



*Prosperity Through Unity  
Exceptional Care for Idahoans*

May, 2018

*The IACP News, Vol. 2, No. 05*

## IACP Annual Convention & Exposition



*Erchonia demonstrated their newest laser technology.*

It was partly cloudy in Boise during the IACP Annual Convention & Expo last month — perfect weather to be inside at the event. Hundreds of doctors of chiropractic did just that, gaining CE credits, networking with vendors and friends, and checking out the latest and greatest in services and equipment.

The Grove Hotel, the event's venue, was, as always, spectacular. Friendly, helpful staff and clean, modern facilities enhanced the Convention experience. The event was filled with innovative presentations, networking opportunities, and discussions on IACP efforts to grow the chiropractic industry into the future.

A fresh and diverse set of speakers, along with a packed

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[Click here for Convention photos](#)

## The Fallacy of Goal Setting...

*How letting go of your goals could lead to increased performance and personal fulfillment*

**By Josh Wagner, DC**

Many DCs believe and are taught that setting practice goals is not only useful, but essential to achieving the success we are seeking. Unfortunately, this concept doesn't always produce what it intends. While having a vision and pursuit for our future certainly plays a strong role in reaching our goals, how we choose to go about our vision can make all the difference for heightened performance and actu-

ally experiencing the inner fulfillment and happiness we all want. Yet attachment to our goals is one of the most seductive sabotages to our happiness.

How many times have you set out to achieve a goal, struggled to reach it, and once accomplished you felt satisfied and proud of yourself — for about a day? And then what you accomplished reverted back to not being enough and needing to add and improve upon it once again?

This is because quantitative results-oriented goals lead to lack of fulfillment — because there's never an end to them. As soon as you reach that number value set out for (patient volume, income, car, home, boat, etc.) there's always another level above it. And the same deep emotions that drove you to your initial goal will kick in about 24 hours after its attainment. And then no matter what quantitative amount you reach, you'll feel the

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# 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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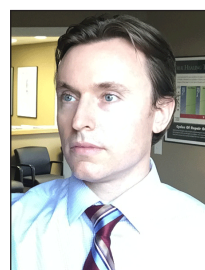
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## President's Corner

### Another great convention, thanks to IACP members



**By Dr. Scott Crawford**  
**IACP President**

Thanks again for another great IACP convention!

We had great speakers and wonderful vendors. It reminded me of the importance and value of century club membership.

We appreciate every membership, however the rewards of a century club are worth the investment. This includes an invite to the President's dinner Friday night where we had an amazing speaker, Sgt. Shilo Harris speak. His life story was inspirational and very motivating.

Our numbers were up and membership growing, so let's keep this momentum going. I would love to see more involvement from our docs statewide. So please call or visit those you didn't see at the convention and share your experience and what you learned from it.

I also want to congratulate our chiropractor of the year, Dr. Christie Hafer. As well as our Rising Star, Dr. Jason Van Sickle,

and our President's lifetime achievement award, Dr Chad Nielson.

Thanks again for another great convention,

Dr Scott Crawford

**IACP Members:** Increase your involvement by joining a committee. Help yourself and your association. [Click here](#) for more information or email Caroline Merritt at [iacpcontact@gmail.com](mailto:iacpcontact@gmail.com)



### *"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





# The Fallacy of Goal Setting

*Continued from front page*

same inadequacy and now need a larger amount to achieve the emotional results previously sought after by the attainment of the first one. This happens everywhere in life, not just our practice statistics.

You can likely relate this to an initial personal goal of getting into chiropractic school. You achieved this and were happy when you received the acceptance letter. Then you matriculated and realized getting into chiropractic school meant nothing unless you graduated. You then toughed it out for four years to pass your boards to get your degree. Then you graduated and got licensed and felt great for the weekend of celebrations, but soon realized graduating and a DC license meant next to nothing if you weren't successful in practice.... So you went into practice and decided on certain measurements either you or your peers deemed "successful" to measure yourself by. And if you reached them, you likely felt proud of yourself and your team for 24-48 hours, and then realized you now wanted more... but worse this time... an actual panic set in from the attainment of your goal.

There are two very depressing factors of reaching your number based goals. The first is as soon as you achieve a goal after the 24 hours of pride and accomplishment wear off, you realize you need to maintain everything it took to achieve it just to stay at that level (patient volume, income, new patient number, etc.). However, this current level isn't your goal anymore. You've already accomplished it. It's not attractive anymore. We want more. So we're right back to the same emotional level before hitting our initial goal for the next self-created one. And do you think it ends once you hit the second goal?

No, it never, ever ends. That's one reason why you hear about those who seem to have everything being depressed, not feeling good enough, and never letting go from the constant need to achieve more.

Lets inspect two important factors about goal setting that can save us from years of exhaustion and frustration. First, we often set goals that we don't even know we truly want. We set them because it sounds good in our head or when we share it with another, and often because someone else told us it's an ideal value to reach (patient volume, income).

However, it's not possible to know what you truly want at any

Josh Wagner, DC, is a native New Yorker raised in Chappaqua, New York. He was a pre-med student at New York University, then went on to Atlanta, Georgia to earn a doctorate in Chiropractic at Life University. After graduation, he interned with the largest Torque Release practice in the country – Exodus Chiropractic in Knoxville, TN.



The renowned founder of the Torque Release technique, Dr. Jay Holder, of Miami, Florida, became his educator and mentor in the specialty. Wagner chose to study the Torque Release Technique because it parallels his healing philosophy: Doctors don't heal, yet assist in creating an environment where the body can heal itself. His teachings, videos and event information can be found online at [PatientMastery.com](http://PatientMastery.com).

point in the future if you haven't experienced it yet. Whether what you want for dinner later tonight, your income in five years or what your retirement life will look like. Not only can we not accurately predict how our future circumstances will make us feel (because they're made up), but most of our goals are based on circumstances that we've never experienced and are purely influenced by society.

For instance, we're currently seeing 125 visits/week and we want to see 250 visits/week because we imagine that equates to being a better chiropractor, more income, or making a bigger difference in our community (neither of which are intrinsically true). Or perhaps you're making \$200,000/year income but want to make \$500,000/year income. If we haven't experienced our objective goal already, we actually don't know if it will bring us the experience we hope for when we reach it. And that's actually why we set goals in the first place. Because of the feeling we hope it will provide us upon achievement.

The second factor alluded to is our chosen path to reach our self-imposed goals. Most of us set a goal for ourselves, the actions steps to reach it and execution of them to be daunting and exhaustive. And in many cases, it is. So we end up never enjoying the process of the pursuit of our goals. And then one of two outcomes happens; neither of which results in happiness or fulfillment.

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# IACP Marketplace

## *The IACP News,*

this monthly newsletter of the Idaho Association of Chiropractic Physicians, reaches 600-800 chiropractors across Idaho every month.

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# The Fallacy of Goal Setting

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The first is we don't reach our predetermined goal, resulting in an exhaustive, stressful process we perceive as "losing". The latter is we go through the exhaustive, stressful process and achieve the goal providing an emotional high for approximately 24 hours but leaving us in the exact same emotional state as when we set out to achieve it. But it's actually worse once we achieve our goals. We're worse off for three significant reasons: 1. We realize we're no better off emotionally, nor fulfilled. 2. We feel the pressure to maintain the goal reached through the same exhaustive process now forevermore. 3. We immediately create loftier goals that if we don't achieve we now feel like a failure.

Do any of these feel familiar? Now, instead of thinking you have to drop your goals altogether, have no vision or direction and just drift through life to be fulfilled, there are other options in going about a fulfilling and happy career and life not measured exclusively by quantitative measures.

We'll look at two primary areas of focus for a better chance of sustained life fulfillment and happiness. The first is if you do choose to pursue purely quantitative goals. Since the process of pursuing your goal will be 99% of your waking hours (remember once you achieve the goal you'll be on to your next next one within 24 hours) it's imperative that you enjoy the process of pursuing your goal. Instead of laborious action steps we dread having to do and keep ourselves accountable to, how can we choose steps that make us feel great along the process? And, to choose actions that inspire us and contribute to feeling joyful, even if pushing outside our comfort zone?

**Here's a secret:** the reason we're pursuing a goal is to feel the emotions we hope it will bring us. But we cannot predict the emotion it will bring us if we haven't experienced that same result and associated emotion before. And the attainment of the goal will more often than not bring us right back to the original feeling of inadequacy, which was the reason for setting out on the goal from the start.

This conjures the age-old adage of, "Life is a journey, not a destination." Our goals are destinations. But our life takes place in the pursuit of them. If you neglect happiness on your process of reaching your goals, you're really missing out entirely. Your life takes place in the pursuit of our goals, not in their attainment. So if you're currently pursuing a goal and the journey isn't inspiring, this is something to heavily

consider, and then adjust how you're going after what you decided you wanted.

The second factor for adjusting our goal-oriented mindset to have more happiness and fulfillment is the nature of the goal itself. As discussed previously, any quantitative goal will never create fulfillment or long-term happiness. The same motivating factor, the need to achieve the goal, will appear again after it's achieved for the next elevated goal. And that's the problem with quantitative markers: there's never an end. And it more often than not ends up in a "never enough" mentality. Conversely, if our goals are of a qualitative nature — such as emotional balance, peace of mind, daily gratitude and joy, close loving relationships and being of service and contribution in areas you're passionate about — then the opposite effect happens.

No more is it a "how much" game as it all too often turns into with quantitative goals. Rather it's simply: is this present in my life or not?

It's not about having MORE joy daily or how much MORE loving your relationship with your spouse or children could be. It's simply: is it present or not? When our goal is about the presence of something, it doesn't turn into the never-ending need for more and more. It's either there or it's not.

And you know if you're missing the mark if it's not present. And you've achieved it if it is present. And when you're achieving the presence of your qualitative goals, not only are you more likely to be in a healthier, more productive and more influential place to achieve your numeric goals, but you'll likely have the emotional balance to realize the emotional outcomes you were subconsciously attracted to by achieving the goal has already been fulfilled (for example feeling worthy, respected, loved, or good enough).

Finally, there's nothing wrong with having and striving for numeric quantitative goals, so long as you realize their attainment not only won't change how you feel, but more likely will put you into the never-ending game of needing more. And that's no way to go through the journey of life. Rather, the pursuit and attainment of your goals through a process you truly enjoy, while maintaining daily focus on your most important qualitative goals (how you feel) will not only often have you reach them easier, but you'll actually have achieved the emotional fulfillment you sought from the beginning all along the way. And then you're more powerful than any numeric goal reached.



# FORTIFY SEMINAR

by Dr. Robert Silverman DC, DACNB, DCBCN, MS

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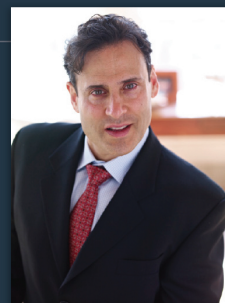


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### About the Seminar:

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- Tennis/golfer's elbow
- Plantar fasciitis
- Ankle sprain
- Peripheral nerve entrapments
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Dr. Robert Silverman  
DC, DACNB, DCBCN, MS

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# Are you working on the business, or just in the business?

By **Stoney Foster, Financial Services Representative**  
**Hall & Associates**

Running a successful business takes time, strategy and hard work. You may find yourself designing or manufacturing products, working with vendors, helping customers or managing employees. As a business owner, you will eventually want to retire and enjoy the benefits of your hard work. As you approach that day, you want to have an exit plan in place so you are set up to successfully leave the business on your terms, help set the minds of your employees and clients at ease and help your successor take over with confidence.



Many business owners simply don't plan for their personal financial future or for the next generation's ownership. Some have kids ready to take over, so they assume the transition will take care of itself. Others simply avoid thinking about the day when they're no longer in control of the business they've diligently nurtured. Still, others hesitate to jump into an arena they know little about. You've put in long hours building your business, and your legacy, so that you can pass it on intact. Because no one knows what tomorrow will bring, now is the time to plan for that transition.

## Three key areas for planning

Planning for the future generations of your business may seem complicated, with delicate decisions to make. Over the years you've held many roles in your business, it's now time to add succession planner to the list. Think about these three planning categories designed to help you and your family work together to realize long-term planning goals.

- Succession strategies
- Retirement income
- Estate planning

## Develop your succession strategy

If you are like most business owners, you have not given much thought to how, when and to whom you will transfer your business. Too often, your everyday business gets in the way of long-term planning. Someday, you will leave your business, whether by a planned or unplanned event. Some transitions can be anticipated, like a planned retirement. Other events are less predictable, such as an untimely death or disability. It is important to make plans to exit your business on your terms - no matter what the circumstances are. This planning can help protect you and your family under

many contingencies: retirement, death, disability, personal bankruptcy or even a divorce. Key items to consider include (1) to whom will you sell or transfer the business (2) when do you want to transition (3) how much will you sell for, and (4) where will the funding come from and what will the payment terms be.

## Retirement income

We get it – retirement could mean slowing down, not walking away. You'll still be involved, but with a different role. The next generation will be doing more, and earning more from the business. Planning ahead can help you buy back your time, and do those things you've likely put off while you were tied to the day-to-day (like that vacation you've promised yourself).

Your business will likely play a key role in providing your income during retirement. Diversifying your income source based upon timing and income tax characterization can be beneficial. Key items to consider include (1) how much will I net from the sale of my business (2) what retirement income sources will I have (3) will those sources be enough to meet my retirement income goals, and (4) what is the tax impact to my retirement income from each source.

## Legacy and estate planning

Deciding where your assets go when you are gone is a tough, and important, decision to make. You're the only one who can decide what is fair. But doing it now allows you to gather input, explain decisions, equalize your estate and leave a plan that is easy to execute without unnecessary tax burdens. Numerous effective techniques are available to successfully protect and transfer your assets. Key items to consider include (1) who do I want to leave my assets to (2) how do I protect my assets while I am alive (3) do I want to be fair or equal to my heirs, and (4) do I have an estate tax liability, if so how will it be handled.

## Team of advisors

No single advisor can counsel you on all the components of an exit plan – it is up to you to create and develop your team. The proper team of advisors will help you with your transition planning so you can successfully leave the business on your terms and perpetuate your business through the next generation. The importance of planning can't be overstated – we have all seen or heard about what a lack of planning does to businesses, families and employees. Surround yourself with the right people that will help you spend time working on the business, not just in the business.



# IACP Annual Convention & Exposition

*Continued from front page*

hall of exhibitions from IACP industry partners, provided attendees with professional development as well as beneficial products and services.

While there were many innovations showcased this year, one of the new technologies created just for IACP members was a mobile app designed for the 2018 IACP Annual Convention & Exposition. It had all the important information needed for the event, and features to enhance the event experience.

The Keynote Speaker was Dr. Dan Murphy, DC, DABCO, who spoke on Brain Injury and Neurodegeneration. His lecture spanned all of Friday, and he kept an entire room riveted with his keen insights, stories and knowledge. Featured speakers included:

- Dr. David Cruz, DC, who spoke about: Integrate Active Care and Improve Outcomes with Evidence-Based Care: Practical Application in the Clinical Setting; Shoulder Injuries; Knee Injuries
- Dr. Mitch Green, DC, DACRB, FAC,

who spoke about: Integrating Rehab in your Practice, Rehab of the Extremities, and Rehab of the Injured Runner

- Dr. Scott Bautch, DC, DACBOH, CCST, CCSP, who spoke about: Pain Management: The Chiropractor's Role in Combating the Opioid Crisis

If you missed the Convention & Expo, you missed a good one, but don't worry, the IACP Convention will return next April, and as always, your *IACP News* will have all the information you need to register and get involved.









# NIH launches HEAL Initiative to accelerate scientific solutions to

At the National Rx Drug Abuse and Heroin Summit held this April, National Institutes of Health Director Francis S. Collins, M.D., Ph.D., announced the launch of the [HEAL \(Helping to End Addiction Long-term\) Initiative](#), an aggressive, trans-agency effort to speed scientific solutions to stem the national opioid public health crisis. NIH is nearly doubling funding for research on opioid misuse/addiction and pain from approximately \$600 million in fiscal year 2016 to \$1.1 billion in fiscal year 2018.

“Every day, more than 115 Americans die after overdosing on opioids,” said Dr. Collins. “That is a four-fold increase since 2000, and the numbers continue to climb. NIH has been deeply invested in efforts to counter this crisis through research, but we are determined to do even more. Over the last year, NIH has worked with stakeholders and experts across scientific disciplines and sectors to identify areas of opportunity for research to combat the opioid crisis. The focus of these discussions has centered on ways to reduce the over prescription of opioids, accelerate development of effective non-opioid therapies for pain, and provide more flexible options for treating opioid addiction. NIH is committed to bringing the full power of the biomedical research enterprise to bear on this crisis.”

HEAL will bolster research across the NIH to:

## [Prevent Addiction through Enhanced Pain Management:](#)

- Launch a longitudinal study to follow patients 1) after acute onset of musculoskeletal pain and 2) after surgery to identify biomarkers that might predict which individuals are more likely to transition from acute to chronic pain.
- Leverage innovative imaging and -omics neurotechnologies developed through the [NIH BRAIN Initiative](#) and [SPARC](#) (Stimulating Peripheral Activity to Relieve Conditions) program to identify 1) potential new targets for treatment of chronic pain and 2) objective biomarkers to predict which individuals will respond to a treatment.
- Advance understanding of the genetic and social factors that put patients at risk for opioid misuse and addiction to inform precision prevention strategies tailored to individual risk factors.
- Define and support best practices for pain management

## *National Opioid Overdose*

*The opioid epidemic killed more than 33,000 people in 2015. US, with 47,055 lethal drug overdoses in 2014. Opioid addiction to prescription pain relievers, and 10,574 overdose deaths related to rates, sales and substance use disorder treatment admissions overdose death rate in 2008 was nearly four times the 1999 rate those in 1999; and the substance use disorder treatment admissions million prescriptions were written for opioids, which is more than*

using nondrug and integrated therapies for specific pain conditions by building on research from the National Center for Complementary and Integrative Health, the U.S. Department of Veterans Affairs, and Department of Defense [research collaborative](#) to address the needs of service members and veterans.

- Pursue public-private partnerships to develop new non-addictive pain medicines by sharing data on past and present research projects, and matching researchers with a selection of potentially promising but abandoned pharmaceutical industry compounds to explore their effectiveness for the treatment of pain.
- Build a clinical trials network that will allow multiple new and repurposed compounds to be tested simultaneously for effectiveness. This allows ineffective compounds to be weeded out and new compounds to enter trials more swiftly. The combination of testing compounds that already have received large investments and passed safety testing, and a flexible clinical trials network will significantly accelerate the development of effective therapies.

## [Improve Treatments for Opioid Misuse Disorder and Addiction:](#)

- Expand therapeutic options for treating addiction, including extending the options for Medication-Assisted Therapy (MAT) and overdose reversal treatments. Develop immunotherapies that enlist the immune system to block entry of

# Initiative, doubles funding to stem national opioid epidemic

## Close Epidemic Statistics

*Drug overdose is the leading cause of accidental death in the United States. Prescription pain relievers are driving this epidemic, with 18,893 overdose deaths related to heroin in 2014. From 1999 to 2008, overdose death related to prescription pain relievers increased in parallel. The rate; sales of prescription pain relievers in 2010 were four times the 1999 rate. In 2012, 259 million prescriptions were written, enough to give every American adult their own bottle of pills.*

heroin or synthetic opioids to the brain to prevent overdose or relapse for individuals at high risk for addiction. Compare already proven MAT in combination with other nondrug approaches such as cognitive therapy and meditation.

- Evaluate treatments and long-term consequences of Neonatal Opioid Withdrawal Syndrome by expanding the Advancing Clinical Trials in Neonatal Opioid Withdrawal Syndrome (ACT NOW) project, tapping into the [Environmental Child Health Outcomes](#) and [IDeA States Pediatric Clinical Trials Network](#).
- Working with federal and state partners, pilot demonstration projects to test the integration of multiple addiction prevention and treatment options in healthcare and criminal justice settings in states with the highest rates of opioid misuse and overdose to inform evidence-based prac-



tice. Despite multiple effective prevention and treatment approaches, the majority of the 2 million Americans with opioid use disorder do not receive appropriate or adequate treatment for their addiction.

“Science and technology have illuminated our understanding of the mechanisms underlying addiction,” said Nora D. Volkow, M.D., director of the National Institute on Drug Abuse. “With these additional resources, we can develop more customized, high-quality treatments for addiction and pain, as well as harness implementation science to bring evidence-based changes to our healthcare system, including treatment for those in the criminal justice environment.”

The NIH HEAL Initiative will build on extensive, well-established NIH research that has led to successes such as the development of the nasal form of naloxone, the most commonly used nasal spray for reversing an opioid overdose; the development of buprenorphine for the treatment of opioid use disorder; and the use of nondrug and mind/body techniques to help patients control and manage pain, such as yoga, tai chi, acupuncture, and mindfulness meditation. The Initiative will tap into the expertise of the [NIH Pain Consortium](#), which was established to enhance collaboration among NIH institutes, centers and offices that conduct pain research.

“This nationwide crisis stemmed initially from over-prescribing of opioid medications to treat pain,” said Walter J. Koroshetz, M.D., director of the National Institute of Neurological Disorders and Stroke, the lead NIH institute on pain. “The HEAL Initiative will develop the scientific evidence that informs best practices to effectively treat patients with pain while preventing addiction. A major focus will be to understand why some people go from acute to chronic pain, with the intent to prevent that transition. Importantly, the Initiative will drive the science to enable the development of powerful, non-addictive pain treatments that would limit the need for opioid medications in the future.”

*About the National Institutes of Health (NIH):* NIH, the nation’s medical research agency, includes 27 Institutes and Centers and is a component of the U.S. Department of Health and Human Services. NIH is the primary federal agency conducting and supporting basic, clinical, and translational medical research, and is investigating the causes, treatments, and cures for both common and rare diseases.



# Classified Ads

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**Seeking job as IC or Associate (prefer):** I am a dedicated and patient outcome driven Chiropractic Physician who is looking to give back and serve the community. As a practicing Chiropractor, I focus on the neuromusculoskeletal system specifically the spinal subluxation and the consequences of these types of disorders on the overall health of my patients. I am pursuing either, an Independent Contractor or Associate position, to employ all my knowledge, skills and abilities in Boise or the surrounding areas.

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- Growth opportunities for the entire clinic
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**For sale:** CLA's 3 tech Insight Subluxation Station w/ lab top for sale. Barely used, 2017 model includes; pulse wave profiler (heart rate variability), SEMG, wireless rolling thermal. Asking 10,500.00. Contact Debra 208-777-4000.

**Position Available:** Full time Chiropractic associate position in a busy multi-doctor office in Nampa Idaho, just outside of Boise. We are looking for a highly motivated, honest and

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- Willing to learn
- Wanting to build a career.
- Sales and marketing experience is a plus
- Licensed in Idaho, though not a requirement to start

Contact us with your resume at:

[drmccconnell@balancedmovementchiropractic.com](mailto:drmccconnell@balancedmovementchiropractic.com)

**Free:** Chiropractic materials for donation to new or expanding office. Posters, banners, practice building materials, forms and other misc. chiropractic materials to be given to anyone needing materials and willing to pick up. Please contact at 208-467-7600.

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# Upcoming Events Calendar



## October 3-6 Multi city tour

Boise, Pocatello, and Coeur d'Alene. (exact schedule TBD).

Dr. Ty Talcott is the presenter.

More info coming right here in the *IACP News*

## *We're practically giving it away!*

When you buy a half-page or full-page display ad in this monthly newsletter, we will give you, absolutely free, the following:

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# Office Poster



It occurred to us that some readers may wish to print out and post up on your patient bulletin boards the healthy living information we have been publishing.

So we have created [printable PDFs](#) of the ***Seven Simple Steps to a longer, Healthier Life*** story on the following page, and the following stories available online:

***New study suggests fries may be deadly***

***Watermelons are not just for kids***

***Research suggests diet soda link to stroke & dementia***

***Benefits of eating apples***

***Tips for keeping your New Year's Resolutions***

***Skipping breakfast may hurt your heart health***

***A high-sugar diet makes healthy people sick - fast***

***7 simple steps to a longer, healthier life***

Please feel free to print out and post up any or all of the flyers. They are available on the website, [www.IACPnews.com](http://www.IACPnews.com) in an easy to print PDF 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) .***

# The Secret Weapon for Lower Blood Pressure



People 50 and over are frequently searching for ways to lower their blood pressure and focus on foods to eliminate, such as items high in salt. But can adding tasty items help, as well?

“Potassium can be a secret weapon when thinking of heart health, managing blood pressure and improving systems in the body,” nutritionist Jae Berman wrote for the Washington Post. Sodium and potassium, which are very similar chemically, join forces in a sodium-potassium pump in your body, which “moves sodium out of the cell and potassium into the cell,” Berman writes. This process is essential to cell function and energy production.

Unfortunately our diets are typically much higher in sodium than potassium, causing an imbalance in our system. According to the National Health and Nutrition Examination Survey, fewer than 2 percent of Americans achieve the recommended consumption of potassium, which is 4,700 mg per day. Yet the vast majority of us, over 90 percent, eat more than 2,300 mg of sodium per day, which is the top tolerable limit recommended by the Institute of Medicine. Just one teaspoon of table salt equals 2,400 mg of sodium, so it is easy to knock your system off balance.

Whole foods are the best sources of potassium, and avoiding packaged and processed foods is the best way to lower your sodium intake. Excellent sources of potassium include:

- Avocado (Try swapping out salted butter with this natural treat in your next meal.)
- Bananas are high in potassium and pectin and antioxidants
- Yogurt
- Winter squash (acorn or butternut)
- Spinach and other greens
- Whole potatoes with the skin, such as yams
- Salmon and sardines
- Dried fruits such as apricots and prunes
- Vegetables such as beets and broccoli



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Idaho Association of Chiropractic Physicians (IACP) .*



# Chiropractic News

## ICA launches Practice Success Academy

The International Chiropractors Association (ICA) has partnered with 12 of the professions top experts in practice growth and management to develop a one-year program to teach chiropractic offices throughout the world how they can create a greater impact in their community.

Each month beginning May 1 and continuing through April 30, 2019, the ICA will showcase an expert on practice growth and efficiency who will be answering questions and sharing the keys to a successful practice.

"This outstanding program was developed so that chiropractors can have the tools and necessary information to grow their practice and to serve as many people in their community as possible. Now more than ever a sick and suffering society needs what the chiropractic profession has to offer," said ICA president Dr. George Curry.

Participating in the program are Dr. Josh Wagner, Dr. Kevin Pallis, Dr. Barbara Eaton, Dr. Ben Lerner/AMC, Dr. Brad Glowaki, Dr. Mark Radermacher, Dr. Fred DiDomenico, Dr. Eddy Diaz, Dr. Tim Young, Dr. Stephen Franson, Dr. Mike Reid and Dr. Chris Zaino.

To participate in this program contact the ICA at 571-765-7550 or send an email to: [rvanbeelen@chiropractic.org](mailto:rvanbeelen@chiropractic.org)

## Palmer study finds high levels of chiropractor integration

A recent study by the Palmer Center for Chiropractic Research found a majority of doctors of chiropractic working in multidisciplinary health-care facilities such as hospitals report high levels of integration, including co-managing patients with medical staffs and sharing health records.

An article about the study was published in the February 2018 issue of the *Journal of Manipulative Physiological Therapeutics*. Scientists from the Palmer Center for Chiropractic Research (PCCR) and collaborating partners, described the characteristics, benefits and challenges of doctors of chiropractic (D.C.s) working in medical facilities in the U.S.

"Recent clinical practice guidelines have encouraged greater

use of non-drug based therapies, like spinal manipulation, for the treatment of people with back pain," said Stacie Salisbury, Ph.D., R.N., the study's lead author. "We know from previous studies conducted by the PCCR that chiropractic patients would like their D.C.s to collaborate with medical personnel. Chiropractors who work in integrated health-care settings, like the ones described in this paper, are well-placed to practice in just such a collaborative style. This survey describes some of the benefits and challenges faced by D.C.s who practice in typical medical facilities. Future studies will need to explore the impact of such integrated care on patient outcomes."

The online survey, funded by the NCMIC Foundation, included 38 D.C.s, mostly mid-career professionals, who worked in integrated health-care facilities, such as hospitals, multispecialty offices, ambulatory clinics, or other health-care settings. Most (68 percent) were salaried employees. The majority reported high levels of integration in their facilities, such as co-managing patients with medical staff, using the same health record, and working in the same clinic.

## Opiates ineffective for chronic back or hip pain

A recent study published in the *Journal of the American Medical Association* found that opioids are not an effective solution for chronic pain. Researchers from the University of Minnesota studied 240 patients who had chronic back, hip, or knee arthritis pain. Half of the study subjects received opiates; the other half received non-opiate pain medications. Patient progress was evaluated at 3-months, 6-months, 9-months, and one year.

The study found:

- There was no difference in pain-related function between the two groups.
- At 12 months, the nonopioid patients had less pain than did those who received opiates.

"The opioid group had significantly more medication-related symptoms over 12 months than the nonopioid group"

The study authors wrote: "Among patients with chronic back pain or hip or knee osteoarthritis pain, treatment with opioids compared with nonopioid medications did not result in significantly better pain-related function over 12 months.

Nonopioid treatment was associated with significantly better pain intensity, but the clinical importance of this finding is unclear.”

Previous research has found that about 20% of patients with musculoskeletal pain are prescribed narcotic pain medications for their symptoms, and [another recent study](#) found that 36% of people who overdosed from opiates had their first opioid prescription for back pain.

Another recent study found that chiropractic patients are less likely to use opiates for their pain than are medical patients.

From this research, it seems clear that it’s risky to prescribe opiates for musculoskeletal pain. Chiropractic care is a proven safe and effective approach for both chronic and acute back pain.

### Chiropractic reduces opioid use and abuse

A new study published in *The Journal of Alternative and Complementary Medicine* concludes that adults receiving chiropractic care for low back pain (LBP) were 55 percent less likely to fill a prescription for an opioid analgesic in comparison to adults who did not receive chiropractic care.

The study by James Whedon, Andrew Toler, Justin Goehl, and Louis Kazal, called, *Association Between Utilization of Chiropractic Services for Treatment of Low-Back Pain and Use of Prescription Opioids*, can be [found here](#).

The object of the investigation was to evaluate the association between utilization of chiropractic services and the use of prescription opioid medications. Based on the findings, the Foundation for Chiropractic Progress (F4CP), a not-for-profit organization dedicated to raising awareness about the value of chiropractic care, notes that pain management services provided by doctors of chiropractic (DCs) may allow patients to use lower or less frequent doses of opioids, leading to reduced costs and risk of adverse effects.

Key findings of the study include:

- Of the 13,384 subjects studied, only 19 percent of the subjects receiving chiropractic care filled a prescription for opioids, while 35 percent who did not receive chiropractic care filled these prescriptions.
- All categories of prescription charges were significantly lower for recipients of chiropractic services in comparison with non-recipients.
- In 2014, annual charges per person were 78 percent lower for opioid prescriptions and 71 percent lower for clinical services among chiropractic recipients compared with non-recipients.

“Consumers are actively looking for safe, clinically and cost-effective, drug-free approaches to manage back pain,” said Sherry McAllister, DC, executive vice president, F4CP, who notes that among U.S. adults prescribed opioids, 59 percent reported having back pain. “As the cost and risks associated with prescription opioid medication continues to rise, it is only logical that more people are turning to non-invasive approaches, such as chiropractic care, as the first-line approach to treating neck, back and neuro-musculoskeletal pain before medication or surgery.”

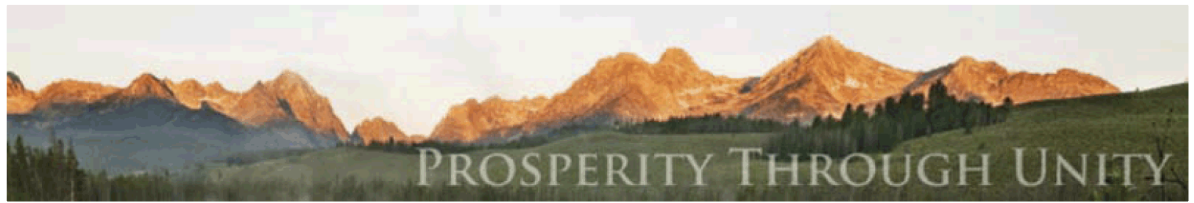
According to the study, more aggressive pain management efforts that began in the 1990s have led to an epidemic of prescriptions for opioid pain medications in the U.S, with more than 650,000 opioid prescriptions dispensed per day. An estimated one out of five patients with non-cancer pain or pain-related diagnoses is prescribed opioids in an office-based setting.

The Institute of Medicine has recommended the use of non-pharmacologic therapies, including chiropractic care, prior to utilization of pharmacotherapy for patients with chronic pain. In addition, recently published guidelines from the American College of Physicians recommend non-pharmacologic treatment as the first-line approach to treating back pain, with consideration of opioids only as the last treatment option, or if other options present substantial harm to the patient.

The study was funded by the Council on Chiropractic Guidelines and Practice Parameters/Clinical Compass. Data for this research were supplied by the New Hampshire Insurance Department and NH Department of Health and Human Services. The study population comprised New Hampshire residents aged 18-99, enrolled in a health plan in 2013 and 2014, and with at least two clinical office visits within 90 days for a primary diagnosis of low-back pain in 2013.







## IACP MEMBERSHIP APPLICATION

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<b>IACP Membership Categories:</b> Types of Membership and Benefits:		<b>Full Amount</b>	<b>Monthly</b>	<b>Payment Information:</b>
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<b>All Standard Membership Benefits, plus:</b> <ul style="list-style-type: none"> <li>• FREE Convention Member Registration;</li> <li>• FREE Non-DC Staff Member Convention Registration;</li> <li>• Expanded Discounts for Member and Staff on three IACP quarterly seminars;</li> <li>• 25% Discount on advertising via the IACP newsletter and/or website;</li> <li>• 25% Discount on Bronze Level Convention Sponsorship;</li> <li>• Invitation to IACP PAC Dinner(s) for legislative officials targeted for IACP support;</li> <li>• Opportunity to write articles for IACP newsletter editions*;</li> <li>• Two FREE classified ad both online and printed newsletter per year;</li> <li>• <b>First Call</b> - IACP Referrals for patients seeking specific DC techniques/education;</li> <li>• Invitation to the IACP President's Dinner – including other Century Club members, past IACP Presidents, Idaho Legislators &amp; Sponsors;</li> <li>• Portion of C.C. dues fund the IACP PAC - supporting legislative efforts/candidates.</li> </ul> <small>** The IACP reserves the right to review articles and edit submissions as it deems necessary.</small>		\$1200	\$100	
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# Are your billing practices creating a negative patient experience?

By Dr. Ray Foxworth, DC, President of ChiroHealthUSA

Office billing and collections can create ill feelings between a practice it's patients. It can also be a point of contention for staff and doctors alike. Advances in technology have made life more convenient for us, our families, and our patients. Yet, we continue to use antiquated, confusing, and inconvenient methods for collecting payments from our patients. To improve the patient experience in our offices and take the sting out of patient finances, we should create clear expectations up front, be transparent when it comes to the value of care in our offices, and offer automatic payment options and affordable payment solutions.

A negative patient financial experience can prevent you from collecting on an outstanding balance and keep a patient from returning to your office. And, in many cases, licensure board complaints and audits are triggered "fuzzy" financial policies. Sitting down with your patients to explain their financial responsibility in the office, is an excellent way to prevent confusion and establish expectations. Clarifying the number of visits, what insurance will and will not cover, and presenting payment options that easily fit in their budgets, is the first step in eliminating confusion and letting patients feel in control of the decision-making process. It also lessens the likelihood that patients will feel buyer's remorse once they leave your office.

**Stop collecting at each visit.** InstaMed's annual market research from 2016, shows that the number of automated payments in healthcare is growing at a rate of 111% each year. Automatic payments guarantee revenue that might otherwise go uncollected in your practice, which increases revenue. The more often your patients think about paying for care, the more likely they are to stop requesting care. Once your automatic payments are scheduled, all you do is sit back, relax, and collect your revenue and focus on taking great care of your patients. Payments automatically process, whether it's a holiday, a weekend, raining, or you're on vacation. This is convenient not only for your patients, but also for your staff. Check with your EHR software provider to see if your software has automatic payment options.

**Be honest about your fees.** Be direct when it comes to discussing the cost of care. These days, patients are demanding price transparency. Giving them the runaround is not going to cut it. Additionally, apologizing for the cost of care doesn't help much either. When your fees are set at, or near, market value, it empowers you and your staff to confidently present the cost of. Pair that with a solid clinical report of

findings, and you have given your patient a reason to value the care you have recommended.

**Discount correctly.** Be cautious when it comes to offering discounts in your practice. Special pricing, limited-time offers, and free services, not only de-value the services you provide, but can land you in regulatory hot water. Discounts should only be offered when they are legal and compliant. And here is the important part. Complaint, means the discounts do not violate rules or regulations by your licensure board, your Provider Agreements, your State Department of Insurance, Medicare and the Office of Inspector General. You can worry about all of those often confusing and conflicting rules, or utilize the "Gold Standard". The contractual network discount. This is the model used by all major insurance companies and discount medical plan organizations, which are regulated in most states. In March 2018, a chiropractor in Iowa who provided free electrical stimulation to his patients, agreed to pay restitution of nearly \$80,000 after an investigation found him guilty of violating the Anti-Kickback statute and in turn the False Claims Act. If he had used a DMPO to create contractual network pricing for modalities, he could have avoided this threat to his practice and still helped his patients have access to affordable healthcare.

Being flexible and open to new changes in your practice can go a long way to improve patient satisfaction, reducing collection headaches, increasing revenue, and attracting new patients. Implementing these strategies doesn't have to be difficult or expensive. Do your homework and select the right partners for your practice. There are great companies that have been in business a long time because they have done their due diligence. They can help you follow the rules while helping to streamline your practice with new innovations. Embrace the technology and convenience your patients demand, and they will return the favor.

*Dr. Ray Foxworth is a certified Medical Compliance Specialist and President of ChiroHealthUSA. A practicing Chiropractor, he remains "in the trenches" facing challenges with billing, coding, documentation and compliance. He has served as president of the Mississippi Chiropractic Association, former Staff Chiropractor at the G.V. Sonny Montgomery VA Medical Center and is a Fellow of the International College of Chiropractic. You can contact Dr. Foxworth at 1-888-719-9990, [info@chirohealthusa.com](mailto:info@chirohealthusa.com) or visit the ChiroHealthUSA website at [www.chirohealthusa.com](http://www.chirohealthusa.com). Join us for a free webinar that will give you all the details about how a DMPO can help you practice with more peace of mind. You can register at: [www.chirohealthusa.com](http://www.chirohealthusa.com)*



# Chiropractic College News Update

## Life West launches Smile for LIFE

Life West has launched a new and exciting AmazonSmile program to help fund its outreach programs. Each time someone makes a purchase on Amazon, if they will do it on AmazonSmile, a half a point gets donated to the non-profit of their choice. Of course, the college is asking that chiropractors make Life West their non-profit of choice.

There is much work to do in the world to bring more people under the chiropractic fold. Life West will be using these donations to do just that. Life West is asking for your support. It's easy — view the below video for instructions. Please share this video with your friends, colleagues, and patients.



## Gladiatrix honored at Hayward City Hall

Mayor Barbara Halliday and local dignitaries honored the Life West women's rugby team with a Certificate of Commendation at the Hayward City Hall. The Gladiatrix were recognized by the City of Hayward for their recent successes in women's rugby. The Gladiatrix posted back-to-back undefeated seasons that resulted in a Division II National Championship title in 2016 and a Division I National Championship title in 2017. The Gladiatrix are on track for an unprecedented third title this season.

Mayor Halliday referenced the current NBA champions, Golden State Warriors, and NCAA Division I Men's Basketball National Champions, Villanova Wildcats, as a comparison to the Life West Gladiatrix dominance in women's rugby. A standing ovation ensued after the Mayor Halliday's commendation of the team.

Gladiatrix captain, Jenn Sever, summarized the team's grati-

tude to the City Council. "Having the support of our community means the world to us. The Hayward community is where we are rooted and we're just excited that we have you guys in our corner supporting us as we pursue our third undefeated national title," Sever said. "We're excited that we can use rugby as a vehicle to connect and educate this community with chiropractic."

The Gladiatrix presented Mayor Halliday with a Life West Rugby polo.



## CUKC receives equipment donation from alum

The Research Department at Cleveland University-Kansas City (CUKC) was recently the recipient of a generous donation that will allow it to broaden the scope of its work. The department was gifted two pieces of MedX equipment by Dr. James A. Wyllie, a 1983 Cleveland graduate. Wyllie was revamping his practice, and no longer needed the two machines, so he contacted CUKC. After learning the testing equipment could be used in the University's research efforts, the two machines were soon on their way to the CUKC campus.

According to Dr. Mark Pfefer, director of research at CUKC, the equipment was valued at more than \$100,000 when new, so it was a tremendous gift for the department. The lumbar and cervical strength testing machines are used to accurately evaluate the neck and low back, to identify current or potential problems. Precise measurement of range of motion, strength and endurance can be compared to establish norms. This allows a progressive strengthening program to be developed to isolate and bolster the weakened area.

Pfefer said the scope of chiropractic research regarding

*Continued on next page*

# Chiropractic College News

*Continued from last page*

strength and performance changes is limited, so these new additions will help researchers at CUKC to fill that void.

“Our plan is to use the equipment to study changes in neck and low back strength before and after chiropractic care,” Pfefer said. “We also plan to use it for selected patients with identified spine weakness, and evaluate different rehabilitation approaches to optimize recommendations for future patients.”

## The 2018 Rubicon Conference May 18 - 20

The Rubicon Group (TRG) will host its fourth conference, the first in the United States, May 18-20, 2018 in Atlanta, Georgia at the Renaissance Atlanta Waverly Hotel & Convention Center, in cooperation with LIFE Vision Seminars. This year’s conference is highlighted by some of the biggest names in the chiropractic profession and beyond, including New Zealand College of Chiropractic Director of Research Dr. Heidi Haavik; Emmy award-winning film and TV producer Del Bigtree (Vaxxed); Life Chiropractic College West professor Dr. Dan Murphy; Life University Chancellor Dr. Guy Riekeman, and many more.

## ICA Council on Upper Cervical Care announces First Symposium June 2018 in San Diego

“Advances in Spinal Care” is the theme of the ICA Upper Cervical Council’s first symposium to be held at the Loews Coronado Bay Resort in San Diego, Calif., June 21-23, 2018. The program is impressive with topics ranging from cervical alignment and dental malocclusions and why you need to have a dentist in your back pocket to advancements in dynamic upright MRI imaging of misalignments at the CCJ post neck and head trauma to an update on cervical spine adjusting and artery issues. There are also eight research paper presentations. Papers were selected from submissions by field doctors and academia following a a profession-wide Call for Papers.

The distinguished list of speakers include Scott Rosa, DC, Gerry Clum, DC, Arthur Croft, PhD, DC, MSc, Jeffrey Scholten, DC, DCCJP, FCCJP, Ron Wellikoff, DC, Curtis Westersund, DDS, Scott Bales, DC, DCCJP, David Harshfield, MD and Angelo Colavita, DC.

“We invite all DCs to attend this symposium,” said Dr. Bo Rochester, president of the ICA Council on Upper Cervical Care. “Though the program was designed with the upper cervical practitioner in mind, the material will be of interest to any clinician who wants to learn more about spinal care.” [Click here for more information or to register.](#)

## Northwestern Health Sciences University is answering the call to action

A call to action by one of the world’s leading medical journals is raising awareness and understanding about low back pain as a public health crisis. Northwestern Health Sciences University commends this initiative and commits to contributing to improved understanding and treatment through its recognized leadership role on low back pain issues. NWH-SU offers knowledge and direct patient treatment through chiropractic, massage therapy, acupuncture and other disciplines that compose its curricular, research, clinical and professional support programs.

Low back pain is the leading cause of disability in the United States and worldwide. Calling attention to this serious public health issue was the impetus for a series of three research-based articles published in The Lancet, one of the world’s most respected medical journals. The series concludes that reports of low back pain are growing in our country and around the world, driven in part by aging and lifestyle factors, and that health professionals are not doing enough to treat it—or are relying on ineffective and dangerous treatments that can make patients’ lives worse.

[Continue reading the full report here:](#) *Low back pain: A call to action answered at NWH-SU.*

## Palmer offers CE series on women’s health

Most chiropractors treat women for a variety of conditions, and Palmer is now offering a special continuing education program, the Women’s Health Series, to provide the latest information on addressing many of the most common women’s health issues. This comprehensive series covers a wide range of topics, including hormonal imbalances, infertility, and considerations for a healthy pregnancy and post-partum care. All sessions in the series will be held on Palmer’s Main campus in Davenport, Iowa.

May 12-13, Dr. Sirchio-Lotus and Jeanie Bussell, L.Ac., Ph.D., present, "The Road to Conception: How to Protect Fertility and Recover from Infertility, an Interdisciplinary Approach."

The June 16-17 session addresses two topics. Dr. Sirchio-Lotus will present, "Preconceptive Health: Correcting Hormone Imbalances, Lifestyle Choices and Underlying Conditions Prior to Conception." Rachel Fabbi, D.C., presents "Natural Gynecology: Treatments and Options Outside of Surgery to Address Common conditions."

Additional sessions will cover such topics as the physiological and musculoskeletal care of pregnancy symptoms, taping and fitness throughout pregnancy, post-partum issues, baby development milestones, baby and child nutrition, pain and its relation to pregnancy, metabolic syndrome, insulin resistance and DM2 and cardiac health in the female patient and common female reproductive disorders.

[Find out more](#) about this fascinating, informative series and register today!

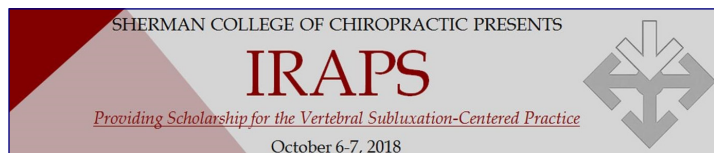
### **Sherman College of Chiropractic to host the 15th annual IRAPS**

Sherman College of Chiropractic will host the 15th annual International Research and Philosophy Symposium (IRAPS), a peer-reviewed conference on vertebral subluxation research and the philosophy of chiropractic. The conference will be held in Spartanburg, October 6-7, 2018 at the Summit Pointe Conference Center. Sherman College is [calling for submissions of abstracts](#) for those wishing to present at this year's conference.

The goal of IRAPS 2018 is to bring leaders in philosophy and research together, along with practitioners who are centered on vertebral subluxation practice, to build a stronger academic community worldwide regarding the subluxation model of chiropractic. The intent is to foster a view that the chiropractic profession is:

- Centered on vertebral subluxation
- Based on vitalism
- Dedicated to research
- Developing a discipline of philosophy

[Registration](#) opens July 1.



## ***The IACP News***

**accepts press releases**

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# The Idaho Association of Chiropractic Physicians

## *The IACP News*

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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

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