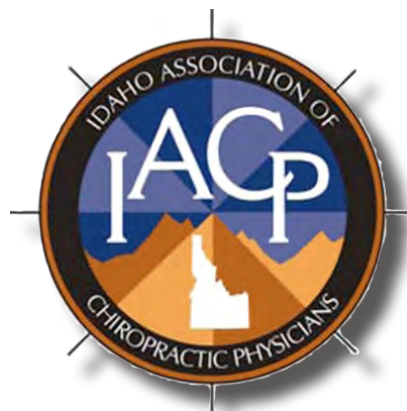
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# In This Issue

2024 IACP Annual Convention April 26 - April 28, 2024	Pages 4 - 5
IACP Membership Application	Page 6
Health Policy Fellowship to educate doctors of chiropractic (continued)	Page 7
Medical/Chiropractic office space available	Page 7
Chiropractic care and neck pain	Pages 8 - 10
Instrument assisted soft tissue mobilization	Page 11
ChiroHealth USA: Navigating legal requirements when hiring independent contractors	Pages 12 - 13
Latest Research: Treating depression without drugs	Pages 14 - 15
Advertise in this newsletter, and reach the Idaho chiropractic community	Page 16
Dr. Guadagno serves Team USA as volunteer chiropractor	Page 17
Update on the efficacy of health monitoring devices	Pages 18 - 19
Chiropractic News	Pages 20 - 21
Join the Pack - become a member of IACP	Page 21
Chiropractic College News	Pages 22 - 25
The IACP Marketplace: Featured Businesses & Suppliers	Page 26
Office poster notice	Page 28
<b>POSTER:</b> Chiropractic care can help with anxiety & depression	Page 29
IACP News Display Advertising Rates and Sizes	Page 30

*This table of contents is linked for your convenience. Just click on the page you want.*





## **Join your fellow chiropractic colleagues for the 2024 IACP Annual Convention**

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# Health Policy Fellowship to educate doctors of chiropractic

*Continued from front page*

and observing the process and related discussions. Fellows will also learn about areas such as coding guidance, payer engagement and payment reform.

Over time, ACA hopes to build a cadre of experts who will be equipped to contribute to the policymaking process in a variety of contexts, from submitting comments to federal agencies to representing ACA and the chiropractic profession within external healthcare organizations, coalitions and other initiatives pertaining to national health policy.

## About the American Chiropractic Association:

The American Chiropractic Association (ACA) is the

largest professional chiropractic organization in the United States. ACA attracts the most principled and accomplished chiropractors, who understand that it takes more to be called an ACA chiropractor. We are leading our profession in the most constructive and far-reaching ways—by working hand in hand with other health care professionals, by lobbying for pro-chiropractic legislation and policies, by supporting meaningful research and by using that research to inform our treatment practices. ACA also provides professional and educational opportunities for all members and is committed to being a positive and unifying force for the practice of modern chiropractic.

To learn more, visit [www.acatoday.org](http://www.acatoday.org).

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# Chiropractic care and neck pain

According to the prestigious Mayo Clinic, Neck pain is common. Poor posture — whether from leaning over a computer or hunching over a workbench — strains neck muscles. Osteoarthritis also is a common cause of neck pain.

[Research](#) published in PubMed Central (PMC) in 2022 asserts that: “Neck pain is one of the most common musculoskeletal disorders, having an age-standardized prevalence rate of 27.0 per 1000 population in 2019. This literature review describes the global epidemiology and trends associated with neck pain, before exploring the psychological and biological risk factors associated with the initiation and progression of neck pain.”

That work also noted that: “Psychological risk factors, such as long-term stress, lack of social support, anxiety, and depression are important risk factors for neck pain. In terms of the biological risks, neck pain might occur as a consequence of certain diseases, such as neuromusculoskeletal disorders or autoimmune diseases. There is also evidence that demographic characteristics, such as age and sex, can influence the prevalence and development of neck pain, although further research is needed.”

Because the neck supports the weight of the head, it can be at risk of injuries and conditions that cause pain and restrict motion. Neck pain causes include:

- **Muscle strains.** Overuse, such as too many hours hunched over a computer or a smartphone, often triggers muscle strains. Even minor things, such as reading in bed, can strain neck muscles.
- **Worn joints.** As with other joints in the body, neck joints tend to wear with age. In response to this wear and tear, the body often forms bone spurs that can affect



joint motion and cause pain.

- **Nerve compression.** Herniated disks or bone spurs in the vertebrae of the neck can press on the nerves branching out from the spinal cord.
- **Injuries.** Rear-end auto collisions often result in whiplash injury. This occurs when the head jerks backward and then forward, straining the soft tissues of the neck.
- **Diseases.** Certain diseases, such as rheumatoid arthritis, meningitis or cancer, can cause neck pain.

Symptoms include:

- Pain that's often worsened by holding the head in one place for long periods, such as when driving or working at a computer
- Muscle tightness and spasms
- Decreased ability to move the head
- Headache

The Mayo Clinic says that most neck pain is associated with poor posture combined with age-related wear and tear. To help prevent neck pain, keep your head centered over your spine. Some simple changes in your daily routine may help. Consider trying to:

- **Use good posture.** When standing and sitting, be sure your shoulders are in a straight line over your hips and your ears are directly over your shoulders. When using cell phones, tablets and other small screens, keep your head up and hold the device straight out rather than bending your neck to look down at the device.
- **Take frequent breaks.** If you travel long distances or work long hours at your computer, get up, move around, and stretch your neck and shoulders.
- **Adjust your desk, chair and computer** so that the monitor is at eye level. Knees should be slightly lower than hips. Use your chair's armrests.
- **If you smoke, quit.** Smoking can increase the risk of developing neck pain.
- **Avoid carrying heavy bags** with straps over your shoulder. The weight can strain your neck.
- **Sleep in a healthy position.** Your head and neck should be aligned with your body. Use a small pillow under your neck. Try sleeping on your back with your thighs elevated on pillows, which will flatten your spinal muscles.
- **Stay active.** If you don't move much, increase your activity level.

[Research](#) published in the *Journal of Chiropractic Medicine* (Volume 22, Issue 4, December 2023) evaluated the long-



term effects of adding osteopathic manipulative treatment (OMT) to neck exercises compared to exercises alone for individuals with non-specific chronic neck pain (NCNP).

Titled, *Assessment of Long-term Effects of Adding Osteopathic Manipulative Treatment to Neck Exercises for Individuals With Non-specific Chronic Neck Pain: A Randomized Trial*, this research used a randomized, controlled, dual-blind clinical trial conducted between June 2017 and December 2018. After confirming eligibility criteria, participants were randomly assigned to an exercise group (EG) or an exercise in combination with an OMT group (OMT/EG).

The authors noted that, “This study, as far as we know, is the first randomized controlled trial to use OMT plus exercises with the aim of evaluating the 6-month long-term effectiveness of associating OMT and neck strengthening and stretching exercises in pain and functionality in participants with non-specific neck pain. We found no statistically significant differences in the primary and secondary outcomes between groups at 12 weeks and 24 weeks after the treatment. However, our data analysis suggests a significant.”



The research introduction stated: “Neck pain is a serious health problem with economic and social impacts, affecting up to two-thirds of adults at some point in their lives. It is estimated that 4.5% of the population may present a substantial limitation of activities due to chronic neck pain. Studies show that up to 50% of people will have an episode of cervical pain at some point in their lives and may still have symptoms for five years after the first episode of pain. As a result, cervical pain represents a great health cost, mainly due to work absenteeism.

“Most neck pain has no specific or identifiable cause and, therefore, is labeled as non-specific chronic neck pain (NCNP). However, several aspects may contribute to NCNP, such as mechanical and biological conditions (age, sex, history of trauma, musculoskeletal disorders, and physical activity), as well as other factors related to psychosocial characteristics such as beliefs, fears, expectations, job satisfaction, anxiety, and depression. These factors are thought to determine the transition from acute to chronic pain.

“There are several options for management of NCNP, including manual therapy, conventional physical therapy, drug treatment, exercise, and pain education, among others. In recent years, manual therapy has shown a substantial increase of clinical trials to investigate the effectiveness of this practice, becoming a widely used approach. However, there is only moderate quality evidence supporting the use of manipulative treatments for neck pain able to prove that it is more useful than having no intervention or placebo treatment. Manual therapy is a favorable treatment option for cervical pain compared to conventional physical therapy and drug treatment.

“Another approach used in conservative treatment of NCNP is strengthening and stretching exercises. In a systematic review, Freitas et al described improvement in pain and functionality in the exercise group when compared to the placebo group. Another systematic review concluded with moderate evidence that exercise impacts the improvement of pain, functionality, and satisfaction of the patient with NCNP. Manual therapy combined with exercise also showed better results when compared to manual therapy or exercises applied separately.

“Osteopathic manipulative treatment (OMT) has been an option to treat neck pain. OMT consists of manual diagnostic techniques and manual treatments, following pre-established principles such as the inter-relationship between structure and function, intrinsic capacity for self-regulation and homeostasis, and also the concept of body

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# Chiropractic care and neck pain

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unity. The rational use of OMT in patients with chronic pain should not have a singular focus. It must integrate the whole body, interrelating structure and function to guarantee the best approach for each individual according to the somatic dysfunctions found.

“Current evidence has reported that OMT is more effective than placebo treatment or no treatment for pain and functionality in patients with NCNP. A recent systematic review examined the effectiveness of OMT in reducing pain and improving functionality in individuals with NCNP, concluding that OMT reduced pain when compared to other groups (physical therapy or placebo). In a previously published article, we concluded that a 4-week OMT plus an exercise program improves pain and functionality when evaluating short-term (30 days) outcomes, although there is a need to investigate the long-term impact of exercise associated to OMT in patients with NCNP, as well as the ideal dosage of the treatment. Therefore, the aim of this study was to evaluate long-term (3 and 6 months) effects of adding OMT to exercise for patients with NCNP.”

The study concluded: “Outcomes of pain and functionality for patients in both groups were improved at 6 months. After 6 months, both treatment groups reported improvement in pain and functionality. Our results do not support the hypothesis that the combination of 4-week OMT plus neck strengthening and stretching exercises would result in long-

term improvement of functionality and reduction of pain in patients with non-specific chronic neck pain rather than patients who had only exercise.”

The most reported benefit of spinal manipulation therapy is reduced chronic back pain. A 2019 [meta-analysis](#) of 47 randomized controlled trials found other benefits, including improved body function and short-term pain relief.

Like many other CAM therapies, there are fewer clinical studies on spinal manipulation benefits than more traditional therapies, such as medication and surgery. Yet many people who use spinal manipulation report that they find additional benefits, though not yet proven, including:

- General wellness
- Disease prevention
- Improved energy
- Better immune function
- Improve memory or concentration

In the United States, about 67% of adults who use osteopathic or chiropractic manipulation say they use it to treat a certain health condition that they already have. About 53% use it as a preventive therapy and for overall wellness.

Research shows that the chiropractic management of neck pain is one of the most effective treatments, and can provide a safe, non-invasive alternative to prescription medications or over-the-counter pain medications.



# Instrument assisted soft tissue mobilization versus integrated neuromuscular inhibition technique

[Research](#) published a few months ago in the *Journal of Chiropractic Medicine* (Volume 22, Issue 4, December 2023) compared the effects of instrument-assisted soft tissue mobilization (IASTM) vs integrated neuromuscular inhibition technique (INIT) on pain intensity, pressure pain threshold, neck disability, and electrophysiological properties in nonspecific chronic neck pain.

Called, *Instrument Assisted Soft Tissue Mobilization versus Integrated Neuromuscular Inhibition Technique in Nonspecific Chronic Neck Pain: Single-blinding Randomized Trial*, the research “performed a pre-post prospective randomized controlled trial on 90 participants with nonspecific chronic neck pain. The participants were chosen randomly from physical therapy out-patient clinics in the Giza governorate and allocated randomly by permuted block to the following three groups: Group A received INIT on the upper trapezius in addition to supervised traditional therapy (STT) as hot pack, stretching and strengthening exercises, Group B received IASTM on the upper trapezius in addition to STT, and Group C received STT only. Treatment was three times per week for four weeks. Pain intensity by visual analog scale (VAS), pressure pain threshold (PPT) by commander algometer, neck disability by Arabic Neck Disability Index (ANDI), and electrophysiological properties in the form of muscle amplitude by root mean square (RMS), and fatigue by median frequency (MDF) were measured at baseline and after four weeks.”

The study noted that nonspecific chronic neck pain (NCNP) is a common disorder with symptoms lasting more than 12 weeks. Pain is felt in the lateral and dorsal aspects of the neck and may radiate to the extremities, but no pathogenic signs or symptoms are present. The prevalence of neck pain is about 70% of the general population. Neck pain affects women more than men due to a lack of exercise and psychological factors. Inactivity and abnormal loading cause the formation of small nodular taut bands with oversensitive painful focus in the musculature around the neck, known as myofascial trigger points (MTrPs), resulting in a musculoskeletal imbalance in the upper quarter of the body.

When an MTrP is compressed, it causes tenderness, referred sensations, motor dysfunction, and autonomic symptoms. An MTrP is classified as active or latent based on its ability to reproduce clinical symptoms. When compressed, an active

trigger point (TrP) partially or completely reproduces a familiarized symptom experienced by the patient. However, latent MTrPs do not reproduce any familiarized clinical presentation experienced by the patient. A study using electromyography (EMG) has detected differences in cervical muscle activity between patients with NCNP and healthy individuals. Impaired function of the upper trapezius (UT) may cause or prolong neck pain. It transfers loads from the shoulder girdle to cervical structures with low pain tolerance as a result of its superior attachments. Moreover, neck pain is often associated with guarding muscle spasms, resulting in a reduction of blood flow to this muscle and increased pain. Also, weakness of the superficial and deep cervical spine extensors is common in patients with neck pain.

For this research, one hundred participants with NCNP were recruited from outpatient physical therapy clinics. This study compared the effects of INIT and IASTM on pain, function, and electrical activity of the UT in patients with chronic neck pain. The results revealed no statistically significant differences between INIT and IASTM in VAS and ANDI posttreatment, but there were differences between the INIT and STT groups and also the IASTM and STT groups. In PPT, MDF, and RMS, there was a difference between all groups ( $P < .05$ ). Secondly, the minimal clinically important difference for VAS was 3.1.

The study found no statistically significant differences between INIT and IASTM groups in VAS and ANDI posttreatment, but there were differences between the INIT and STT groups and also between the IASTM and STT groups.





# Navigating legal requirements when hiring independent contractors

Hiring independent contractors for a chiropractic office can offer flexibility and specialized expertise. Still, it comes with a set of legal considerations that must be carefully addressed. From compliance with healthcare regulations to proper classification, chiropractic business owners must be well-versed in the legal requirements of independent contractor relationships. Failing to do so can be costly.

**Understanding Classification:** Differentiating between employees and independent contractors is crucial. Misclassification can lead to legal consequences. Independent contractors typically control their work, use their tools/software, are responsible for their billing/collections, and are accountable for their taxes. Facts that provide evidence of the degree of control and independence fall into three categories:

**Behavioral:** Does the company control or have the right to control what the worker does and how they do their job?

**Financial:** Are the business aspects of the worker's job controlled by the payer? (these include how workers are paid, whether expenses are reimbursed, who provides tools/supplies, etc.)

**Type of Relationship:** Are there written contracts or employee-type benefits (i.e., pension plan, insurance, vacation pay, etc.)? Will the relationship continue, and is the work performed a vital aspect of the business? (IRS, 2023)

Two other questions you may want to ask to gain clarity are: Does the independent contractor do work for any other entity? If I classify a provider as an independent contractor, do I have them sign a non-compete? By answering these questions it will help you clarify your employment policies.

Marc Abla, with the Illinois Chiropractic Society, recorded a [video](#) to clarify these categories to help you determine if you have an employee or an independent contractor. The cost of non-compliance can be staggering. Fines levied by the US Department of Labor (DOL), IRS, and state agencies for worker misclassification can exceed millions depending on the severity of the infractions. (Abla, 2021)

If you have an independent contractor, as a business owner, you have the responsibility of ensuring the following:

**Compliance with Healthcare Regulations:** Chiropractic offices must ensure that independent contractors comply with healthcare regulations such as the Health Insurance Portability and Accountability Act (HIPAA). Contractors should understand the importance of patient privacy and adhere to the highest standards of confidentiality.

**Written Agreements:** A well-drafted contract is essential. Clearly outline the scope of work, payment terms, and expectations. Include clauses that address compliance with healthcare laws and regulations.

**Professional Licensing:** Verify that the independent contractor holds the necessary licenses and certifications required for their role in the healthcare setting. This is critical to maintain the quality and legality of services provided.

**Insurance Coverage:** Independent contractors should have their own liability insurance. However, chiropractic offices must ensure that contractors have adequate coverage to protect against potential liabilities related to their work.

**Tax Considerations:** Independent contractors are responsible for their taxes, and chiropractic offices should not withhold income taxes. However, both parties should clearly understand their tax obligations. Ensuring compliance with tax laws is essential to avoid legal issues.

**Compliance Training:** Independent contractors should undergo compliance training to understand and adhere to the office's policies and procedures. This is particularly important for maintaining a consistent standard of care.

**Termination Clauses:** Include clear termination clauses in the contract. Define the circumstances under which either party can terminate the agreement and the associated procedures.

**Ongoing Monitoring and Evaluation:** Regularly monitor the independent contractor's performance and compliance with legal requirements. Conduct periodic evaluations to ensure continued adherence to healthcare regulations.

In conclusion, hiring independent contractors for a chiropractic office demands a thorough understanding of legal requirements. From proper classification to compliance with healthcare regulations, chiropractors must prioritize legal considerations to foster successful and legally sound relationships with independent contractors. The misclassification of workers significantly impacts the individual worker, the employer, and the economy at large. Seeking legal advice and guidance can be invaluable in navigating the complexities of this hiring process. Because of the high potential cost of misclassification and the additional DOL investigators available to challenge your worker classification, it is more important than ever to ensure you correctly classify your workforce. (Haight, 2023)

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# Latest Research:

## Treating depression without drugs

During the cold winter months, depression can take hold of most anyone. According to the National Institute of Mental Health, “Depression can affect people of all ages, races, ethnicities, and genders. Women are diagnosed with depression more often than men, but men can also be depressed. Because men may be less likely to recognize, talk about, and seek help for their feelings or emotional problems, they are at greater risk of depression symptoms being undiagnosed or undertreated.”

When a wave of depression hits, exercise may sound like the last thing you want to do. But a new [study](#) published in the BMJ says it could be crucial to feeling better.

Many types of exercise — including walking, jogging, yoga, tai chi, aerobic exercises and strength training — showed benefits as strong as therapy when it came to treating depression, according to the study.

“Depression (affects) somewhere between (10%) and 25% of people. It hurts wellbeing more than debt, divorce, or diabetes,” said lead study author Dr. Michael Noetel, senior lecturer in the School of Psychology at the University of Queensland in Australia.

The research, called *Effect of exercise for depression: systematic review and network meta-analysis of randomised controlled trials*, concludes:

“Exercise is an effective treatment for depression, with walking or jogging, yoga, and strength training more effective than other exercises, particularly when intense. Yoga and

strength training were well tolerated compared with other treatments. Exercise appeared equally effective for people with and without comorbidities and with different baseline levels of depression. To mitigate expectancy effects, future studies could aim to blind participants and staff. These forms of exercise could be considered alongside psychotherapy and antidepressants as core treatments for depression.”

The results align with what many other studies have said about the benefits of exercise, said Dr. Adam Chekroud, assistant professor adjunct of psychiatry at Yale School of Medicine and cofounder of Spring Health, a mental health-care service. He was not involved in this study.

Chekroud’s [2018 study](#) of more than 1.2 million Americans showed those who exercised reported better well-being and mental health. That work found:

“Individuals who exercised had 1.49 (43.2%) fewer days of poor mental health in the past month than individuals who did not exercise but were otherwise matched for several physical and sociodemographic characteristics ( $W=7.42 \times 1010$ ,  $p<2.2 \times 10^{-16}$ ). All exercise types were associated with a lower mental health burden (minimum reduction of 11.8% and maximum reduction of 22.3%) than not exercising ( $p<2.2 \times 10^{-16}$  for all exercise types). The largest associations were seen for popular team sports (22.3% lower), cycling (21.6% lower), and aerobic and gym activities (20.1% lower), as well as durations of 45 min and frequencies of three to five times per week.”

Both studies should give people confidence that exercise is a good approach to treating depression along with other options, including therapy and medication, Chekroud said.

“None of these treatments are silver bullets. But, given how debilitating it is to have depression, almost all patients should be offered both exercise and therapy,” Noetel said.

The conclusion is clear: more exercise and a higher intensity of workout are better, but you don’t need to start out training like a professional athlete, according to the data.

“It didn’t matter how much people exercised, in terms of sessions or minutes per week,” Noetel said. “It also didn’t really matter how long the exercise program lasted.” Any





exercise was better than none, but Noetel recommended adding some challenges.

“We initially thought those with depression might need to ‘ease into it.’ We found it was far better to have a clear program that aimed to push you, at least a little,” he said.

Many people struggle with finding the motivation to exercise, and adding depression on top of that can make it even harder to get started. Whether your thing is weight training or walking, you need to make the activity enjoyable to keep it up.

“Be kind to your future self by making exercise as easy and attractive as possible, like getting yourself an audiobook or a trial at a yoga studio,” Noetel said.

The more you enjoy your workout, the more confident you will be to overcome exercise obstacles, which means you’ll be more likely to stick with a regimen, according to a 2015 study.

“Then, be kind to yourself if it’s hard — we always forget how easy it is for life to get in the way of exercise, so make a backup plan as if your happiness depended on it ... because it does,” Noetel said.

### ***Chiropractic care can also help ease depression***

Neurologically based chiropractic care takes a holistic approach to care, focusing on improving physical symptoms such as spinal misalignments to improve mental health. This natural and safe approach to whole-body health has shown promising results for mental health issues like anxiety and depression.

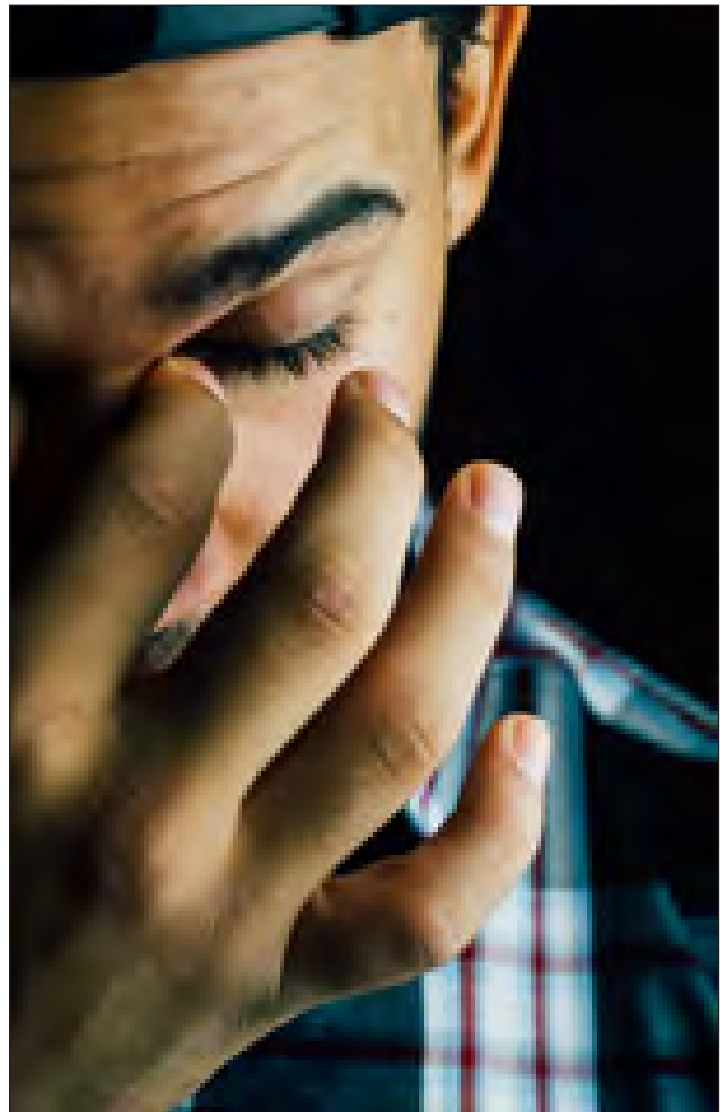
Chiropractic care can be a very useful adjunct to any recommended treatment. Common treatment recommendations for depression include lifestyle modification (exercise, diet, mindfulness, etc.) and antidepressant medications. Did you know that chiropractic care can potentially help expedite the recovery process or make symptoms more manageable?

Chiropractic care has been shown to improve sleep, reduce pain, and instill an overall sense of well being; all great ways to feel in better control of depression. Additionally, the very literal health of the brain and spinal cord can be influenced by encouraging spine health. Chiropractic BioPhysics (CBP) specializes in addressing spine and neural health by

promoting optimal spine alignment.  
CBP care and depression

When the spine is out of alignment, it affects overall nerve energy in the body. This blocked nerve flow affects every single bodily function, including brain function and the way we process our emotions. Spine misalignment is a common underlying issue for many organ dysfunctions that can be addressed by an expertly trained CBP practitioner, whether we realize there is an issue or not. This non-invasive, extensively researched approach can help restore balance to an out of sync nervous system.

CBP care has the potential for improving brain chemistry, down regulating certain genes, and helping you feel motivated to tackle your health issues, like depression, head-on. When the spine is better aligned, both the body and mind may have the opportunity to function at their highest potential. Talk to a CBP practitioner today to see if their care might be right for you in battling depression and other health issues.



# Soar with us



This monthly newsletter will get information about your products or services directly into the hands of the Idaho chiropractic community. There is no faster, less expensive way to reach this exclusive market. Advertising rates on the last page of this issue, or email Steve at [CandSpublishing@gmail.com](mailto:CandSpublishing@gmail.com) for details and discounts.

# Dr. Guadagno serves Team USA as volunteer chiropractor

The Pan American Games Santiago, held in Santiago, Chile last year, was a key stop on the road to the biggest sports event of next year: the Olympic Games Paris 2024. As a result, the Pan American Games 2023 are a key event for the Olympic aspirations of a large portion of athletes from America.

Supporting USA athletes, Carlo Guadagno, DC, DACBSP®, ICSC, FICC, a National University of Health Sciences' Florida faculty member, was in Santiago, serving the athletes of Team USA as a volunteer chiropractor with the U.S. Olympic and Paralympic Committee (USOPC) medical staff.

About 6,800 of the best athletes in the world competed across 38 sports during the Games from Oct. 20 – Nov. 5 in order to qualify for the Paris 2024 Summer Olympics. Team USA earned a total of 286 medals, including 124 gold, 75 silver and 87 bronze.

The United States competed at the 2023 Pan American Games in Santiago, Chile from October 20 to November 5, 2023. This was the United States's 19th appearance at the Pan American Games, having competed at every Games since the inaugural edition in 1951. The team included 631 athletes (313 men and 318 women). Sport shooter Vincent

Hancock and artistic gymnast Jordan Chiles were the country's flagbearers during the opening ceremony.

Dr. Guadagno shared details about his experience along with a few photos in the latest quarterly newsletter for the International Federation of Sports Chiropractic (FICS). "The Pan Am Games were incredibly successful for Team USA," he wrote in the newsletter. "Our job was to keep our athletes healthy and ready to compete."

Some of the most common injuries were in the hip, shoulder and lower back. The most common illnesses were allergic rhinitis, upper respiratory infection and nasopharyngitis.

The 2024 Summer Olympics, officially the Games of the XXXIII Olympiad and commonly known as Paris 2024, is scheduled to take place from 26 July to 11 August 2024 in France, with Paris as the main host city and 16 other cities spread across metropolitan France, plus one subsite in Tahiti—an island within the French overseas country and overseas collectivity of French Polynesia.

To read the full article and see more photos, read the December issue of the [FICS newsletter](#), page 27.





# Update on the efficacy of health monitoring devices

Doctors of chiropractic are often asked for advice and recommendations on a wide range of health topics. One that may be broached is how effective are health monitoring devices, and are they worth the price to buy.

Modern smartwatches, for example, begin at around \$300 and go up from there, depending on the features and manufacturer. Most have almost every health monitoring feature imaginable, but not every device provides the specific focus some people need. For instance, while blood oxygen sensors are near ubiquitous, not every smartwatch packs a reliable medical-grade sensor, and some devices are better at tracking specific factors than others.

## What are wearables?

Wearables are small devices designed to work with a person's wardrobe and lifestyle. Often enabled by artificial intelligence, they can be smartwatches, headsets, and clothing and footwear embedded with sensors. Even "smart tattoos" are being developed. While wearables can look cool and trendy, they're also a useful tool that can be used to track and deliver important health data.

Each product can work in different ways. Some help count steps or calories burned during a workout. Others track vital signs or medical conditions and may be able to send the information to your doctor.

Wearables can't replace doctor visits. But they're good at putting your patients focus on building healthy behaviors.

## Building health awareness

Fitness trackers were the first wearables that were quick to catch on with consumers. Devices like Fitbit® and Apple Watch® are useful for tracking and calculating physical

activity. There are even watches with built-in thermometers. They can note a rise in body temperature that might be a sign of a viral infection like the flu.

Since wearables offer real-time feedback, it's easy to see the little things that add up to a healthy day. Plus, personal reminders and alerts can help you meet your goals — and motivate you to push past them.

Wearables offer new ways to support health beyond vital signs and fitness measures. Some medical wearables even provide pocket-sized solutions to help with ongoing conditions.

Glucose-monitoring wearables can help track blood sugar (glucose) levels throughout the day. When prescribed, they can even send the data to a doctor's office. Certain medical wearables are also available over the counter. They can send important data to apps on a smart device to uncover possible issues to discuss with a doctor.

These devices are shaping the future of health care with services you could once only get at the doctor's office.



## Considerations when using wearables

Notifications! Numbers! Achievements! Higher and higher and higher they go! Wearables create positive feedback that helps people feel great about their progress. But there's a line drawn between using your device for a healthy purpose or depending on it too much. Cost also factors in.

It's important to understand each device's limitations. Wearables aren't always 100% accurate. In one [study](#) (Anna Shcherbina et al., *Accuracy in Wrist-Worn, Sensor-Based Measurements of Heart Rate and Energy Expenditure in a Diverse Cohort*, Journal of Personalized Medicine, 2017.) seven wrist-worn fitness trackers miscalculated calories burned by over 20%.

The study authors concluded, "We assessed, in a controlled laboratory setting, the reliability of seven wrist-worn devices in a diverse group of individuals performing walking, running and cycling at low and high intensity. We found that in most settings, heart rate measurements were within acceptable error range (5%). In contrast, none of the devices provided estimates of energy expenditure that were within an acceptable range in any setting. Individuals and practitioners should be aware of the strengths and limitations of consumer devices that measure heart rate and

estimate energy expenditure. We encourage transparency from device companies and consistent release of validation data to facilitate the integration of such data into clinical care. We provide a forum for the community to share such data freely to help achieve this end."

## What to say to patients who ask

Patients should be reminded that while valuable, wearables don't replace the services provided by a doctor of chiropractic, or at medical facilities. People who don't have access to screenings, lab tests, and physical exams are not getting the full picture of their health. Relying on a health monitoring device is problematic, as the wearable is just a tool to use to add data — not as a substitute for visiting a doctor.

If your smartwatch says you're doing great, but something still doesn't feel right, listen to your body. Wearables can't speak for the whole you — so it might be time to see your doctor.

Today's wearables aren't perfect. But the AI technology that powers many of them means they're going to get smarter and better every year. And for many people, these devices work wonders by connecting them to their health status in a way that fits their lifestyle.



# Chiropractic News

## **ACA launches Fellowship to prepare future health policy experts**

The American Chiropractic Association (ACA) has launched a Health Policy Fellowship to educate doctors of chiropractic about health policy, coding and other complex issues and to prepare them to advocate on behalf of the chiropractic profession in the future.

ACA members selected to participate in the fellowship's first cohort are: Cynthia Chapman, DC, MPH, of Occoquan, Va., Della M. Schmid, DC, MS, of Newtown, Conn., and Morgan Price, DC, of Seattle, Wash.

"This is an opportunity for members to develop knowledge and skills that will expand ACA's capacity to influence policymaking at the national level," said ACA President Leo Bronston, DC, MAppSc, who has been active in health policy and coding initiatives at ACA for more than 10 years and was recently appointed to the American Medical Association's CPT® Editorial Panel.

The one-year fellowship will begin with an orientation period, after which participants will gain first-hand experience in AMA's procedures for developing and valuing physical medicine codes by regularly attending CPT meetings and observing the process and related discussions. Fellows will also learn about areas such as coding guidance, payer engagement and payment reform.

Over time, ACA hopes to build a cadre of experts who will be equipped to contribute to the policymaking process in a variety of contexts, from submitting comments to federal agencies to representing ACA and the chiropractic profession within external healthcare organizations, coalitions and other initiatives pertaining to national health policy.

To learn more, visit [www.acatoday.org](http://www.acatoday.org).

## **Scholarship fund for recent chiropractic school graduates announced**

Dr. James Cox, developer of Cox® Technic Flexion Distraction Decompression System of Spinal Pain Management protocols, has established a scholarship fund for recent chiropractic school graduates (within 2 years of the

scholarship application date) to attend the Cox® Lumbar Spine Certification Course Parts I/II in 2024. The scholarship finances the registration fee (\$1600) for the 30 hours of course work/hands-on training and the certification exam fee (\$75). CE credits will be available if they have already been applied and approved.

The 2024 [schedule](#) of Lumbar Spine courses includes:

- March 14-17, 2024 - West Palm Beach FL (at Keiser University College of Chiropractic Medicine)
- April 18-21, 2024 - Fort Wayne IN (at Grand Wayne Center/Hilton)
- October 24-27, 2024 - St. Louis (Chesterfield), MO (at Logan University)
- November 7-10, 2024 - Fort Wayne IN (at Grand Wayne Center/Hilton)

There are 11 scholarships available for each course, a total of 44 in 2024. If all scholarships are granted for a course, an applicant's scholarship request can be moved to the next course.

Applications are available [online](#). Questions may be directed to Julie at [info@coxtechnic.com](mailto:info@coxtechnic.com) or by phone at 260-637-6609.

## **New doctor of chiropractic program begins**

The University of Pittsburgh School of Health and Rehabilitation Sciences (SHRS) will begin offering a Doctor of Chiropractic program, the first at a research-intensive public university in the United States and the only one in Pennsylvania, Anthony Delitto, dean of SHRS, announced Monday.

The program will focus on evidence-based training for spine and musculoskeletal conditions and prepare students to work within interprofessional teams.

"With the addition of a chiropractic program, students and faculty from various health disciplines can come together to explore new research avenues, share knowledge and develop integrated approaches to patient care," Delitto said.

"Major drivers of this program include an accumulation of scientific evidence showing that chiropractic care is a



safe and effective approach to the treatment of pain and the important role it can play in mitigating opioid use for back and neck pain through nonopioid interventions,” said Michael Schneider, a professor in SHRS and the Clinical and Translational Science Institute at Pitt, who will be the program’s acting director.

“According to the World Health Organization, an estimated 619 million people live with low back pain. It is the leading cause of disability worldwide,” Schneider said.

“Opening a Doctor of Chiropractic education program in a research-intensive university is a bold and innovative step toward advancing health care education, fostering interdisciplinary collaboration and improving patient outcomes,” Delitto said.

Chiropractic care has been covered by most health care plans for years and is widely utilized by consumers. With a bill under consideration in the Senate proposing the expansion of Medicare coverage of chiropractic services, the field is increasingly seen as an integrative part of mainstream health care, making the need for more research-based training especially timely.

### **Research notes a rising use of “complementary health approaches”**

An analysis conducted by the National Institutes of Health’s National Center for Complementary and Integrative Health (NCCIH) reveals a substantial increase in the overall use of complementary health approaches by American adults

from 2002 to 2022. The study, published in the *Journal of the American Medical Association*, highlights a surge in the adoption of complementary health approaches for pain management over the same period.

Researchers utilized data from the 2002, 2012, and 2022 National Health Interview Survey (NHIS) to evaluate changes in the use of seven complementary health approaches, including yoga, meditation, massage therapy, chiropractic care, acupuncture, naturopathy, and guided imagery/progressive muscle relaxation.

The key findings include:

- The percentage of individuals who reported using at least one of the seven approaches increased from 19.2% in 2002 to 36.7% in 2022.
- The use of yoga, meditation, and massage therapy experienced the most significant growth from 2002 to 2022.
- Use of yoga increased from 5% in 2002 to 15.8% in 2022.
- Meditation became the most used approach in 2022, with an increase from 7.5% in 2002 to 17.3% in 2022.
- Acupuncture, increasingly covered by insurance, saw an increase from 1% in 2002 to 2.2% in 2022.
- Additionally, the analysis showed a notable rise in the proportion of U.S. adults using complementary health approaches specifically for pain management. Among participants using any of the complementary health approaches, the percentage reporting use for pain management increased from 42.3% in 2002 to 49.2% in 2022.

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## *“Join the Pack”*

### *Become a member of the IACP*

The IACP acts as a resource, representative and leading advocate for the chiropractic industry in Idaho. We cannot continue to properly serve the chiropractic profession without the commitment and support of exceptional industry leaders, such as yourself. The IACP Board and its members believe that membership in the Association is and should be mutually beneficial to both the Doctor and the IACP, which makes it a perfect cooperative relationship. As a member, you will have multiple opportunities to obtain learning and marketing opportunities, at a discounted rate, through membership, as well as, have an opportunity to utilize the services of the IACP team and its Board. You will also have an opportunity to get involved in important issues, from the center, along with other industry leaders and spokespeople. At the same time, the Association continues to grow and provide broader services to the industry with your support. Join now and be a part of the “pack” that will lead us into the future!

# Chiropractic College News

## Logan University Symposium 2024

Logan University is looking forward to welcoming chiropractors and health science professionals to the [2024 Symposium](#) at St. Louis Union Station. The event is taking place on Friday, April 12 and Saturday, April 13 and will provide continuing education opportunities, chiropractic seminars, networking events and more.

This year, some changes were made to the event to increase engagement and learning opportunities. One new addition to this year's Symposium is ***Bring your Chiropractic Office Staff Day*** on Friday. Chiropractors, chiropractic assistants, office managers, receptionists, billing specialists and administrative staff are encouraged to join. Led by Kathy Weidner (Mills-Chang), MCS-P, CPCO, CCPC, CCCA, this comprehensive training will teach you and your team how to master best practices to propel your practice to greater prosperity and stability. This session will empower your staff to drive increased financial success, exceptional patient care, increased engagement and motivation. Registration for the 8-hour program is \$99, and all who attend are welcome to join the Loomis Mix & Mingle (6:30 – 8:00 pm) directly after for food and refreshments.

"From the doctor to the front desk to the billing department, every team member plays a vital role in ensuring financial success, while following important regulatory guidance," said Amber Henry, EdD, Logan's Director of Continuing Education.



[Learn more](#) about ***Bring your Chiropractic Office Staff Day***.

In addition, the Symposium will feature 36 breakout session options. These breakout sessions are highly beneficial for attendees as they enhance the overall learning experience and cater to diverse interests and expertise levels. Breakout sessions provide a platform for in-depth exploration of specific topics, allowing participants to delve deeper into subjects that align with their individual preferences and professional needs. This personalized approach allows a more engaging and interactive environment, encouraging active participation and meaningful discussions among attendees. In addition, technique refresher and overviews will be offered throughout the event, taught by specialists of each technique.

[View the 2024 Symposium schedule](#) (PDF) to see all breakout session options.

This year's Symposium offers 19 total hours of continuing education (CE) courses. There are 15 in-person CE hour opportunities offered at the Symposium and four additional CE hour opportunities offered online to be taken after the event. Additionally, the online courses encourage ongoing learning beyond the event itself, allowing attendees to revisit materials, discuss with individuals they met at the event and reinforce their understanding at their own pace.

[Registration for the 2024 Symposium](#) is available online.

## NUHS mourns passing of renowned alumnus Dr. Ray Tuck

The National University of Health Sciences community is mourning the loss of one of its most distinguished alumni, N. Ray Tuck Jr., DC, '97, who has passed away.



"It is with profound sadness that we mourn the passing of Dr. Tuck, a cherished member of our university community," said NUHS President Joseph Stiefel, MS, EdD., DC. "Dr. Tuck was not only a distinguished graduate of our institution but also an exemplary individual whose contributions to chiropractic

medicine left an indelible mark on society. As an alumnus, he embodied the values and spirit of our university, and his accomplishments serve as an inspiration to current and future generations of students.”

Dr. Tuck was past president of the American Chiropractic Association (ACA) and National University of Health Sciences’ 2019 Alumnus of the Year. In 2019, he was also named ACA’s Chiropractor of the Year.

Across Southwest rural Virginia, Dr. Tuck played a crucial role in increasing access to chiropractic medicine. Starting in 2002, he bought two practices from his late father (NUHS ’78) and expanded them into 10. By 2011, Tuck Chiropractic Clinic was named one of the top 50 rising and growing companies in Virginia by the Virginia Chamber of Commerce.

### **New one-year healthcare master’s program launched**

National University of Health Sciences has launched a one-year master’s program for students who wish to pursue highly-in-demand careers in healthcare.

The on-campus Master of Science in Medical Science (MSMS) program, in partnership with Tiber Health, will help prepare students for medical school and other medical professional programs like chiropractic, naturopathic, pharmacy, optometry, and physician’s assistant, or for a career in public health or clinical research. This additional academic training is designed to expand access to quality healthcare education programs by helping students increase their medical knowledge and improve performance on the USMLE and MCAT Exams.

Classes will be delivered via virtual, synchronous, interactive sessions with faculty broadcasting live. In a flipped classroom arrangement, students will be tasked with watching online lectures and completing assigned readings before the actual in-person class. During the class itself, the focus shifts to engaging in immersive discussions, interactive case studies, and collaborative group activities.

Access to medical school training is becoming increasingly important as the U.S. healthcare industry faces a growing doctor shortage, particularly in rural areas. Although 20 percent of Americans live in rural communities, just 11 percent of physicians practice in these areas, according to the Association of the American Medical Colleges (AAMC).

The profession also fails to reflect the increasingly diverse U.S. population. According to the AAMC, Black and Hispanic

Americans make up nearly one-third of the U.S. population but only make up 10 percent of doctors and 12 percent of medical school students. Today, more than 83% of the MSMS student body across all Tiber partner universities come from underrepresented backgrounds.

For more information or to apply to the MSMS Program visit the [NUHS website](#).

### **D’Youville University selected by Carnegie Foundation 2024 Community Engagement Classification**

The American Council on Education (ACE) and the Carnegie Foundation for the Advancement of Teaching announced that D’Youville University is one of the 40 U.S. colleges and universities to receive the 2024 Carnegie Community Engagement Classification, an elective designation that indicates institutional commitment to community engagement. This important classification is awarded following a process of self-study by each institution, which is then assessed by a national review committee.

“We recognize these institutions for their exceptional commitment to community engagement, and their work to transform knowledge into meaningful action,” said Timothy Knowles, president of the Carnegie Foundation for the Advancement of Teaching. “They exemplify the true spirit of the Carnegie endorsement and the power of serving the public good.”

“D’Youville University is proud to receive this honor. This designation speaks to our commitment to a healthy and vibrant community, transforming lives and to truly making a difference,” states President Lorrie Clemo, PhD.

The Carnegie Community Engagement Classification has been the leading framework for institutional assessment and recognition of community engagement in U.S. higher education for the past 19 years with classification cycles in 2006, 2008, 2010, 2015, 2020, and now 2024.

“Now is the opportune moment to pay attention to these recently classified and re-classified institutions, as they dedicate themselves to fortifying their public purpose missions. Let us draw inspiration from their remarkable contributions through community engagement, enhancing both teaching and research, and simultaneously benefiting the wider community,” said Ted Mitchell, president of ACE. About the Carnegie Classifications, the Carnegie Classifications are the nation’s leading framework for

*Continued on next page*



# Chiropractic College News

*Continued from last page*

categorizing and describing colleges and universities in the United States. Utilized frequently by policymakers, funders, and researchers, the Classifications are a critical benchmarking tool for postsecondary institutions.

## Northeast College Unveils Imaging Sciences Wing

Northeast College of Health Sciences opened the new Imaging Sciences wing of its Anatomy Center, unveiling cutting-edge sonography and radiological suites, during a ribbon-cutting ceremony on Feb. 13, 2024. During the event, community and state leaders also recognized the College for advancing healthcare education in the region.

The new Imaging Sciences facilities provide advanced learning spaces for students in Northeast's NEW associate degree programs in radiologic technology and diagnostic medical sonography. The suites are also the latest addition to the College's state-of-the-art Anatomy Center, which already features the Computerized Anatomy Resource Lab (CARL) containing 3D virtual Anatomage technology, an extensive cadaveric dissection lab and an observation theater.

"There is already a master's program in diagnostic imaging here at Northeast that is a model in its field. So Northeast has always been well set up to offer imaging sciences education," said Director of Imaging Sciences Roger Weeden. "This new wing (for undergraduate study) pulls it all together. We have the infrastructure, the knowledgeable faculty and the technology at the forefront of imaging sciences education. We are ready to move our new sonography and radiologic technology programs forward with Northeast's ever-better philosophy and commitment to academic excellence."



## Texas Chiropractic College appoints new members to its Board of Regents

Texas Chiropractic College (TCC) is pleased to announce the induction of Dr. Steven Davis and Dr. Bhavna Reddy into its Board of Regents, effective July 22, 2023.

"I am thrilled to welcome Dr. Steven Davis and Dr. Bhavna Reddy to the Texas Chiropractic College Board of Regents. Their diverse expertise, dedication and passion for advancing healthcare and education will undoubtedly contribute to the success and excellence of TCC," said Dawn Schawb, chairman of the TCC Board of Regents. I look forward to their invaluable insights as we collectively shape the future of chiropractic education and solidify TCC's position as a leader in the field."

**Dr. Steven Davis**, a prominent Houston area entrepreneur, brings over two decades of expertise in accounting and finance to the TCC Board of Regents. A 2011 graduate of TCC, Davis holds both a B.S. in Human Biology and a Doctor of Chiropractic degree. In addition to his chiropractic education, he earned a B.B.A. in Accounting from the University of Houston and an M.B.A. from the University of Texas of the Permian Basin.



Expressing his enthusiasm for joining the Board, Davis stated, "I am honored with the opportunity to serve as a member of TCC's Board of Regents. I look forward to working with the board in guiding TCC along its mission. TCC has secured its place in the chiropractic profession as a top-tier institution, and I am excited to see what the future holds for TCC."

**Dr. Bhavna Reddy**, a board-certified member of the American Academy of Family Physicians, adds a wealth of medical knowledge and community engagement to the TCC Board of Regents. Hailing from East Texas, Reddy earned her undergraduate degree from Texas Tech University and completed



her medical education at St. George's University School of Medicine, with clinical rotations in NYC. She completed her Family Medicine residency at Houston Methodist Baytown Hospital in Baytown, TX, formerly San Jacinto Methodist Hospital.

After spending over eight years with Memorial Hermann Medical Group, Reddy opened her own direct primary care practice. Her commitment to healthcare and community service aligns seamlessly with TCC's mission. In the spirit of collaboration, Reddy shared, "I am excited to contribute to the growth and success of Texas Chiropractic College. My experiences in family medicine and community engagement have prepared me to support TCC in its mission to provide outstanding chiropractic education."

### DC joins USA Gymnastics medical team

Dr. Todd Riddle, professor at Texas Chiropractic College (TCC) and a seasoned sports chiropractor, recently etched his name in the annals of sports history. Joining the medical team of USA Gymnastics for the 37th FIG Trampoline Gymnastics World Championships in Birmingham, England, Riddle brought his expertise to the forefront of elite athletic performance.



Prior to the championships, Riddle immersed himself in the rigorous preparations alongside Team USA in Renne, France, fine-tuning their physical well-being for the pinnacle event. The culmination of the team's efforts unfolded on the global stage, where over 1,000 athletes from 40 countries showcased their prowess. Riddle's involvement was not merely professional; it was a testament to his commitment to advancing the field of sports chiropractic.

"To say that it was an honor to represent our country and our flag at World Championships would be a dramatic understatement," explained Riddle, his excitement for his team's performance written plainly in the smile on his face, "I am so proud of the athletes and their resilience. The results of their efforts are obvious, team World Champions!"

Riddle, having over two decades of experience in sports medicine, is no stranger to the Olympics. He has had the opportunity to treat and educate dozens of gold standard athletes from around the world, serving as Team Chiropractor for the Nigerian women's bobsled/skeleton team at the 2018 PyeongChang Winter Olympics in South

Korea, as Team Chiropractor for the Australia Bobsleigh/Skelton IBSF BMW World Cup in 2021, as well as the 2022 USA Racquetball Sports Medicine US Open.

### Logan University offers Master of Science in Chiropractic Pediatrics

In recent years there has been increasing interest in chiropractic care for pediatric patients as a gentle and non-invasive option to support their well-being as they grow. Allison Harvey, DC ('06), DICCIP finds herself at the forefront of this movement as a seasoned pediatric chiropractor and now a faculty member for [Logan University's Master of Science in Chiropractic Pediatric](#) (MS-CP) program. This specialized degree is for chiropractors looking to delve deeper into the pediatric field.

Dr. Harvey has been treating children since 2006 and is one of the only Diplomates in Clinical Chiropractic Pediatrics (DICCIP) in Missouri. In addition to serving as the lead clinician for the pediatric department at the Montgomery Health Center at Logan, she teaches pediatric courses to Logan's trimester 7 Doctor of Chiropractic students and oversees the very specialized pediatrics rotation.

"Before Logan's MS-CP program, the pediatric diplomate was one of the only ways to learn more about this specific population, so the degree is not only incredibly valuable, but also innovative," said Dr. Harvey. "Graduates of this program have high-value credentials that are recognized universally. The hybrid format is very accessible. The hands-on portion is intensive, and they focus heavily on safety and learning to be gentle and effective with patients."

Dr. Harvey teaches Pediatric Case Management 2. In the spring of 2024, she will begin teaching Advanced Pediatric Case Management, the final course in the case management series. In Pediatric Case Management 2, students deepen their knowledge of health concerns in pediatric patients and uncommon conditions. Students also gain better understanding of the whole health of the patient, from congenital issues to delayed milestones, ensuring the appropriate diagnosis and treatment for successful outcomes.

"Creating courses for this master's program has been eye-opening because I want the courses to be built exactly how I wish I was taught—not just lectures, but also interactive and creative," she said. "I want a happy medium of what students can reasonably manage within their busy lives in family and practice and still complete what's most effective to make this program unique and innovative."

# IACP Marketplace

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poster on the following page, and  
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***The drug-free approach to pain reduction***

***Get up and move!***

***STRETCHING for better joint health***

***Easy exercises to keep your neck healthy***

***Were you pain free this morning when you got out of bed?***

***Tips for safe stretches***

***Don't let pain keep you from enjoying life***

***Walking now touted as "a wonder drug"***

***Four ways to avoid pain and injury when starting an exercise regime***

Please feel free to print out and use any or all of the flyers.  
Or, make them available as handouts to your patients.

They are available on the website,  
[www.IACPnews.com](http://www.IACPnews.com) in an easy to print format.

Each has the following tagline:



***This healthy living information is provided by  
your Doctor of Chiropractic and the  
Idaho Association of Chiropractic Physicians (IACP) .***

# Chiropractic care can help with anxiety and depression

Anxiety and depression are common mental health conditions that affect millions of people worldwide. It's common knowledge that these conditions can cause a variety of emotional symptoms, such as panic attacks, chronic stress, loneliness, intrusive thoughts and fears. So how can chiropractic help with anxiety and depression?

What some people may not realize is that anxiety and depression can also cause a wide range of physical symptoms—this is the mind-body connection at work. Some examples of symptoms include muscle tension, high blood pressure, weight gain, weight loss, heart palpitations, headaches, stomach pain and more.

While traditional treatments such as therapy and medication can be effective for many of the emotional symptoms, many individuals with anxiety and depression are using a holistic approach, turning to alternative therapies such as chiropractic care to manage their physical symptoms.

Regular chiropractic adjustments can play a role in managing mental health conditions such as anxiety and depression. While chiropractic care directly treats physical pain, don't overlook the fact that treating physical pain can improve quality of life, and trickle down to improve mental health symptoms as well.

Chiropractic adjustments can impact the central nervous system by improving communication between the brain and the body. This has a positive effect on mental health conditions such as anxiety and depression, as the central nervous system plays a crucial role in regulating emotions.

Anxiety and depression disorders are common mental health conditions that can significantly impact a person's quality of life. There is both anecdotal and scientific evidence documenting the benefits that chiropractic care can provide for people with anxiety and depression. Benefits include relief of physical symptoms, improvement of sleep patterns and reduction of chronic stress.



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# The Idaho Association of Chiropractic Physicians

## *The IACP News*

### Display Advertising Policy, Rates and Information

The Idaho Association of Chiropractic Physician's *IACP News* is a full-color digital newsletter, published monthly and distributed to member doctors of chiropractic across Idaho as well as out-of-state members and student members.

**Format:** *The IACP News* is produced in a state-of-the-art digital format. It can be opened and viewed online from both the IACP website at <https://iacp.wildapricot.org/> and also from the publication site: [www.IACPnews.com](http://www.IACPnews.com). The publication site has both current and back issues of *The IACP News*. Questions about the digital format, the website, or display advertising should be directed to C&S Publishing at [CandSpublishing@gmail.com](mailto:CandSpublishing@gmail.com).

**Classified Ads:** IACP accepts classified ads. They are published without cost for IACP members, but can also be purchased for \$100 by non-members. For additional information about placing a classified ad, contact Caroline Merritt, IACP Executive Director at (208) 515-6263 or [caroline@idahotruenorth.com](mailto:caroline@idahotruenorth.com).

**Ad Sizes and Rates:** IACP reserves the right to determine position and placement of all advertising. Special positioning may be purchased for an additional 20% if space is available. Inside Cover and Back Cover are charged additional 20% for special positioning. **15% off these rates for IACP Members.**

Ad Type	Ad Size	1 run	3 runs	6 runs	12 runs
Full page (bleed)	8 5/8" wide by 11 1/4" tall	\$450	\$414	\$378	\$330
Full page (boxed)	8" wide by 9 3/4" tall	\$450	\$414	\$378	\$330
Half page	8" wide by 4 3/4" tall	\$267	\$264	\$224	\$190
One Third (V)	2 3/8" wide by 9 3/4" tall	\$190	\$174	\$159	\$140
One Third (H)	8" wide by 3 1/8" tall	\$190	\$174	\$159	\$140
Quarter Page	3 7/8" wide by 4 3/4" tall	\$160	\$146	\$134	\$115
One Sixth	3 5/8" wide by 2 7/8" tall	\$105	\$97	\$88	\$75

Rates are for full color ads **per insertion**. Ads published under a multi-run contract can be changed for each issue at no additional cost. Flash animation (.swf files), animations (.gif format) and video clips can be added to any ad. There is no extra charge for video clips or multi-media in ads unless "assembly" of the ad is required. Some file size limitations apply. For details contact [CandSpublishing@gmail.com](mailto:CandSpublishing@gmail.com). Email camera-ready ads in high resolution Adobe Acrobat (.pdf) format to: [CandSpublishing@gmail.com](mailto:CandSpublishing@gmail.com). Ad creation and graphic design services are available through C&S Publishing at no additional cost.

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