

The Virginia Voice

Fall 2019

New President's Message

am humbled and flattered to take on the role of president of our UVCA.

Becoming president was never an intention of mine but instead it seemed to happen by inertia. This momentum stemmed from starting to show up and contribute in whatever way I could, as many of you do. This led to learning about how amazing our leadership was, and is, in terms of genuinely good people with big hearts for our profession. They created an atmosphere that I wanted to be a part of.



It is said that leading volunteers is the most difficult form of leadership because the only thing you have to motivate people with is the cause. My predecessors, in particular Drs. Dolberg, Wetzen, Robinson, and Ward, have truly created an amazing association that I believe we are all proud to be a part of. My goal is to leave it even better than when I showed up, which is no small task. With a great leadership team in place -- Drs. Rose, Sonak and LaBarbera, as well as many others -- I am confident we will make practicing chiropractic in Virginia even better, for the benefit of our communities. This can only happen through the success of the individual doctors and that is why <u>you</u> are the focus of our efforts. Your success is not just good for you and your patients but for all of us.

Thank you for this opportunity!

Christopher R. Perron, DC President, UVCA

Outgoing President's Message

My Greatest Honor

The torch of UVCA leadership was handed off to a new board and your new President, Dr. Chris Perron, following the Executive Committee elections held at the UVCA convention in Williamsburg on September 21. Dr. Rose, Dr. Sonak, and Dr. LaBarbera round out the committee as I ascend to Immediate Past President and Dr. Wetzen leaves the board and continues his fine leadership with ChiroCongress.

I thank you for allowing me to be your president for the past four years. I am proud of the many accomplishments our board achieved during that time, and I acknowledge that there is continuing work to be done. It is always best to move forward with fresh ideas and inspired energy. Thus, I have the highest *Continued on page 3*

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Fall Convention Pics Pgs. 26-29!

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Supporting Supplier News

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Bill Hopkinson, president of CBC Inc. & VCS Inc. was awarded MDHBA's Lifetime Achievement Award at its annual conference October 11, 2019 for contributions to the medical accounts receivable industry. In addition, CBC Inc. & VCS Inc. was nominated as a Top 25 Most Innovative Agency by Receivables Advisor magazine.



Stirling Oil is offering a special promo through the end of November! Stirling Oil will donate 10% of every new customer's purchase and 5% of any existing customer's purchase to the UVCA Legal & Legislative Fund. Every new customer will get the same Show Special that Stirling Oil offered at the

recent Fall Convention in Williamsburg. CBD from Stirling Oils is currently in 10+ Virginia chiropractic offices. Visit www.stirlingcb-doil.com.

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confidence in the stability and the gains of the UVCA in the near future.

The honor of leadership should not be limited to the few. The business of the UVCA functions well by paid staff and great management by our Executive Director, Julie Connolly. The vision of the association must come from you, the Docs in the trenches.

John Quincy Adams said, "If your actions inspire others to dream more, learn more, do more and become more, you are a leader."

I implore every UVCA member to look into your own soul and pledge to give back to the advancement of chiropractic. With that



being both my first and final goal, and knowing that great leaders will continue to emerge, I give thanks to you for my greatest honor.

David B. Dolberg, DC

David B. Dolberg, DC Immediate Past President

Dr. Dolberg with his second grandchild, Kole, born October 17, 2019.

Exam is Key

By Mark A. King, DC & Jason R. Placeway, DC

Many in the modern manual therapy world emphasize the need for a patient examination that pinpoints the best treatment approach. Craig Liebenson, DC, for example, in his Spinal Rehabilitation, 2nd edition, textbook places importance on patient categorization for condition specific treatment, hence better clinical outcomes. A study titled "Sub-grouping Patients with Low Back Pain: A Treatment Based Approach to Classification," August 23, 2011, in the online version of Sports Health: A Multidisciplinary Approach was discussed in The Chiropractic Report, from November 2011.

This study was about categorizing low back patients, although we suggest this concept can apply to other areas as well. In your exam of a patient with low back pain, would they respond best to adjustments, spinal stabilization, an anti-inflammatory diet, soft tissue, end range loading, or traction? The percentage of low back pain patients who improve with conservative care improves from 50% with only manipulation to 95% when properly categorized and subsequently specifically treated.

There are lots of classes, books, articles and colleagues to help teach this information if this is a new concept. Dynamic spinal evaluation for joint dysfunction/fixation is foundational for DCs. The need for spinal stabilization is nicely screened with gait evaluation and functional screens; e.g., active straight leg raise test or hip extension test. End range loading; i.e., McKenzie screens, can help you discover if end range loading is going to be your most clinically effective and time efficient approach. Traction is a treatment tool that can help certain patients, especially when other conservative treatment fails. Examination findings are less clear for traction, but some of you reading this routinely use decompression traction and like its clinical effectiveness.







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It is very important to do a thorough patient history including prior treatments. Have they been to another DC, adjustments performed and no improvement noted? Has your patient been to a therapist who did stabilization exercises, but only aggravated the patient's condition, or a McKenzie practitioner who could not help the patient either? If previous treatment has failed, look more closely at a different approach. The Abraham Maslow quote, "If your only tool is a hammer, then everything looks like a nail" is a great line to keep in mind.

After your thorough history and examination, treat the big findings, the obvious things, first. For example, if someone with a lumbar radiculopathy centralizes with end range extension and has stiff illifemoral joints and T/L junction, start with working on those things.

One area not part of this study that we feel is a key clinical issue is poor nutrition and chronic inflammation. A patient who is in a pro-inflammatory state simply does not heal as well as a nutritionally healthy person. Give your patient the best chance to recover by helping them understand the importance of what they eat and drink for healing.

It is a new ballgame out there in the health care world. We need to strive for clinical effectiveness in a time efficient manner. The majority of your patients are paying for care with their own hard earned cash, so they want and need results. Clinical mediocrity is a recipe for failure. As we go forward, the cream will rise to the top and the scams to increase collections will be harder to come by.

Len Faye, DC often asks the question, "Who went to chiropractic school to be mediocre?" Hopefully, not you. Learn to perform an excellent exam, learn to perform the best, most appropriate treatment; and learn to do this in an efficient manner. Remember to give your best to your patients and build the practice of your dreams.

Dr. Mark King (below right) and Dr. Jason Placeway (below left) practice at Mt. Lookout Chiropractic and Sports Injury Center in Cincinnati, Ohio. Dr. King may be reached at DrMK-ing@MtLookoutChiro.com. Dr. Placeway may be reached at DrPlaceway@MtLookoutChiro.com. Dr. King conducted an eight hour class on "MPI Lumbopelvic Mobility & Stability" at the Unified VCA's recent fall convention in Williamsburg.





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elevate your practice, email customersupport@kaizenovate.com to set up your free walk-through.



In preparation for her upcoming ACA webinars ("An Audit from the Inside" on 4/2/2020 and "Step-By-Step Success: An Implementation Strategy for Compliant Documentation" on 6/4/2020), Dr. Ellen Fitzenrider hosts webinars

about "ALL THINGS AUDIT." Replays at https://www.facebook.com/DrEllenFitzenrider/ and https://itsmedre.com/blog.



Prepare for Microsoft Support Changes

By Moe Talash

Just as Microsoft ended support of Windows XP in 2014, it is officially ending support of Windows 7 in January of 2020. Therefore, you must either upgrade from Windows 7 to Windows 10 or replace it with a new Windows 10 PC to be HIPAA compliant and protected from hackers.

Windows Server 2008 and Windows 2011 are also expiring in January, so please check with your IT professional sooner rather than later to discuss replacing these. In just three months, Microsoft will no longer provide extended -- or even paid -- support for these.

Here is a link from Microsoft for more details:

https://mycomputerexperts.net/2018/12/21/say-goodbye-to-windows-7-server-2008-r2-small-business-server-2011/.

It's important to plan ahead. It's not quick and easy to switch computers over to Windows 10, since you might need to migrate data and licenses.

If your PC has less than 4gb of RAM and is 4 or more years old, it's best to replace the unit; otherwise, consider an upgrade. If you are planning to purchase a new PC with Windows 10 (instead of just upgrading your software from Windows 7 to Windows 10) and your budget allows, I recommend you purchase a PC with a Solid State Drive (SSD) instead of a traditional hard drive. It performs better with Windows 10 and is faster. Server units are not really upgradeable and we do not recommend trying to do so. It's best to



entirely replace your server unit with a brand new one.

Note: Vendors like ChiroTouch and Eclipse will also be very busy during this time period, since they will be helping their clients with database migration. Scheduling with them may get tight at end of the year, as well.

Mr. Moe Talash is an IT Consultant and owner of Computer Troubleshooter Business Solutions. He can be reached at 703-820-6972.



UVCA Members Elect New Officers

Dr. Jeff Bowers, Unified Virginia Chiropractic Association (Unified VCA or UVCA) nominating committee chair, conducted officer elections at the General Membership Meeting on Saturday, September 21. The elections were held in conjunction with the Fall Convention at The Williamsburg Lodge, Williamsburg, Virginia.

The following doctors were unanimously elected.

- Dr. Will Sonak, Secretary (bio at https://www.vafamilychiropractic.com/page/doctor.html)
- Dr. AJ LaBarbera, Treasurer (bio at https://tuckclinic.com/ doctors/a-j-labarbera/)
- Dr. Michelle Rose, Vice President (bio at https://www.greenrunchiropractic.com/page/doctor.html)
- Dr. Christopher Perron, President (bio at https://perronchiro.com/meet-the-chiropractor.html)

Dr. David Dolberg moved to the position of Immediate Past President and Dr. Tom Wetzen moved off the board.

Dr. Aaron Trochim has been appointed to serve the remainder of Dr. LaBarbera's term as director of district 3-West.

Dr. Perron shared, "I am excited for the opportunity to serve as president of our UVCA. I look forward to continuing to build upon the great foundation that has been set in place by my predecessors, and all the great volunteers that continue to work on behalf of our great profession."

For leadership contact information, visit the Unified VCA's web site and click on "Leadership and Staff" under the "About UVCA" tab.

2019 Awards Announced

The following awards and recognition were presented at the UVCA awards dinner part in Williamsburg on September 21st.

Tuck Chiropractic Clinic received the John Stoke Literary Award for its May 6, 2019 article in *The Roanoke Times* entitled "A Team Approach to the Opioid Epidemic."

Eric R. Carlsen, DC was named District Director of the Year for his work in bringing central Virginia chiropractors together and his commitment to making UVCA stronger and relevant.

Ms. Susan McClelland was coronated as "The Chiropractic Profession's Reigning Queen." She was congratulated for her recent retirement from the chiropractic profession and thanked for her 30-some years of service.

The UVCA leadership and members, led by Dr. Lee Matthis, expressed their gratitude to Dr. David Dolberg for serving as president the past four years. Thanks in no small part to Dr. Dolberg's efforts:



- The first week in October was named Chiropractic Health Week in Virginia,
- · We've increased communications with NoVa legislators,
- We've established a silent auction each spring to add fun to the convention and raise funds for chiropractic PR.
- We have expanded leadership training and support.
- We have implemented hotel points programs that are enabling us to do more.
- We have kept the strategic planning going.
- And more.

Dr. Dolberg served two terms as Treasurer prior to his election to President. He was named Chiropractor of the Year in 2012. Rumor has it that the only thing he would like better than being a Virginia Chiropractor would be to be the Chiropractor for the New York Yankees!

Below: Outgoing President Dr. David Dolberg receives a standing ovation at Fall 2019 Convention in Williamsburg.



Premier Membership Update

As of 10/23/19 Marco Accordo, DC E Briggs Allen, Jr, DC Michael Amato, DC Lee Bazzarone, DC Anna Bender, DC Robert Berube, DC Walter Bogdan, DC Jeffrey Bowers, DC Shannon Breeding, DC Daniel Cohen, DC Christopher Connolly, DC Philip Connolly, DC Camille D'Amato, DC Gary Dennis, DC Diane DeReu-Foley, DC David Dolberg, DC Theresa Dunton, DC Sandra Elbaum, DC Christine Fallwell, DC William Todd Fisher, DC Joseph Foley, DC Christopher Frey, DC Lincoln German, DC Tess Graf, DC Jay Greenstein, DC Lawrence Griffith, Jr, DC Mark Gutekunst, DC Alicia Haupt, DC Thomas Hennessey, DC

Hannibal Hervey, DC Lisa Holland, DC Duane Hudspath, DC Mark Hundley, DC Carmen Johanning, DC Vincent Joseph, DC Min Koo Kang, DC Shawn Keegan, DC Joseph Kennedy, DC Elizabheth Koch, DC Ronald Kulik, DC AJ LaBarbera, DC Linda Larsen, DC Edward Lauterbach, DC Robert Leib, DC Bryan Lowry, DC Marc Lunenfeld, DC Katrina Mah, DC Lee Matthis, DC Kat Mayes, DC James McLelland, DC David Milot, DC Bibhu Misra, DC Theresa Neiss, DC Cally Parks, DC Mathias Pastore, DC Minesh Patel, DC Christopher Perron, DC Janice Piedmont, DC Anne Pinto, DC

Robert Pinto, DC Richard Reinhold, DC Andrew Reno. DC Brad Robinson, DC William Roodman, DC Nisha Saggar-Patel, DC Jean-Luc W. Sansfaute, DC Theodore Savvas, Jr, DC Joanne Schmit, DC Matthew Schrier, DC Andrew Shepherd, DC J. Randall Short, DC Elizabeth Skorupa, DC Lonnie Slone, DC William Sonak, DC Samuel Spillman, DC Christine Stewart, DC Robert Stickle, DC Lawrence Svihla, DC Susan Sweeten, DC Carly Swift, DC Eric Terrell, DC Robert Thoma, DC Nguyen Tran, DC Aaron Trochim, DC Paul Tschetschot, DC Ray Tuck, Jr, DC Chris Virusky, DC NEW Kevin Walsh, DC William Ward, DC

Erika Warner, DC
Thomas Wetzen, DC
Joshua White, DC
M Scott White, DC
Daniel Whitenack, DC
Rebecca Wilder, DC
Adam Wilding, DC
Casey Wille, DC
Howard Wilson, DC
Stephen Wolford, DC
Jeffrey Wynn, DC
JeYoung Yun, DC

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Contributors

An updated contributor list will follow by blast email on or about November 6th.

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- 1. Go to www. virginiahchiropractic.org
- 2. Click on "Legislation" tab
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Clinical Applications of the Cerebellum

By: James A. Munse, DC, DACNB, MA

The cerebellum (also known as the "little brain" in Latin) is an area of the hindbrain that controls an array of functions such as movement coordination, balance, equilibrium, muscle tone, and various aspects of speech and cognition. In fact, on-going research continues to unveil the increasing role that the cerebellum exerts on almost all other neuronal systems. As such, the cerebellum is an extremely important area of the brain for clinical application. Due to the complexity of the cerebellum, this article will only provide a summary of cerebellar function and evaluation – which should prove relevant and helpful in clinical practice. The article will conclude with an introduction regarding rehabilitative techniques for the cerebellum – this topic will be continued and expanded upon in future articles for this publication.

The most explicit function of the cerebellum for clinical testing is its role in coordinating voluntary muscle contractions (and thus the focus of this article). To make a given movement – the brain must know where a particular body part "starts from" in order to orchestrate the sequence, rate, and force of muscular contractions to get from one point to another. For instance, musculoskeletal proprioceptors inform the cerebellum about extremity positioning and movement, as well as about joint angulation and the length and tension exerted on the muscles. Because of this proprioceptive input – the cerebellum coordinates muscle contractions to produce steady voluntary movements and postures. Consequently, clinical tests for cerebellar dysfunction expose unsteadiness of voluntary movements and postures.

There are five "cardinal signs" of cerebellar dysfunction. This includes the following: ataxia, intention tremor, postural tremor, hypotonia, and asthenia. To make this easier – just remember that the clinical manifestations of cerebellar dysfunction are that of a drunk person! They will often have a nystagmus, speech difficulties, poor balance, poor coordination, an unsteady and broad-based gait, an intention tremor, low muscle tone, and personality changes. As such, if a patient exhibits signs of cerebellar disease – the metabolic state of the patient must be considered. The cerebellum and the basal ganglia are the most metabolically active regions of the brain, and thus receive the most blood. If toxins are present in the blood supply (like alcohol), then it will likely influence the cerebellum. Therefore, signs of frank cerebellar disease should be

accompanied by laboratory work to confirm or rule out metabolic causes of neurological dysfunction.

Cerebellar dysfunction is ipsilateral to the patient's symptomatology. Consequently, if there appears to be cerebellar dysfunction on the patient's left side of the body – then the left side of the cerebellum is affected. It should also be noted that the cerebellar hemispheres communicate with the opposite (or contralateral) cerebral cortex. Thus, the left cerebellar hemisphere communicates with the right cerebral cortex. And since each cerebral hemisphere controls the opposite side of the body – the right cerebral hemisphere and the left half of the cerebellum hemisphere maintain the integrity of voluntary movement on the left side of the body.

Many physical exam procedures can be utilized to evaluate the cerebellum. A complete list of these procedures (with their interpretation) is beyond the scope of this article; as such, I will briefly discuss four physical exam procedures that can be easily utilized in any chiropractic office. The information in the previous paragraph can give you the clinical impression that cerebellar dysfunction is present. However, we want to determine which side of the cerebellum is affected - because this will influence our treatment options. The first physical exam procedure is the Romberg exam. The patient stands with their eyes open in a narrow-based stance, and then you ask them to close their eyes... look to see which direction the patient initially sways towards. The direction of initial sway is the side of cerebellar dysfunction. As such, if they close their eyes and sway to the left - then there could be left cerebellar dysfunction. A more thorough explanation of the Romberg exam can be found in the winter issue of this publication. A second cerebellar test can be the one leg balance test. The patient stands on one leg with their eyes open, and then again with their eyes closed (the procedure is performed bilaterally). The leg with the most instability correlates to the side of cerebellar dysfunction. The third test is a "rapid alternating movement" (RAM) test. Have the patient sit and tap their thigh with their hand - by supinating and

pronating their forearms to strike their thigh in an alternating fashion between the anterior and posterior aspects of their hand. The patient does this as fast as they can for about 10 seconds. Identify the side that looks less coordinated (more awkward) and slow – this



is the side associated with cerebellar dysfunction. The fourth test is simply a gait analysis, from which you can gleam an immense amount of information. However, for the purpose of this article – look at the arm swing and identify the side that has diminished swing in comparison to the other arm. Less arm swing could be associated with cerebellar disease. These four procedures are quick and non-invasive for the patient, and if they all produce findings on the same side – then diminished cerebellar activity should be considered.

Optimizing the health and connectivity of the cerebellum is crucial for balance within the musculoskeletal system. Once the side of cerebellar dysfunction has been identified – you can rehabilitate that region and strengthen its connections to other neuronal regions. Remember that the left half of the cerebellum communicates with the right cerebral hemisphere. Thus, you can stimulate the right cerebral cortex by stimulating the left cerebellum. So how could you stimulate and boost the activity of the left half of the cerebellum? We can increase the proprioceptive input into the left half of the cerebellum by adjusting the left upper and lower extremities, adjusting the left side of the spinal column, performing soft tissue work on the left side of the body, Continued on page 10

Welcome, New Members!

The Following Members Joined the UVCA Between 7/25/19 & 10/23/19

Allen, DC, Scott

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Thompson, Extremity Adjusting,
Flexion-Distraction – Cox, Full Spine,
Gonstead, Graston, Activator, Kinesiotaping, Motion Palpation, Myofascial Release, Nimmo, Soft Tissue
Referred by: Dr. Corey Malnikof

Burke, DC, Mary

Beyond Wellness Ashburn, Virginia Phone: 703-723-9355

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and/or applying various physio-therapy modalities to the left side of the body. Anything that provides proprioceptive feedback (favoring the left side) can be of benefit in this scenario. The prior issue of this article discussed eye movements to activate the brain, and those could be utilized here as well. Future functional neurology articles for this publication will discuss (in much more detail) other



rehabilitative techniques that we can utilize to improve cerebellar function. Specifically, the vestibular system can be used to activate the cerebellum and the "interactive metronome" activity is a great way to enhance the connection between one half of the cerebellum and the corresponding cerebral cortex. Both of these topics will be explored in future articles.

James A. Munse, DC, DACNB, MA of Chantilly Chiropractic Center in Chantilly, Virginia is a Diplomate of the American Chiropractic Neurology Board, which he 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 full-tme 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.

kathleenburke1776@gmail.com Member Type: First Year DC Active Release Technique (ART)

Carlington, Brianna

Charlotte, North Carolina Member Type: Student, Life Univer-

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Kinesiotaping, Low / Non Force
Techniques, Myofascial Release, Soft
Tissue

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Tyson, DC, Shawn

Advanced Care Chiropractic & Wellness Center
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Chiropractic Care for All, Without a Box on the Wall

By Rebecca J. Wilder, DC

or over a year, I have been trying to provide Chiropractic and health-based care for those in need in the Charlottesville community. Who knew trying to give love and serve would have so many legalities!

I founded The Align Foundation, a 501(c)(3) non-profit, in late 2018. My hope was to model a program I participated in as a student at Life Chiropractic College West that provided exams and adjustments at a day labor camp in San Francisco. After talking with non-profit, tax and healthcare attorneys, I am pleased to share with you that I have recently been welcomed by the Housing Authority and University of Virginia (UVA) Nursing Program at the Westhaven Nursing Clinic in Charlottesville, a resource center for the residents of five low income housing communities. I am excited to finally serve this mission.

The staff at the clinic does not provide any health services beyond checking blood pressure and basic vitals. Due to the residents'



financial situations, many only use public transit. If they have any insurance at all, their access to even mainstream healthcare is limited. I am the first physician to offer any services, although several other health-minded organizations like Common Ground and City Schoolyard Garden also participate. Common Ground provides free massage therapy and City Schoolyard Garden gives residents access to organic vegetables.

Walk-in patients are seen once a week for examinations and conservative chiropractic care on my portable chiropractic table in a small room. I have my old college "doc bag", face paper, ice packs, Activator and a locking plastic file drawer in tow.

As anticipated, there are challenges such as literacy and language barriers when conducting a history. The demographics of the patients I see are severely underrepresented in most of the chiropractic and other educational materials, so the message does not always resonate as easily as in private practice. Still, the feeling that comes with sharing the benefits of chiropractic care with patients who might never otherwise have that access is irreplaceable.

I cannot share with you how humbled I am to be welcomed to this place and to provide care for those who seek and desperately need it. I hope you will be inspired by my efforts to share Chiropractic with everyone and I hope you will send your support and good vibes my way. Funds for admin materials and donations of various other goods such as ice/heat packs are an ongoing need. Additionally, I am seeking donation of a portable drop table or portable drop pieces. Check out the Align Foundation page on my practice's website (www.aligncville.com) to learn more or to donate via Paypal. Thank you and be well!

Dr. Rebecca Wilder owns and runs ALIGN Chiropractic in Charlottesville, VA. A Premier DC Member of the UVCA, she graduated from Life Chiropractic College West in 2016 and became licensed in Virignia that same year.



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2019 UVCA Medical Insurance Program

United Virginia Chiropractic Association (UVCA) members have access to medical, dental and vision insurance programs that are available to chiropractors in the 16 states listed below.



First established in 2015 with the Ohio State Chiropractic Association, the plan rapidly spread across the country from the Midwest .



Our mission

From the start, our mission has been to provide another group medical insurance option to chiropractors.



Who is eligible?

The program is available to chiropractor members of the UVCA, their employees and dependents. Chiropractors who are not currently members of the UVCA may complete an application and receive a quote, but membership in the UVCA is required to participate and maintain coverage.



What plans are available?

There are 16 medical plan options; 4 are health savings accounts and 12 are traditional designs with co-pays and a Rx card. The networks available include MedCost PPO, Multiplan PHCS and First Health. After completion of the application, members are provided quotes and plan outlines to determine the program that works best for their needs. We can assist with plans as small as two employees; spouses who are involved in the business are considered an employee.



When and how can I apply for coverage?

Since we allow members to start coverage any month of the year, now is a great time to get your quote. Contact: **Mark Ritchie,** RMFS Benefit Solutions, LLC, by phone: 614-214-8334, email: mark.ritchieohio@gmail.com or fax: 614-553-7763.

UVCA Member Servicing Transition

MEDICARE, INSURANCE, CODING, BILLING, DOCUMENTATION, COMPLIANCE, RELATED

Qusan McClelland, FICC has served The chiropractic profession and the healthcare industry for over thirty years. She handled all aspects of patient care and clinic management for her husband's (Dr. George "Mac" McClelland) successful Christiansburg practice for 25 years. She played an integral role on the ACA's Medicare, Coding and Reimbursement, Clinical Documentation, Medicare Demonstration Project Team and other key committees/ task forces, as well as providing consulting and program development services. In addition to helping many private practices over the years, she consulted for dozens of state chiropractic associations, the Congress of Chiropractic State Associations, the Foundation of Chiropractic Licensing Boards, the Texas Back Institute, and the National Board of Chiropractic Examiners, tackling a range of complex topics including coding, insurance, clinical documentation, outcomes assessment and Medicare. She has been hired by or worked with law firms, state licensing boards, chiropractic colleges, the Virginia Attorney General's office, Blue Cross/Blue Shield, the Centers for Medicare and Medicaid Services, the

Office of Inspector General (OIG) for the United States Department of Health and Human Services (HHS), the World Health Organization, and even the FBI. These and many other organizations have relied on Susan for her insights, analytical skills and experience.

Susan has provided great assistance to VCA, then UVCA, members for over three decades. For over fifteen years, she has responded to individual questions on a variety of Medicare and insurance subjects. She taught coding, documentation and Medicare seminars and convention sessions for even longer. Her unwavering commitment to clarity and accuracy made Susan an integral part of the association's member servicing team.

But things change. Mac retired a few years ago after his own illustrious career as a chiropractic leader. They now go back and forth between homes in Virginia and Florida enjoying their granddaughter, golf, family, and friends. And Susan has retired, as well.

So... What does that mean for UVCA member support?

Many of you are already familiar with Becky Walter, MCS-P. Becky helped run her husband Greg Walter's successful Roanoke practice - including during his tenure as VCA President - until his recent retirement. A certified compliance specialist for physicians, she has taught and consulted for well-known practice management companies, hospitals and private practitioners. She has served as a consultant in many different areas at the local, state, and national level. Her first certification was as an x-ray technician, followed by obtaining a chiropractic assistant certification from National College (now NUHS). She was the VCA's first CA of the Year and President of its Auxiliary. She obtained a BS from Bluefield College in Organizational Management, graduating cum laude, and went on to complete her Medical Compliance Specialist-Physician Office (MCS-P) certification. She has helped association members with compliance and other questions for many years and taught dozens of association classes for both doctors and members of their team, including the VCA's successful Total Office Management series.

A few months ago, Becky began to play an increased role in providing members relevant and experienced advice and training on Medicare requirements, coding, billing, finances, documentation, and compliance in the chiropractic field. With Susan's retirement, Becky has expanded that role further, becoming the association's primary specialist in these areas. We are grateful for Becky's expertise.

Should you have any questions, contact your executive director, Julie Connolly, at jconnolly@virginiachiropractic.org or Ms. Walter at Becwalter57@hotmail.com. In the meantime, the UVCA thanks Susan for her service and welcomes Becky to her broad-

Convention, Williamsburg, VA (see page 6).





Can Olympic Athletes Use CBD?

By Joe Kryszak

Can Olympic athletes use CBD? The United States Anti-Doping Association (USADA) answers this question as follows.

"The chemical compound cannabidiol is not prohibited. But remember, it is very difficult, if not impossible, to obtain a pure CBD extract or oil from the cannabis plant. Anyone who buys a CBD oil, extract, or other CBD product should be aware that it may be a mixture of CBD and other cannabinoids. All other cannabinoids, including THC and the more than 115 other identified cannabinoids in the cannabis plant, as well as all synthetic cannabinoids, are prohibited in-competition." (https://www.usada.org/spirit-of-sport/education/six-things-know-about-cannabidiol/)

Thus, Olympic athletes can use CBD with the following caveats

- · Pure, CBD from Isolate is allowed.
- Full Spectrum/Broad Spectrum CBD is not allowed and will get athletes removed.

Even if you don't provide care to Olympic Athletes, this is good information to consider when looking to CBD products for your patients who suffer from pain and inflammation. Make sure anything you carry is third party tested. Consider whether or not your patient needs to pass any drug test looking for THC. If he/she does, look for products with a 0% THC Guarantee.



Mr. Joe Kryszak is owner and president of Stirling Oil, a Unified VCA Supporting Supplier Member headquartered in Apex, NC. For a special UVCA promotion from Stirling that ends on November 30, 2019, see page 1.

The Virginia Award for Excellence in Chiropractic History

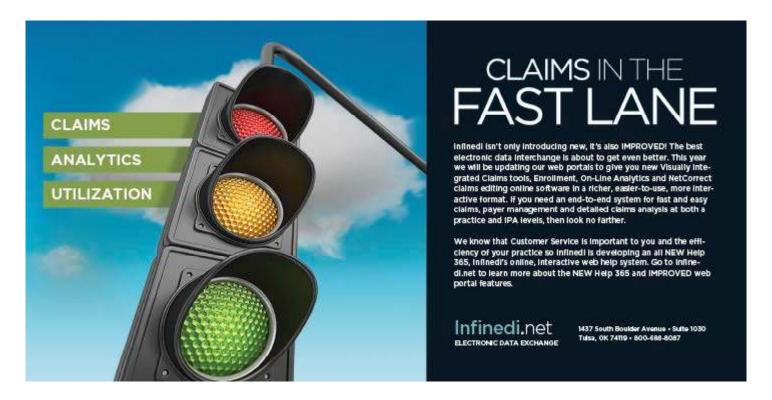
n a quest to preserve and publish Virginia's chiropractic history, the Virginia Chiropractic Students Assistance Foundation, Inc. has funded an award for non-DC authored papers. The \$600 award is being administered by the Association for the History of Chiropractic.

The topic must be chiropractic history in Virginia. Author must not be a Doctor of Chiropractic, an enrolled student of a DC program, or employed as a instructor or employee of a chiropractic institution at the time of submission. Essays are limited to 10,000 words, including endnotes.

Submissions must be postmarked by January 15th of the biennial for which they are to be considered. First biennial will end January 15, 2020. Papers must be submitted in accordance with *History of Chiropractic* guidelines.

Please submit by mail to the Association for the History of Chiropractic, 4802 Fairhaven Ct., Davenport, IA 52807; email AHC at ahc1895@gmail.com; or email Joe Foley, DC, at bonesdc@aol.com





Omega-3 Fatty Acids, Associated Disease Risks & Objective Parameters Associated with Clinical Application

By Scott Banks, DC, MS

Omega-6 and omega-3 long chain fatty acids are essential to humans meaning that they must be consumed and that inadequate levels are associated with specific health risks. While that reality exists in this area, debate continues about the exact details of the above relationships. Many studies trying to isolate relationships in this area have failed to support assumptions about their effect and the appropriate dosages associated with reduced disease risks.

The basis of their role in disease prevention is thought to relate to at least two areas:

- They are a key substrate in the chemical process of transitioning from the inflammatory state to the anti-inflammatory/proresolving or healing state.
- 2. They play and important role in regulating lipoprotein patterns to a less atherogenic pattern. (1)

The anti-inflammatory/pro-resolving mechanism has multiple parts involving activation of intestinal fatty acid receptors that reduce inflammatory signaling from the gut and serve as the precursor in activated macrophages to the production of the primary molecules involved in anti-inflammatory/pro-resolving signal, the specialized pro-resolving mediators.

This later mechanism has received considerable attention in the last decade with the growing appreciation that that inflammatory process does not simply "burn out" at some point and it must be resolved by a very active counter-mechanism.

The confusion created by these studies that suggest that the omega-3 fatty acids have little importance in disease mechanisms has more recently been attributed to study methodology errors. Newer work with attention to these methodologic errors has appeared refining the effective clinical application of omega-3 supplementation. The first question needing clarification is the necessity of omega-3

fatty acid supplementation in the first place. There is no dispute that omega fatty acids are essential requiring that they be added through diet and/or supplementation. Through most of human history those appeared to be adequately balanced through diet. Significant dietary change over the past 75-100 years has changed this dynamic considerably.

Wild fish, other animal fats sources such as meat, dairy and eggs, and oils such as flaxseed and nut oils historically supplied significant omega-3 fatty acids. These plant sources have gradually been replaced with seed and vegetable oils which are poor in omega-3 and rich in omega-6 fatty acids shifting historic human omega-6 to omega-3 fatty acids ratio from 1:1 to 10:1.⁽²⁾ Not only have these shifts occurred in our direct consumption, it has also occurred in the food sources in animal production and the subsequent ome-

ga-6:3 content of meat, fish, dairy and eggs. This shift has been from a balanced ratio of pro/anti-inflammatory substrates to a pro-inflammatory state linked to a broad group of chronic disease states.

An example of the impact on chronic disease risks are the neurodegenerative diseases such as Alzheimer's Disease. A study using an animal model of Al-

Common Food Sources of the Plant Omega-3 Precursor ALA (18:3n-3, as gram per serving)

Flaxseed oil g/tbsp 7.26 Chia seed g/ounce 5.06 English walnuts g/ounce 2.57 Whole flaxseed g/tbsp 2.35

Canola oil g/tbsp 1.28 Soybean oil g/tbsp 0.92 Corn oil g/tbsp 0.15

Data from the Office of Dietary Supplements, National Institute of Health (NIH). Tbsp denotes tablespoon.

zhiemer's looked at the impact of replacing olive oil with canola oil on the disease risk. The study concluded "Taken together, our findings do not support a beneficial effect of chronic canola oil consumption on two important aspects of AD pathophysiology which includes memory impairments as well as synaptic integrity. While more studies are needed, our data do not justify the current trend aimed at replacing olive oil with canola oil."(3)

With little progress being made in reversing the trends in food production, the importance of correction by $Continued\ on\ page\ 19$



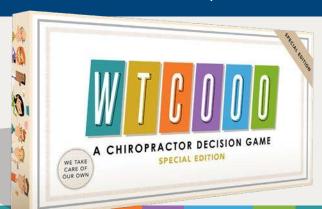
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Continued from page 17 supplementation of omega-3 fatty acids has been studied extensively. Unfortunately, the results have been conflicting until very recently providing little guidance in this area. One of the methodologic errors in many studies has been the use of arbitrary dosing. While they have broadly concluded that omega-3 supplementation has not proven helpful in mitigating disease risk, this is now thought to be related to inadequate dosing.

Clinical effect appears to be more related to balancing cell membrane omega-3 and omega-6 levels which requires differing omega-3 dosing based on this baseline finding. In addition to EPA + DHA (omega-3) dose the ability to optimize cell membrane levels, chemical form (triglycerides versus esters) also influence cell membrane levels. These levels can be measured with a test called the omega-3 index. (4) Testing looks both at red blood cell membrane percentage of omega-3 fatty acids as well as omega-6:3 ratio. Both correlate with disease risk.

One precaution is needed. While the progressively elevating omega-6 to omega-3 ratio has correlated with the negative health effects, the omega-6 fatty acids are also essential and play a role in normal function. Abnormally low cell membrane omega-6 levels compromise inflammatory activation which plays and important role in immune defenses and the initial injury responses that are needed before resolution can proceed. The goal is to balance the omega-6 omega-3 ratio and not to simply avoid all omega-6s.

Discussing the earlier studies suggesting that omega-3 supplements have little established health impact, Kristina Harris Jackson, PhD, RD, who was the co-lead author on this latest paper, "A low dose could make a study show no effect of EPA and DHA, which makes the literature more indecisive and the medical community more skeptical of omega-3 benefits," she said. "Hopefully, ensuring the dose of EPA and DHA is high enough to reach a target Omega-3 Index level will clarify whether or not EPA and DHA are effective."

An analysis of a large database of the omega-3 index found that tested levels vary from 2% to 20%. Optimal outcomes appear to correlate with index levels between 8-11%. "All humans have levels of EPA+DHA that if methodologically correctly assessed in erythrocytes, are optimal between 8% and 11%. Deficits can cause serious health issues that can be prevented by optimal levels." (5) A large study of the relationship between omega-3 dosing and omega-3 index found that across 1422 subjects pooled from 14 studies that the mean pre-treatment omega-3 index values of 4.9% improved to 8.1% with supplementation between 1297 and 1983 mgs of mixed EPA and DHA. The mean outcome value of 8.1% varied by up to 2.7% so potentially varying from inadequate 5.4% to an adequate level of 10.8%. (6)

The "what now" clinical conclusion seems to that it is optimal to guide dosing with an pre-treatment measurement of the omega-3 index, adjusted dosing based on that outcome and insuring good individual outcome by confirmation of an omega-3 index of >8%. This appears to require supplemental omega-3 dosing of 1300 to 2000 mgs in those with an initial index of 5% and may require more dosing with lower initial index levels. It is important to remember that this is omega-3 dosing (EPA and DHA) and not simply mgs of total fish oil which is typically about 35-40 % omega-3 fatty acids. Ideally with each patient, it is optimal to correct these balances in omega fatty acids with diet but with the reality that much of the balancing may have to be done with supplementation.

1) Sparkes et al. EFFECT OF LOW DOSE DOCOSAHEXAENOIC ACID-RICH FISH OIL ON PLASMA LIPIDS AND LIPOPROTEINS IN PRE-MENOPAUSAL WOMEN: A DOSE-RESPONSE: RANDOMIZED PLACEBO-CONTROLLED TRIAL. Nutrients, 2018:10;1460.

²⁾ Covington M. OMEGA-3 FATTY ACIDS. Am Fam Physician. 2004 Jul 1;70(1):133-140.

- ³⁾ Lauretti E, Praticò D. EFFECT OF CANOLA OIL CONSUMPTION ON MEMORY, SYNAPSE AND NEUROPATHOLOGY IN THE TRIPLE TRANSGENIC MOUSE MODEL OF ALZHEIMER'S DISEASE. Scientific Reports 2017, ePub ahead of print.
- 4) Walker et al. PREDICTING THE EFFECTS OF SUPPLEMENTAL EPA AND DHA ON THE OMEGA-3 INDEX. Am J Clin Nutr. 2019 Oct 1;110(4):1034-1040.
- ⁵⁾ von Schacky. CONFUSION ABOUT THE EFFECTS OF OMEGA-3 FATTY ACIDS: CONTEMPLATION OF STUDY DATA TAKING THE OMEGA-3 INDEX INTO CONSIDERATION. Internist (Berl). 2019 Oct 7, Epub ahead of print.
- 6) Coley et al. DEFINING THE OPTIMAL TARGET POPULATION FOR TRIALS OF POLYUNSATURATED FATTY ACID SUPPLEMENTATION USING THE ERYTHROCYTE OMEGA-3 INDEX: A STEP TOWARDS PERSONALIZED PREVENTION OF COGNITIVE DECLINE? Nutr Health Aging. 2018;22(8):982-998.

Dr. Scott D. Banks' Virginia Beach practice specializes in nutritional therapy and functional rehab. He is a VCA past president The Virginia Voice co-editor. He has served as a postgraduate instructor for eight chiropractic colleges and the Chiropractic Rehabilitation Association. He has taught in the chiropractic orthopedics certification, rehabilitation, and sports injuries programs. Dr. Banks has lectured on spine topics to the UVCA, American Col-

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lege of Sports Medicine, the Southern Medical Association, the Maryview Hospital Pain Management Program and others. He has published numerous papers on spine topics and contributed to textbooks.



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Medicare Legislation, the UVCA & You

The Unified VCA recognizes how critical it is to remove barriers so Medicare patients can receive appropriate care and our doctors are respected and valued. The UVCA leadership has been monitoring legislative developments and reaching out to the American Chiropractic Association, International Chiropractors Association, ChiroCongress and other organizations to gain insights into priorities and perspectives. We will continue to endeavor to provide the information you need regarding various approaches and calls to action.

As part of its efforts to improve patient access under the Medicare system, ChiroCongress recently developed a list of tenets deigned to guide future decision-making related to Medicare initiatives. Like ChiroCongress, the UVCA takes the responsibility of speaking on behalf of our members very seriously. We believe these tenets will also help us to fairly and equitably assess proposed initiatives. Below is an adaptation of the ChiroCongress' work to fit Virginia. We will review these tenets regularly and tweak them as necessary to ensure that they continue to serve the interests of our members and their patients.

The Unified VCA Board strives to:

- Support improved patient access and reimbursement parity for chiropractic in all Medicare programs, commensurate with all other provider groups. Help develop and/or support initiatives aimed at eliminating all Medicare discriminatory policies and practices in statute and in the administrative arena.
- Continue to support the current chiropractic benefits now covered by Medicare statute. Support appropriate efforts to allow chiropractors to have the same rights as all other providers in choosing to opt in or out of the Medicare program.
- 3. Continue to work in a collaborative manner with the chiropractic community, helping all stakeholders avoid negative messaging and other activities that could stop positive change.
- Support chiropractic legislation or administrative changes only if the sponsors are not involved in overt efforts to undermine another chiropractic organization's initiative.
- Review all Medicare initiatives to confirm that they will result in parity for all chiropractors and their patients. Parity includes, but is not limited to, reimbursement for all covered Medicare services that are allowed under a practicing chiropractor's individual state scope of practice act.
- Thoroughly vet, in an Independent and unbiased fashion, any Medicare legislation and/or legislative strategies that improve patient access to chiropractic and guarantee reimbursement parity. Vote to support, stand neutral, or oppose any Medicare legislation or administrative changes presented.
- Review Medicare policies, recommend language, create strategies and timelines for passage, hold legislative events, develop independent UVCA messaging, help lead grassroots efforts with key stakeholders, and offer financial assistance when possible.
- 8. Respect the right of each member to formulate his or her own position on any policy or administrative initiatives.

For the latest information from your national associations on current Medicare initiatives and how you can help, visit the following and web sites.

American Chiropractic Association

https://www.acatoday.org/Advocacy/Legislative-Regulatory-Policy/ Medicare

International Chiropractors Association

http://www.chiropractic.org/opt-out-in-medicare/

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UVCA Classifieds

DC members may place a classified ad in The Virginia Voice and on UVCA's website free of charge. Fee is \$50 for member vendors and \$88 for all non-members. Listing will remain on website for 3 months. plus appear in at least 1 issue of newsletter, broadcast email/fax to member and non-member DCs throughout VA, and promotion of link to Classifieds on VCAdoctalk. Individuals may not post classified listings to the list-serve, per membership vote. Limit of 35 words may be imposed. For deadlines, display ad info. or to submit your listing, e-mail jconnolly@ virginiachiro-practic.org.

(Updated 10/22/19)

Events

For DC & staff training from the Unified VCA & its partners, visit the Calendar section of the web site.

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Is peace of mind, keeping your office open & continuity of care important? Yes. I am Dr Pat Boulogne. +I have over 30 yrs of experience & versed in the majority of techniques. NCMIC insured. References available upon request. Let's talk to see if we are a fit... call or email: drpatb@gmail. com & phone 202-642-2335.

Practice Wanted

Ariya Chiropractic Group is continuing to expand in the Greater Richmond & surrounding areas through practice partnerships. Clinic owners/operators retain 100% ownership but also get the benefits of partnering w/our large group. We help you with the business of chiropractic, staff training/education, documentation, compliance, to see a full list of services- check us out on Facebook. For more info/questions call 804-526-7125 or email ariyachiropractic@yahoo.com. [listing#010220a]

Non-DC Position Available

Massage Therapist needed immediately (IC). Our office is in Gloucester County. We are open Monday, Wednesday, & Friday. Must be licensed in the state of VA. Competitive pay scale. Qualified candidates, please email your resume to chirocarehaves@gmail.com. [listing#120419a]

DC Position Available

Associate Chiropractor - Richmond. VA. Airrosti is hiring full-time chiropractors in Texas, Virginia, Ohio, & Washington. Airrosti is a healthcare group that employs chiropractors who specialize in delivering high quality, outcome-based musculoskeletal care. The chiropractor is responsible for the evaluation, ongoing assessment, treatment, & management of patients w/musculoskeletal injuries & conditions through the use of an evidencebased approach. Apply online at www. airrosti.com. Questions? Email recruiting@ airrosti.com. [listing#013020]

Arlington: Amazing Opportunity! Seeking FT associate at busy multi-discipline, sport based practice. We incorporate chiropractic, physical therapy & sports medicine along w/x-ray, diagnostic ultrasound & functional testing. Looking for a Dr w/good manual therapy skills & bed side manner. Base salary w/potential of \$100K & ownership opportunity!! Vacation, Continuing Ed, Malpractice paid by company. Send resume to: drward@novarehab.com or call 703-434-9669. [listing#022520a]

Leesburg: Well established practice looking for confident DC to hire. We are a busy, fast-paced office in need of another Doctor to keep up w/continuing growth. Position offers base pay plus commission. Our office is in the town of Leesburg. A good candidate for this position would have good communication skills, adjusting skills, & work ethic. Please contact Dr. Bradlev Clegg at: cleggchiro@gmail.com (703)777-8884.[listing#012320a]

We are looking for a professional, motivated Chiropractor for our VA Beach office who is focused on offering exceptional patient care. We focus on helping you grow & learn how to be successful in practice. Great salary, bonuses, & benefits. Relocation reimbursement up to \$2,000 offered. Send your CV & cover letter to Dr. Frank Lombardozzi at kempsvillechiro@ gmail.com Visit our website at www. kempsvillechiro.com. [listing#010120a]

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w/ability to teach how to create your own thriving practice. Send CV to mimi@drmimi. com with your vision of how you can serve. [listing#092620a]

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. [listing#122519a]

Associate Position in Chesapeake: Looking for a motivated ethical associate who has good communication & adjusting skills to be a permanent addition to our high volume family chiropractic practice of 27 yrs. Visit our website www.blockchiro.com & read our reviews. Great salary & benefits. Email resumes to: stacey@drblockchiropractic. com. [listing#122419a]

Associate Position in Woodbridge. Full-time or Part-time. No weekends. Treat athletes & a wide range of patients. Diversified technique, Flex-Dist, ART, Graston, Dry needling. Prefer a strong background in rehabilitation & exercise. The candidate must be hard working, diligent & compassionate. Salary for FT. Hourly for PT. Health. Dental, Vision, 401K benefits for FT. Email resumes to: wssrehab@ yahoo.com. [listing#121719a]

Well-established insurance-free practice in Arlington is seeking a Rock Star licensed DC for hands-on, modality-free, results driven practice. Must have impressive technical toolbox, patient management skills, a humble demeanor, & an amenable, compassionate personality. Prenatal & Pediatric experience a plus. Generous compensation & benefits package for the right person. Please apply w/resume & cover letter to chrysanthi168@gmail.com. Job Type: Full-time. [listing#121819a]

Newport News, looking for part time or full time chiropractor. Guaranteed hourly rate or percentage weekly, which ever is greater. Practice on your own & let us take care of the headaches. Call Dr Tom @ 757-404-7643 or email tcvinick@gmail.com. [listing#112819a]

Are you looking for work life balance? CHAWC.com is looking for a long-term associate doctor who wants to join a positive, organized, growing practice of 26 yrs where we share life & serve God together in Richmond. Work a part time schedule of five half-days a week w/fulltime benefits, retirement plan, competitive salary, bonus plan. Send CV & letter of interest to employment@chawc.com. [listing#112719a]

Vibrant Health is an integrative/multispecialty clinic. We are looking for Chiropractors in our Richmond & Winchester areas. This is a unique opportunity for a Chiropractor. We offer

Continued on page 23



5th Year in a Row!!!

Chirocenters Management Corporation is AGAIN giving up to \$1000 to the person who sponsors the highest number of new members for 2019 -- \$100 for each new member sponsored -regardless of member type!



In the meantime, Dr.
Matthew Schrier received
a \$50 gift card from HF Hill
& Associates at the May 4th
membership meeting for
his sponsorship efforts!
Three members tied
for the most members
sponsored by that time:
Drs. Michael Amato,
Matthew Schrier and Carly
Swift. A drawing of the
three determined the
winner.

SALES AND SERVICE SINCE 1989

SHARE the expertise, resources, support and camaraderie that Unified VCA membership provides - and the SUCCESS that follows.

- For every member you refer to membership, you'll receive a \$25 Value Voucher for a UVCA event registration, membership dues or as a discount on the new member's first dues installment. You'll get one regardless of the membership type (even Student membership with dues of just \$35!). There's no limit to how many you can accumulate.
- You'll be contributing not just to that individual's success, but to your own, the association's, and your profession's.
- The chance to win up to a Grand or an Amazon gift card provide some icing on the cake.

It's good -- and easy -- to share!
For forms, benefits
flyers, testimonials,
etc., visit www.
virginiachiropractic.
org, go to
Membership
Recruitment and
click on "Member
Sponsorship."



2019 Member Sponsors At 10/7/19

13 New Members
Dr Corey Malnikof

8 New Members
Dr Michael Amato

3 New Members
Dr Carly Swift

2 New Members
Dr Matthew Schrier
Dr. Will Sonak

1 New Member

Ms Brenda Cassell,
SCRIP HESSCO
Dr Alicia Haupt
Dr. Shawn Keegan
Dr Gregory Lee
Dr. Christina Lowenthal
Dr. Marc Lunenfeld
Dr. Carl T. Musick
Dr Michael Placide
Dr Sherri Wright-Cox



Continued from page 21

competitive pay with the future opportunity to have your own practice. The initial year is salary based, two weeks paid vacation, malpractice insurance & continuing education provided. Email resumes to: nc@vibranthcs.com. [listing#111919b]

We are looking for the right associate to join our prenatal & pediatric focused practice in Mechanicsville. Great salary, bonus, retirement package & help w/student loan repayment. Please email your resume to: dr.anna@atleechiropractic.com We look forward to meeting you!

Associate Doc w/great adjusting skills (Diversified, Drop, Non-force) to join our Virginia Beach office. Must be coachable, compassionate, communicative. Basics of nutrition & applied kinesiology is preferred. Skill focused mentorship program for systems, communication, & care management. Send your resume to Candice@AppliedHealthVA.com. Salary, Bonus, Benefits. [listing#110119a]

Work, live play by the beach! Independent contractor wanted for busy Chiropractic/PT office. Awesome opportunity! Please visit jonelectro.wixsite.com/independentcontract for pics & video info!!! Or, call 757 483-6000 to learn more! [listing#103019a]

Do you want to make a difference? Our office is looking for a motivated associate doctor who is skilled in diversified adjusting & enjoys treating a variety of patients including athletes, accident victims & family care to pregnant patients & pediatrics. Dry needling certification would be helpful. Located in Falls Church. Spanish speaking is a plus. We provided benefits. Please forward your resume to drdamato@qualitychirova.com. [listing#102919b]

Northern Va associate needed. Currently two chiropractors and three massage therapists. One associate must move overseas, so immediate patient base exists. Competitive salary/commission. Top notch bedside manner and adjusting skills required. E-mail CV/Resume to: DrSampson@leesburgchiro.com". [listing#102919a]

Jacobs Chiropractic is looking for a new, motivated, licensed (Virginia) Chiropractor. Will teach you how to find, keep & heal your patients. We have a small active office specializing in Sports Chiropractic & Rehabilitation. Located 10 minutes from D.C. Salary +% patients seen + Benefits + possible moving bonus. Email resume to drj1294chiro@gmail.com. [listing#101819a]

Fredericksburg - Fully train alongside an experienced chiropractor & mentor while learning how to grow, run, & manage your own high volume practice. Perfect opportunity to 'earn & learn' & be a key player in our busy, thriving practice.

Candidate must be energetic, hard working & teachable. Good base pay w/excellent bonus & benefits. Call Dr Christine Stewart at (540)845-3133 to learn more. [listing#101219b]

Fredericksburg--Interested in working only 2.5 days/wk? We have an opportunity for the right DC to do just that, as a permanent, part-time associate. We are a busy, well established office & offer chiropractic, acupuncture, massage therapy & nutritional supplements to our patients. Certification in acupuncture is a +, but not necessary. Diversified is our primary technique used. Generous compensation. Please send resume to drlarrylesser@gmail.com.[listing#101219a]

Virginia Beach - Dynamic, fast paced, state-of-the-art high tech Chiropractic Clinic is looking to add a full time Associate Chiropractor to the team. Applicants must be licensed Chiropractors & provide school & yr of graduation. New graduates welcome. We will train. Please email your resume to website.proadjusterchirovb@gmail.com. [listing#090619a]

Ariya Family Chiropractic Centers, Greater Richmond area, looking to make an associate's dream come true & offer rewarding compensation package, ask our current doctors. We offer 401k & cover 1st year malpractice, UVCA membership & conventions. The position consists of salary + performance bonus. Experience is a plus. For more information or questions call 804-526-7125. Please fax resume to 804-520-7624 or email ariyachiropractic@ vahoo.com.

Wanted: Dr w/great adjusting skills, basic knowledge of nutrition, basic applied kinesiology a +. We are an integrative practice of DCs/applied kinesiologist, acupuncturist, nutritionist, MTs. Send your resume to drtomroselle@gmail. com. Salary, Bonus, Benefits (health insurance, malpractice insurance, 401K, paid vacation & holidays, possible stock options.)

Sport & Spine Rehab, 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@ssrehab.com.

Practices

Two established Clinics in the NoVa area approximately 20 miles apart with a total collection of over \$260K. Performing Chiropractic, PT & Acupuncture. No advertising being done. Lots of potential for growth. Asking \$179K for both. Looking to retire. Will stay on for transition. Serious

Continued on page 24

Chiropractic Offices Engage Patients & Help Those in Need Through Two UVCA Events

3rd Annual School Supplies Drive

Seventeen Virginia chiropractic offices collected nearly 2000 pounds of school supplies to help ensure our students were equipped to learn with the start of the 2019 school year.

1st Place Office Chesapeake Wellness Center, Chesapeake, VA

Dr. Mark Gutekunst

Total of 543 Pounds Collected

1st Place District UVCA District V-E: Dr. Carly Swift, Director

Total of 1200 Pounds Collected

2nd Place Office Chester Family Chiropractic, Chester, VA

Drs. Sandy & Andrew Elbaum
Total of 337 Pounds Collected

2nd Place District UVCA District IV-E: Dr. Eric Carlsen, Director

total of 490 Pounds Collected

For a complete list of participants, contact the UVCA office.





Sneaker Drive

Over 50 chiropractic offices collected gently worn sneakers to provide individuals in impoverished countries with inventory they can sell in local markets. Between April 1 and August 1, 2019, over 300 pairs of sneakers were collected from throughout Virginia!



Most Pairs Collected

Morenings Chiropractic, Bristol, VA Dr. Imanuel Morenings Total of 48 Pairs Collected

For a complete list of participants, contact the UVCA office.









Are You Aware of All Your Benefits?

We've found that VERY few UVCA member doctors -- let alone their staff members -- are fully aware of the benefits of membership and how to access them... For example...

The Opioids Crisis: Tools and resources to help DCs talk to their patients, community, employers, and other groups regarding the seriousness of the opioid crisis and how Chiropractors can help.

- Reforming the Law
- Chiropractic as a Safer Option for Pain
- National Drug-Free Awareness Month
- CDC Guidelines
- News Releases
- Presentation Materials

Practice Support: Resources related to everyday practice, including:

- Marketing Ideas
- Social Media Cntent
- SOPS, Forms, Employee handbooks
- · Practice Approaches
- Office Management
- DOT Training
- Spanish for the Chiropractic Office

Legal: Information related to legal matters such as:

- HIPAA
- Fee Discounts
- Advertising
- Employee vs. Independent Contractor
- New Patients
- Compliance Programs

Research: Research references to use for a variety of purposes: educating patients, talking to other healthcare providers or media, working with PI attorneys, and more. Categories include:

- · Conditions: LBP, NP, Extremities
- · Chiro vs. Standard Medical Treatment
- Chiro Safety/Efficacy
- Pediatrics
- Headaches
- · Legal/Insurance Support
- · Research Sites
- How-Tos

Do a Little Surfing. Get your UVCA member log-in, go to www. virginiachiropractic.org, and discover what's there, just waiting for you. If you ever have questions about tools and resources available to UVCA members – on the web or through staff, consultants and specialists – or if you'd like to share something that has worked for your office – please contact the association headquarters.

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inquiries please Call 703-229-3106 or email me at IMDRNRG@AOL.COM [listing#011520a]

Practice for Sale Located in Alexandria for over 65 yrs. Present owner retiring after 40 yrs. Once larger practice has reduced w/doctor working only part time. Excellent opportunity for new doctor w/ enthusiasm. Will sell quickly at very reasonable price. Jeffrey Brown 703-370-5335, alxchiro@aol.com. [listing#010920a]

Sports & rehab oriented chiropractic practice for sale in Tysons Corner just outside Washington DC. Owner is making a healthy six-figure income that can be yours when you step into the driver's seat. Buy this practice with as little as \$20,000 down! For more info, see http://www.strategicdc.com/19801 or info@strategicdc.com. [listing#122419d]

7-figure multi-specialty practice for sale featuring chiropractic, physical medicine, physical therapy & massage in a professional park setting just outside the nation's capital. Owner willing to stay for an extended transition (if desired). Financing possible to purchase with as little as \$50,000 down For more info, see http://www.strategicdc.com/19703 or info@strategicdc.com. [listing#122419c]

Thriving practice outside Annapolis & close to DC & Baltimore. Owner is netting six figures on part-time hours. Purchase financing possible with as little as \$15,000 down. For more info, see http://www.strategicdc.com/19301 or email info@strategicdc.com. [listing#122419b]

Tyson's Vienna Sports Chiropractic Office: Established, Modern equipment & new technologies. Doctor moving. 3 tx rooms. 80-100 per week. open only 3 days. Great price. 1700sqft in medical building. Flxn/Dis, Drop, ART, Sports Rehab and Impulse. Serious Candidates Only. Contact Sportschiro900@gmail.com. [Listing#121619a]

Yorktown Practice for Sale. Doctor retiring. Home/office complex. IDEAL location w/ plenty of visibility. Located within a great school district. Low overhead. Would prefer to sell patient list, equipment, supplies, & property together but will consider selling separately. Serious inquiries only. Email questions to cpksjk@cox.net. [listing#121319a]

Very busy, single doctor, 39 y/o Chiropractic/Acupuncture practice. Great staff, low overhead, good community & reputation. Will help new Dr for gradual, smooth transition as needed. -- www. drgeorgechirkinian.com --804-233-9244.

Chesterfield County. Doctor retiring. 23 yr practice for sale on track to gross 500k this yr. 26 new patients/mo, \$116 collected/visit. \$15k -- \$20k/mo in massage income. All instrument adjusting

with 4 massage therapists. Owner financing available. For more information, please text 804-678-8663 & leave your name, email address & best phone number to reach you. [listing#112119a]

Chiropractic Practice for Sale in Roanoke. Practice steadily collects over \$200K per yr, w/1 doc & 1 massage therapist (w/room to expand). Don't start from scratch. Take advantage of the fact that the existing chiropractor is relocating. Come discover an excellent practice & lifestyle in the beautiful Blue Ridge Mountain area. Live, work & succeed easily! Info: ThrivingChiropractice@yahoo.com. [listing#102919c]

For SALE/LEASE – Delaware. Chiropractor retiring after 30 yrs offering MULTIPLE OPTIONS ranging from simple office lease, to office, home & land package purchase in LEWES BEACH, DE. Easily build upon well-established practice w/highly recognizable name & web presence, in a rapidly growing BEACHTOWN. Delaware is sales tax FREE, w/among the Nation's lowest property tax rates. Great place to live/practice! For more info: info@ LewesChiro.com. [listing#101219c]

Practice for sale: Doctor of established practice in downtown Norfolk looking to transition the practice.If interested please contact me at Cedarwoodchiro@aol.com.

Products & Services

Ariya Chiropractic Group is continuing to expand in the Greater Richmond & surrounding areas through practice partnerships. Clinic owners/operators retain 100% ownership but also get the benefits of partnering w/our large group. We help you with the business of chiropractic, staff training/education, documentation, compliance, to see a full list of services- check us out on Facebook. For more info/questions call 804-526-7125 or email ariyachiropractic@yahoo.com.

Space Available

Office space available to share-single chiropractor office in Richmond. Rent is \$775/month & includes utilities/internet, but not phone. Office equipment & ChiroTouch use could be negotiated for new doc. Email drgreen@MySpinesAligned.com.

Office space for lease in established holistic healthcare office in downtown Fredericksburg. Rent is \$600/month for a treatment room, use of waiting room & reception area, utilities & Wi-Fi included. Looking for the right person to add to our warm, friendly healing atmosphere. Call Christine Thompson at (540) 809-4223 or email cthompson@whole-health.net.

We have a 1000 sqft office w/your own private room for rent in a well-established clinic in Herndon. We have availability to staff for general office work. Would be a great fit for a chiropractor, physician,

Why Go Digital?

By Stacey Risley

ave you wondered whether or not you should covert to a digital x-ray system? Following is a list of key reasons why you may want to consider such a change.

- Digital x-ray systems reduce radiation exposure by up to 80%, making digital radiography safer for your patients and staff.
- Digital x-rays provide superior image quality, even for overweight patients.
- You'll eliminate the expenses related to your outdated filmbased system, which can add up quickly: monthly cleaning of the processor, the cost of film and chemicals, service fees, etc.
- Some digital systems do not charge ongoing service fees, increasing your savings.
- You'll save time. Developing film is extremely time consuming, especially if you must reshoot under- or overexposed images. Digital radiography all but eliminates the margin of error and enables you to enhance images if needed for optimal quality.
- Some systems offer advanced, user-friendly software with a toolbox specific for your field of specialty. This will allow you to effectively measure, manipulate and make annotations to your digital images, making interpreting results and showing patient progress easier.
- You can save images to CDs or flash drives to easily share with patients and collaborate with colleagues.
- Many insurance companies are now following the federal guidelines implemented in 2017 and are increasing reimbursements for DR digital x-rays, while cutting those for providers still using film or CR systems.
- Your capital equipment purchase may qualify for 2019's Section 179 Federal Tax incentive. You could receive as much as \$8,000 back for a film-to-digital conversion, reducing your overall upgrade investment.
- Film will soon be obsolete. By going digital, you'll stay competitive and relevant and thrive as a progressive and innovative office.



You can advertise yourself as a fully digital practice that made the investment to safely provide its patients with the best possible radiographic care.

Stacey Risley is National Sales Director of Dynamic Digital Imaging, LLC, a UVCA Supporting Supplier Member. DDI converts film x-ray equipment to Cesium DR digital imaging with acquisition computer, Chiro-specific software, PACA, warranty, service/support all included, and with financing available. For more information, contact Stacey at stacey@dynamicdigitalimaging.com or visit http://www.dynamicdigitalimaging.com.

massage therapist, esthetician or any medical personnel but we are not limited to that field. Give us a call to discuss options at 703-904-8528 or email us at chiro208@ vacoxmail.com. [listing#111519a]

For Rent or Sale - Free standing highly visible Building on busy corner intersection on Main St. in Fairfax. Occupied by a high volume chiropractic practice for the past 32 years. Walk-in condition with no build out necessary. Call 703-304-6211. [listing#101819b]

Office space available to share in a wellness center in Fredericksburg. Adjusting room is 12.5' x 12.5'. We will work opposite days. You can work Tue, Thur, Sat. Sun is also available if you want. Rent is \$700/month & includes utilities. Contact drjpyurgel@gmail.com. handsofhopechiropractic.com. [listing#090719a]

Equipment

Lloyd flat table w/adjustable head piece & arm rest. \$100. Contact Dr. Michael Vanella (vanellachiro@gmail.com).

Retired Chiropractor would like to sell an Amrex SynchroSonic US/54 Combination Ultrasound / Low Volt A.C. Stimulator. Very good condition with leads & pads. Price \$800.00 pictures available by email on request. Please call 540-785-4104. Fredericksburg, VA. [listing#121619b]

FREE: Many like new & must go NOW! Anatomotor (roller table), diathermy, interferentials (one w/pneumatic), high-volt pulsed galvanics, SAMs (spinal analysis), scales, Balans chair, hanging chart holders, low volt, ultrasound chairs, wall mount view boxes. Email me for full list, brands, specs. Can deliver most to UVCA Fall Convention, Williamsburg, September 20-21, PU in Christiansburg, or possibly other arrangements. Email Susan at mcclelland. consulting@usit.net. [listing#112119b]

Adjustable height exam/massage table. Head piece, arm rests, paper roll holder. Adjustable upper & lower pieces for multiple positions. Excellent condition. Pictures available. \$450. sbanksdc@baycrk.net. [listing#111919a]

Zenith hi-lo table for sale; \$1050 ---- Need to sell ASAP!!! Cast iron frame, pelvic drop & thoracic break away. The head piece can angle downwards & upwards but is not a drop. It has a pedal for the table to rise & lower. If you have any questions please text or call 404-821-3828. [listing#111419a]

Perfect for new office! Due to DC retiring, we have an entire practice-full of equipment & furniture, from adjusting tables & e-stim machines to file cabinets & chairs -- & everything in between. Pics at https://imgur.com/a/36svVAy. For full list, questions, etc, call Dr John Piersol at 304-482-7239; email dripiersol@gmail.com. \$15K OBO; can help with shipping. [listing#110619a]

Galaxy McManis Flexion table w/all drops & elevation. Can deliver anywhere in Virginia & set up as well. \$5500 Life2uadio@aol. com if interested. [listing#102219a]

Insight by CLA for Sale LIKE NEW/GREAT CONDITION \$11,500. Bought in 2018. Product is in LIKE NEW/GREAT condition. Used about 40 times. CLA estimated product at \$13,590 new. Includes HRV,

sEMG, thermography & complimentary adult & child gowns. Once purchased, call CLA to register product & software. We are located in Sterling. Can be shipped. Please contact Dr. Ryan at 516-233-9907 for more details. [listing#101619b]

Tabletop X-ray developer & accessories: light tight storage bin, 10x12 &14x17 films, x-ray cassettes (10x12 & 14x17, 6 of each), x-ray label flasher, chemical automaker/ feeder, 14x17 x-ray storage folders \$400 OBO. Light boxes: \$50/each. Please email dr.ashleydc@gmail.com for pictures or more information. [listing#100819a]

NEW/USED EQUIPMENT; 30+ yrs experience; HF Hill & Associates, Inc. Chiropractic showroom is located in Richmond (by appointment). We buy & sell new & used equipment: Lloyd Table Co., Richmar, Hill Labs, Pivotal Health, Chattanooga & more. Adjusting tables, laser, electrotherapy, ultrasounds, & traction tables (decompression & IST). Check out our NEW & USED EQUIPMENT IN STOCK - www.HFHill.net. 1.800.434.4551, ask for Hugh or Bryce. [listing#062120a]















Unified VCA Education & Events

Wednesday, November 6, 13 & 20

3 Part Webinar Series

CARING FOR THE PEDIATRIC PATIENT: GESTATIONAL THROUGH YOUNG ADULTHOOD

Presenters: Elise Hewitt, DC, DICCP, FICC; Kristina L. Petrocco-Napuli, DC, MS; Jeana L.

Voorhies, DC

Sponsored by New York Chiropractic College

6 Type 1 CEUs

Friday, November 8

Free Lunch, Networking, Presentation

3 THINGS EVERY CHIROPRACTOR SHOULD KNOW ABOUT HIDDEN MONEY LEAKS -- AND WHAT TO DO ABOUT THEM

Presenter: Rachel Marshall

Sponsored by The Money Advantage

Virginia Beach, VA - Gordon Biersch Brewery Restaurant

Friday, November 15

Free Lunch, Networking, Presentation

PRINCIPLES OF GENERAL LIABILITY, MEDICAL MALPRACTICE, AND STATE BOARD PROCEDURES

Presented & Sponsored by Legally Mine Charlottesville, VA - Shebeen Pub & Braai



District

Connection





Saturday, November 16

CODING & DOCUMENTATION

Presenter: Dr. Evan Gwilliam
Sponsored by ChiroHealthUSA and
Infinedi
Springfield, VA - Hilton Hotel
6 Type 1 CEUs



Saturday/Sunday, December 7-8, January 11-12, & February 1-2 3-Weekend Seminar Series

ADVANCE YOUR REHAB SKILLS & GROW YOUR PRACTICE

Jeffrey Tucker, DC, DACRB Sponsored by Kaizenovate

Rockville, MD - Sport & Spine Rehab/Kaizo Health

36 Credit Hours toward DACRB; Type 1 CEUs in Va. Pending

Saturday/Sunday, December 7-8

DRY NEEDLING CERTIFICATION

David Fishkin, DC, MPH Sponsored by Dry Needling Institute Rockville, MD - Dry Needling Institute 12 Type 1 CEUs

Ongoing

CA TRAINING -- Assistants for Chiropractic Excellence
ONLINE CEUS -- ChiroCredit.com and EON!
RAD TECH CEUS -- Myicourse.com

For details, updates, & registration info., go to www.

The Virginia Voice

The Virginia Voice is the quarterly newsletter of the Virginia Chiropractic Association, dba the Unified VCA, PO Box 15, Afton, VA 22920, virginiachiropractic.org.

Editor: Julie K. Connolly, Executive Director.

Editorial Committee: Scott Banks, DC; Chris Perron, DC; Michelle Rose, DC.

Advertising: 540-932-3100.

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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 VCA lobbying expenses and is not deductible. Further information should be obtained from your tax advisor.