

CHIROPRACTIC SCOPES OF PRACTICE

Mr. Chair and committee members, good afternoon. Thank you for allowing me to speak with you today. My name is Dr. Adrian Velasquez. I am a Chiropractor and have been in practice for five years now. I see a high volume of patients weekly and have recently written my first book, titled The Chiropractic Code.

I am here today representing a group of my colleagues. We are a group of Chiropractors that have been in practice anywhere from a few years to over 40 years. We graduated from different chiropractic colleges such as Palmer, Life, Life West, Parker and Texas Chiropractic College, just to name a few. We are from all over NM-Albuquerque, Rio Rancho, Gallup, Artesia, Alamogordo, Las Cruces, Silver City and Lordsburg. We use different techniques and approaches in our offices, but we all agree on one important thing, that being chiropractic is a system of healthcare that does not include drugs and surgery.

We are here today because we are concerned with the direction a small, but very vocal sub-set of our profession here in New Mexico is trying to take us. They have been actively pursuing prescriptive drug rights for the past four years and we are strongly opposed to this. It is our understanding another bill will be introduced this January.

I'd like to take a few minutes explaining chiropractic. Chiropractic is a complete system of healthcare focused on restoring, preserving, and optimizing health by natural hands-on care. The goal of chiropractic is to optimize health with a non-invasive approach that does not use drugs or surgery. Chiropractic's primary avenue of care is the correction and maintenance of the spine and nervous system, which is of fundamental importance in health.

The spine is an important structure that houses and provides protection for the spinal cord, while providing mobility for the torso. This dual requirement of strength and flexibility makes the spine a very complex structure, with 24 vertebrae forming the spinal column. When these vertebrae are not positioned or functioning normally, it can affect the nerves exiting the spine affecting the overall function of the body. Chiropractic care attends to irritations called subluxations along the spine by manually repositioning these joints. This is an "adjustment."

This is the way to optimize the health of the whole human body and not just a means to relieve back complaints.

I have one intent as a chiropractor: to lay my hands on that person to find subluxation, correct it to the best of my ability and maintain that threshold long enough for the body to be able to replicate itself normally versus abnormally and allow this individual (patient) to express the inherent ability of their body to self regulate and self heal. Many patients choose chiropractic as their primary care doctor, because they prefer treatment plans that do not rely on medication or surgery. The word "Chiropractor" was coined in 1898. Chiro=hand, practic=practice; to practice by or with one's hands. Note that the word "chiropractic" is the actual name of the profession. A chiropractor practices chiropractic not chiropractic medicine.

The Association of Chiropractic Colleges defines Chiropractic this way. "Chiropractic is a health care discipline that emphasizes the inherent recuperative power of the body to heal itself without the use of drugs or surgery. The practice of chiropractic focuses on the relationship between structure (primarily the spine) and function (as coordinated by the nervous system) and how the relationship affects the preservation and restoration of health. In addition, Doctors of Chiropractic recognize the value and responsibility of working in cooperation with other health care practitioners when in the best interest of the patient. The ACC continues to foster a unique, distinct chiropractic profession that serves as a healthcare discipline for all."

This definition has been accepted by our leading national trade associations, ICA, ACA and by the World Federation of Chiropractic. In November 2013, just last year, the Summit, an umbrella leadership group of 40 prominent chiropractic organizations approved unanimously the following statement: "The drug issue is a non-issue because no chiropractic organization in the Summit promotes the inclusion of prescription drug rights and all chiropractic organizations in the Summit support the drug-free approach to healthcare."

What this means is our chiropractic paradigm is unique and distinct. We don't want to do what MDs and Dos do; we want to provide an alternative to drugs and surgery whenever reasonably possible. Our

profession has practiced preventative and wellness care for most of our existence as a profession

Conventional or "allopathic" medicine focuses on curing illness through surgery and pharmaceuticals. The public has been taught to believe that the solutions to their health problems are going to come from drugs or surgery. Why are we so sick? This is the most important question because if people don't understand why they are sick, there's no possible way we will ever find a solution on how to get and stay well. Understand that you cannot medicate your way out of a problem that you behaved your way into. Drugs are targeted at blocking the bodies' ability to regulate itself. Drugs stop pathways and override systems. Chiropractic has never been based upon outside-in philosophy! It is our duty and responsibility as Doctors of Chiropractic to educate our patients first, teaching them how to make the correct lifestyle choices, nutrition, and good exercise habits. Real healthcare is designed to optimize health, not merely treat disease. Too many patients want a quick fix and doctors can get easily caught up in trying to give them that "quick fix" through the form of a pill or prescription rather than taking the time to educate them first. Pills are much easier, but education takes time and work just as the problem has taken time to get there. The sixth chiropractic principle states that there is no process that does not require time. We must remember that healing takes time! There is no quick fix!

Chiropractic is more pro-active in its care. Lets not wait until you get sick, lets keep you healthy so you don't have to be a customer of the sick care system. Medicine is sick care! According to Gary Null, Ph.D nutritionist, and the Center for Disease Control and Prevention, deaths from drug overdose have been rising steadily over the past two decades and have become the leading cause of death in the United States ahead of pulmonary disease, diabetes, AIDS, pneumonia, accidents, and automobile deaths. Prescription drug overdoses kill one person every 19 minutes. According to *The National Survey on Drug Use and Health*, a survey of approximately 67,500 people across the United States, found that the states with the highest rates of narcotic painkiller abuse were in the West - Arizona, Colorado, Idaho, Nevada, Oregon, Washington, and last but not least New Mexico. The FDA website reports there are over 2 million serious adverse drug reactions yearly with 100,000 deaths

yearly. ADRs are the 4th leading cause of death ahead of pulmonary disease, diabetes, AIDS, pneumonia, accidents and automobile deaths. Nursing home patients have an adverse drug reaction rate of 350,000 a year. The United States represents 5% of the world's population, yet we take 75% of the pharmaceuticals that are out there, and still, according to the World Health Organization, the US is ranked 37th in health among all the nations. We don't need more drugs being prescribed by Chiropractors.

At this time, I would like to introduce my colleague, Dr. Brad Fackrell, who will discuss further why granting prescriptive drug rights to chiropractors is not desired by the majority of our profession, and not in the best interest of the safety of our NM citizens.

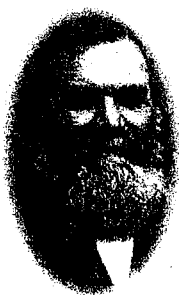


ICA News Release

International Chiropractors Association
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CHIROPRACTIC PROFESSION AND PATIENTS CELEBRATE FOUNDER'S DAY



Chiropractic's famous first adjustment is recognized each year with an annual observance commemorating September 18th, 1895 as Chiropractic Founder's Day. On this day, 119 years ago, Dr. Daniel David Palmer administered the first specific chiropractic adjustment on his patient, Harvey Lillard in Davenport, Iowa. Dr. D.D. Palmer delivered this historic first chiropractic adjustment with the specific intent of realigning a malpositioned vertebra on the patient, restoring its normal position, and Harvey Lillard, who had lost most of his hearing 17 years earlier, noted his hearing swiftly returned under Dr. Palmer's care. Dr. Palmer proceeded to explore and evolve his clinical practice to his new method of replacing spinal bones that were out of position, and experienced positive clinical results in patients with a wide variety of health concerns.

His practice grew as patients happily referred their friends and family, the profession of chiropractic was launched, and since that day chiropractic has grown to serve millions of patients worldwide, recognized for clinical efficacy, cost effectiveness and safety as a distinct doctor-level health care science, philosophy and art.

The theory and clinical basis of chiropractic was succinctly described as "Founded on Tone" in 1910 in a book authored by Dr. Palmer. Over subsequent years the science, art and philosophy of this unique and special approach to health care was further described and detailed. Key aspects of the chiropractic approach to health and healing were published in a listing of 33 Principles, outlined in a landmark text by Dr. R.W. Stephenson in 1927. Over the following years of research, education and clinical practice, chiropractic has grown into a widely recognized, distinctive health care profession with an expanding collection of research references and growing numbers of enthusiastic and grateful patients around the globe.

As an emergent new health science and practice now 119 years old, chiropractic is predicated on the recognition that the human body is a self-healing, self-regulating organism. And, most constructively, chiropractic understands how the body, rather than requiring intervening interruptions or intrusions into the healing process, instead needs no interference with its innate capacities for self-coordination, organized communication, and repair. The pioneering efforts begun by Dr. Palmer, that in his time were deemed an affront to the orthodox medical industry of the era, is now a concept so accepted and credible that widely-recognized authorities like Drs. Andrew Weil and Deepak Chopra base the core premise of their best-selling books and tapes on this healing model.

The Founding Principles of Chiropractic, referred to as *The 33 Principles*, provide a helpful articulation of the intellectual, philosophical and scientific foundation for the chiropractic profession and they represent the key components of chiropractic's unique approach to health and healing. These core principles, with Dr. D.D. Palmer's founding pronouncement that chiropractic was "Founded on Tone", set the course for a health revolution in the United States and around the world. Established in 1895 from a modest and, unfortunately, often misunderstood and misconstrued beginning, chiropractic continues to grow in popularity and acceptance, and is now coming into its own as the largest drugless healthcare profession. It was because of the authenticity and soundness of these principles that chiropractic has not only survived initial harsh criticism and onslaught by its detractors, but has flourished, and now is increasingly understood and embraced by a wide audience of people in search of health.

(MORE)

The 33 Principles are well known by chiropractic practitioners and students throughout the profession as the basic defining and organizational concepts of chiropractic's core philosophy and science. They are recognized and applied by many as the roots of the value system of chiropractic practice. Many of the complications experienced in chiropractic's professional evolution and acceptance, as noted by Dr. Jack VanDervort in his research presentation* at the ICA Symposium in Rome in April 2002, involve an unfortunate lack of familiarity with and understanding of the 33 Principles of Chiropractic:

Chiropractic has 33 beautiful lines that were written to define and delineate this new healing profession. In the definition of the chiropractic niche in health care we have chosen the word "holistic" rather than "alternative" or "complementary" because of its appropriateness to our distinct, indeed unique, position. Holistic refers to "care of the whole person rather than just treating the symptoms of a disease." "Complementary" to allopathic medicine or "alternative" to anything, simply are not adequate and do not convey our meaning.

"It is vitally important that both professionals and the public become better aware of the founding principles of this profession," explains Dr. Daniel J. Murphy, internationally respected chiropractic educator and former ICA Vice President. "The very nature of the language used to describe chiropractic science includes core concepts that are in turn explored in research, articulated in education and expressed in practice by thousands of doctors of chiropractic worldwide." These principles are a unifying and distinguishing element in chiropractic, vital to articulating and maintaining the independent perspective chiropractic represents in health care.

Once misunderstood as "experimental", "unorthodox", or "alternative" health care, Chiropractic has now become a vital part of the main stream of health care for people around the world. "Doctors of chiropractic worldwide have every reason to be proud of our profession and the unique contributions chiropractic science continues to make to the lives of millions," said ICA President Dr. Michael S. McLean. Chiropractic receives tremendous support from the public, and every day in countries around the globe, millions of individuals of all ages, from newborn infants to the most senior of our citizens, seek the care of a doctor of chiropractic. Throughout its history, the chiropractic profession has provided clinically efficacious, cost-effective and safe care to millions of patients worldwide, and has earned the highest patient satisfaction levels of any doctor-level health care science.

*Copies of Dr. Jack K. VanDervort's commentary, "An Exegesis of the Founding Tenets of Chiropractic, Relative to the Post Modern Model of Holistic Health Care," which was presented as a research paper for the Proceedings of the ICA Symposium held in Rome, Italy in April 2002, are available upon request to science@chiropractic.org.

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International Chiropractors Association

The International Chiropractors Association is the oldest continuously active international chiropractic organization in the world. Established in 1926 by B.J. Palmer (son of D.D. Palmer, the founder of chiropractic) the ICA represents thousands of practitioners, educators, students and lay persons dedicated to the chiropractic profession. The ICA has traditionally been and continues to be recognized as representing the moderate voice of the chiropractic profession. The ICA represents and promotes the interests of chiropractic, chiropractors and the patients they serve through advocacy, research, and education. Throughout its long history, the International Chiropractors Association has sought to educate and inform the public, other health care professions and health policy makers on the principles and definitions of chiropractic in order to foster a broader understanding and acceptance of the profession. The ICA has also established standards of ethical, technical and professional excellence as guideposts for the Doctor of Chiropractic. For further information including ICA's Policy Handbook & Code of Ethics, Best Practices and Practice Guidelines, and a description of the Practice of Chiropractic, contact the ICA (www.chiropractic.org).

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American
Chiropractic
Association

News Release

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FOR IMMEDIATE RELEASE

July 28, 2014

American Chiropractic Association Touts Conservative Care First During Annual Observance

***Public Health Awareness Campaign Held Each October;
Tool Kit Online Now***

Arlington, Va.--The American Chiropractic Association (ACA) will once again this October lead the country in celebrating National Chiropractic Health Month (NCHM). This year's observance features the theme "Conservative Care First!" to educate the public about the value of exhausting non-invasive, non-pharmaceutical treatments for pain management and health enhancement before moving on to other options.

During NCHM, ACA members and doctors of chiropractic (DCs) nationwide will share information with the public about chiropractic's "conservative care first" approach and why it is especially significant for today's health care consumers. This in turn will help patients have well informed dialog with their health care providers, empowering them to become their own advocates by insisting on information about conservative treatment options.

"People need complete information about their treatment options," said ACA President Anthony Hamm, DC. "During National Chiropractic Health Month, doctors of chiropractic will encourage patients to ask questions and learn about safe, effective conservative approaches that may help them avoid riskier and more costly treatments."

To kick off the celebration, ACA has created an online tool kit for ACA members, chiropractic state and specialty associations, chiropractic colleges, Student American Chiropractic Association (SACA) chapters and anyone who wishes to participate. The kit contains information and resources that will assist participants in planning and implementing NCHM activities at local and regional levels. Certain resources are exclusively available to ACA members.

For more information on how to participate, visit
www.acatoday.org/NCHM.

INTERNET ARCHIVE
waybackmachine<http://www.fda.gov/Drugs/DevelopmentApprovalProcess/DevelopmentResources/> Go

236 captures

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Drugs

Why Learn about Adverse Drug Reactions (ADR)?

Institute of Medicine, National Academy Press, 2000

Lazarou J et al. JAMA 1998;279(15):1200-1205

Gurwitz JH et al. Am J Med 2000;109(2):87-94

- Over 2 MILLION serious ADRs yearly
- 100,000 DEATHS yearly
- ADRs 4th leading cause of death ahead of pulmonary disease, diabetes, AIDS, pneumonia, accidents and automobile deaths
- Ambulatory patients ADR rate—unknown
- Nursing home patients ADR rate— 350,000 yearly

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Page Last Updated: 02/03/2010

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1. </web/20131109024932/http://www.fda.gov/Drugs/DrugSafety/DrugInteractionsLabeling/ucm110632.htm>

Mr. Chair, members of the committee, good afternoon. Thank you for the opportunity to speak to you today. My name is Dr. Brad Fackrell. I am a Chiropractor and have been in practice in Rio Rancho for 17 years. I am here today to present to you information to support our contention that prescriptive drug rights in the Chiropractic profession is not something the majority of our profession desires and to explain why we see this as a public safety matter.

We are aware representatives from the NM Chiropractic Association made a presentation last year advocating for prescriptive rights. They claimed about 30% of the nearly 500 licensed Chiropractors in NM had undergone the Advanced Practice program. The fact is, at this time there are between 650 and 700 Chiropractors who hold a NM license. There are 140 Chiropractors licensed as Advanced Practice. That is close to 20%, not 30%. They said chiropractors from other states have been moving here in unprecedented numbers to take advantage of our more “progressive” environment. The fact is there have not been any new AP licenses applied for since December 2012 and many of the DCs who have been licensed as Advance Practice were already practicing here in NM. The master’s program at National University of Health Sciences that was approved as the educational pathway for present AP training has no students presently enrolled in the program.

NMCA leadership would have you believe they represent the desires of all the chiropractors in NM; however, this is unsubstantiated. Presently the NMCA has 250 to 260 members according to their Executive Director. This would be about 34% of all the DCs in NM and of the 250 to 260 members, about 100 to 120 attend the Annual General Assembly meeting, but to date they have not been afforded the opportunity to voice their opinions on any proposed bills prior to their introduction. So far three bills requesting prescriptive drug rights have been introduced by the NMCA at legislative sessions – HB127 in 2011, SB471 in 2013, and SB329 in 2014. We are aware the NMCA intends to introduce another bill in January. None of these bills has been made available to the NMCA members for their input prior to introduction nor were they asked for their approval. The NMCA leadership has never made any attempt to seek a vote of approval for these bills from the membership.

The vast majority of our profession nationwide does not want prescriptive drug rights. The latest statistics from the US Department of Labor, Bureau of Labor Statistics reports there were 44,400 chiropractors in the US in 2012. The 140 Advanced Practice DCs represents 0.3% of that total. In November 2013 an historic event took place. The Chiropractic Summit, an umbrella leadership group of prominent chiropractic organizations, met in Seattle, Washington, and approved, unanimously, the following statement, “The drug issue is a non-issue because no chiropractic organization in the Summit promotes the inclusion of prescriptive drug rights and all chiropractic organizations in the Summit support the drug free approach to health care”. The Summit is comprised of our two national trade associations (ICA and ACA), the Association

Chiropractic Colleges, the Congress of Chiropractic State Associations, the National Board of Chiropractic Examiners, and the World Federation of Chiropractic, just to name a few.

Not all of our chiropractic colleges have issued formal statements regarding this issue, but some have. Three colleges (Western States, National and Bridgeport) have expressed support for prescriptive drug rights. These three schools together represent around 1025 students. The colleges who have taken a stand against prescriptive drug rights (Palmer, Life and Life West) together represent around 4045 students, almost four times as many students. In other words, some of our largest, most prestigious chiropractic colleges are opposed to drugs being introduced into our scope of practice.

Recently, both Palmer College of Chiropractic and Life University released letters in response to a white paper put out by a chiropractic trade association in Wisconsin suggesting chiropractors should pursue prescription drug rights. These letters are included in the packet provided to you, so I will not read them in their entirety, but I will quote the following:

“Life University has had a Board of Trustees official position on this topic for over two years... (Life) is emphatically opposed to the inclusion of pharmaceuticals in the practice, licensure requirements or educational standards of a chiropractor...Please add our voice to that of the majority of our profession who are opposed to the inclusion of drugs in the practice of Chiropractic”.

The Chancellor of Palmer College of Chiropractic stated, “Palmer recently spent three years researching and carefully crafting an identity for chiropractors...We created a practice paradigm that states: Chiropractic focuses on neurological and musculoskeletal integrity, and aims to favorably impact health and well-being, relieve pain and infirmity, enhance performance and improve quality of life without drugs or surgery.”

Finally, what about the attitude of the public, the patients seen by Chiropractors? In 2013, when SB471 was introduced, a petition was started on SignOn.org asking for support for chiropractors to obtain prescriptive drug rights. In a three week period they received 432 signatures. One of my colleagues started a petition shortly thereafter on SignOn.org, asking people to support keeping chiropractic drug free in NM. In nine days 2,772 people signed the petition. The public, 2772 to 432, chose to have chiropractic remain drug free.

It appears quite evident that when one looks at the numbers, the majority of my profession and our patients prefer to keep drugs out of our scope of practice.

Let's move on to the issue of public safety. The question arises, are Chiropractors sufficiently trained to take on the responsibility of prescribing drugs? If not, how much more education would we need to be equivalently trained to the standards of a Medical Doctor, Osteopath or even a Certified Nurse Practitioner?

The classroom education of chiropractic students is not a problem. We have equivalent hours in equivalent subjects to that of an MD or DO. It is the lack of clinical experience that is the issue. Clinical training in chiropractic colleges focuses on manual techniques, including examination and adjusting procedures. Chiropractic students do not prescribe drugs in school clinics and have very limited opportunities for hospital training. No Chiropractic college provides practical, in-hospital training on how to handle life threatening drug reactions. Based on the FDA statistics, presented by Dr. Velasquez, we know there can be, will be, serious adverse reactions sooner or later. Our students graduate with a miniscule amount of clinical rotations compared to MDs, DOs and CNPs. CNPs typically are required to complete 700-800 hours of clinical rotations. For an MD or DO the last two years of school emphasize clinical rotations, followed by a minimum of three years of residency training, which may involve 80 hour work weeks. The public is not safely served by allowing chiropractors to by-pass this process. Even completing 650 hours of clinical experience under the supervision of an MD, DO, CNP or a level-two advanced chiropractor in an office setting (as proposed in SB329) is not comparable to hospital rotations in accredited teaching hospitals and cannot be considered Best Practices.

SB329 would have allowed the clinical training to be conducted by chiropractic colleges; however, these programs, which presently do not even exist, would be accredited not by the Council on Chiropractic Education, the only recognized accrediting agency for chiropractic degree programs, but would be accredited merely by regional accrediting agencies that have no connection to or interaction with our profession. Also, there is no provision made for testing by our profession's recognized testing agency, the National Board of Chiropractic Examiners.

It has been suggested by the NMCA representatives that with additional training, chiropractors are poised to enter the work force in adequate numbers within the next few years to make a significant difference in reducing the shortage of PCPs in NM. Since there is no chiropractic college that presently has a program approved by our national accrediting body, that provides the necessary training called for in SB329, it will be years before any chiropractors are trained and ready to fill the shortage.

If our colleagues who desire prescriptive drug rights are truly serious about making a difference in reducing the PCP shortage in NM in the timeliest manner, they should be willing to take the more reasonable pathway currently available to them, which is the Certified Nurse Practitioner program at UNM. A number of chiropractors have done just that in much less time than it will take for the chiropractic colleges to create appropriate programs, arrange for appropriate locations to provide clinical rotations, and for the chiropractors to move through the system.

For the benefit and safety of the NM public, we would encourage them to obtain prescriptive drug rights under a CNP license that is achieved under medical supervision. They can practice with full prescriptive rights, and our profession can maintain a drug free scope of practice as the majority of Chiropractors prefer.

In summary, we are here today to let you know the majority of our profession at this time is opposed to the inclusion of drugs into our scope of practice, and, in our opinion, such a major, fundamental shift in our profession's paradigm should come from our profession's leading organizations at the national level, not be implemented at the state level by legislation introduced for the benefit of 20% of NM chiropractors (0.3% of the nation's chiropractors). Also, we contend the educational pathway suggested in the bills introduced so far is not sufficient or equivalent to the clinical training of an MD, DO or CNP. We would ask that you take this into consideration when the next bill is introduced in the next legislative session.

Thank you, Chairman and members of the committee for your time and attention.

Chiropractic Summit Member Organizations

American Black Chiropractic Association

American Chiropractic Association

Association of Chiropractic Colleges

Breakthrough Coaching

Canadian Chiropractic Association

Chiropractic Economics

ChiroSecure

ChiroTouch

Cleveland Chiropractic College, Kansas City

Congress of Chiropractic State Associations

Council on Chiropractic Education (*non-voting*)

Council on Chiropractic Guidelines & Practice Parameters

David Singer Enterprises

Dynamic Chiropractic

Foot Levelers

Foundation for Chiropractic Progress

Foundation for the Advancement of Chiropractic Tenets & Science

Future Health Software

International Chiropractors Association

Life Chiropractic College - West

Life University

Logan Chiropractic College

National Association of Chiropractic Attorneys (*non-voting*)

National Board of Chiropractic Examiners

NCMIC

New York Chiropractic College

Northwestern Health Sciences University

Palmer College of Chiropractic

Parker College of Chiropractic

Southern California University of Health Sciences

Standard Process

Student American Black Chiropractic Association (*non-voting*)

Student American Chiropractic Association (*non-voting*)

Student International Chiropractors Association (*non-voting*)

Texas Chiropractic College

The American Chiropractor

The Masters Circle

University of Western States

World Federation of Chiropractic

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FOR IMMEDIATE RELEASE: Nov. 14, 2013

Chiropractic Summit Promotes Drug-Free Approach to Health Care

Arlington, Va.—The Chiropractic Summit, an umbrella leadership group of prominent chiropractic organizations, met on Nov. 7 in Seattle, Wash. and approved, by unanimous motion, the following historic statements of agreement:

- **Summit Promotes Drug-Free Approach:**
The drug issue is a non-issue because no chiropractic organization in the Summit promotes the inclusion of prescription drug rights and all chiropractic organizations in the Summit support the drug-free approach to health care.
- **Summit Supports the Council on Chiropractic Education (CCE):**
The Summit fully supports the continued recognition of CCE. Even though there are some issues of concern remaining, such as CCE's governance model, many good things have occurred the last couple of years. In addition, CCE has agreed to carefully review governance models for possible improvements beginning in 2014 in connection with the Summit Roundtable.

In addition, the Summit voted unanimously to reaffirm its support of CCE before the Department of Education's (DOE) National Advisory Committee on Institutional Quality and Integrity (NACIQI) this December.

From: "Guy Riekeman, Dr" <riekeman@life.edu>

Date: October 20, 2014 at 2:39:20 PM EDT

To: Nita Looney <nlooney@life.edu>

Subject: Drug Statement for WI

LIFE UNIVERSITY'S POSITION ON PROPOSED LEGISLATIVE ACTION TO INCLUDE DRUGS IN THE PRACTICE OF CHIROPRACTIC

Recent proposals have been espoused by the Wisconsin Chiropractic Association that would open the door for the use of drugs in the practice of chiropractic. Life University has had a Board of Trustees official position on this topic for over two years, which is included below, but in short is emphatically opposed to the inclusion of pharmaceuticals in the practice, licensure requirements or educational standards of a chiropractor. Life University has a clear and distinct Vision statement that emphasizes the importance of correcting neurological interferences to the nervous system be they a direct or indirect result of physical traumas, environmental toxins or emotional stresses. One of these interferences is spinal malfunction resulting in neurological, muscular, biomechanics and soft tissue damage (vertebral subluxation) and is the unique clinical specialty of chiropractors. Chiropractors can access appropriate medical care when it is called for by direct referral and therefore there is no need to create a duplicate service especially when drugs are a major cause of malpractice and death in the United States even with the best of medical training and residency requirements.

Chiropractic offers a vital, safe and cost effective approach to natural conservative therapeutics for condition based care, but also an approach to long term corrective care to enhance overall function, and as part of a wellness team ensuring regular lifetime care along with whole food nutrition, positive mental behaviors, exercise and functional neurology.

Please add our voice to that of the majority of our profession who are opposed to the inclusion of drugs in the practice of chiropractic.

Dr. Guy Riekeman
President
Life University

LIFE UNIVERSITY

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From: Lori Leipold [mailto:Leipold_L@palmer.edu]
Sent: Wednesday, October 15, 2014 12:43 PM
Subject: Palmer College of Chiropractic chancellor responds to WCA white paper

Oct. 15, 2014

For immediate release

Contact: Lori Leipold, Media Relations; Palmer College of Chiropractic; phone (563) 884-5726; email lori.leipold@palmer.edu

Palmer College of Chiropractic chancellor responds to Wisconsin Chiropractic Association white paper

Palmer College of Chiropractic Chancellor Dennis Marchiori, D.C., Ph.D., has issued the following response to a recent white paper from the Wisconsin Chiropractic Association on chiropractic scope of care.

October 10, 2014

As chancellor of Palmer College of Chiropractic, I feel compelled to respond to a recent white paper from the Wisconsin Chiropractic Association (WCA) titled, "The Primary Spine Care Physician Initiative." The WCA is to be applauded for highlighting contemporary health care challenges, including the need to address the huge burden of non-surgical spine-related disorders on the health care system. I agree with their position that chiropractors, as primary care professionals for spinal health, are uniquely qualified to fill this role. However, I disagree that prescription rights are needed to effectively fulfill this role. Instead, let's continue our advocacy that health care delivery evolve to embrace our conservative and wellness-based approach.

Palmer recently spent three years researching and carefully crafting an identity for chiropractors as: *The primary care professionals for spinal health and well-being.* We also created a practice paradigm that begins: *Chiropractic focuses on neurological and musculoskeletal integrity, and aims to favorably impact health and well-being, relieve pain and infirmity, enhance performance, and improve quality of life without drugs or surgery.* (For more information on our identity, see www.palmer.edu/our-identity.)

To achieve our shared goal of enhancing public health by addressing the global burden of spinal-related disease, we need an identity, a focus and a scope of care that honors our tradition, is evidence-based -- and is clearly understood and embraced by health care consumers. We contend that Palmer's identity, which includes primary spine care along with wellness, does exactly that -- without drugs or surgery.

Sincerely,
Dennis Marchiori, D.C., Ph.D.
Chancellor

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Chiropractic Expansion Act Improves Healthcare and Public Safety.

By Dr. J. Adam Metzger (Contact)

To be delivered to: The New Mexico State House, The New Mexico State Senate, and Governor Susana Martinez

PETITION STATEMENT

NM Senate Bill 471 (SB471) improves the quality of healthcare in the state by increasing access to chiropractic physicians as primary care providers.

Stand-up for public safety; VOTE YES on SB471 or any piece of legislation expanding the utilization of chiropractic physicians in New Mexico.

Petition Background

30 million uninsured patients are expected to enter the healthcare system through 2019 as a result of insurance mandates required by the Patient Protection and Affordable Care Act. At the same time, a shortage of primary care physicians is expected to surpass 52,000 by 2025, according to a recent study published in the November/December issue of the Annals of Family Medicine.

SB471 expands public access to conservative, cost-effective, primary care physicians in underserved and rural areas by expanding the scope of chiropractic medicine.

We're calling on Gov. Martinez, members of the New Mexico State Legislature, and members of the Senate Public Affairs Committee to stand-up for public safety and VOTE YES on SB471.

There are currently 432 signatures

NEW goal - We need 500 signatures

Previous petition signers

#432	Jo March	Feb 21, 2013	Santa Fe, NM
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I believe this is a matter of urgency because medical doctors are very limited in their practices, and Chiropractors are able to give a much wider range of care which, in my case especially, is needed. Please pass this. Thank you.

#431	Benjamin Balarezo	Feb 21, 2013	North Miami Beach, FL
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#430	Rob McLarnon	Feb 21, 2013	Levittown, PA
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Keep Chiropractic drug free in New Mexico.

By Allen Miner (Contact)

To be delivered to: NMCA, The New Mexico State House, The New Mexico State Senate, and Governor Susana Martinez

PETITION STATEMENT

If you believe that prescription drugs do not have a place in Chiropractic care, then please help voice your concern by letting our congress men and women no that you are against SB 471. Please sign this petition to vote "NO" for this Bill.

Chiropractors provide essential health care services to the people of New Mexico and the rest of the country offering primary contact and primary care services within the nationally and internationally accepted chiropractic model of care as a drugless, non-surgical approach to health care.

Petition Background

Chiropractors provide essential health care services to the people of New Mexico, and the rest of the country, offering primary contact and primary care services within the nationally and internationally accepted chiropractic model of care as a drugless, non-surgical approach to health care.

If you believe that prescription drugs do not have a place in Chiropractic care, please help voice your concern by signing this petition and voice your vote "against" SB 471

There are currently 2,772 signatures

NEW goal - We need 3,000 signatures

Previous petition signers

 #2772 Josephine Lackner Feb 21, Chillicothe, IL
2013

Keep drugs out of Chiropractic

 #2771 Steve Feb 21, West Columbia, SC
2013

 Drugs can create subluxations. My job is to remove subluxations
not create them

 #2770 TERI A. BYNUM Feb 21, MARIETTA, GA
2013