



*Prosperity Through Unity
Exceptional Care for Idahoans*

July 2021

The IACP News, Vol. 5, No. 7

Chiropractic care and our Olympic athletes

The most decorated Olympian of all time, the world's fastest man and other Olympic athletes use chiropractic care to improve performance

The last Summer Olympic games held in Rio in 2016 showcased the competitive advantage chiropractic care can give world-class athletes. American athletes in the 2021 games in Tokyo will continue to use and benefit from chiropractic adjustments.

Chiropractic has been helping U.S. Olympians push the limits of their athletic abilities and perform to the best of their abilities since Dr. George Goodheart, the founder of Applied Kinesiology who practiced in Detroit and Grosse Pointe, became the first official US Olympic team chiropractor at the 1980 Winter Olympics in Lake Placid.

For athletes, chiropractic care can help to reduce the risk of injuries, accelerate recovery time and improve health and



performance through enhancements in range of motion, flexibility, balance, muscle strength and other key factors.

Sherry McAllister, DC, executive vice president, Foundation for Chiropractic Progress (F4CP), says, "It is gratifying

Continued on page 4

Chiropractic action urged by ACA on HR 2654

Legislation championed by the American Chiropractic Association (ACA) to increase Medicare coverage of chiropractic services has been introduced in the U.S. House of Representatives.

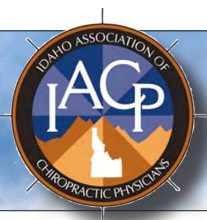
The Chiropractic Medicare Coverage Modernization Act (H.R. 2654) would allow Medicare beneficiaries access to the chiropractic profession's broad-based, non-drug approach to pain management, which includes manual manipulation of the spine and extremities, evaluation and management services, diagnostic imaging and utilization of other non-drug approaches that have become an important strategy in national efforts to stem the epidemic of prescription opioid overuse and abuse.

H.R. 2654:

- Provides patient access to all Medicare-covered benefits allowable under a chiropractor's state licensure.
- Requires that DCs complete a documentation webinar.
- Appropriately defines a Doctor of Chiropractic (DC) as a "physician" in the Medicare program.
- Is bipartisan legislation, introduced by 16 cosponsors from both political parties.

The federal Medicare program, which serves as a model for private insurance plans, currently serves more than 55 million individuals. Various projections forecast the number of people age 65 or older increasing by about one-third over

Continued on page 7



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.

2019-2020 IACP Board of Directors



Dr. Jeremai Hafer
President



Dr. Thomas Bench
Vice President



Dr. Joan Burrow
Secretary



Dr. Scott Crawford
Treasurer

2019-2020 IACP Board of Directors



Dr. Corey Vollink
District 1



Dr. Michael Henze
District 2



Dr. Kimball Arritt
District 3



Dr. George Fiegel
District 4



Dr. Howard "Rusty"
Arrington
District 5



Dr. John Maltby II
District 6



Dr. Grayson Blom
District 7

Idaho Association of Chiropractic Physicians

P.O. Box 8611, Boise, ID 83707

Phone: (208) 424-8344 • FAX (888) 399-5459

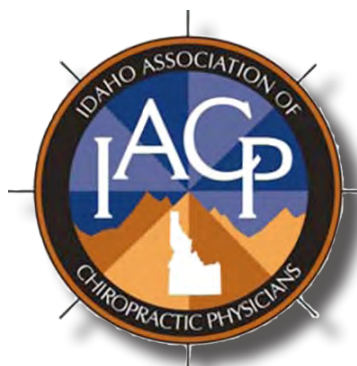
<https://iacp.wildapricot.org> • iacpcontact@gmail.com

For advertising info, email C&S Publishing at: CandSpublishing@gmail.com

In This Issue

Chiropractic care and our Olympic athletes (Continued)	Pages 4 - 5
IACP Membership Application	Page 6
Chiropractic support for HR 2654 needed (Continued)	Page 7
All Orthotics are NOT created equal: custom orthotics vs. generic insoles	Pages 8 - 11
Ergonomic intervention can reduce injuries for cyclists	Pages 12 - 13
Ergonomic pitfalls of working at home	Pages 14 - 15
ChiroHealth USA: The financial impact of the pandemic on your practice	Pages 16 -17
Upper Cervical 2021 Conference	Page 18
Save the date: September World Federation of Chiropractic virtual Biennial Congress	Page 19
Chiropractic News	Pages 20 - 21
Chiropractic College News	Pags 22 - 24
2021 Annual Superconference on Chiropractic & Pediatrics	Page 25
Classified Ads	Page 26
The IACP Marketplace: Featured Businesses & Suppliers	Page 27
Office poster notice	Page 28
This month's poster: Gain better health through improved ergonomics	Page 29
<i>IACP News</i> Display Advertising Rates and Sizes	Page 30

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



Chiropractic care and our Olympic athletes

Continued from front page

to witness the demand for and growing utilization of chiropractic care among professional athletes. The evidence-based, hands-on chiropractic approach utilizes a variety of techniques, including spinal manipulation, to help restore functionality of the spine and nervous system to ensure optimal well-being, and inevitably fuel competitive athletic performance.” Be sure to check out Dr. McAllister at the MAC Fall 2016 Convention & Exhibition, September 23-25 in Dearborn.

Two of the major stars at the 2016 Olympics – swimmer Michael Phelps of the United States and sprinter Usain Bolt of Jamaica – use chiropractic care to help them stay at the top of their sports.

Bolt – the World’s Fastest Man – regularly utilizes chiropractic care to recover from injury and improve his performance. In Rio, Bolt, the most decorated sprinter of all time, became the first track athlete in Olympic history to win three gold medals in one discipline, with his win in the 100m sprint. He followed that up by winning the unprecedented “Triple Triple” – winning the 100m, 200m, and 4x100m relay in three straight Olympics. He (possibly) finishes his career an 11-time World Champion and nine-time Olympic Gold Medalist.

Olympic legend Michael Phelps, already the most decorated Olympian of all time, added five Golds to his remarkable tally, finishing his storied career with an amazing 28 medals – 23 of them Gold. In an interview with Details magazine, Phelps credited Graston Technique with being essential to his recovery after hard workouts.

Chiropractic – An Integral Part of the Olympic Games

Chiropractic has become such a fixture in the Olympics that a chiropractor, William Moreau, DC, DACNSP, serves as managing director of sports medicine for the United States Olympic Committee (USOC) and chief medical officer for Team USA at the Rio 2016 Olympic Games.

“Chiropractic plays an important role in preventive, maintenance or injury specific care, and contributes to enhanced clinical outcomes and high patient satisfaction levels among all athletes,” says Dr. Moreau.

Even teams without their own team chiropractors had access to official Olympic chiropractic services in Rio. An international team of chiropractors delivering services to

these athletes was led by Brazilian Marcelo Botelho, DC, MD, ICCSP, MSc. “The care provided by a doctor of chiropractic can help athletes reduce the risk of injuries, accelerate recovery time and improve health through improvements in range of motion, flexibility, balance, muscle strength and other key factors,” Dr. Botelho told the F4CP. “Chiropractic care provides athletes with the competitive edge to fuel peak performance and succeed during their time at the Olympics.”

Featuring a record 33 sports, 339 medal events and 42 venues, the Games will open on 23 July 2021 and close on 8 August. Actual competition will start two days before the Opening Ceremony on 21 July with softball in Fukushima – in line with the Games’s theme of recovery. The first medals of the Games will be awarded on 24 July in the women’s 10m air rifle shooting event. A total of 11 medal events will take place that day including in judo, the sport in which Japan normally wins their first medal of an Olympics.

The action swings into full gear with “Super Saturday” on 31 July featuring 21 medal events, four of which will debut at the Olympic Games: the 4x400 mixed relay in athletics, judo mixed team, triathlon mixed relay, and shooting trap mixed team.

August’s arrival will bring with it 25 gold medals on “Golden Sunday”, including the men’s 100m in athletics as well as four artistic gymnastics events. The men’s tennis singles final is also on the cards.

Tokyo 2020 will peak on 7 August with 34 medal events being held, such as the women’s marathon in Sapporo and the finals for baseball, men’s basketball, football and volleyball. Of the new sports other than softball, 3x3 basketball will take stage on 24 July followed by skateboarding (street) the next day, when surfing also catches its first wave. [The full schedule of events can be found here.](#)





On the way to the 2020 Summer Olympics in Tokyo, chiropractic sports medicine is repeatedly praised as a necessary part of the USA team and medical staff of all countries. As a result, many DCs may wonder about the selection process to be part of the Olympic Games Sports Medicine team, how chiropractic can benefit these elite athletes, and what efforts are being made to promote chiropractic for Olympians.

The US Olympic Committee's Sports Medicine division encompasses a wide range of health professionals, including doctors, orthopedic surgeons, DCs, and massage therapists. All members participate voluntarily as part of an ongoing selection process. Chiropractors who wish to apply for a spot on the team must have malpractice insurance, no disciplinary action against them, and currently practice sports chiropractic.

DCs who pass the application process are then sent to one of the three Olympic training centers to evaluate how they are caring for the athletes in training. During this evaluation period, DCs can also be sent to Olympic qualifying events or international games around the world to work with the athletes. While doing this, they are constantly being evaluated and tested to see how well they work not only with the individual athletes, but also with the coaches, other applicants and health care providers who are already part of Team USA. On the way there, applicants are shut down as only a limited number make the final cut for Team USA.

"The appointment as a chiropractor for USA Swimming at the Summer Olympics 16 is the greatest honor of my career, and it has been an absolute privilege to serve our swimmers as a member of the medical support staff for over a month (during training camps and the Olympics)" Said Kevin Rindal, DC, one of six chiropractors in his family and founder of InHealth Sports Injury and Performance in Seattle.

"Nothing compares to the Olympics – entering the stadium at the opening ceremonies was electrifying, and I was very proud to represent Team USA as a chiropractor," said Rindal, who took part in their other international swimming events in the USA, the FINA World Championship belonged to the Pan Pacific Games and the Pan American Games.

As you would expect, the majority of conditions chiropractors treat at the Olympics are related to sports injuries – tight or torn ligaments and joints, dislocated joints, or joint pain and stiffness. The aim is not only to properly treat the injury, but also to enable the athlete to continue participating in the games if possible.

However, DCs need to be prepared to deal with almost any medical issue, ranging from an allergic reaction to a bee sting to insomnia due to time changes to travel-related GI issues. In addition, the medical team must be available not only to athletes, but also to coaches, referees, support staff and even participants in an emergency.

As part of an ongoing campaign to raise awareness about chiropractic in general and the role it can play in keeping Olympic athletes in top shape, the Foundation for the Advancement of Chiropractic will be launching a series of five commercials during the Summer Olympics on July 24th -Aug. 9. In every 30-second ad sponsored by the National Board of Chiropractic Examiners (NBCE), a former Olympic athlete will discuss how chiropractic sports medicine helped improve their performance and ultimately made their decision, according to retiring from sport to become DC.

This summer, an estimated 204 million people will watch elite athletes from countries around the world compete for gold for two weeks. Of course, none of these athletes can win alone. You have a whole team to prepare for your big day. As the new advertisements from the Foundation for Chiropractic Progress will show, chiropractic sports medicine is an integral part of this team.





IACP MEMBERSHIP APPLICATION

Contact Information:

Name: _____ License #: _____

Practice Name: _____

Business Address: _____ Business Address 2: _____

City, State, Zip: _____ County: _____

Phone: _____ Fax: _____

Email: _____ Website: _____

IACP Membership Categories: Types of Membership and Benefits:		Full Amount	Monthly	Payment Information:
IACP CENTURY CLUB				Payment Type: <input type="checkbox"/> VISA <input type="checkbox"/> MC (circle one)
All Standard Membership Benefits, plus: <ul style="list-style-type: none">• FREE Convention Member Registration;• FREE Non-DC Staff Member Convention Registration;• Expanded Discounts for Member and Staff on three IACP quarterly seminars;• 25% Discount on advertising via the IACP newsletter and/or website;• 25% Discount on Bronze Level Convention Sponsorship;• Invitation to IACP PAC Dinner(s) for legislative officials targeted for IACP support;• Opportunity to write articles for IACP newsletter editions*;• Two FREE classified ad both online and printed newsletter per year;• First Call - IACP Referrals for patients seeking specific DC techniques/education;• Invitation to the IACP President's Dinner – including other Century Club members, past IACP Presidents, Idaho Legislators & Sponsors;• Portion of C. C. dues fund the IACP PAC - supportings legislative efforts/candidates. <small>** The IACP reserves the right to review articles and edit submissions as it deems necessary.</small>				
IACP STANDARD MEMBERSHIP				<input type="checkbox"/> Discover <input type="checkbox"/> AMEX <input type="checkbox"/> Check
<ul style="list-style-type: none">• \$100 discount on convention registration fees• \$20 discount for each staff member on convention registration fees;• 10% Discount on Online CE Credits offered through the IACP Website;• 10% Discount on ICD Coding Books Offered by the IACP;• 10% Discount on all products, videos and materials sold by the IACP;• Earn at least 6 FREE CE credits each year at district meetings;• Discounts on Quarterly IACP Seminars for Member and Staff;• One FREE classified ad both online and printed newsletter per year;• Find A Doctor Referral Directory and access to members only information regarding Medicare, insurance & legislative insight;				\$1200 \$100
RETIRED DC MEMBERSHIP				Credit Card #: _____
<ul style="list-style-type: none">• Annual subscription to IACP Newsletter (12 issues per year);• 10% Discount on all IACP events or classes• Discounts on advertising in the IACP Newsletter or on the IACP website;• Discounts on classified ads in IACP Newsletter or on the IACP website.				CVC: _____ Exp. Date: _____
MULTIPLE DC HOUSEHOLD MEMBERSHIP				Billing Zip Code: _____
<ul style="list-style-type: none">• For dual DC households where both members of the household are practicing DCs. Spouse can choose a discounted Century Club or Standard Membership.				Optional PAC Donation:
NEW GRADUATE MEMBERSHIP				PAC stands for Political Action Committee the fundraising arm of the IACP. All monies donated go directly to supporting campaigns, educating state representatives, and hiring watch groups to guard against harmful legislation that would curtail your right to practice.
<ul style="list-style-type: none">• New chiropractic college graduates receive basic membership for no fee!				I wish to support my profession by donating:
				<input type="checkbox"/> \$25/mo. <input type="checkbox"/> \$55/mo.
				<input type="checkbox"/> Other: \$ _____/mo.

By signing this form you agree to pay for the membership type and frequency listed and the optional PAC donation indicated above. The authority you give the IACP to charge your account will remain in effect until you notify IACP in writing to terminate the authorization, after the agreed upon term has been met. This includes annual renewals. If the amount of your payment changes, we will notify you at least ten days before payment date. You also agree to notify IACP of any changes in account information.

Signing this form acknowledges an understanding that cancellation requests must be made in writing and will only be honored following fulfillment annual timeframe:

Signature: _____ Today's Date: _____

Mail to: IACP, 13601 W. McMillan Rd., Suite 102-331, Boise, ID 83713 or Fax to 888-399-5459

Chiropractic support for HR 2654 needed

Continued from front page

the next decade. Chiropractic inclusion in Medicare was established in 1972 and has seen little change since then, other than elimination of the X-ray requirement in 1997.

Originally introduced in 2019, the bill gained traction in the last congressional session, picking up over 90 cosponsors. Sixteen of those members have signed on as original cosponsors of H.R. 2654: Reps. Jason Smith (R-Mo.), Brian Fitzpatrick (R-Pa.), John Larson (D-Conn.), Thomas Suozzi (D-N.Y.), Robert Aderholt (R-Ala.), Cynthia Axne (D-Iowa), Debbie Wasserman Schultz (D-Fla.), Jefferson Van Drew (R-N.J.), Mary Gay Scanlon (D-Pa.), Brendan Boyle (D-Pa.), Don Bacon (R-Neb.), Mike Rogers (R-Ala.), Kathleen Rice (D-N.Y.), John Joyce (R-Pa.), Kurt Schrader (D-Ore.) and Chellie Pingree (D-Maine).

“We applaud Rep. Higgins and the cosponsors for their support of modernizing Medicare’s chiropractic coverage to meet the needs of today’s beneficiaries, who should not only be able to choose their provider but also access necessary covered services conveniently and safely during these challenging times,” said ACA President Michele Maers, DC, MPH, PhD.

The opioid crisis, which has worsened during the COVID-19



pandemic, further heightens the need for Medicare beneficiaries to have access to the chiropractic profession’s broad-based, nondrug approach to pain management, which includes manual manipulation of the spine and extremities, evaluation and management services, diagnostic imaging and utilization of other nondrug therapies and modalities.

Since 1972, Medicare beneficiaries have been covered for only one chiropractic service—manual manipulation of the spine—forcing them to access additional medically necessary care from other types of providers or to pay out of pocket for the services from their chiropractor. Chiropractors are the only physician-level providers in the Medicare program whose services are restricted in this manner.

To learn more and to urge your member of Congress to support this important legislation, visit www.HR2654.org.

The time is NOW - Ask Congress to Support H.R. 2654. [Click here](#) to compose your message to your elected official. More information on the ACA [website](#).



Share your stories with the Idaho chiropractic community

**The IACP News accepts press releases
and news items. We want your news.**

**Please email press releases
and news items in Word doc format
to Steve at C&S Publishing:**

CandSpublishing@gmail.com

All Orthotics are NOT created equal custom orthotics vs. generic insoles

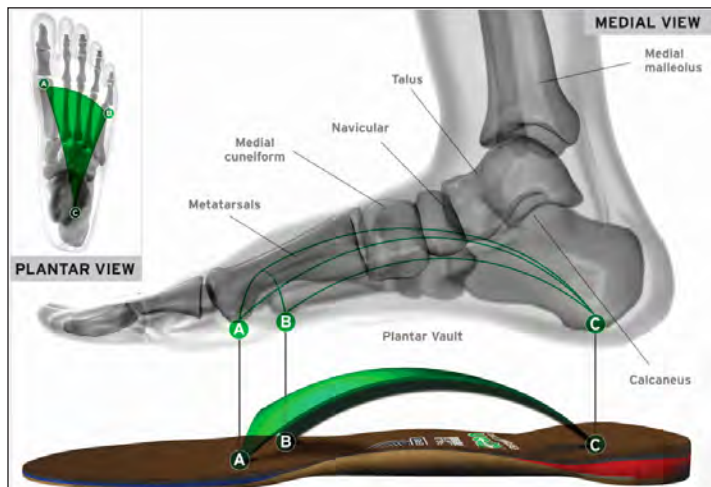
By Kevin M. Wong, DC

One of the biggest challenges I have found over the last 25 years with being an extremity-based Chiropractor is the general lack of public knowledge regarding the feet and how they affect the rest of the body. Starting from a very young age, we are not properly taught about our anatomy and how different body parts work with and affect each other. This comes into play when incorporating the use of orthotics into Chiropractic care.

When patients need medical care, the majority of them will begin with allopathic medicine. This is because they believe that pain is the indicator of when to seek treatment. It's common to only treat the pain of conditions like plantar fasciitis, metatarsalgia, and Achilles tendonitis, rather than identifying and correcting the foot/arch dysfunction and biomechanical problems that are their underlying cause. Interestingly enough, many patients with faulty foot biomechanics live their lives without having any foot pain at all. However, in my experience I have seen that upwards of 87% of all human beings in a standing posture exhibit signs of flat or pronating feet that can lead to pain and disfunction in the knees, hips, pelvis, neck, and spine. Even common conditions like shin splints and sprained ankles can stem from unhealthy foot function.

Misconceptions about arch anatomy

If you ask 10 people on the street the following question "How many arches do we have under each foot?". They will likely all answer "one". The average person never learns that we have three functional arches forming the plantar vault of the foot.



Most of the health care providers patients utilize propagate the notion that the inner arch is the only foot arch that exists. This misinformation people operate under influences the purchasing decisions they will make regarding foot-related products, especially orthotics. Attention must be given to educating the patients properly, so they understand the difference between mass-produced generic insoles that tout arch support and custom orthotics designed to address the unique biomechanics of each patient and restore natural, healthy function of all three arches, thus stabilizing the entire body.

Dictionary.com defines the word "orthotic", or orthosis, as a device or support, especially for the foot, used to relieve or correct an orthopedic problem. The definition in and of itself is quite vague. The orthotic market is confusing because it is flooded with too many cheap pre-made products.

On one end of the spectrum, there are many brands of off-the-shelf, prefabricated, non-custom orthotics available through retail/drug stores, online retailers, and some care providers. The manufacturers use attractive marketing and catchy statements to influence customers to buy impulsively in the hopes of experiencing pain relief and improved athletic performance.

On the other end of the spectrum, there are flexible, three-arch, custom-made orthotics that have been around for over 69 years. These custom orthotics are only available from specifically trained and qualified health care providers who assess the feet through a weight-bearing scanning or foam casting process. It's the doctor's role to offer these products in their practices and educate patients about their benefits. Let's make some common orthotic phrases and concepts clearer so you can achieve better care results by helping your patients make more informed choices.

When orthotics are advertised we often see comments like these:

- "Clinically proven"
- "Podiatrist designed and/or recommended"
- "Same day solution so patients don't have to wait"
- "Premium materials" and/or "quality construction"
- "Low price"

Clinically proven: Implying that pre-fabricated orthotics

are clinically proven is very vague. They generally only have one arch, so they end up helping some patients more than others. Some feel no better or even worse. If the person has a flat inner arch, they may find some initial pain relief from these, but the other two arches (transverse/lateral arch) will get no benefit from these off-the-shelf orthotics. The foot will actually continue to get flatter over time due to the lack of support. During this time, their faulty foot biomechanics could be undermining the stability and healthy function of their entire bodies.

The three-arch, custom, flexible orthotics have over 37 scientific research studies that validate their effectiveness and success with countless patients. Many of the research articles, case studies, and white papers are available for you to access and read. These studies along with over 69

years of successful implementation by countless health care providers across the world are clinical proof that these orthotics are extremely effective.

Podiatrist designed/recommended: A podiatrist's perspective on the foot is more static vs. dynamic. They are treating only the patient's foot with little regard to the skeletal structures and associated joints above. They also tend to echo the inner or single arch concept so their patients are not exposed to the existence and importance of supporting the three arches. Podiatric orthotic choices can range from very expensive, rigid, one-arch orthotics to telling the patient to go to the store and choose an off-the-shelf brand. This can be very confusing for patients.

Recall that the body is a dynamic system. The feet/ankles intimately affect the knees, hips, pelvis, and spine. As Chiropractors, we understand this relationship. When the feet are excessively pronating, this affects the rest of the body and they significantly contribute to some very common clinical conditions patients seek care for, like lower back pain.

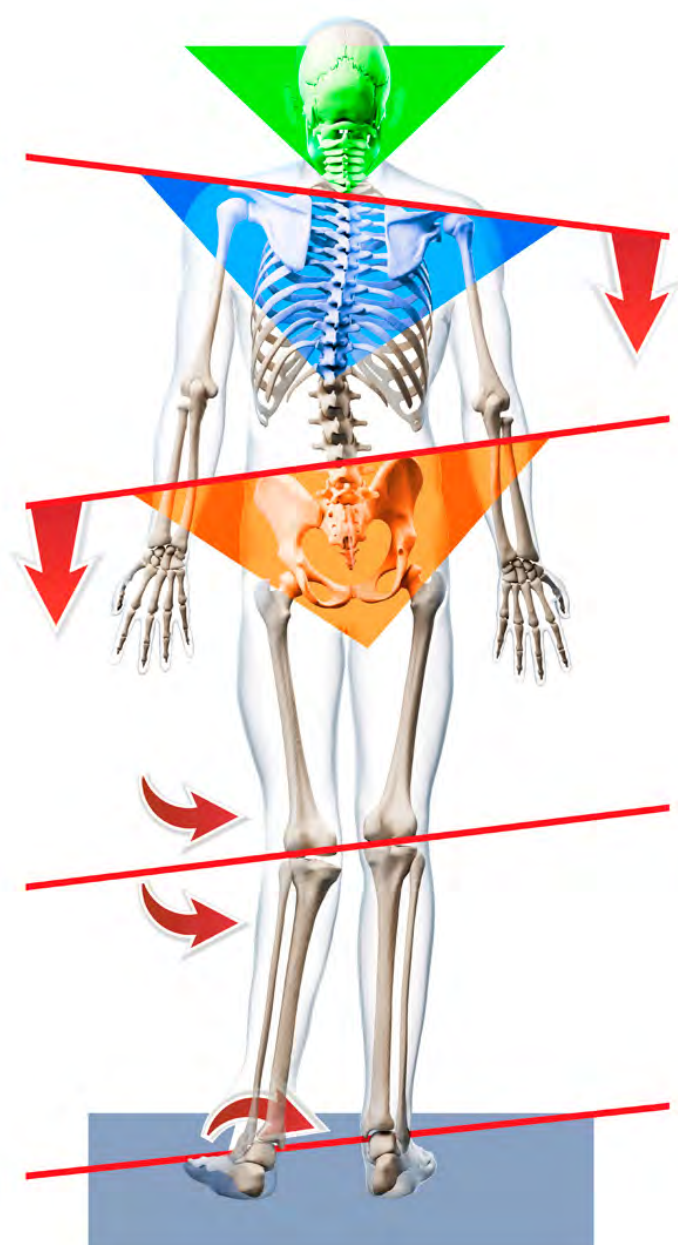
Same-day solution so patients don't have to wait: In our society, we are accustomed to getting what we want fast. When patients are experiencing pain, they want to feel relief right away. The off-the-shelf orthotic companies try to capitalize on this. Instead of waiting for a custom-molded orthotic that will support that patient's body completely, they try and get the customer to bite on an inferior product just because it is readily available.

Taking the time to scan or cast the patient and have a pair of orthotics custom-molded for them ensures they will have an unparalleled product that is uniquely designed for their feet and body as a whole.

When I scan and assess a patient's feet, I can submit a custom orthotics order the same day. If the patient wants them sooner, they can pay a little extra for expedited shipping. Getting the custom orthotics in quickly is never a problem if that is what the patient wants.

Premium materials and/or quality construction: The term "You get what you pay for" is appropriate here. Pre-fabricated orthotics sold off the shelves and produced in mass quantities for \$35-80 are made of materials that allow them to be sold cheaply. How could these companies truly be using quality materials when they make a product that costs so little? Looking at websites of these prefabricated orthotic companies to see what materials are inside the

Continued on next page



All Orthotics are NOT Created Equal

Custom Orthotics vs. Generic Insoles

Continued from last page

insoles, one can see there is not much to them. It is to be expected for a product under \$100.

The three-arch, custom, flexible orthotics are made of top quality, high-performance viscoelastic materials that absorb shock, enhance stability, and provide a propulsive boost during all weight-bearing activities. Their designs and materials have evolved for over 69 years based on patient and doctor feedback. For the best care outcomes, patients should wear their orthotics all the time, so durability is very important.

Low price: The off-the-shelf orthotic companies hope the cheap price tag of their products will be very appealing to consumers. This strategy serves them because they are dealing with customers who are uninformed regarding the arches and foot anatomy. Their ads often highlight the low price and the immediate availability.

As Chiropractors, we realize the importance of the three arches and the choice of the orthotic for the patients. We are not out to compete with online retailers, a sporting goods store, or a drugstore on price because their pre-fabricated orthotics are of lesser quality and effectiveness.

Each foot has its own unique biomechanical properties and dysfunctions. By analyzing both feet distinctly (using a digital scanner or foam cast), it's analogous to an eyeglass prescription, where the lens correction is usually different for each eye. For effective and accurate arch support and body stabilization, each foot needs its own custom corrections for all three arches.

Health care providers who are trained in prescribing custom orthotics offer their patients a proven, value-added "experience" rather than an impersonal off-the-shelf solution. No inventory needs to be kept on-site and the one-year money-back guarantee gives patients confidence that spending more money on a quality product is the right move and reinforces the value of their custom orthotics.

In conclusion

For too long, patients have been operating on the incorrect belief that we only have one arch under each foot. The prefabricated orthotic companies have been successful

in wooing these customers by capitalizing and further spreading this fallacy with their one-arch insoles. Give your patients the awareness and education about custom orthotics and once they understand foot anatomy and how it affects their bodies, they will be quite amenable to the custom, three-arch, flexible orthotics you can offer as a Chiropractor.

About the author: Dr. Kevin M. Wong is a graduate of the University of California, Davis, and a 1996 Summa Cum Laude graduate of Palmer College of Chiropractic West. He has been a practicing Chiropractor and Continuing Education Instructor for over 24 years and is the owner of Orinda Chiropractic & Laser Center in Orinda, CA. His practice has an evolving influence on the course material he teaches Chiropractors, Chiropractic Assistants, and students.



As a member of the Foot Levelers Speakers Bureau since 2004, Dr. Wong is a frequently requested speaker on the topics of extremity/spinal adjusting, foot biomechanics, orthotics, and ergonomics, and teaches over 120 hours per year in the U.S. and internationally.



Foot Levelers is the world's leading provider of individually designed Stabilizing Custom Orthotics, custom orthotic flip-flops, Shoethotics® and Sandalthotics®, as well as therapeutic products. They have been serving doctors of chiropractic and their patients for over 6 decades with products designed to help reduce pain in the feet, legs, hips, back and neck, so you can enjoy a fuller and happier life at work, home or play.

Custom Orthotics vs. The Other Guys

How Do They Measure Up?

Weight-bearing	Non-Weight-bearing		
Flexible	Rigid	Semi-Rigid	"Generic" - TV and off the shelf
Designed to treat the body as a functional unit starting with the feet	Designed to treat the foot only		Not designed for the individual; mass-produced
Designed to help maintain normal joint position, thereby reducing serial changes up the lower extremity, pelvis, and spine	Not designed to treat the entire body		Designed with no regard for the skeletal structure above
Designed to influence the joint receptors and evoke proprioceptive response from the cerebellum, resulting in better muscle balance	Designed in a way rarely evoking positive proprioceptive response		No effect on joint receptors
Does not create any hypermobile joints above the ankle	Restricted motion in the foot can create hypermobility in joints above the ankle		
Designed to provide a balanced foundation for the foot and spine	Designed to maintain a rigid, neutral position of the foot		Cannot provide balance, because no postural analysis is involved prior to purchase
Created from weight-bearing casting system which has been proven effective and more accurate ¹	Created from a less accurate, non-weight-bearing casting system ¹		Mass-produced; no casting involved
Accurately supports all three arches of the foot	Does not support all three arches of the foot		Mass-produced; no accurate individual arch support
Research proves flexible orthotics with 3-arch correction reduce the damaging effects of heel-strike shock ² , and low back pain ³	Minimal shock absorption		Only addresses shock

¹ Smith-Oricchio K, Harris BA. Interrater reliability of subtalar neutral, calcaneal inversion and eversion. JOSPT 1990; 12(1):13.

² Hyland JK, Yochum TR, Barry MS. Bone marrow edema and postural misalignment: a preliminary report. Success Express 1996; 16(3):13.

³ Cambron, J.A., Dexheimer, J.M., Duarte, M & Freels, S 2017, Shoe Orthotics for the Treatment of Chronic Low Back Pain: A Randomized Controlled Trial. The Archives of Physical Medicine and Rehabilitation

Cleveland University study suggests that ergonomic intervention can reduce injuries for cyclists

As the weather warms, clinicians will see increased numbers of patients with pain related to bicycling. Clinicians and researchers at Cleveland University-Kansas City (CUKC) recently partnered to present a review and case study, "Median nerve entrapment in a cyclist: a case study and review of bicycle-fitting guidelines for the clinician." The paper was presented at the recent Association of Chiropractic Colleges Research Agenda Conference, held in March 2021.

Distal neuropathies in the upper extremity related to excessive handlebar gripping are commonly seen in cyclists. Both ulnar and median neuropathies are common among cyclists, with ulnar neuropathy (cyclist's palsy) present in 19% to 35% of cyclists.

This case describes the treatment and ergonomic interventions for a recreational cyclist with bilateral median nerve entrapment syndrome. This 62-year-old male experienced a new episode of severe, bilateral hand pain and numbness in the median nerve distribution (digits 1, 2, and 3) following a significant increase in bicycle session times while riding a newly acquired bicycle.

Bicycle-related upper extremity palsy is a handlebar contact point injury involving compression of the ulnar or median nerve at the wrist. It can be a result of excessive vibration from the road and may be exacerbated by prolonged, excessive hyper-extension of the wrist which increases traction (stretching) on nerves in the region. These injuries are termed a neuropraxia, a peripheral nerve injury associated with temporary loss of motor and sensory function due to decrease in nerve conduction.



In this case, the patient presented for care at the Cleveland University-Kansas City Chiropractic Health Center and was diagnosed with bilateral median nerve entrapment related to bicycle grip pressure. Pain and sensory changes were present without motor (strength) deficit.

The patient was treated with multimodal chiropractic care, including spinal and extremity manipulation, and instrument-assisted soft tissue mobilization. After three sessions, the patient reported a significant reduction in pain, but symptoms returned after additional cycling sessions.

The patient brought his bicycle into the clinic for a cursory assessment. Several potential ergonomic faults were identified. Basic changes were made, including moving the saddle forward, raising the handlebar height, and adding bar-end extensions to promote grip variety. The patient was encouraged to always wear gloves with gel padding.

The patient was evaluated and treated during two additional visits, and after returning to cycling following the ergonomic changes, had a lasting improvement in upper extremity symptoms.

Dr. Mark Pfefer, director of research at CUKC, said the results support being proactive with such injuries.

“This case points out the importance of early intervention with a conservative approach, and the significance of addressing ergonomic concerns that commonly lead to cycling neuropathies,” Pfefer said. “Our experience also demonstrates that cyclists with upper extremity symptoms also frequently have cervical, upper thoracic, and thoracic outlet dysfunction which should be assessed and addressed along with the treatment directed to the distal extremity sites.”

A specific evaluation overview can be helpful when determining the most beneficial treatments for a cyclist. Effective rehabilitation involves identification and correction of contributing biomechanical factors in both the cyclist and the bicycle. Evaluation of the cyclist begins with a detailed history of the injury or discomfort, and presence of symptoms off the bike, on the bike, or both. There must be inquiry regarding cycling activities, such as climbing, sprinting, long distances, or specific gears, which provoke symptoms.

Degenerative joint disease or spondylosis can affect the cyclist’s biomechanics and may require accommodations on the bicycle. A full cycling history should also include the athlete’s disciplines of cycling, training, and racing schedule, cross-training, as well as prior crashes, injuries, and treatments. For athletes with neurologic symptoms, questions regarding head injury and a brief concussion screen may be appropriate.

The cycling-specific physical examination should be tailored to the athlete’s complaint; however, there are certain tests that may be helpful in a number of different scenarios. The single-leg squat test is a simple and very useful in-office test for weakness or decreased recruitment of hip abductors and may show contralateral pelvic tilt or ipsilateral medial knee deviation, frequently seen in cyclists and in individuals with patellofemoral or lumbar spine complaints.

Assessment of lumbosacral and hamstring flexibility is useful in determining how much forward flexion an athlete is prepared to tolerate on the bicycle. For lumbar spine complaints, assessment of directional preference and dural tension (seated slump test) is often useful.

If available, the third part of the cycling-specific evaluation should include an assessment of the cyclist’s position and biomechanics on the bicycle. This requires relatively little equipment, a stationary bike trainer, and a keen eye for mechanics.

The clinician should not double as a bike fitter without the

appropriate training and certification; however, should be familiar with the basic principles. A collaborative evaluation with a certified bike fitter is extremely helpful in making specific recommendations regarding modifications to fit, or the addition of components.

If upper extremity neuropathy is present, the following causes should be explored:

- Infrequent position changes
- Too much weight in the hands
- Lack of cushioning on bars or gloves
- Handlebars too low or forward
- Saddle tilted nose-down

Pfefer says if treated early, most cycling-related neuropathies are reversible. For a complete return to cycling, treatment interventions should be combined with ergonomic assessment and clinicians should be aware of basic bicycle fitting strategies to optimize outcomes.



Quite a few of us have gotten used to working from home during the pandemic, even if a lot of us are not practicing safe office ergonomics. Bad posture habits are keeping chiropractic offices busier with new aches and pains.

According to a Gallup poll, the majority of workers that Gallup surveyed for this poll reported that they would prefer to continue to work remotely, even now that quarantine restrictions are ending. Approximately 60% of those surveyed liked having the option to work from home, while 40% stated that they would prefer returning to their workplace once the current quarantine conditions were lifted.

If these survey results are any sort of accurate prediction for trends among the American work force, not only will we see the number of remote workers increase during the current pandemic, but continue to do so once the quarantines are lifted. Part of the reason for this is simple economics for both employees and employers. Not only do employees save on gas and commute time, but employers can see both increases in productivity among remote workers, as well as savings in turnover, absenteeism, and electricity costs for the workplace.

With so many people working from home, setting up their home office for maximum productivity becomes a large concern. In addition to making certain that there is proper connectivity and telecommunications, comfort must also be taken into consideration, including ergonomics. This is where the expertise of doctors of chiropractic can come into play.

One of the big potential pitfalls from working at home is being tempted to use the couch or, worse, the bed as a workspace. While it may be tempting to do so, using something other than a desk and chair, or standing work station, for a home office can end up causing a number of problems that may lead to less productivity. Trying to spend the entire day working from the couch or bed will likely not be good for

the posture, leading to stiff, aching joints. Finally, the lighting in these areas is often less than optimal for looking at a computer screen for long periods of time, which often means squinting at the screen or hunching the shoulders with the head pushed forward. Such a position can lead to neck pain and headaches over time.



Ergonomic pitfalls of working at home



One big component of making the home office a productive space will be its ergonomics – or how well the office furniture and equipment conforms to the body so that patients will be comfortable working all day. This includes the position and height of a chair, the optimal height for a display screen, and tilt of the keyboard, among other things. Suggestions for optimally aligning an office space include:

- Consider a workstation that can convert to either a sitting or standing position
- Both elbows and knees should be bent at a 90° angle to the floor
- Use a towel or pillow with your chair to adjust your height and as lumbar support
- Computer screens should be at eye level

In a standard workplace environment, you are not sitting at your desk the entire time. You walk to the break room for coffee, tea, or to get your lunch. You may walk to another department to talk with a coworker, or the conference room for a meeting. If you are feeling ambitious, you might even take the stairs, rather than the elevator, or walk a lap or two

around the office parking lot. The point is that you probably get more exercise during a standard day at your workplace than you realize.

Unfortunately, this is not the case when working from a home office. The kitchen and restroom are only a short distance away, so there is less opportunity to get up and stretch your legs during the day.

There are ways to build breaks into a patient's day to help overcome this inertia. Some ideas include:

- Setting an alarm to go off every 30-60 minutes to remind you to get up and stretch
- Starting your day with a short yoga routine, such as a few sun salutations
- Not eating lunch at your desk while you work. Take time to walk around the block or do some household chores that get you moving.
- Ending your day with another yoga session or some meditation

"We really overlook how simple it is to correct our posture, and what a significance it has to our whole body," noted Dr. Alexandra Duma, DC, DACBSP, a chiropractor at New York City recovery studio FICS. "Our parents were right when they said, 'Sit up straight.' I hope everyone does some form of movement, but I would hope people don't go, 'I haven't done a workout in months and now I'm going to go all out and do the craziest workout I find on Instagram' and get injured."

There's no question that the current pandemic situation has up-ended how we think about the workplace. It has presented us all with challenges in working from home.

However, patients practicing good posture and body alignment in the home office, along with taking time to stretch, move and release tension, will help them outside the office and you as a chiropractor inside our office when they are more flexible, fit, and following good posture advice.



Have you addressed the financial impact of the pandemic on your practice?

By Dr. Ray Foxworth, President of ChiroHealthUSA

While many of our colleagues saw increases in patient volume in the wake of the pandemic, many saw reductions. One thing that has become consistent is that the cost of doing business has increased. If you have been putting off evaluating your fees or haven't addressed them in years, it is time to stop procrastinating. Regardless of your patient volume, if your fees don't reflect the impact of increased costs to your practice, it is going to have a negative effect on your practice revenue.

All practice owners need to know the cost of doing business. According to a national survey a few years back, overhead in a typical chiropractic practice can average 50%. I would be surprised if that average hasn't increased, considering the increased cost of addressing a pandemic, compliance mandates, rising overhead, and lower reimbursement models. To calculate your average cost of providing an office visit and the percentage of overhead, [use this simple calculator](#). This number is key to knowing your bottom dollar for maintaining profitability in your practice. While this is not as exact as a formal Profit and Loss Statement, it will give you an excellent ballpark idea of your costs.

Next, you need to determine the average charges for services offered in your area. Unfortunately, the Sherman Anti-Trust act prevents you from reaching out to colleagues in your community and asking what they charge, as this can be seen as price-fixing. There are multiple ways you can gather this information, however. You can hire a consultant to collect this information for you or utilize websites such as [ChiroCode.com](#) or [fairhealthconsumer.org](#), which calculate fees in your zip code.

Finally, start a spreadsheet and list every code that you use in your practice. Then list the reimbursement rates for each code from Medicare, in-network, and out-of-network insurance companies. Next, add the information you gathered on average fees based on your zip code. Start by comparing the averages in your area to the current fees in your practice. Are you above or below the average? Then, using your actual fees, determine what you are currently charging per visit, on average. Are you falling above or below your cost per visit? Finally, you will want to compare your cost per visit to your reimbursement rates with provider agreements. Do you have any contracts that pay

you less than your cost per visit? Finally, if you are in a state where there is a state mandated fee schedule for Workers Compensation or Personal Injury, be sure and review these numbers as well. In working with thousands of clinics, we have found many are charging BELOW what is allowed. This leaves substantial revenue on the table.

Now that you have this information in front of you, what's next? Now is a great time to determine if you need to make any adjustments to your current fees. Even a slight change of \$5 per visit for the average practice can have a significant financial impact on your bottom line. Just \$5 more per visit is the equivalent of getting paid for 13 months while only working 12. If you have any provider contracts that are not meeting your desired cost per visit, reach out to negotiate your agreement. If they are unwilling to negotiate, it may be time to cancel.

If raising your fees gives you heartburn, and you have concerns that doing so will run off your patients with limited benefits, high deductibles, or no insurance at all, then consider using a Discount Medical Plan Organization, like ChiroHealthUSA. Providers who offer these types of memberships to their patients give their patients the same kinds of discounts that insurance carriers have negotiated for those same services. As a result, the discounts to patients are often the same or lower than the co-pays they are accustomed to paying for their treatment with robust insurance plans. In addition, having a contractual network agreement with a DMPO makes the discounts you offer legal and compliant.

This fee analysis may take a little time, but I challenge you to sit down and evaluate your fees. It will allow you to see where you could be losing money and correct those areas of concern to become more profitable in 2021 and beyond.

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 and is a former Staff Chiropractor at the G.V. Sonny Montgomery VA Medical Center. You can contact Dr. Foxworth at 1-888-719-9990, info@chirohealthusa.com or visit the ChiroHealthUSA website at www.chirohealthusa.com.

We've missed so many things.

Birthday celebrations, a long-planned vacation, the graduation of a niece or nephew... We've taken for granted the routine that makes life so precious.

After this last year, we can all use a friend and maybe a drink. That corny old joke has never sounded so good.

ChiroHealthUSA will be there when you need us. Just like a friend lends an ear, we'll hold your hand and help you through this. And we'll laugh at that joke, too.

Cheers to a better tomorrow... the one we'll build together.

ChiroHealthUSA®
The Network That Works for Chiropractors

1-888-719-9990
ChiroHealthUSA.com



International Chiropractors Association

UPPER CERVICAL

2021 CONFERENCE

*Join us August 13th 'n 14th
in beautiful Nashville, TN!*

Our lecturers will cover advanced imaging, thermography, advanced case management and several other topics, plus six research paper presentations.

CE Information

Approved States (up to 12 CE hrs):

AK, CT, CO, DC, DE, IA, ID, IL, IN, MA, MD, MS, MT, NE, NJ, OH, OR, PR, RI, SC, UT, VA, VT, WA, WY, Manitoba, New Brunswick, Nova Scotia, Ontario, & Quebec

Applied For/ Pending Approval (up to 12 CE hrs):

AL, AZ, AR, CA, FL, GA, HI, KS, KY, ME, MI, MN, MO, NC, ND, NH, NJ, NM, NV, NY, OK, PA, SD, TN, TX, WV, Alberta, Saskatchewan

Where?

The Doubletree Nashville Downtown
315 4th Ave N.
Nashville, TN 37219



**International
Chiropractors
Association**

Featured Speakers

- | | |
|---------------------------|------------------------|
| ★ Dr. Robert Kessinger | ★ Dr. Ian Bulow |
| ★ Dr. Jaime Browning | ★ Dr. Tyler Evans |
| ★ Dr. Robert Schwartz | ★ Dr. Rachae Bell |
| ★ Dr. Christopher Chapman | ★ Dr. Scott Rosa |
| ★ Dr. Matthew Richardson | ★ Dr. David Harshfield |

Registration

	FEB 25 - JUL 31	AUG 1 - 14
DC (Member)	\$500	\$575
DC (Non-member)	\$600	\$675
Non DC/CA	\$300	\$300
Student (Member)	\$100	\$100
Student (Non-member)	\$250	\$250

*Register online at
icaevents.org/ucnashville*

Questions? Please contact Stephanie Becker
at events@chiropractic.org or 703-528-5000.

Save the date: September World Federation of Chiropractic virtual Biennial Congress

The World Federation of Chiropractic (WFC) has announced the academic program for its upcoming virtual Biennial Congress on Sept. 23-25, 2021, held virtually as a result of ongoing international travel restrictions caused by the COVID-19 pandemic.

As the nation emerges from the pandemic, we find ourselves in a new normal. What seems certain is that the delivery of healthcare has evolved, new methods will become accepted practices, and emerging evidence will drive methods of learning, communication, and care delivery. Patient expectations will also have changed, and expectations of evidence-based, people-centered, interprofessional and collaborative practice will drive change in the environment of this new normal.

The WFC has partnered with Parker Seminars to host its event using a state-of-the-art hosting platform. The entire three-day event will also be accessible on-demand to those registering for the congress.

This year marks the 30th anniversary of the WFC's Biennial Congress. Since its inaugural meeting in Toronto back in 1991, chiropractic has advanced around the globe. This year, the 16th Biennial Congress reflects an unprecedented time in history, with COVID-19 acting as a catalyst for inspiration, innovation and opportunity.

The 2021 Biennial Congress will showcase the leading global



2021 SEPTEMBER 23-25
WFC BIENNIAL CONGRESS
CHIROPRACTIC
FOR A NEW NORMAL

advances in chiropractic. With contributors from around the globe, the theme of "Chiropractic For A New Normal" will showcase leading contemporary issues, with outstanding keynote speakers, stimulating panel discussions, groundbreaking research and inspirational subject specific content-experts.

Plenary sessions will cover themes of patient-centeredness, inter-professionalism, collaboration, futurism, and adaptation to a new normal. Presenters have been drawn from each of the WFC's seven world regions and 19 countries are represented by the speaker faculty.

The Congress also constitutes the largest international chiropractic scientific meeting, with researchers from around the world presenting original and published abstracts. For the first time, this Congress will also feature innovative digital poster sessions. Complete with a virtual exhibition hall, the 2021 WFC Biennial Congress has something for every chiropractor across the entire spectrum of the profession.

[Click here](#) for more information and to register.



"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 News

Women Chiropractors to hold UNconvention

The Women Chiropractors association will be holding an UNconvention, which is being billed as an unconventional convention, October 15 to 17 in Florida. An unconventional convention should include an unconventional location. That's why they chose the Wyndham Grand Hotel in beautiful, relaxing Clearwater Beach, Florida. They want to encourage you to grow as a person as well as a chiropractor. So join in, learn with us, and relax with us at this beautiful vacation destination.

At this event, they want the focus to be on more than just chiropractic. Here, they want to focus on you as a woman, as well as you as a chiropractor. That's what makes this an "unconventional" convention. Together we will discuss how to become the best version of ourselves as women so we can better be able to give the best version of care to others. Taking time to care for ourselves is so important, but in the busyness of life, often feels a little unconventional. They want to change that and bring to you a convention that is all about YOU.

Women Chiropractors UNconvention
October 15-17, 2021

unconvention
THE UNCONVENTIONAL CONVENTION

REGISTER TODAY!

WOMEN CHIROPRACTORS CONVENTION

OCT. 15-17 2021

WDC WOMEN CHIROPRACTORS

WYNDHAM GRAND
Clearwater Beach

Information and Registration!

It doesn't matter if you're a student, associate, or business owner, this event will feature a full day on Saturday with the top Women In Chiropractic specializing in business, money, marketing and staffing. There will also be strategic planning and masterminding sessions, a hands-on adjusting workshop, and sponsored events and sessions. To add fun, self-care, and girl time to our already incredible weekend, we have cocktail hours, fitness classes, pool time, AND MORE planned throughout our three days together.

[Click here](#) for more information.

Patient-Centered Outcomes Research Institute seeks comments on proposed national priorities

The Patient-Centered Outcomes Research Institute occupies a unique place in health care and health research. PCORI funds patient-centered comparative clinical effectiveness research to assist patients, clinicians, purchasers, policymakers, and the broader healthcare community in making informed health decisions. Guidance from a wide range of health stakeholders ensures that the research and initiatives PCORI funds are relevant and that our stakeholders are engaged throughout the research lifecycle, from developing research topics to ensuring the use and uptake of study findings.

PCORI's congressional authorization requires identification of National Priorities and establishment of a Research Agenda outlining how PCORI will address each priority. These documents guide our work. Hundreds of stakeholder representatives, advisors, and experts are informing our process, strategic approach, and various content elements, such as the proposed priorities.

In June 2021, the PCORI Board of Governors voted to release for public comment five proposed National Priorities for Health. PCORI will work toward these broad, ambitious goals through our Research Agenda, stakeholder engagement, dissemination and implementation, and health communication. While our current National Priorities and Research Agenda have guided PCORI for nearly 10 years, these proposed priorities represent an ambitious new approach to direct our work in the years ahead.

After a 60-day public comment period from June 28 to August 27, PCORI will revise the proposed National Priorities

for Health and expects to finalize them in Fall 2021. The priorities will serve as the foundation for developing PCORI's Research Agenda, which we intend to present for public comment in Fall 2021.

PCORI aims to fund comparative effectiveness research on both new and existing healthcare approaches. This type of research compares two or more ways to prevent, diagnose, or treat a health condition. It can also compare ways to deliver health care. This research will help to close gaps in what is known, so that people have better information when making health decisions. Filling these gaps for both current and emerging approaches will improve health care, health outcomes, and health equity.

[Click here](#) for more information and to provide comments.

ICA Upper Cervical Council conference August 13 - 14

Mark your calendars. August 13 & 14, 2021 in Nashville, Tennessee the ICA Upper Cervical Council is holding their first conference in two years and cannot wait to see you there. If traveling is not an option for you, there will be a distance learning option—even for international doctors! Our lecturers will be covering advanced imaging, thermography, difficult case management and several other topics with six paper presentations. The schedule supports 12 hours of CEs approved in over 40 states and in several Canadian provinces. Each course was specifically selected to enhance an Upper Cervical doctor's knowledge in specific areas of practice. This conference begins on Friday afternoon at 1pm and concludes on Saturday at 6pm. Friday night there is an exclusive gathering for ICA Upper Cervical members & Saturday afternoon includes a sponsored lunch with council awards. Lots of excitement, fellowship and information any Upper Cervical Doctor would not want to miss! [Click here](#) for more information.

Dr. Chris Todden named to National Accreditation Board

Chris Todden, Ed.D., dean of the College of Health Sciences at Cleveland University-Kansas City, was appointed to the Board of the Committee on Accreditation for the Exercise Sciences (CoAES), which is responsible for establishing standards and guidelines for academic programs in the health fitness and exercise industry.



In addition to his College of Health Sciences duties, Dr. Todden serves as program director for the new Bachelor of Science (B.S.) in Exercise Science degree program, which is scheduled to begin enrollment in Fall 2021.

“Dr. Todden has led program development and served as a practicing clinician specializing in rehabilitative exercise and balance for more than 25 years,” Dr. Cheryl Carpenter-Davis, vice president of academic affairs, said. “We are always pleased when external organizations place our academic leaders in significant national positions.”

The primary role of CoAES is to establish standards and guidelines for academic programs in the health fitness and exercise industry. The Commission on Accreditation of Allied Health Education Programs (CAAHEP) accredits programs upon the recommendation of the Committee (CoAES). The committee's guidelines are used for the development, evaluation, and self-analysis of exercise science programs.

Legislation introduced to expand access to nutritional supplements

Legislation introduced this week in the U.S. Senate by Senator Kevin Cramer (R-ND) would expand health savings accounts (HSA), health reimbursement arrangements and flexible spending accounts (FSA) to cover dietary supplements, according to the Natural Products Association.

The effort is part of a broader effort by the Natural Products Association (NPA) to expand access to nutritional supplements for underserved communities through programs like the Supplemental Nutrition Assistance Program (SNAP) and the Special Supplemental Nutrition Program for Women, Infants, and Children (WIC), the NPA says.

Mounting evidence suggests a link between vitamin D deficiency and serious COVID-19 illnesses, and experts in the U.S. and around the world have urged policymakers to consider the benefits of vitamin D supplements to help support immune systems and prevent serious illnesses. Research has shown that zinc deficiency can compromise immune function and increase the risk of infection, affecting an estimated 30% of the global population.

According to available data, 95% of adults and 98% of teens have an inadequate vitamin D intake and 61% of adults and 90% of teens do not get enough magnesium. More than 23 million Americans, including 6.5 million children, live in food deserts — areas that are more than a mile away from a supermarket.

Chiropractic College News

RSVP to the virtual F4CP Olympics Party

Join the Foundation for Chiropractic Progress on Thursday, July 22 at 5:00 pm PT for a virtual Olympics party to celebrate the first-ever :30 second chiropractic TV commercial, which will air 15x on NBC Networks July 26-30. This is the perfect time for us to gather in advance of the upcoming airing of the commercial during the 2021 Summer Olympics.

Join us to hear great speakers, connect with colleagues, visit vendors and win prizes! It's free for you and your staff. And, by the way, it's going to be a lot of fun!

[Click here](#) to join the party on July 22.

CUKC Alumna Recognized by ACA

Dr. Tessa Lowenstein, a Cleveland University-Kansas City, College of Chiropractic alumna, was named, "NextGen Member of the Month" for May 2021, by the American Chiropractic Association (ACA). The NextGen community is comprised of ACA members who have graduated and started practicing within the last five years. A 2020 graduate of CUKC, Lowenstein joined her father's chiropractic practice in Colorado Springs, Colo., after graduation.



NextGen members use their connections in the group to network, and to ask questions of, and share knowledge with their peers, the next generation of chiropractors. It also gives new practitioners the opportunity to engage in volunteer and leadership opportunities. The group allows recent graduates to take an active role in advancing their profession.

While she was a student at CUKC, Lowenstein was active in her local chapter of the Student American Chiropractic Association, and the Student American Black Chiropractic Association. She has been a member of ACA since 2017, and became involved with NextGen soon after graduation. Her efforts have focused mainly on work with the ACA's Committee for Equity, Diversity, and Inclusion.

Continuing education classes offered by Parker University

Texas in the summer is always hot – and we're adding to that with sizzling continuing education classes. Come join us in a cool classroom on the Parker University campus or online from the comfort of your home. Add red-hot innovative techniques to your skills and set off fireworks for your practice!

We plan as far in advance as possible to help you schedule. All live programs shown are held on the Parker University campus in Dallas unless otherwise noted and are dependent on pre-enrollment numbers and current distancing rules and mandates. PPE rules will be in place for our on-campus classes. Check out our full lineup at [Parker Success Academy](#).

For the best pricing on live programs, register more than 3 weeks prior to the event date. We accept MasterCard, Visa, American Express and Discover. Discounts are available for Parker University alumni and TRI-eligible students, contact the Continuing Education office for promotional codes.

Our phone lines are open Monday – Friday, 8am – 4:30pm CST at 800.266.4723 or locally at 214.902.2401. We will be closed July 5th to celebrate the holiday and July 30-31 for [Parker Seminars NeuroCon](#).

Sherman College Lyceum 2021 scheduled for October 28 - 30, 2021

Sherman College has been carefully evaluating plans for Lyceum 2021 over the past few weeks in accordance with current events and local, state and federal recommendations regarding COVID-19. The college has opted to postpone Lyceum 2021 until October 28-30, 2021, in hopes that we can host our homecoming and continuing education event experience on campus and in person.

Of course, as the year progresses, we will continue to evaluate the safety and potential liability of hosting this event, and we will keep you informed with as much advance notice as possible, keeping in mind your need to arrange travel plans and logistics. No matter what happens, you can count on Lyceum 2021 happening on October 28-30, either in-person or virtually.

We want to see chiropractic flourish, and the Continuing Education staff are committed to doing our part in developing and facilitating the best program we can to support the profession. We will continue to serve you by delivering outstanding content to help you learn, grow and better serve your communities. We desire nothing more than to host this event in person so we can see our friends, connect with new ones, and celebrate our wonderful profession together, the way B.J. intended at the first Lyceum so many years ago. Please watch our [website](#) for the latest program information and updates.

NUHS partners with Aurora University to offer Advanced Scholars Program

National University of Health Sciences (NUHS) has partnered with Aurora University to allow students to complete both undergraduate and doctor of chiropractic (DC) degrees in less time.

The [Advanced Scholars Program](#) is a joint recruitment and dual admission effort that creates coordinated curriculum specifically for exceptional students who maintain a 3.0 GPA or higher at Aurora University. As an Advanced Scholar, students will have a chance to finish both undergraduate and doctor of chiropractic degrees in as little as 6.5 years.

“In the past, NUHS has enrolled many Aurora University students who have done very well in the Doctor of Chiropractic Medicine Program,” said NUHS President Joseph Stiefel, MS, EdD, DC. “The Advanced Scholars Program is a great way for those motivated students to get the most out of their time in school and reduce the cost of their educational investment. Graduating earlier also allows students to embark on their career sooner.”

As part of the [pre-chiropractic program](#) at Aurora University, qualified students will complete three years of undergraduate study or a minimum of 90 semester credits leading toward their bachelor of science in health science degree. Students with a 3.0 GPA or higher will then start the DC program at NUHS. After successful completion of all coursework in the first three trimesters at NUHS, they will be granted their bachelor degree from Aurora University.

Aurora University has a longstanding tradition and strong foundation in the helping and healing professions, including preparing students for advanced study in the medical professions.

“Our track record has allowed many students to be successful at National University already,” said Sarah Radtke, Dean of

the School of Health Science at Aurora University. “This partnership solidifies our combined mission to develop well-rounded health care practitioners who lead with compassion, integrity, and inclusivity.”

NUHS has created similar Advanced Scholars Programs with St. Petersburg College, Ball State University, Elmhurst College and South Dakota State University. Collaboration agreements with other area schools are also in progress.

For more information or to apply to the Advanced Scholars Program at Aurora University and NUHS contact 1-800-826-6285 or [visit nuhs.edu](#).

Logan University offers postgraduate programs

Committed to our graduates’ ongoing development, Logan University’s Postgraduate Department offers a variety of engaging, affordable and applicable continuing education programs. [Click here](#) for upcoming programs in July, August and September 2021. For more information or to register, visit [www.logan.edu/post-grad](#) or contact the Postgraduate Department at [Postgrad@Logan.edu](#) or 800-842-3234.

Logan University Symposium 2021: Advancing chiropractic in today’s health care

Informative, inspirational and entertaining, Logan University Symposium 2021 welcomes chiropractic leaders from around the world for four days of learning, networking and innovation. [Click here](#) for more information or to register.

Logan University is thrilled to welcome alumni and friends back to Symposium this fall. Logan’s Symposium 2021 will be held Thursday, September 16 through Sunday, September 19 on campus and at the Hilton St. Louis at the Ballpark. Join us for continuing education opportunities, chiropractic exhibitors, networking events and an address by Logan’s President, Clay McDonald, DC, MBA, JD.

We are making every effort to safely accommodate as many attendees as we can while adhering to St. Louis City and St. Louis County social distancing and room capacity guidelines. As always, we will keep you informed of any federal or county changes related to COVID-19. We look forward to seeing you soon!

Call Logan Postgrad at 1-800-842-3234 or email us at [postgrad@logan.edu](#) to see if continuing education credits have been approved for your state.

Continued on next page

Chiropractic College News

Continued from last page

Key leadership change at Palmer West

After nearly 40 years of service to Palmer College, William (Bill) Meeker, D.C., M.P.H., president of Palmer's West campus in San Jose, California, has announced his retirement from the College.



"I know the Palmer College community joins me in congratulating Bill on his nearly four decades of impactful service to Palmer and the chiropractic profession," says Dennis Marchiori, D.C., Ph.D., Palmer College chancellor and CEO.

Meeker received his B.A. in political science from Wabash College in 1973, his Doctor of Chiropractic degree from Palmer West in 1982, and his Master of Public Health from San Jose State University in 1988.

After serving 12 years as the vice president for research at Palmer College and as director of the Palmer Center for Chiropractic Research, at Palmer's main campus in Davenport, Iowa, he was appointed president of Palmer West, in 2007.

"I'm very proud to have been a member of Palmer's academic community for my entire professional career," says Meeker. "My association with Palmer has energized my passions and provided me many pathways to serve the chiropractic profession.

"Particularly important to me was being given the opportunity to establish and lead the Palmer Center for Chiropractic Research, and thereby enhance its significant role in the development of the science of chiropractic."

During his tenure at Palmer College, he has served as a member of the National Advisory Council of the National Center for Complementary and Alternative Medicine (NCCAM) at the National Institutes of Health, and the Governing Council of the American Public Health Association. Currently, he serves on the boards of the Foundation for Chiropractic Progress, World Spine Care, and the Academy of Integrative Health

and Medicine, for which he is the chair. He formerly served the vice-chair of the Association of Chiropractic Colleges.

Dr. Meeker serves on the editorial boards of the *Spine Journal*, the *Journal of Manipulative and Physiological Therapeutics*, *Explore*, the *International Journal of Therapeutic Massage and Bodywork*, and others. In his 38 years in the profession, Dr. Meeker has authored more than 60 peer-reviewed papers, books and book chapters, and has made more than 100 scientific and policy presentations to multidisciplinary audiences around the world.

Legislative win for Oregon in insurance pre-authorization

Oregon Legislature recently passed House Bill 2517 and has been signed into law by Governor Kate Brown. This new Oregon law will help reduce confusion and delays many patients have dealt with when attempting to obtain pre-authorization for various medical procedures, some even lifesaving. The law will reduce the administrative burden medical staff must deal with while reducing cost as well as reducing patient waiting times. It requires a process for electronic submission for authorization, clarifies necessary information needed for submission of a complete utilization management request, specifies health service authorizations by insurers, and the health plans are valid for at least 60 days and 12 months for chronic disease treatment.

This Oregon law will improve transparency and navigation through the administrative process by ensuring all medical offices and their patients receive a clear reason for any denied requests and requires insurance companies to provide notification of any changes to utilization management within a reasonable period. This patient-centered legislation was the result of several health care professions and foundations working together for the good of all patients. These groups include the Oregon Chiropractic Association (OCA), the Oregon Medical Association (OMA), Oregon Association of Naturopathic Physicians (OANP), Osteopathic Physicians and Surgeons of Oregon (OPSO), Oregon Nurses Association (ONA), Oregon Physical Therapy Association (OPTA), Oregon Association of Acupuncturists (OAA) and others. All patients in Oregon will benefit, because these health care professions were willing to work together over the course of the last three Oregon legislative sessions.

Join us in Orlando!



The International Chiropractors Association presents the

2021 Annual Super Conference on Chiropractic & Pediatrics

November 12th - 14th, 2020 • Hyatt Grand Cypress, Orlando Florida

One Grand Cypress Blvd., Orlando, FL 32836

Featured Speakers

Tracy Barnes, DC, DICCP, CKT • Ramneek S. Bhogal, DC, DABCI •
Kathryn Cantwell, DC, DICCP, CSP, CSCP • Allison Carlson, DC, CCEP • Calvin Gabel, DC, DICCP •
Stu Hoffman, DC • Julie Mayer Hunt, DC, DICCP • Stephanie O'Neill- Bhogal, DC, DICCP •
Alaina Rowsell- Kulikowski, DC, DICCP • Lora Tanis, DC, DICCP

Topics of Discussion

- Introductory pediatric technique workshops & office management
- Pediatric epidemiology & risk management for experienced DICCPs
- In-depth pediatric upper cervical & fascia case studies

Registration

	Early Bird	Normal	Late & On-Site
DC - Non-member	\$425	\$500	\$575
DC - ICA or Pediatrics Council Member	\$400	\$475	\$525
SICA Member	\$100	\$200	\$250
Student	\$200	\$250	\$300
CA/Spouse - Non DC	\$250	\$350	\$400
ICA Lifetime Member	\$50	\$50	\$50

Continuing Education

Applied for/Pending Approval:

AL • AK • AR • CA • CO • CT • DC • DE • FL • GA • HI • KY
IA • ID • IL • IN • KS • LA • ME • MI • MN • MO • MT •
NC • ND • NE • NH • NJ • NV • NY • OH • OR • PA • RI •
SC • SD • TN • TX • UT • VA • VT • WA • WI • WY • Puerto
Rico • British Columbia • Manitoba • New Brunswick •
Nova Scotia • Ontario • Prince Edward Island • Quebec



Register at icaevents.org/orlando

For more information, visit icaevents.org/orlando or contact Stephanie Beckler at 800-433-0000 or steph@icapevents.org.





Idaho chiropractors, do you have something to sell, share, or advertise with your fellow practitioners? List it as an IACP classified ad. These ads will be listed online and included in the IACP newsletter for two months. Email your ad to: iacpcontact@gmail.com

Full Time Associate Wanted: Full time associate position available in Nampa. Competitive salary, paid vacation, paid holidays, and matching 401K. Contact Josh. Email: drjmckim@McKimChiropractic.com. Phone: 208-318-4762

Associate Doctor Wanted: Are you ready to make an IMPACT? Our team is expanding, and Summit Spine & Sport Chiropractic is excited to be making an impact in the lives and the health of the Rexburg and Idaho Falls communities. Our clinics are located in tight-knit communities that are safe, friendly, and you won't find more beautiful surroundings! Not only will you join a well ran systems driven practice, but you will have a team assisting you that is on board with the purpose of changing the health of our communities with Chiropractic! We are excited for you to join our team! Interested? Contact Dr. Kimball Arritt - dr.arritt@summitchiropractichealth.com

For Sale: Chiropractic Office in Blackfoot Idaho. This well-established medically integrated office is a must for all in the health industry. The practice collected \$345,262.00. \$80,000 worth of equipment included, over 3,000 patient files, fully staffed and the potential to continue regenerative medicine. This is a dream for anyone looking to purchase a practice, a total "Turn-Key". This practice has been appraised at \$285K, but asking a reduced price of \$169,000 OBO. Blackfoot Idaho is located in south east Idaho just off I-15. It is a small tight-knit community with low cost of living and a sportsman's paradise. Blackfoot has a 17.6% lower cost of living than the rest of the United States. The median home price is \$169,000. Please call 435-764-1775 with inquiries.

Associate Doctor to Owner: Jon R. Gray Chiropractic is looking to hire/train an associate. Teaching Business Principles such as:

- How to Hire and Train Staff
- Insurance Billing and Coding
- Patient Education
- Marketing New Patients
- Treatment Schedules.

Contact by email: 1drgray@gmail.com, 208-870-2054 (Dr. Gray), boiseweightloss@gmail.com, 208-870-2732 (Heather).

IACP Marketplace

The IACP News,
this monthly newsletter of the Idaho
Association of Chiropractic Physicians,
reaches 600-800 chiropractors
across Idaho every month.
Build your business right here!



Producing modern, digital magazines and
newsletters exclusively for non-profit associations.

www.CandSpub.com



Enjoy more compliance, peace of mind, and simpler financial options that help
your patients combat rising health care costs, increasing co-payments, and skyrocketing deductibles



ChiroHealthUSA is one of the simplest and easiest solutions to counter potentially illegal dual-fee schedules and improper time-of-service discounts offered by doctors in an effort to make care more affordable for patients. The great news is that when your state association partners with ChiroHealthUSA — as IACP does — not only do you and your patients benefit, but the entire profession wins through our donation to IACP.

1-888-719-9990

www.chirohealthusa.com

info@chirohealthusa.com

**Get your display advertisement into the IACP Marketplace and save BIG!
Less than a dollar a day gets your ad going – \$29 a month.
Email Steve today at: CandSpublishing@gmail.com**

Office Posters



We have created a FREE [printable PDF](#) of the
Gain better health through improved ergonomics

poster on the following page, and
the following posters are available online:

Stretch before every walk

Ways to keep moving with joint pain

Basic Coronavirus protective measures

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 touted as "wonder drug"

7 simple steps to a longer, healthier life

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 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).***

Gain better health through improved ergonomics

Ergonomics is the science that studies the design and arrangement of items people use and interact with most efficiently and safely. It is also referred to as human engineering.

Computer ergonomics is the study of how we interact with our computers. Scientists that study computer ergonomics, attempt to find solutions to strain, fatigue, and injuries caused by poor product design or workplace arrangement. Their goal is to create an overall comfortable and relaxed workplace environment.

Sitting at a computer for many hours a day, many people find themselves looking for a better way to work. Personally, my back hurts, my neck gets tight, and I often find that my legs fall asleep. So what can you do when your workstation is ergonomically wrong?

Setting Up Your Workstation: according to the ergonomic experts at the University of Michigan, your workstation should:

- Be adjusted to allow your arms to rest at a 90-degree angle to the keyboard
- Allow for the monitor and keyboard to be separated
- Have a chair that supports your back in an upright seated position with a slight arch that may or may not contain a lumbar roll for the lower back
- Position the monitor to be directly in front of you (at least 18 inches) and at eye level
- Keep feet flat on the floor with the legs in a parallel position, and for the vertically challenged, a footrest may be needed
- If using a hard-copy document, use a document holder to keep it at eye level

Since laptops are not designed for use over long periods of time, if possible, separate the monitor and keyboard. Place the laptop on top of books or some other device to raise it to eye level. Then, use an external keyboard that allows the elbows to retain their 90-degree angle while typing.

Keeping physically fit can also help to avoid, and even treat, problems and pains related to extended computer use. Build up core muscles to support the lower back while seated.

If you have constant pain, numbness, or any other symptoms that are persistent and do not go away, check in with your chiropractor immediately. A delay in seeking care may cause the problems to develop into serious medical conditions related to the back and joints.



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

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. 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.

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.

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. Email camera-ready ads in high resolution Adobe Acrobat (.pdf) format to: CandSpublishing@gmail.com. Ad creation and graphic design services are available through C&S Publishing at no additional cost.

Acceptance of Advertising: IACP reserves the right to refuse any advertisement with or without reason or explanation including any ad that, in the opinion of IACP, is unethical, makes extravagant claims, misrepresents, is unfair or harmful to other advertisers; violates postal, anti-trust or U.S. currency regulations; or is deemed inconsistent with the objectives of the IACP.

The IACP News is produced for the IACP by C&S Publishing

Phone: 916-729-5432 • Email: CandSpublishing@gmail.com