

KNOWLEDGE AND SKILL BUILDING FOR THE CHIROPRACTIC CLINICIAN AND EXPERT

Joint Meeting of the:
THE AMERICAN COLLEGE OF CHIROPRACTIC CONSULTANTS
THE COUNCIL ON FORENSIC SCIENCES*
WEST HARTFORD GROUP



October 8, 9, 10, 2015

Oak Brook Hills Resort Hotel
3500 Midwest Rd., Oak Brook, IL 60523 Phone: 630-850-5555

Thursday Evening October 8, 2015 – For Early Arrivals

- 6:30 to 9:00 p.m. **Consulting in the Real World: Mistakes, Errors and How to Avoid Catastrophe and Overcome Problems with Case Review.**
Presenter: Daniel Bowerman, DC and John Cerf, DC
Description: Experienced consultants will cover forensic errors and omissions—presenting real world case examples to underscore the importance of thoroughness and accuracy of clinical case reviews, prior peer reviews, IME's, examination under oath, and dealing with opposing experts. Speakers will discuss navigating the Byzantine paths in litigation for both civil and criminal cases with lessons based on personal and collegial experiences.

Friday, October 9, 2015 Main conference Begins

- 7:00 – 8:00 a.m. **Registration and Full Breakfast Buffet Provided to Registered Conference Attendees**
- 8:00 – 9:30 a.m. **The Effect of Bias and Belief on Clinical Reasoning**
Presenter: Stephen M. Perle, DC, MS
Description: Cognitive errors result in bias combined with beliefs affect the ways all humans interpret and think about events they observe. These errors in thinking are common and can have deleterious consequences. In clinical practice common cognitive errors often lead to diagnostic and clinical management errors. Further these errors lead to misinterpretation of the value and meaning of research. One way to combat the effects of cognitive errors is to learn what they are as a strategy to minimize their effects upon ones clinical reasoning.
- 9:30 – 10:00 a.m. **Vertebral Artery Dissection in Evolution Found During Chiropractic Examination: a case report**
Presenter: Danny Futch, DC
Description: Vertebral artery dissection (VAD) is a rare but serious condition that has been associated with chiropractic and cervical manipulation. This session will describe a case of a patient with a VAD in evolution that was missed at emergency department presentation and subsequently diagnosed during chiropractic examination prior to any treatment application. This case illustrates the importance for all health care providers who see patients with neck pain and headache to be attentive to the symptomatic presentation of patients with VAD in progress.
- 10:00 – 10:45 p.m. **Chiropractic Care and the Risk of Vertebrobasilar Stroke: results of a case-control study in U.S. commercial and Medicare Advantage populations**
Presenter: Thomas Kosloff, DC
Description: The association between vertebrobasilar artery system (VBA) stroke and cervical spinal manipulative therapy is a controversial topic. This session will summarize the findings and limitations of the largest case-control study to report on the association between vertebrobasilar artery system (VBA) stroke and cervical spinal manipulative therapy. The findings and recommendations from this investigation will be placed into context with the overall body of knowledge on this topic.

Friday, October 9, 2015 (continued)

10:45 – 12:00 p.m. **Introduction to Patient Activation**

Presenter: Thomas Kosloff, DC

Description: “Patient activation” is a behavioral concept that captures a number of core components of patient involvement in managing their health and health care. Measures used to screen for levels of patient activation evaluate competencies that drive health behavior including self-management competency and one’s sense of being in charge of his or her health. This presentation will provide an overview of how patient activation can be assessed in clinical care settings; and, how clinical encounters can be tailored to meet individual patients’ stage of readiness.

12:00 – 1:00 p.m. **Lunch Provided to Registered Conference Attendees**

1:00 – 2:00 p.m. **Trends in Documentation: Gaming Artificial Intelligence Software for Bodily Injury Claims**

Presenter: Warren Jahn, DC, MPS

Description: The most widely used bodily injury claim software is called Colossus that requires specific provider information to generate maximum claim value. Learn the Colossus style narrative report “tricks” taught to providers which purportedly provides the best opportunity for their patients to get the maximum offer from Colossus software based on their injuries. Actual medical records and special forms will be highlighted.

2:00 – 3:00 p.m. **A Critical Analysis of Whiplash Associated Disorder (WAD) Assessment and Management**

Presenter: Charles Simpson, DC

Description: Incomplete recovery from whiplash injury is common. This session will survey the evidence and clinical guidelines that are focused on identified predictors of poor outcomes from WAD and what treatment plans can mitigate tendencies to chronicity.

3:00 – 4:00 p.m. **Complementary Medicine in Chronic Pain Treatment**

Presenter: Charles Simpson, DC

Description: This session discusses several issues related to therapies that are considered “complementary” or “alternative” to conventional medicine. A definition of “complementary and alternative medicine” (CAM) is considered in the context of the evolving health care field of complementary medicine. A rationale for pain specialists and other physicians and clinicians who treat pain to understand these treatments is presented. The challenges of an evidence-based approach to incorporating CAM therapies are explored. Finally, a brief survey of the evidence that supports several widely available and commonly used complementary therapies for chronic pain is provided.

4:00 – 5:00 p.m. **Pain Medicine as a Bridge to Functional Recovery and Patient Activation**

Presenter: Edward Garay, MD, PhD

Description: Assisting patients return to maximal function and activity can require consideration of many treatment options. This session will provide an evidence based and pragmatic approach for the referral, selection and timing of interventional neuroaxial injections and peripheral nerve blocks. Discussion will include timing and appropriateness recommendations for manual therapy and exercise processes concurrent with these interventions.

5:00 – 6:00 p.m. **Greatest Hits: A Compendium of Interesting and Thought Provoking Testimonies, Case Reviews and Investigations**

Presenter: S. Steven Baker, DC

Description: This session will provide the audience with interesting components of case review and clinical/legal testimonies demonstrating the need for ongoing learning for the clinician and expert. Specific case review will provide the context for discussion of each topic area. Strategies and techniques for building and defending your analysis and opinion will be presented.

6:30 – 8:00 p.m. **Social Hour with Appetizers**

Saturday, October 10, 2015

7:00 – 8:00 a.m. **Full Breakfast Buffet Provided for Registered Conference Attendees**

8:00 – 10:00 a.m. **The Biological Mechanisms of Manipulation**

Presenter: Greg Kawchuk, DC, PhD

Description: What really happens during the application of spinal manipulative therapy? What tissues are impacted the most and what difference does being on/off target make? This lecture will provide the audience with the basis of “Manipulation Mechanics 2.0” and then paint a picture of how new information about the mechanics of spinal manipulation is shaping our view of patient safety.

Saturday, October 10, 2015 (continued)

10:00 – 11:00 a.m. Causation Assessment in Musculoskeletal Injury and Return to Work Assessment

Presenter: James B. Talmage, MD

Description: In cases where the incident alleged to have initiated a condition is minor, and does not injure most people, and in cases with no inciting incident (cumulative trauma) a mechanism for legally defensible causation assessment is needed. Such a system was initially proposed by NIOSH, and later used by ACOEM and the AMA. This system will be described and illustrated using examples of back conditions. This will be contrasted with non-evidence based causation analysis usually occurring in workers' compensation systems.

Physicians are often asked to determine what a patient can be expected to do at work, which requires an analysis of "risk", "capacity", and "tolerance". How to think through these concepts and determine work ability for chronic cases will be discussed in detail.

11:00 – 12:00 p.m. Evidence Based Treatment for File Reviews

Presenter: James B. Talmage, MD

Description: In this age of "evidence based medicine" physician decisions on tests and treatments are often subjected to utilization review. How physicians should document requests for treatment and how to use and document evidence in file reviews will be explored in detail.

12:00 – 1:00 p.m. Lunch Provided to Registered Conference Attendees

1:00 – 2:30 p.m. Quality Assessment of Clinical Care Guidelines

Presenter: Michele Maiers, DC, MPH, PhD

Description: Health care decision making is increasingly driven by evidence informed policies, most commonly in the form of clinical practice guidelines (CPGs). This has resulted in a proliferation of CPGs from various stakeholder groups, often coming to different conclusions. This poses a unique challenge to those held responsible for complying with best practices; how can reviews using the same evidence arrive at differing versions of what constitutes "best" care?

Participants in this seminar will learn to assess the quality of CPGs and other forms of summary evidence, using standardized critical appraisal tools. They will practice appraising summary evidence, and explore the nuance of translating individual study results into broad policy recommendations. These skills will be applied in the context of the Canadian Chiropractic Guideline Initiative, where CPGs for back pain and whiplash associated disorders will be shared and debated.

2:30 – 3:45 p.m. Primary Spine Care Services – Responding to Runaway Costs and Disappointing Outcomes

Presenter: Donald Murphy, DC and John Ventura, DC

Description: The purpose of this session is to present an emerging model in the health care system – primary spine care services. The primary spine care service line involves any practitioner who comes in contact with the spine patient. The central player in this service line is the Primary Spine Practitioner (PSP), a specially trained clinician who serves as the primary care practitioner for spine patients. The primary spine care service line has been implemented in several varied environments, including hospital systems and healthcare communities. The role of primary spine care services and the PSP in the present and future health care system will be discussed.

8 hours of continuing education for the Thursday morning/afternoon program*, 2.5 hours for the Thursday evening session, and 16 hours for the main conference program on Friday and Saturday applied for in most states. Total available hours for all three days 26.5. Continuation education credits applied for by National University of Health Sciences, 200 E. Roosevelt, Lombard IL, 60148.**

* The Council on Forensic Sciences (<http://www.forensic-sciences.org/>) is a recognized Council of the American Chiropractic Association

** Thursday evening, Friday and Saturday program qualifies for 18.5 hours toward ABCC, and 18.5 hours toward ABFP diplomate re-certification hours.

*** See separate flyer for details of an additional 8 hour CE workshop on Thursday morning and afternoon October 8 that is available **free to doctors registered for the main conference**. This program focus is clinical evidence assessment for the practicing chiropractor, and is co-sponsored by National Chiropractic Mutual Insurance Co. (NCMIC). Full-time NCMIC insured DC's get a yearly 5% premium discount for three consecutive policy years for attending this 8 hour course.

Conference Speakers:

Bart Green, MEd, DC
Daniel Bowerman, DC
John Cerf, DC
Stephen Perle, DC, MS
Danny Futch, DC
Thomas Kosloff, DC
Warren Jahn, DC, MPS
Charles Simpson, DC
Edward Garay, MD, PhD
Steven Baker, DC
Greg Kawchuk, DC, PhD
James B. Talmage, MD
Michele Maiers, DC, MPH, PhD
Donald Murphy, DC
John Ventura, DC

Conference Chair and Co-chair:

William Tellin, D.C.
Warren Jahn, D.C.



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**26.5 Hours of Continuing Education Applied
For By National University of Health Sciences**

