



### President's Message:

Here we are in August already. More than halfway through the year! Our recent Spring Convention boasted some of our best DC numbers since before COVID and our Fall Convention is just around the corner. Top speakers including Dr. Dan Murphy, the Carrick Institute's Dr. Freddy's Garcia, and many more will join us in Williamsburg on September 20-22. Go to [our website](#) to learn more.

Some of you may have heard me talk about Veterans being denied access to chiropractic care in the Hampton Roads area – despite objective assessments showing improvement and the VA's promises that chiropractic care is available. We were able to get a significant story aired on our local TV news in the Hampton Roads area discussing this. It turned out to be a great, positive piece for chiropractic and the media is conducting follow-up interviews for additional coverage. However, in the meantime, the problem remains. I will continue to fight for our profession and for our Veterans (See article pg. 6.)

You may get tired of hearing it, but I will keep saying it. We need continued outreach to our local and state legislators. We need to donate to [CPAC](#). These are the actions that will improve our standing in the world and in our communities. Connections are key. You never know who could turn out to be our biggest ally – especially in an election year.

Get out and meet your legislators. Tell them who you are and what you do. Connect with other chiropractors.

**Support each other.**



Dr. Michelle Rose  
UVCA President

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### Supporting Supplier News

**Student Loan Tutor** is offering a **90 min Free Strategy Call** for UVCA members which offers an opportunity to get advice regarding student loans! They are looking forward to supporting UVCA members with their student loans.

**Kaizenovate** recently launched **EMBODI**, a groundbreaking platform that enables healthcare providers to cut through the noise and focus directly on patient care. It offers essential features like two-way text messaging, appointment reminders, tailored home exercise programs, and new revenue streams through Remote Therapeutic Monitoring (RTM). For providers, EMBODI streamlines operations, enhances patient engagement, and drives practice growth. Patients benefit from a centralized digital guide that empowers them to actively participate in their healing process. With EMBODI, healthcare providers witness significant practice growth, while patients feel supported and engaged in their healthcare journey. [View our demo.](#)



**CONNECT WITH HISTORY** UVCA Fall Convention  
September 20-22, 2024  
*Colonial Williamsburg*



## PROGRAM HIGHLIGHTS



**Dr. Dan Murphy**

Improve Mitochondrial Health for Better Wellbeing

**Dr. Freddy Garcia**

Pain Reset: Applied Neuroscience to Solve Pain;  
Closing General Session: Tools for the Powerful DC:  
Vestibular System



**Dr. Jack Bourla**

General Session Keynote: Are You Being Impeccable?;  
Chiropractic Principles & Application(s)



**Ms. Lisa Maciejewski-West**

Effective Communication for Maximum Patient  
Satisfaction Retention; Chart Auditing Workshop



**Dr. Anish Bajaj**

Sports Chiropractic; Sacro-Occipital Technique



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Ms. Susette Goodwin, & Dr. Tom Wetzen!**

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# What Physical Examination Can Tell Us About Osteoporosis

by Scott Banks, DC, MS

Osteoporosis is a prevalent disease that should create added precaution in a chiropractic practice. The most serious concern with osteoporosis is fracture which can occur with minimal mechanical force. Many chiropractic technics involve a controlled mechanical force. While those forces are very safe in a spine with normal bone density, they may exceed the tolerance of an osteoporotic spine.

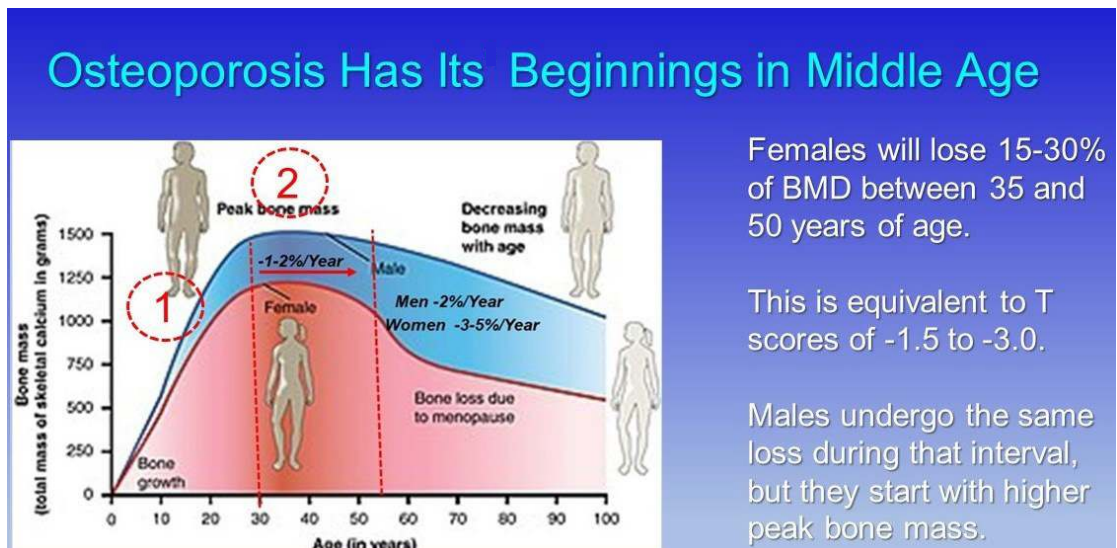
A significant number of osteoporotic patients will present without a previous diagnosis of the disease, particularly in the female population under 70 years of age.<sup>1</sup> The prevalence of osteoporosis is approximately 15% or 1 in 6 women age 50-59 years. The prevalence in that demographic of osteopenia is thought to be 30% or 1 in 3 women. These numbers jump to 33% and 50-60% for osteoporosis and osteopenia respectively in women 60-69 years of age.

While the gold standard of diagnosis of osteopenia and osteoporosis is measurement of bone

mineral density on a DEXA scan, physical examination can be helpful in those who have not had this testing. Bone mineral density on DEXA is an important but incomplete risk assessment. The osteoporotic spine or hip fractures risk is done with Fracture Risk Assessment Tool or FRAX. This assessment tool uses 11 additional factors along with bone mineral density to more accurately determine future risk.

These additional risk factors include previous history of fracture which predicts significant subsequent fracture. An example is the history of previous distal radius

(cont. on pg. 4)



## The Virginia Voice has a New Look!

As part of the UVCA's effort to create more consistent branding and continuity in our written and electronic communications, UVCA's quarterly newsletter has a brand new look!

Melissa Luce has expanded her position as Accounting & Finance Director to include Newsletter Designer & Manager as well.

We are grateful that Melissa is sharing her additional talents with us!

Julie K. Connolly, FICC

UVCA Executive Director



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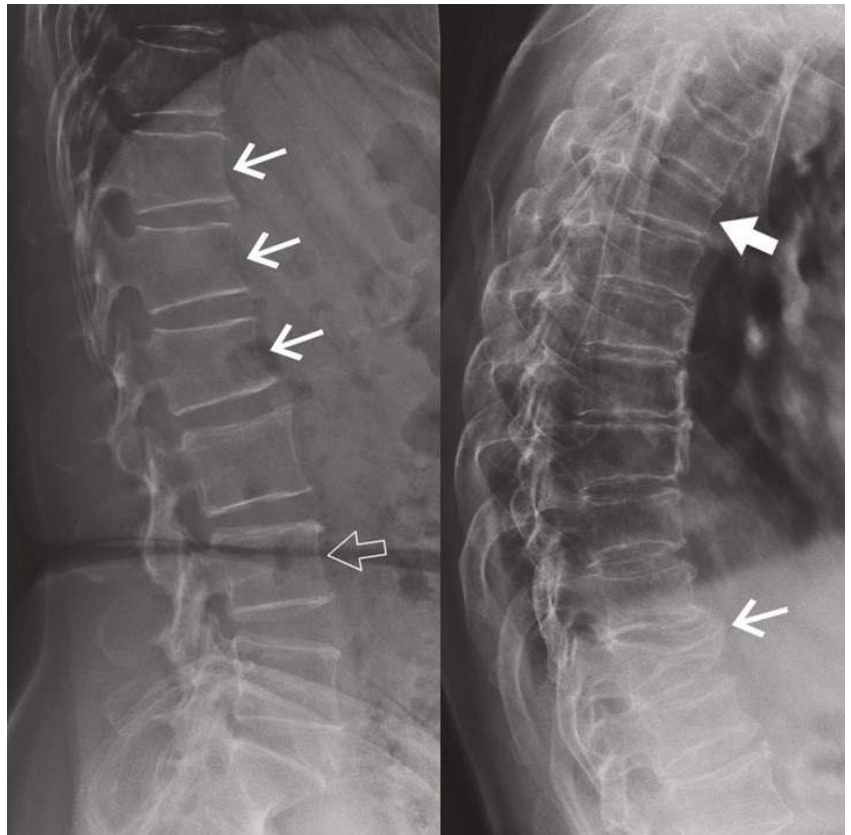
fracture (DRF). This is not surprising for those who have reviewed a large number of DEXA scans as that site often displays the lowest bone mineral density. In a study of 1900 women and men over the age of 55 years, those with a hip fractures 18.8% had a history of DRF versus 2.7% who did not.<sup>2</sup> Clearly, a major risk factor for a new osteoporotic fracture is a history of a prior one.

It seems straightforward that a prior fracture would be known but that is often not the case in the spine. Compression fractures can be pronounced as shown at the bottom arrow on the right side of the image typically generating significant back pain. They can also be "silent" yet also predictive about subsequent fracture risk as is shown on the left side of the images at L4 and L2 and L3. In these patients, there can be multiple suggestive indications from physical examination.

Physical measurements that have been correlated with the presence of osteoporotic compression fractures include:

- Arm Span to height ratio (AHR)
- Wall-occiput distance (WOD)
- Rib-pelvis distance (RPD)
- One leg standing (OLS)
- Walking speed (WS)

Different tests reflect different components of changes associated with spine fractures. AHR reflects changes in height related to changes in spine length. In Caucasians, the arm span is normally the same as height with the ratio in a healthy spine being 1.03 in males and 1.01 in females.<sup>3</sup> The ratio is slightly higher in African Americans. A study of women mean age 69 years using arm span to height difference (AHD) rather than a ratio and compared radiographic analysis.<sup>4</sup> In women without radiographic evidence of fracture the AHD was 4.2 cm while it was 7.0 cm in those



with fractures. AHD had a sensitivity of 85% with a specificity of 67%.

The WOD measurement was graded as positive if this distance in normal standing with the shoulder against a wall was >5 cm. WOD had a 70% sensitivity and 67% specificity. The RPD, defined as the measured distance from the inferior margin of the 11<sup>th</sup> rib to the iliac crest, had a sensitivity of 70% and a specificity of 33%.

Another type of physical test look more at changes in function rather than structure. OLS is performed by having the patient stand on one leg with the arms folded on the chest. The test is considered normal if that can be maintained for 30 seconds. The walking speed is measured by having the patient start walking a 10 meter distance timing them from 2 meters to 8 meters. The test is performed twice and the times averaged.

A study looking at the above function tests found that the OLS was associated with a 1.13 HR of any fracture, a 1.15 HR for a major fracture and 1.34 HR for hip fracture.<sup>5</sup> The WS was only associated with hip fracture.

All tests have less than 100% sensitivity and specificity. Other factors such as degenerative changes can also affect structural tests. A number of age associated diseases can affect function such as OLS. Combining structural and functional tests increases sensitivity and specificity.

(cont. on pg. 5)

(cont. from pg. 4)

Once enough suspicion is found of osteoporosis referral for a DEXA is optimal. This diagnostic scrutiny may prevent a serious subsequent fracture such as in the hip or adverse outcome from chiropractic treatment. These considerations should be made in patients  $\geq 55$  years where the incidence of serious bone loss becomes a concern.



1. Choi et al. "Prevalence and diagnosis experience of osteoporosis in postmenopausal women over 50: Focusing on socioeconomic factors." *PLoS One*. 2021;16(3): e0248020.
2. Ghafoori et al. "Investigation of the History of Distal Radius Fractures in Patients Over 55 Years Old Suffering from Hip Fractures." *Archives of Bone & Joint Surgery*. 2024;12(5):418- 422.
3. Tan MP, Bansil SK. **"The Arm Span to Height Relationship and Its Health Implications."** In: Preedy, V. (eds) *Handbook of Anthropometry*. Springer, New York, NY.
4. Abe et al. "Osteoporosis Cohort. Use of anthropometric indicators in screening for undiagnosed vertebral fractures: a cross-sectional analysis of the Fukui Osteoporosis Cohort (FOC) study". *BMC Musculoskeletal Disord*, 2008;26;9:157.
5. Gregori et al. "The role of different physical function tests for the prediction of fracture risk in older women." *Journal of Cachexia, Sarcopenia and Muscle*, 2024:DOI: 10.1002/jcsm.13508.

Dr. Scott Banks has been in practice for 40 years. He received his undergraduate degree from Alfred University and his DC degree from Logan College of Chiropractic. He received his Master of Science degree in Human Nutrition from the University of Bridgeport. Dr. Banks is the past editor of "Nutritional Perspectives", the journal of the Council on Nutrition of the American Chiropractic Association. He has given continuing education programs to health care professionals throughout the United States including the Southern Medical Association, The American College of Sports Medicine, The Northern Virginia Society for Continuing Medical Education. He served as a preceptor for Eastern Virginia Medical School in alternative medicine. He was named Chiropractor of the Year by the Virginia Chiropractic Association and has received a Lifetime Achievement Award from the organization. Dr. Banks is a co-editor of the UVCA's *The Virginia Voice* and is a frequent instructor at the association's events.



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# Media Expands Coverage of VA Denials of Chiropractic Care in Hampton Roads

News 3 (WTKR, Hampton Roads) continues to help the Unified Virginia Chiropractic Association (UVCA) bring awareness to veterans' outrage at how the Hampton Veterans Administration (VA) is denying their chiropractic care and has pressed lawmakers to look into the issue.

On June 10th, WTKR reported on local veterans that are furious that their chiropractic care has been cut off by the Hampton Roads Veterans Administration (VA), with denials dating back to October of last year. It featured interviews with UVCA President Dr. Michelle Rose and several of her VA patients who explained that the only thing that truly helps their chronic pain is seeing the chiropractor. In addition, veteran Rachel Yurko explained that instead of chiropractic and massage therapy, she was prescribed muscle relaxers and Tramadol, a schedule IV opioid. "I'm thinking, why are you giving me all of this that I don't want instead of giving me an alternative option?" said Yurko. [View the full video story and article.](#)



Veteran Douglas Uncapher from WTKR

## Legislators Press for Answers

On June 21st, the media outlet released reporter Margaret Kavanagh's report, "Congresswoman Kiggans responds to veteran complaints regarding chiropractic care denials." Ms. Kavanagh asked Congresswoman Jen Kiggans, who serves on the House Committee on Veterans' Affairs and is the chair of the Subcommittee on Oversight and Investigations, what she is doing about the issue. Kiggans met personally with the VA to try to determine what the holdup was for the veterans, and says

when it comes to chiropractic care, medical professionals need to listen to patients. "If that's their preferred pain treatment, then we need to work our hardest to make sure that that's the pain treatment that they're getting," said Kiggans.

On June 25th, WTKR published a second follow-up story, "Senator Kaine looking into veterans not getting chiropractic care," in which Ms. Kavanagh interviewed Senator Tim Kaine. Although he cannot comment specifically on the case until he meets with leaders of the VA, he indicated his support. "Taking away pain management modalities that really work for some veterans... that's not the solution, we should be doing more, not less," said Senator Kaine.

The UVCA, led by Dr. Rose, continues efforts to recover and increase safe and effective chiropractic care for the veterans that want, need, and deserve it. The UVCA thanks the WTKR investigative team for its coverage.

For additional information, feel free to reach out to Dr. Michelle Rose, UVCA President, at [michelle@grc.hrcoxmail.com](mailto:michelle@grc.hrcoxmail.com).

## Kiggans Presses Hampton VA on Access to Chiropractic Care

*WASHINGTON, DC:* [On July 16th], Congresswoman Kiggans formally requested Dr. Taquisa Simmons, the executive director of the Hampton Veterans Affairs Medical Center (VAMC), to examine and take action on recent care denials of over 25 patients.

Congresswoman Kiggans met with Dr. Simmons and her staff in April to raise concerns surrounding access to chiropractic care for veterans at the Hampton VAMC. However, veterans are still citing denials of chiropractic care which are negatively impacting their ability to work and decreasing their quality of life.

"Patients continue to reach out to my office to express their frustrations about how their lives have been negatively impacted following a discontinuation of chiropractic care," said Congresswoman Kiggans. "They describe an inability to perform basic tasks such as climbing up stairs and showering without assistance

*(cont. on pg. 7)*

(cont. from pg. 6)

due to debilitating pain... The highest priority for the Hampton VAMC should be the delivery of safe and quality healthcare for our nation's veterans. As a third-generation veteran, I will continue to advocate for all those who have served and ensure they receive the care they deserve."

The full letter, dated July 16, 2024, is included below:

Taquisa K. Simmons  
Hampton Veterans Affairs Medical Center  
100 Emancipation Dr  
Hampton, VA 23667

Dear Dr. Simmons,

I write today to express my continued concerns regarding access to chiropractic care for veterans at the Hampton Veterans Affairs Medical Center (Hampton VAMC) and to request that recent care denials be reexamined.

On Thursday, April 24, 2024, I raised concerns related to access to care with you and your staff. Following that meeting, my office was provided with a service care agreement between Hampton VAMC's Chiropractic Clinic and Primary Care Service. One of the provisions within the agreement stipulates, "In the instance of prior chiropractic care, documentation of meaningful clinical

improvement is required. Meaningful Clinical Improvement is considered a minimum of 20% improvement by objective measures..." However, in further conversations with my office, many patients and their providers have alleged that while documentation submitted to the Hampton VAMC did show the requisite improvement, care was still denied.

Patients continue to reach out to my office to express their frustrations and describe how their lives have been negatively impacted following a discontinuation of chiropractic care. They cite an inability to perform basic tasks such as climbing up stairs and showering without assistance due to debilitating pain. Others have reported increases in spinal pain, difficulties with mobility, and have detailed how this is directly impacting their ability to work and live.

The highest priority for the Hampton VAMC should be the delivery of safe and quality healthcare for our nation's veterans. To accompany this letter, my office is transmitting information from over 25 patients for further review to determine if their care was discontinued appropriately. Thank you for your attention to my request. Please do not hesitate to have your staff contact my office with any questions.

Sincerely,

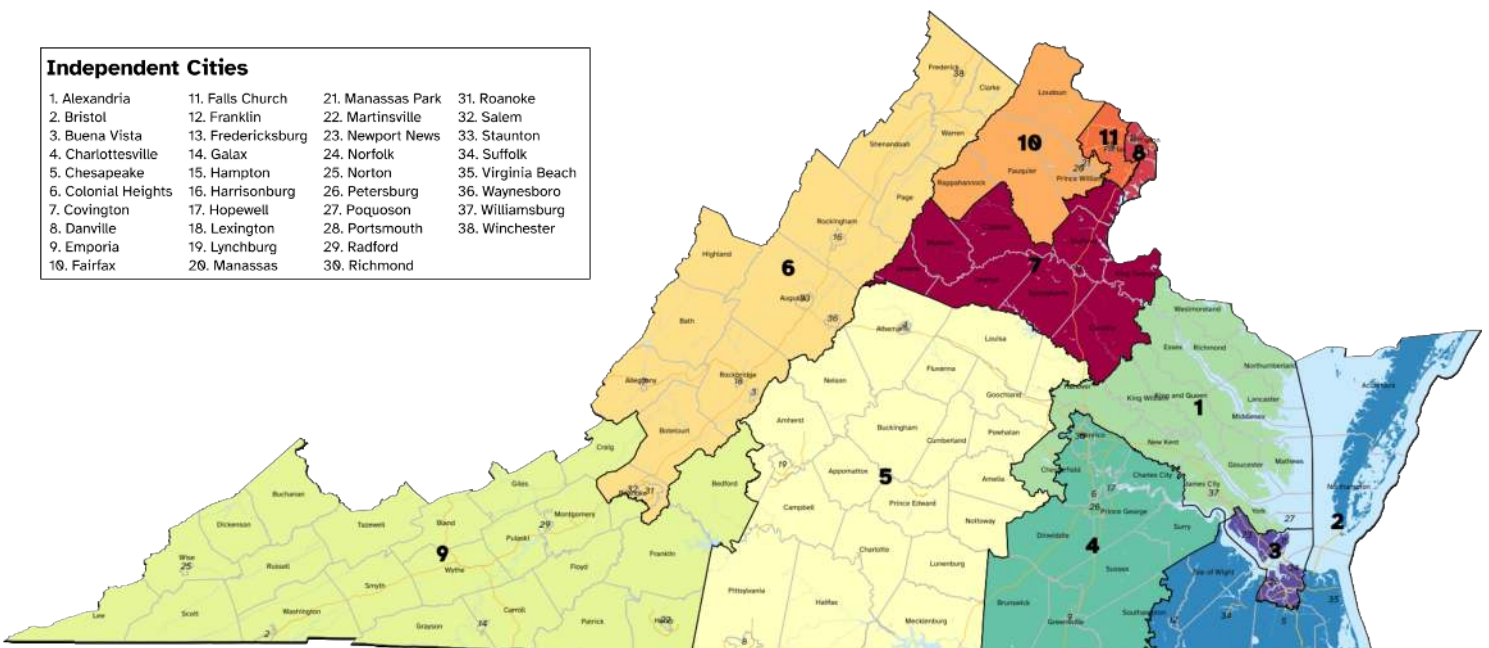
Jen A. Kiggans  
Congresswoman, Virginia's Second District

## Contact your Legislators - Show Rep Kiggans your appreciation

Let your State Senators and Congresspersons know how you feel about this issue! Find contact info [HERE](#)

### Independent Cities

- |                     |                    |                   |                    |
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| 4. Charlottesville  | 14. Galax          | 24. Norfolk       | 34. Suffolk        |
| 5. Chesapeake       | 15. Hampton        | 25. Norton        | 35. Virginia Beach |
| 6. Colonial Heights | 16. Harrisonburg   | 26. Petersburg    | 36. Waynesboro     |
| 7. Covington        | 17. Hopewell       | 27. Poquoson      | 37. Williamsburg   |
| 8. Danville         | 18. Lexington      | 28. Portsmouth    | 38. Winchester     |
| 9. Emporia          | 19. Lynchburg      | 29. Radford       |                    |
| 10. Fairfax         | 20. Manassas       | 30. Richmond      |                    |



# Let's Play Catch: A Clinical Application

by James A. Munse, DC, DACNB, MPA

Some of my best childhood memories come from playing catch with my dad. I'd imagine myself as an NFL receiver scoring game-winning touchdowns as I caught pass after pass after pass, and this would often continue for hours. It was an activity that I never seemed to get tired of. And it didn't matter if we were playing outside – or heaven forbid – in the house (despite stern warnings from my mom). I loved it whether it involved a football, basketball, nerf ball, tennis ball, baseball, or a random dog toy, it didn't matter. Playing catch was not only fun, but it also seemed to provide a sense of calm and focus. I just felt "right" while playing catch. And thanks to a recent visit from my 7- and 8-year-old nieces, I got to re-experience the joy of playing catch. It doesn't matter if I'm a kid in elementary school or a practicing chiropractor in his late 30's, playing catch is always a good time and just feels "right." But why is this? Well, it's because the act of playing catch provides great stimulation to the brain.

For instance, the mere task of simply catching the ball requires your cerebral cortex, brainstem, and cerebellum to share and integrate information in an extremely precise, timely, and coordinated fashion. Essentially, multiple neuronal regions are activated and working together to accomplish the task at hand. This barrage of electrical impulses between different areas of the brain boosts arousal, focus, and overall neuronal activity. In particular, playing catch is an awesome stimulator of the cerebellum and cerebral cortex. And this is why playing catch can be such a great activity for young kids: it activates and stimulates the same areas of the brain that are rapidly developing during childhood, thus giving it a boost.

Aside from childhood development and overall brain activation, can the act of playing catch be used clinically? The answer is definitely YES! For the purpose of this article, I'll focus the discussion as it pertains to the cerebellum and cerebral cortex (specifically the frontal and parietal lobes of the cortex). And please remember that the cerebellum and cerebral cortex are comprised of two hemispheres; each have a right and a left half.

The cerebellum controls an array of functions such as movement coordination, balance, equilibrium, muscle tone, and various aspects of speech and cognition. And the cerebellum must function appropriately for us to play catch! Let's first briefly discuss how to evaluate the cerebellum. I'll focus on the acts of balance and coordination because they're relatively easy to assess. If a patient has a clear lack of coordination, identify if one side of their body appears to be less coordinated than the other. If this is the case, then suffice it to say that the uncoordinated side is the same side as cerebellar dysfunction. For example, if a patient has an intention



tremor on the right hand when performing the finger-nose-finger test, or they struggle to perform smooth, coordinated movements with the right hand or right foot, then that person likely has decreased activity within the right half of the cerebellum. If a patient has balance issues, identify if they tend to fall to one side more than the other (especially with their eyes closed). For example, if they tend to sway or fall to the

*(cont. on pg. 9)*



(cont. from pg. 8)

right, then the right half of their cerebellum is likely underperforming. As such, cerebellar dysfunction is ipsilateral to the patient's symptomatology.

It's important to note that the cerebellar hemispheres communicate with the opposite (or contralateral) cerebral cortex. This is hard-wired into our nervous system! Thus, the right cerebellar hemisphere communicates with the left cerebral cortex. And since each cerebral hemisphere controls the opposite side of the body – the left cerebral cortex and the right half of the cerebellum maintain the integrity of voluntary and coordinated movement on the right side of the body. As such, when you activate right half of the cerebellum, you automatically activate the left cerebral cortex (and vice versa).

For brevity I will emphasize the cerebral cortex's role in producing accurate eye movements, which is a must for playing catch. The frontal lobes produce saccadic eye movements, which are quick, voluntary movements that help us locate the ball once it's in the air. As such, these are the rapid eye movements that allow the eyes to locate and focus on the ball. It should be noted that the frontal lobes "push the eyes" to the opposite side. As such, the left frontal lobe produces rightward saccades, and therefore pushes the eyes to the right. And the cerebellum "stops" a saccadic eye movement accurately at the target. So if a ball is thrown from your right visual field, the left frontal lobe pushes your eyes to the right so you can locate the ball, and then the right half of the cerebellum helps your eyes accurately land on the ball (and not over and undershoot the target). The parietal lobes produce smooth "pursuit" eye movements, which allow our eyes to stay locked

on a moving target and thus track that moving target (the ball) into your hand. Specifically, the parietal lobes "pull the eyes" towards themselves (think of a fisherman reeling-in a fish). Thus, the left parietal lobe enables the eyes to track the ball as it sails across our visual field to the left. And conversely, if a target moves the right, then the right parietal lobe is activated. To summarize – the parietal lobes pull the eyes towards themselves, and the frontal lobes push the eyes away.

Let's imagine that a patient presents with right cerebellar dysfunction as diagnosed by our observations of balance

(cont. on pg.10)

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(cont. from pg. 9)

and coordination. As such, our goal is promote positive neuroplasticity within the right half of the cerebellum and the left cerebral cortex. Thus, we want to isolate and strengthen these weakened pathways. How can we specifically activate these areas of the brain? We play catch! In doing so, we would want the patient to produce a quick eye movement to their right to locate the ball as it's in the air, which activates their left frontal lobe. They then track the moving ball to their left, thus activating the left parietal lobe. And this culminates with the patient catching the ball with their right hand, which activates the right half of their cerebellum. As such, playing catch in this way selectively biases the left cerebral cortex and right half of the cerebellum.

What does this look like in the office? Well, you can be quite creative. I often play catch with my patient(s) using a small, squishy ball. The patient will face me and I'll usually stand approximately 5-12 feet away (depending upon the patient). I start by "warming them up" – which is simply playing catch for a minute or two. And if there is a deficiency in the left cerebral cortex and/or right half of the cerebellum as in the examples listed above. I bias the activity to strengthen these areas (as previously mentioned).

For instance, I would toss the ball off the wall of the treatment room that is located to the patient's right, and the patient would have to catch the ball as it ricochets off the wall and heads towards them. This causes the patient to initiate a right saccade to find the ball once it bounces off the wall (thereby activating the left frontal lobe and right cerebellum). The patient must then track the ball (smooth pursuit eye movement) as it moves across their visual field and toward them (activating the left parietal lobe). And then of course they catch the ball. This is a fun, productive activity that most patients really enjoy. You can also make it more challenging as the patient progresses, such as having them move and/or balance on one leg as they catch the ball. Or the patient can stand on a vibration plate while playing catch. Each of these additional obstacles enhances activity in the cerebellum. Again, you can be quite creative.

I love this activity because it is easy, fun, and cheap. No expensive equipment required! And the patient and their family can easily do this at home. There's a lot to

be said for the simple, playful, and functional activities that many of us do as kids. And as I've tried to explain in this article, many of these activities –specifically playing catch – are not only important for our development but also can be used therapeutically.



James A. Munse, DC, DACNB, MA of Chantilly Chiropractic Center in Chantilly, VA is a Diplomate of the American Chiropractic Neurology Board earned through the Carrick Institute. He is proficient in Full Spine Diversified (Palmer Package), Gonstead, Activator, Thompson, Extremity Adjusting, Flexion-Distraction, and Functional Neurology diagnosis and rehabilitation. In addition to practice, Dr. Munse serves as an adjunct professor at George Mason University and an assistant coach for the Westfield High School varsity football team. He can be reached at jamunse@gmail.com.



**NEW MEMBERS!**

**Ruth Aurand, DC**

Lorton, VA

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Member Type: DC - First Year

**Referred by Dr. Christine Stewart**

**Lynn Carlsen, DC**

Williamsburg, VA

Phone (757) 220-8552

Member Type: Premier

**Referred by Dr. Robert Pinto**

**Shawn Haseley, DC**

N. Tonawanda, NY

Phone (716) 807-2814

Member Type: Out of State

**Brysen Ross**

Richmond, VA

Phone (804) 922-3464

Member Type: Student/New Grad



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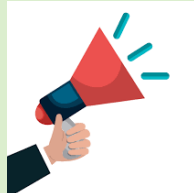
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## Important Member Information

### 2024 Annual Meeting

The annual meeting of the UVCA will be held on **Saturday, September 21st** during the UVCA Fall Convention at the Williamsburg Lodge in Williamsburg, Virginia. If you have any agenda items you would like to request, please contact Dr. Carly Swift, UVCA Secretary, at [drswift@gmail.com](mailto:drswift@gmail.com).

### Call for District Director Nominations

The right to choose your leadership is one of the most integral benefits of your association membership. Please take advantage of this right and duty and participate actively in the election process.

District Director elections will be held during the September 21st annual meeting in Williamsburg. The deadline for nominations is August 20th, 2024.

### Call for Awards Nominations

Help recognize your colleagues who have gone above and beyond to support your profession in Virginia and your association in the past year. The UVCA will be presenting the following awards in conjunction with the Fall Convention:

- UVCA District Director of the Year
- UVCA Chiropractor of the Year
- UVCA Literary Awards

Awards will be presented during the upcoming Fall Convention. Nominations and papers for literary awards are due by August 20th.

Convention registration is not required for qualified members to nominate candidates, run for a position, attend, and vote at the membership meeting, and/or nominate for awards.

**Watch your email for links to nominations forms!**

# Pearls for Practice Success

**One of the most popular sessions at the recent UVCA Spring Convention in Richmond was a panel discussion featuring four successful Virginia DCs representing a range of practice styles and sizes.**

Dr. Eric Carlsen, Director of UVCA District IV, facilitated a discussion between Drs. Chris Perron, Corey Malnikof, Nisha Saggar-Patel, and Minesh Patel.

To get the conversation going, Dr. Carlsen asked each doctor to share his or her top tips. Those “practice pearls” included the following.

Dr. Chris Perron:

1. Define Your Success
2. Discernment
3. Resilience
4. Invest in Yourself
5. Nothing Grows in a Silo

Dr. Corey Malnikof:

1. It all comes from you; you must keep building yourself.
2. Always have a pulse on every aspect of your business.
3. Surround yourself with people one step ahead of you.
4. Build a world class A team.
5. Know your tribe.

Dr. Minesh Patel:

1. A higher tolerance for risk
2. Humility
3. Grit
4. Team mentality
5. Be a perpetual student

Dr. Nisha Saggar-Patel:

1. Adaptability
2. Resilience
3. Critical Thinking Leading to Collaboration
4. Approachability/Empathy
5. “Unreasonable” Hospitality

The resulting discussion provided valuable insights into what has worked – and in some cases what hasn’t worked – for these successful practitioners and businesspeople. The panelists’ frank sharing was emotional at times – and always informative. Attendees left the session with expanded perspectives and fresh ideas.

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- Scroll down to PASSWORD – Click CHANGE and input temporary password and new password then click SAVE.

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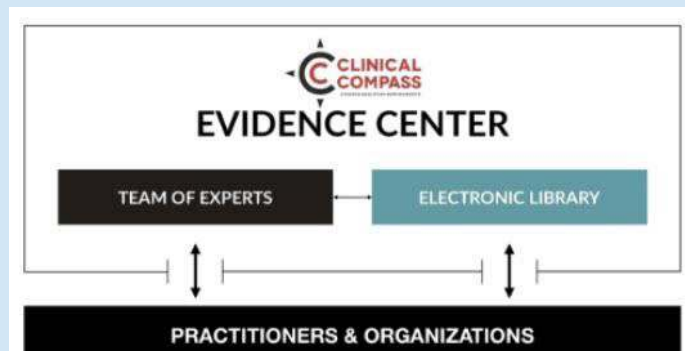
The Clinical Compass mission is to improve patient outcomes by advancing evidence-based care in an effort to transform healthcare through knowledge translation. The Clinical Compass' Evidence Center is the foundation of its outreach to the chiropractic community. It provides practitioners the resources needed to address the real-world issues they encounter in their practices every day. It is an extensive library of research summaries that includes relevant and current peer-reviewed journal articles, either as abstracts or full-text with an annotated bibliography for each topic that is updated twice a year.

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-- BJ Palmer

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# ChiroPAC

This list of contributors is based on income received by 7/9/2024.  
If you have any questions or needs, contact the Virginia ChiroPAC.

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**Dr. Taylor Myers, UVCA Treasurer and Owner of East Coast Elite Chiropractic, has accepted the position as Chair of the Virginia C-PAC ("Virginia ChiroPAC").**

Dr. Myers shares, "It is truly an honor. I believe that in order for Chiropractic to grow and succeed in the future, that we need to understand how the political realm intersects with healthcare nationally. In order to do this, we need to grow our relationships with our local state and federal legislators, and C-PAC plays an integral role in this." He stresses that, "Every single chiropractor should donate to C-PAC to ensure that our profession's future is bright and that the work of those that came before us is not in vain."

**In addition to welcoming Dr. Myers, the ChiroPAC and UVCA leadership extends their sincere thanks to Dr. Brad Robinson, previous ChiroPAC chair, for his valued service.**

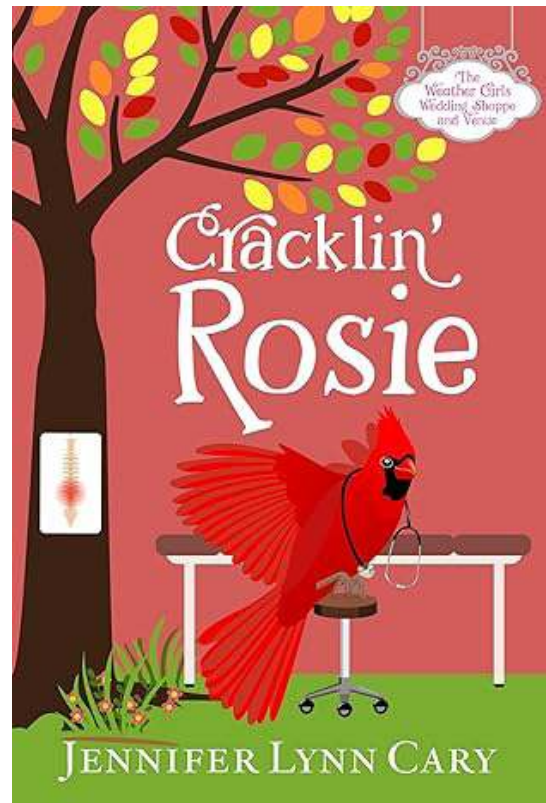


## UVCA Member Linda Larsen Makes the News

Jenny Cary has made a career as an author of young adult romance/comedy books. She and Dr. Larsen attended elementary through high school together. She contacted Dr. Larsen for background material for a novel set in their hometown. Dr. Larsen was able to offer her a history of the strength and character of so many chiropractors, including her dad, who fought to allow chiropractors to practice and to care for their patients. She also informed the author of some techniques and office practices to help provide a realistic view of chiropractic care. Dr. Larsen states, " [Jenny] managed to put all of the information together to create a nice book about a chiropractor that I would love to meet in real life."

In addition to acting as writing consultant, Dr. Larsen is a member of the Maury River Alliance that is working to clean up the beautiful Maury River in her community. The MRA was lucky enough to have an article in *The Washington Post* last recently and then a video on **Fox News Digital**. When she set up for the interview. Dr. Larsen made sure that her dad's diploma, his office sign from the 40s, and office memorabilia that she displays in her office were in the background. Dr. Larsen mentioned, "My dad's name was Emil Larsen but he always went

by E.C or just 'Doc' He had shown his willingness to be outspoken and be brave to keep the profession going when she was a kid. [Displaying his documents] is way to honor him."



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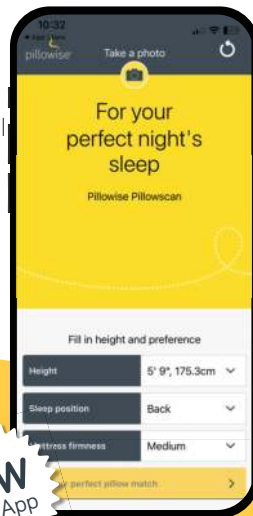


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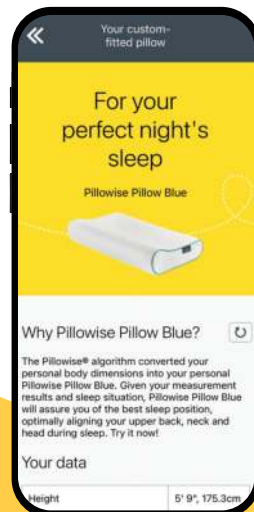
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# Rising Costs: A Growing Concern for Patients

by Ray Foxworth, DC, FICC

Rising healthcare costs are an increasingly pressing issue for many Americans, affecting their ability to access and afford necessary medical care. Among those feeling the strain are patients seeking chiropractic care, who are particularly burdened by the financial implications of their health needs.

## The Financial Burden of Healthcare Costs

A staggering 49 million adults in the United States, including 7.5 million aged 65 and older, consider the cost of healthcare to be a “major burden” on their households. This widespread financial strain is causing significant stress and anxiety, especially as healthcare expenses continue to rise, underscoring the urgency of the issue. (Lopes, Montero, Presiado, & Hamel, 2024)

## Confidence in Financial Preparedness

Nearly half (46%) of U.S. adults have little or no confidence that they will have the financial resources to pay for healthcare as they age. This lack of confidence is not confined to those without Medicare; it affects 33% of eligible individuals for the program. The uncertainty about future healthcare costs is a significant concern, leading many to worry about how they will manage into their later years. (Gallup, 2024)

## Access to Quality, Affordable Healthcare

Access to quality, affordable healthcare remains a significant issue for 31% of Americans, including 20% of those over 65. These levels represent high points in West Health-Gallup polling, indicating a growing number of people who feel they cannot obtain the healthcare they need at an affordable price. This lack of access can lead to delayed treatments, worsening health conditions, and increased healthcare costs in the long run. (Gallup, 2024)

## Impact of Healthcare Costs on Chiropractic Patients

Chiropractic care is essential to many individuals' healthcare routines, providing relief from pain and improving overall well-being. However, the rising healthcare costs are making it increasingly difficult for patients to afford these services. Chiropractors should be aware of the following challenges:

- **Patient Retention:** As healthcare costs rise, patients may forgo or reduce the frequency of their chiropractic visits, which can impact their overall health and the sustainability of chiropractic practices.
- **Education on Preventive Care:** Educating patients about the long-term benefits of chiropractic care and preventive measures is not just about their health, it's about their financial well-being. This can help them understand the value of investing in their health, potentially reducing future healthcare costs.
- **Skipped or Postponed Care:** One in four adults say they have skipped or postponed getting healthcare in the past year due to the cost. Notably, 61% of uninsured adults reported going without needed care because of the price.
- **Health Insurance Worries:** Even those with health insurance are not immune to the burden of healthcare costs. Nearly half (48%) of insured adults worry about affording their monthly premiums, and many rate their insurance coverage as “fair” or “poor” when it comes to premiums and out-of-pocket costs.
- **Widespread Financial Anxiety:** About three in four adults worry about affording unexpected medical bills (74%) and healthcare services (73%). Moreover, about half of adults could not pay an unexpected \$500 medical bill without incurring debt.

Rising healthcare costs are a significant concern for many Americans, including those seeking chiropractic care. Don't let the cost of care become a barrier to care. Schedule a consult with ChiroHealthUSA today to learn how you can implement a profitable discount strategy in your practice. With ChiroHealthUSA, your patients can access affordable chiropractic care while your practice remains profitable.

Dr. Ray Foxworth, DC, FICC, is the visionary behind ChiroHealthUSA, serving as its esteemed founder and CEO. With over 39 years of dedicated service in chiropractic care, Dr. Foxworth has navigated the complexities of billing, coding, documentation, and compliance firsthand. His rich experience includes roles as the former Staff Chiropractor at the G.V. Sonny Montgomery VA Medical Center and past chairman of the Chiropractic Summit and Mississippi Department of Health.

Dr. Foxworth is deeply committed to advancing the chiropractic profession, which is evident through his leadership roles. He is an at-large board member of the Chiropractic Future Strategic Plan and holds an executive board position with the Foundation for Chiropractic Progress.

# Connect with the Unified VCA

There are many ways in which you can help your profession, regardless of your interests or time availability. Reach out to your UVCA leadership at any time to let them know your needs and priorities – and to see how you can help.



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# Seven Ways for DCs to Integrate CBD into Chiropractic Care

by Joe Kryszak (Reprinted with permission from *Chiropractic Economics*, April 22, 2024)



In recent years, the use of cannabidiol (CBD) has surged in popularity as a natural remedy for various ailments, ranging from anxiety and pain to insomnia and inflammation. As our understanding of CBD's potential benefits continues to **evolve**, many doctors of chiropractic are exploring ways to incorporate this compound into their treatment offerings. By combining the principles of chiropractic care with CBD's therapeutic properties, practitioners can offer patients a more comprehensive approach to holistic wellness.

## A CHIROPRACTIC COMPLEMENT

Chiropractic care focuses on the relationship between the body's structure — particularly the spine — and its function. DCs use hands-on spinal manipulation and other alternative treatments to properly align the body's musculoskeletal structure, aiming to alleviate pain, improve function and support the body's ability to heal itself. CBD, on the other hand, interacts with **the body's endocannabinoid system**, which plays a crucial role in regulating various physiological processes, including pain sensation, mood, appetite and inflammation.<sup>1</sup>

When integrated thoughtfully, CBD can complement chiropractic treatments by addressing underlying issues, such as inflammation and pain, thereby enhancing the overall effectiveness of the care provided. Here are several ways DCs can incorporate CBD into their clinics:

**1. Educational workshops and resources:** DCs can educate patients about the potential benefits of CBD through workshops, informational materials and one-on-one consultations. By providing evidence-based information about CBD's mechanisms of action and its

potential therapeutic applications, DCs can empower patients to make informed decisions about their health and wellness.

**2. CBD topicals for pain relief:** CBD-infused topical products, such as creams, lotions and salves, can be used to target localized pain and inflammation. According to the National Institutes of Health, "CBD is non-psychoactive but exerts a number of beneficial pharmacological effects, including anti-inflammatory and antioxidant properties."<sup>2</sup> DCs can recommend these products to patients suffering from conditions, such as arthritis, muscle strains or sports injuries. When applied directly to the skin over affected areas, CBD topicals can provide targeted relief without the psychoactive effects associated with tetrahydrocannabinol (THC), another compound found in cannabis.

**3. CBD supplements for overall wellness:** DCs may also recommend CBD supplements, such as capsules, tinctures or edibles, to support patients' overall health and well-being. CBD supplements can help manage stress,<sup>3</sup> improve sleep quality<sup>4</sup> and promote relaxation, which are essential components of holistic wellness. By incorporating CBD into their daily routine, patients may experience a reduction in pain, inflammation and other symptoms associated with musculoskeletal issues.

**4. Collaboration with CBD specialists:** DCs can collaborate with their CBD suppliers, who specialize in CBD therapy, to provide comprehensive care for their patients. By working together, DCs and CBD specialists can develop personalized treatment plans tailored to each patient's unique needs and goals. This collaborative approach ensures patients receive the most effective and well-rounded care possible, addressing both structural issues and underlying physiological imbalances.

**5. Research and evidence-based practice:** As with any healthcare intervention, it's essential for DCs to stay informed about the latest research and evidence regarding CBD's efficacy and safety. By staying abreast of emerging studies and clinical trials, DCs can make evidence-based recommendations to patients and refine their treatment protocols accordingly. Additionally, conducting research within their own clinics can contribute to the growing body of knowledge surrounding CBD and its therapeutic potential.

**6. Patient monitoring and follow-up:** DCs should closely monitor patients' progress when incorporating  
*(cont. on pg. 26)*



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(cont. from pg. 24)

CBD into their treatment plans. Regular follow-up appointments allow DCs to assess the effectiveness of CBD interventions, make any necessary adjustments to the treatment plan and address any concerns or questions patients may have. Open communication between DCs and their patients is key to ensuring optimal outcomes and patient satisfaction.

**7. Legal and regulatory considerations:** DCs must familiarize themselves with the legal and regulatory landscape surrounding CBD use in their jurisdiction. While CBD products having less than .3% THC are federally legal, some states have specific requirements regarding production, distribution and marketing; these rules vary widely. DCs should ensure that the CBD products they recommend to patients meet quality and safety standards and comply with applicable laws and regulations.

#### FINAL THOUGHTS

In conclusion, the integration of CBD into chiropractic care represents a promising avenue for promoting holistic wellness and improving patient outcomes. By leveraging the therapeutic properties of CBD alongside traditional chiropractic treatments, DCs can offer patients a more

comprehensive approach to addressing pain, inflammation and other musculoskeletal issues. Through education, collaboration and evidence-based practice, DCs can harness the full potential of CBD to support their patients' journey toward optimal health and well-being.

JOE KRYSZAK, MBA, is president of Stirling Professional CBD, the brand built by and for doctors of chiropractic. Stirling gives back to the chiropractic industry through state and national chiropractic associations. Since 2014, Stirling has grown, extracted and produced the purest CBD available and offers an industry-leading lineup of 2,500-milligram CBD lotions, THC and THC-free capsules and gels, and four great solutions for better sleep, bringing patients affordable solutions. For more information, visit [stirlingprofessional.com](https://stirlingprofessional.com).

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- UVCA (history, mission, leadership, governance)
- Member Benefits, Applications, Affinity partners
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COVERAGE: Hampton Roads Area. I am available for coverage on: Tuesday mornings, Thursday and Saturday's all day, in the Hampton Roads area: Chesapeake, Norfolk, Hampton, etc. I have 23 years of experience and I am proficient in most techniques allowing me to keep consistent care for your patients while you are away. I am fully insured with NCMIC. Please give as much notice as you can (2 week min. usually). If you are interested, Thank You. email me @ DC2BME@AOL.COM.

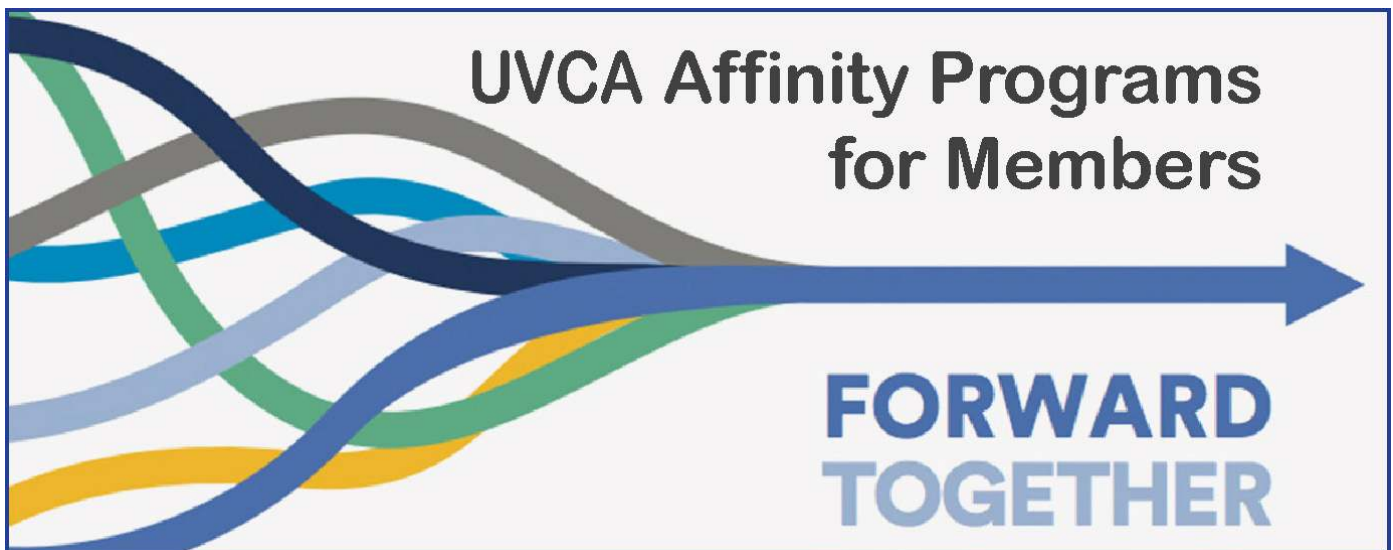
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**DC POSITIONS**

DC POSITION AVAILABLE: Arlington, VA. Student or New Doctor, Will mentor. Open office specializing in Sports & Rehabilitation. Office therapies: Massage, Muscle Activation, Traction/Decompression, CRYO-LEAN 360, Cold Laser & Pulsed Energy (PEMF). Located 10 minutes from D.C. Highly rated and voted Arlington's Best 8 years straight. Wanting to retire soon, the office will be turned over to you. Salary + % patients seen, 401K, 1 week paid vacation, Malpractice insurance + moving bonus. Email resume to info@jacobschiro.com.

DC POSITION AVAILABLE: Arlington, VA. Are you a dedicated and skilled chiropractor looking for an exciting career opportunity with future ownership potential? We are seeking a chiropractic associate to join our successful family practice in an affluent area. What We Offer: Work in a highly reputable, cash-based family practice, Fully equipped office space with tables, Comprehensive scheduling and front desk services,

*(cont. on pg. 29)*



**Affinity programs provide members with cost savings and/or product/service enhancements, increasing membership value. These programs often also include a contribution to the association, helping to reduce its dependency on dues income. The UVCA does not consider affinity program proposals until it has first-hand experience with the organizations and solid feedback from the profession.**

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*(cont. from pg. 28)*

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DC POSITION AVAILABLE - Blacksburg, VA. Seeking Chiropractors to Join Our Group: Tuck Chiropractic Clinic is setting a new standard in patient-focused chiropractic care in Virginia. We want to help our patients feel better and to live with less pain! We are seeking a full time Doctor of Chiropractic for a fellowship position. Our clinics are in long-standing locations, with an established patient base in the local community. Position Summary: The foremost responsibility of a Fellow is to master all fundamentals necessary for the day-to-day operations of our clinics. This will involve working in conjunction with local clinical staff to provide high-quality patient care. The Fellow will begin to learn the requirements of leading a successful practice as defined by Patient Experience, Clinical Care Delivery and Outcomes, and Financial Sustainability. Visit the Careers page on our website at tuckclinic.com for more information and to submit your resume.

DC POSITION AVAILABLE: Chesapeake, VA. Chiropractic office in Chesapeake Virginia looking for an associate or independent contractor to join our team. We are a well-established, 33-year DC/PT clinic that offers Chiropractic, Physical Therapy, Massage Therapy, Laser Therapy and Nutrition. We are looking for an additional D.C. who is wanting/willing to put in the work to become successful in our wonderful profession! Good bedside manner, adjusting skills and a Virginia license is all that is required. We will provide all the training, staff, marketing and support you need. We offer generous compensation and a drama free work environment. This position is perfect for a new grad or even a seasoned doctor. Live, work and play by the beach! Kindly call or text Dr Schaier @ 757 641-0991 to learn more!

DC POSITION AVAILABLE: Fairfax, VA. The Roselle Center for Healing has an immediate opening for a chiropractic associate. Work for the premier chiropractic integrative / wellness

clinic in the mid-Atlantic area. Must have excellent adjusting and communication skills and a desire to work with other professionals in restoring patient health. Learn from the best in chiropractic. Basic AK is a plus, but not necessary-- Salary, bonus, mal-practice, health insurance contribution, 401k and paid vacation. Send resume to: drtomroselle@gmail.com. Check us out at www.rosellecare.com.

DC POSITION AVAILABLE: Ft. Washington, MD. Kaizo Health, a rapidly growing Chiro, PT & Rehab co is looking for highly skilled, ethical DCs w/exc clinical, interpersonal & comm skills. Competitive salary, bonus structure, benefits plan inclusive of health, dental, life, long term disability insurance as well as cont ed benefit, 401K match, ownership plan, more. For more info, pls contact Dr Jay Greenstein at drjay@kaizo-health.com.

DC POSITION AVAILABLE: Montpelier, VA. Holistic Rural Practice near RVA Seeks Associate; Join Our Office Family. Candidates possess strong people skills, humor, with extremity adjusting & nutrition preferred. We find satisfaction in what we do daily, you should too. Patients are more than a spine, we treat the whole person. Competitive Salary, Bonuses, Benefits (malpractice, health ins., vacation/sick/personal days, etc), UVCA (state association) membership paid. Grow with us! <https://montpelier-family-chiropractic.careerplug.com/j/01z2zrm>

DC POSITION AVAILABLE: Midlothian, VA. Associate Doctor Midlothian VA - Amazing opportunity to join an established practice, focused on health, wellness and families. Looking for a passionate doctor who can effectively explain the importance of chiropractic. Will train and help with success. Adjusting skills: for spine and extremities, with interest in rehab, soft tissue techniques a plus. Competitive compensation with benefits, where doctors work a five-day work week. Send CV to chirocandidate@gmail.com.

DC POSITION AVAILABLE: Northern VA / Falls Church. Seeking a 3rd doctor to join our amazing team. Established practice of 30 + years looking for an associate for long term, potential buy in/out opportunity. Owner looking to cut back and needs someone with good hands and a great heart for serving. Diverse practice : Athletes, PI, Work Comp, pediatrics / family care. Acute and wellness population. Exercise Rehab and nutrition incorporated in Tx. plans. Experience with rock blading, Ktaping, orthotics and dry needling is helpful. Spanish speaking a big +. email resume to: drdamato@qualitychirova.com. Malpractice, Continuing Ed., Vacation/PTO time, salary +  
*(cont. on pg. 30)*

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bonus all part of your benefit package.

DC POSITION AVAILABLE: Northern Virginia / Richmond. The Joint Chiropractic in Northern Virginia/Richmond is looking for full time & part time Drs. All cash practice, great adjustment skills required. Competitive Salary & great environment w/ benefits & bonuses. Please email your CV to Dr Ahmed Migdadi amigdadi1988@gmail.com or fax to (888) 503-7522.

DC POSITION AVAILABLE: Williamsburg, VA. \$85,000.00 - \$95,000.00 per year +Benefits Evidence Based Practice, Interdisciplinary Collaboration, Active and Passive Therapy, SMT, Therapeutic Exercise. This position requires routine communication with primary care physicians, pain management specialists, orthopedic surgeons, neurosurgeons, neurologists, physical therapists, and other healthcare professionals. Contact: Info@spinecenterofwilliamsburg.com

DC POSITION AVAILABLE: Woodbridge, VA. Associate wanted for well established single doctor practice in Woodbridge, Virginia. Chiropractor will be managing doctor; owners near fully retired. Six figure minimum with production bonuses. Must have VA license Call 301-332-9492 (Alt.# 703-402-9092)

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PRACTICES: Chesterfield, VA. Reputable 44 year chiropractic and acupuncture practice. Retiring doctor looking for someone to take over his low overhead, high income practice. Averages approximately 30 patients a day. Located in a great area central

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to the Richmond and tri-cities areas. Very reasonable financing options. 804-233-9244 midchiropractic@gmail.com

PRACTICES: Farmville, VA. Great location for lease or sale in the hip and historic, two-college small town of Farmville. Farmville is as fun and cool as small towns get: restaurants, breweries, great walking, running and biking with Rails to Trails right through town. It has one of the biggest furniture stores on the east coast and is the home of two award-winning colleges, Longwood University and Hampden-Sydney College, bringing in lots of students, athletes, professors and college energy. It is the biggest medical and commerce hub for over 50 miles in any direction. This office has high visibility, located right on one of the main roads into town and just a block from the hospital. The office has been completely renovated inside and out, has ample parking, geothermal HVAC and was repainted just this year. Mature and maintained professional landscaping around the building, it has a brand new deck out back overlooking a beautiful wooded area. It is across the street from Wilkes' Lake and Farmville's beautiful public library. 2,138 SF all set up for a professional office with a beautiful waiting room, receptionist space, several office rooms and connected patient rooms. For more information contact missyd57@gmail.com.

PRACTICES: Midlothian, VA. 28 year old established practice for sale. Collecting between 400-500k year 3 days per week. Owner financing available. Easy terms. Email: steelerooney@gmail.com

PRACTICES: Northern VA (Loudoun County). Reputable, well-established 29- year-old practice is ready to welcome its new owner. The current owner is relocating and looking for a passionate, confident, young-at-heart doctor who wants to continue providing quality care to its long- time committed patient base. The practice is currently open 3 days per week collecting an average of \$227,000/year with potential for more growth by adding additional days. This spacious and inviting office has rooms available to add other income generators like massage therapy and acupuncture. The owner is flexible to stay for smooth transition. For more information contact: Mark Irion, Senior Partner at Transworld Business Advisors. mirion@tworld.comor 202-949-2009.

PRACTICES: Richmond, VA. Boutique chiropractic clinic in the heart of Carytown for sale. I build it up from the ground just before covid in 2020 and am ready to move out west to California in a few months. The business is setup a little differently than other clinics where I see patients for about 15 minutes each and provide soft tissue therapies as well as

adjustments as needed. This has allowed the clinic to grow easily and bring in a higher fee per visit. Currently we accept most insurances and work under small care plans and then transition into wellness care. The location is only under lease until end of November but you can negotiate a new lease or move elsewhere. Willing to sell just the patient records and demographics as well. Please email Rusty@ChiroFactorVA.com.

PRACTICES: Virginia Beach, VA. Chiropractic Office In Virginia Beach For Sale Established Practice over 40 years Dr. is Retiring will stay on for smooth transition. Chiropractic services account for 65 percent and Massage services the remaining 35 percent are strictly cash. Collections last year were \$391,000.00 with no advertising dollars spent with earnings from repeat customers and referrals. Just minutes from the beach! Call or Text 757-630-1575.

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SPACE AVAILABLE: Fredericksburg, VA. One room (approx. 11x12) for lease in healthcare office located in downtown Fredericksburg for 27 years. Please contact Christine Thompson for more information. cthompson@whole-health.net 540-809-4223

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*\*As of July 2024*



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# UVCA Education & Events for DCs & Their Teams

## Friday-Sunday, August 2-4 - LIVE/IN-PERSON

### Dry Needling Institute 20-Hour Certified Training Course - Dr. David Fishkin

Each 3-day weekend session provides full certification.

Friday 12:00 PM – 6:00 PM Saturday 8:00 AM–6:00 PM. Sunday 8:00 AM - 2:00 PM

## Thursday, August 8, 1:00 PM - 2:00 PM - LIVE SOCIAL EVENT

District II Connection - Northern VA, Ashburn Village

### Lunch at Rubino's 2<sup>nd</sup> Thursday

RSVP to Dr. Will Sonak, drwill@lifewellnessnova.com or just stop by.

## Thursday, August 8, 12:30 PM - LIVE SOCIAL EVENT

District V Connection - Hampton Roads, VA

### Cantina Laredo, 4505 Commerce St., Virginia Beach

Lunch and drinks will be available for purchase

To confirm your attendance, kindly RSVP at [Eventbrite Link](#)

For more info, contact: Ainsley Hendon Flynn, D.C., 517-242-9728

## Tuesday, August 20, 7:00 PM - 8:00 PM - LIVE WEBINAR

### The Craniocervical Junction & TMJ Pain: Treatment Strategies - Dr. Nelson Marquina

The webinar describes treatment strategies to incorporate into your chiropractic program.

## Thursday, September 12, 1:00 PM - 2:00 PM - LIVE SOCIAL EVENT

District II Connection - Northern VA, Ashburn Village

### Lunch at Rubino's - 2<sup>nd</sup> Thursday Lunch

RSVP to Dr. Will Sonak, drwill@lifewellnessnova.com or just stop by.

## Friday, September 20-22 - LIVE/IN-PERSON

### 2024 UVCA Fall Convention at The Williamsburg Lodge, Williamsburg, VA

Don't miss this time - and cost-effective opportunity to reunite with your Chiropractic colleagues and friends, learn new skills, gain important education and profession updates, earn CEUs, strengthen teambuilding, and explore the exhibit hall. Features joint DC/CA classes as well as DC- and CA-specific programming. CEUs approved for VA, MD, and DC.

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- **Human Trafficking by Joe Kryszak** - FULFILLS VIRGINIA CEU REQUIREMENT
- **Medicare for Chiropractic Offices: From A to Z** by Lisa Maciejewski-West, CMC, CMCA-EM, CMOM, CMIS, CPCO
- **UVCA CA Training Program** by Louis Crivelli, DC
- Rad Tech Ltd. Training Program & Exam by York Technical College & ACRRT
- Monthly Subscription CA Training from Assistants for Chiropractic Excellence
- DOT Testing through TeamCME & NYCC

## UVCA Supporting Supplier Programs

Visit the calendar on UVCA's website for programs & events from supplier members.

For more details, updates, and/or to register, visit the [Calendar of Events at www.virginiachiropractic.org](#)

## The Virginia Voice

Summer 2024

The Virginia Voice is the quarterly newsletter of the Virginia Chiropractic Association, dba Unified VCA, PO Box 15, Af-ton, VA 22920, [virginiachiropractic.org](http://virginiachiropractic.org).

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## Dues & Taxes

We estimate that 78% of VCA dues are not deductible as a charitable contribution, but may be deductible as ordinary and necessary business expense. The remaining 22% is allocated to lobbying expenses and is not deductible. Further info. should be obtained from your tax advisor.