

MAY 2011

# OCA NEWS

ONTARIO CHIROPRACTIC ASSOCIATION



## INSIDE

President's Message . . . . .	2
Chiropractic in the News . . . . .	3
Spring public education campaigns . . . .	4
OCA unveils new television ad campaign. . . . .	5
Protect yourself from identity theft . . . .	6
Update on changes to WSIB POC. . . . .	6
Revisions to WSIB Form 8 . . . . .	7
Online renewal update . . . . .	7
Help chiropractic research . . . . .	8
Demystifying research . . . . .	9
Benefits of maintenance care for chronic back pain . . . . .	10
Student challenge brings health care disciplines together. . . . .	12
Chiropractors and pharmacists in an FHT . . . . .	13
Building physician relations . . . . .	16
Electronic medical records . . . . .	16
In Profile . . . . .	17
In Memoriam . . . . .	18
OCA Practice Realities Panel . . . . .	19
Welcome new members . . . . .	19
Membership resources . . . . .	20
PMP Bits & Bytes . . . . .	22
OCA ChiroWrite . . . . .	25
Classified . . . . .	27

## ALSO IN THIS MAILING

- PMP Post

### OCA contact info:

200 - 20 Victoria St.  
Toronto ON M5C 2N8

416-860-0070  
Toll-free: 1-877-327-2273  
Fax: 416-860-0857

[www.chiropractic.on.ca](http://www.chiropractic.on.ca)  
email: [oca@chiropractic.on.ca](mailto:oca@chiropractic.on.ca)

The inclusion of classified ads or separate enclosures does not imply that the OCA or the chiropractic profession has reviewed or endorses the products, services or opportunities so advertised.

## Advocacy Day 2011 draws enthusiastic crowd at Queen's Park

OCA Directors, staff members, Riding Designates and leaders of the profession recently gathered at the Provincial Legislature for the association's Queen's Park Advocacy Day.

Beginning with a series of 13 organized meetings between OCA representatives and MPPs who are actively involved in health care-related issues, the day yielded many opportunities for frank discussion on two key points:

- the value of chiropractors within collaborative, interdisciplinary primary care models, and
- the benefits to patients, providers and the wider health care system of making regulatory changes to provide chiropractors access to necessary diagnostic tools: MRIs, diagnostic ultrasound, select lab tests and x-rays in hospitals.



Left to right: Minister of Health Deb Matthews, OCA CEO Dr. Bob Haig, Nickel Belt MPP France Gélinas, OCA President Dr. David Brunarski and Kitchener-Waterloo MPP Elizabeth Witmer at OCA's Advocacy Day at Queen's Park.

*"I want to congratulate the Ontario Chiropractic Association for ably representing the best interests of your members. You have a long history of solid leadership and advocacy. Chiropractors are an integral part of our health system and I am pleased that you are being integrated into our Family Health Teams and hospital-based triage partnerships."*

— Elizabeth Witmer, MPP  
Kitchener-Waterloo

Marking the third consecutive year OCA has hosted the event, the day is an opportunity for chiropractors to meet with members of Provincial Parliament and their staff. And this year's cocktail reception proved popular among government stakeholders and decision-makers, with 26 MPPs in attendance, along with a large compliment of Queen's Park staff. Also present was Minister of Health and Long-Term Care Deb Matthews, who took the time to make some remarks.

"I would like to thank the association and its members for the important work it does in helping almost 2 million Ontarians maintain good health," said Minister Matthews.

"As many of you are aware, the Ministry is currently discussing a number of issues with the Ontario Chiropractic Association, the College of Chiropractors of Ontario and

**Continued on page 11** ▶

## PRESIDENT'S MESSAGE

# Working together to strengthen chiropractic's contribution in Ontario

When Minister of Health and Long-Term Care Deb Matthews arrived at our recent Advocacy Day cocktail reception at Queen's Park in April, the mood was bright after a full day of constructive meetings between OCA representatives and MPPs.

*"As many of you know, the Ministry is currently discussing a number of issues with the Ontario Chiropractic Association, the College of Chiropractors of Ontario and the Canadian Memorial Chiropractic College,"* she began, addressing the reception guests from the podium at the front of the room.

*"These discussions are designed to strengthen the role that chiropractors can play in Ontario's health care system."*

The discussions the Minister was referring to related to the joint submission by OCA, CCO and CMCC, and the ongoing collaborative work by all three organizations over the past 18 months that proposed, among other important health system changes, regulatory changes to enable chiropractors to:

- order MRIs and diagnostic ultrasound
- order specific laboratory tests consistent with the chiropractic scope of practice
- re-instate the ordering of X-ray services in hospitals.

The regulatory changes, the submission noted, will enable chiropractors to diagnose and care for patients more quickly and effectively, will result in chiropractors being able to provide more comprehensive care, and facilitate collaboration with other health care practitioners and teams.

The OCA as the profession's advocacy body, the CCO as the regulator, and CMCC as the educator have different mandates and expertise, and each of these has been essential to

give the government assurance that the changes we are proposing for the chiropractic profession are in the best interest of patients and the health care system.

Minister Matthews's words are an encouraging sign that we are succeeding in making the case, and in elevating the profession's profile to create new opportunities for chiropractors within Ontario's health care system.

There are still hurdles to climb and there is much work to be done, but there is reason to feel encouraged, and the OCA is committed to continuing to work with our fraternal organizations on behalf of chiropractors and their patients.

I would like to acknowledge CCO President Dr. Peter Amlinger, CCO Registrar and General Counsel Ms Jo-Ann Willson, CMCC President Dr. Jean Moss and CMCC Special Assistant to the President Dr. Silvano Mior and OCA CEO Dr. Bob Haig for their invaluable contributions to the process so far.

While our strategic priorities and energies have been focused on advocating for these regulatory changes, there has also been a significant development on another issue affecting our members: the sexual abuse provisions of the Regulated Health Professions Act (RHPA).

As you may recall, in a communication sent Feb. 17, 2010, OCA informed all members of a decision by the Court of Appeal of Ontario that confirmed the absolute prohibition against having sexual relations with a patient under Ontario law — even if the patient was a spouse. This decision, we felt, had the potential to place a number of OCA members at risk, particularly where marriages or committed relationships are ending. In response to the court's decisions, OCA and the Ontario Medical Association (OMA) led a coalition of 15 regulated health professional associations in



Dr. David Brunarski, President

writing to Minister Matthews's office to seek amendments to the sexual abuse provisions that would provide better clarity and protect against unjust decisions.

Since the coalition submitted its letter in February of last year, the Ontario Dental Association (ODA) added its voice to the call for reviewing the legislation and has taken the lead in championing changes. As a result, Minister Matthews has also committed to directing the incoming Chair of the Health Professions Regulatory Advisory Counsel, Thomas Corcoran, to review the sexual abuse provisions and recommend changes to the RHPA that will provide needed clarity. OCA is very pleased to learn of this decision by Minister Matthews and we extend our thanks to the ODA for taking on this issue on behalf of all health care professions. ●

### To provide your feedback

on any issue of importance to you, or to send your questions and comments to the President please email to: [president@chiropractic.on.ca](mailto:president@chiropractic.on.ca), fax to 416-860-0857, or mail to Ontario Chiropractic Association, 200 - 20 Victoria St., Toronto ON M5C 2N8.

## CHIROPRACTIC IN THE NEWS

An article recently featured in the online edition of the *Medical Post*, which reaches a targeted audience of approximately 20,000 physicians and health care managers, chronicles the positive patient experience of Markham firefighter Nick Patel, who was successfully treated for piriformis syndrome and returned to active duty.

The article also discusses chiropractic care for high performance athletes, citing the inclusion of chiropractors within the Core medical team at the Vancouver Olympic Games, and profiles the partnership between CMCC and Toronto's St. Michael's Hospital to provide chiropractic care to the inner-city patient population of the hospital's Department of Family and Community Medicine. Quoted in the story is St. Michael's family physician Dr. Judith Peranson:

*"Patient satisfaction is huge. People are getting a lot of relief. Often, given the socio-economic vulnerability of much of the community we serve, these are patients who wouldn't be able to access this kind of care elsewhere...."*

*"Chiropractors are regulated health professionals who are going to practice due diligence in ruling out any serious underlying problems and make note of any red flags. Having the confidence that they're going to call me if the patient's condition changes is comforting for both me as the treating physician, and for the patient. I also trust that my chiropractor colleagues are assessing whether or not diagnostic imaging is indicated, which allows for more efficient use of physician time and judicious use of imaging resources."*

The story is part of OCA's continuing efforts to conduct proactive media outreach to educate our stakeholders on issues of significance to the profession — such as ongoing chiropractic research and the value of including chiropractors within collaborative, interdisciplinary primary health care settings. Read the story on the OCA's website, [www.chiropractic.on.ca](http://www.chiropractic.on.ca), or on the *Medical Post's* website, at [www.canadianhealthcarenetwork.ca/physicians/inter-professional](http://www.canadianhealthcarenetwork.ca/physicians/inter-professional). ●



**Pictured with permission from the *Medical Post*.**

## Chatelaine and [Chatelaine.com](http://Chatelaine.com)

The May print edition of *Chatelaine* hit newsstands in mid-April, and contains a 1/3-page ad aimed at directing readers online to Back Health, a wrap-page on the *Chatelaine* website sponsored by Canada's chiropractors. Visitors to the wrap-page can read more about whiplash injuries and steps to speed recovery following a minor musculoskeletal injury, as well as access archived content from past articles.

The *Chatelaine* print ads and wrap-page are a joint initiative of the OCA, the Canadian Chiropractic Association (CCA) and our fellow provincial associations across the country.

### You can help make this program a success

To help you share this public education program with your patients, you can now order Back Health rack cards to display in your clinic or for networking in the community. From the campaign's first year, there are nine topics in the Back Health rack card series: Gardening, Sleeping Well, Handbags, Snow Shovelling, Falls Prevention, Luggage, High Heels, Fit Tips and Backpacks. All of the rack cards can be previewed on the CCA website, [www.chiropracticcanada.ca](http://www.chiropracticcanada.ca), in the Public Education section.

These colourful rack cards can be purchased at \$6.50 per package of 25 through the Canadian Memorial Chiropractic College Supply Centre and Bookstore. To order your rack cards, email [bookstore@cmcc.ca](mailto:bookstore@cmcc.ca). Please note each package contains only one topic.

If you haven't visited the online public education program yet, go to [www.chatelaine.com/backhealth](http://www.chatelaine.com/backhealth) to take a look at Canadian women's newest source of back health information from Canada's chiropractors. Remember to post a link to Back Health on your clinic website and keep the current issue of *Chatelaine* in your clinic waiting room. ●

## CHIROPRACTIC IN THE NEWS

# Spring public education campaigns

### *Get in the Game Without the Pain*

With the much-anticipated arrival of spring in Ontario, OCA is gearing up for the launch of our spring public education campaigns, beginning with our golf program, *Get in the Game Without the Pain*. Pre-written golf articles with print-ready art is being distributed to media outlets in Ontario this month through News Canada, and the story will be pitched directly to appropriate reporters, editors and producers by OCA's public relations firm Fleishman-Hillard.



### *Plant and Rake Without the Ache*

The OCA's popular gardening program is scheduled to relaunch in the Ontario media in early May, immediately following our golf program. Gardening content will be featured in News Canada, and OCA and Fleishman-Hillard will pitch the program to receptive members of the media as a follow-up to the golf story. Traditionally, lifestyle media has proved an eager audience for gardening content in advance of Mother's Day and the May long weekend, and OCA is working now to identify and prepare spokespeople to help maximize the positive coverage. ●



### *Easy ways to raise awareness with OCA public education materials*

1. Prominently display the program's print materials in your office and keep extras available for distribution. Posters are available for members' offices by request from the OCA.
2. Host a gardening- or golf-themed safety awareness day in your office and demonstrate proper techniques, warm-ups and stretches. Speaking notes are available on the OCA members' website, [www.chiropractic.on.ca](http://www.chiropractic.on.ca), or call 1-877-327-2273.
3. Host a gardening or golf safety information session at a local community centre, gardening centre or golf club. Program materials are available through the OCA free of charge for members conducting public outreach initiatives. This is a great way to network with local businesses and raise awareness about chiropractic in your community. *Remember, you are promoting health and safety, not your individual clinic. The public will appreciate your public education approach, and patients will follow.*
4. Co-ordinate with your local OCA society to contact gardening centres, golf courses, community centres and public libraries. Let them know materials are available for display.
5. Use content from the materials to create topical articles for community newspapers or patient newsletters. Topical, pre-written articles are available for member use and can be found in the Resources section of the OCA members' website, [www.chiropractic.on.ca](http://www.chiropractic.on.ca).

When conducting in-office or public presentations always remember to adhere to the standards and guidelines set out by the College of Chiropractors of Ontario ([www.cco.on.ca](http://www.cco.on.ca)). Also, ensure that your external educational efforts work to promote the profession as a whole, as opposed to your individual practice. The OCA wishes you the best of luck with your activities this spring!

**For more information, contact Krystyn Firka, Stakeholder Engagement Co-ordinator, 416-860-7182 or 1-877-327-2273, ext. 7186, or by email, at [kfirka@chiropractic.on.ca](mailto:kfirka@chiropractic.on.ca).** ●

## OCA unveils new television ad campaign

A new OCA television ad is soon to hit the airwaves on several Canadian television networks targeting health care consumers aged 35-plus.

Scheduled to begin airing in May, the ad was developed to align with OCA's strategic goals of defining, sustaining and advancing the profession, building and expanding chiropractors' professional standing and credibility and creating opportunities to effectively participate in the health care system. Accordingly, the association's External Relations team began working with advertising agency Anderson DDB in the fall of 2010 to establish a refined and realistic creative plan and a clear communication objective.

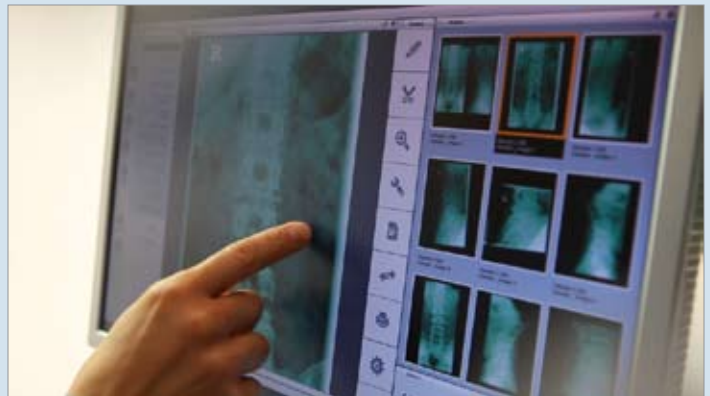
The resulting 30-second spot primarily targets adults between the ages of 25 and 65 who suffer or have suffered from musculoskeletal pain, with other health care professionals (particularly MDs and Registered Nurses) as a secondary target. Using a sophisticated animation technique to convey the end benefit of chiropractic care — that treatment helps people get back to leading an active lifestyle and doing the things they love — the ad emphasizes an evidence-informed approach and positions chiropractors as integral and respected members of Ontario's health care system.

In selecting this concept, OCA conducted qualitative market research to test four different creative concepts. The goal of the research was to maximize the impact and effectiveness of the spot in clearly communicating the ad campaign's main message. The research subjects included male and female back and/or neck pain sufferers, including current chiropractic users, lapsed users and non-users, as well as family physicians who referred patients for chiropractic care and who did not refer. The chosen concept was found to convey a meaningful and relevant set of messages in a professional, medically credible way, and its appeal spanned all patient groups (users, lapsed and non-users, men, women) as well as physicians.

"An intelligent ad," said one of the physicians interviewed. "[It] speaks to the scientific side of it [for the] general population."

The ad is slated to air throughout the month of May on conventional television stations and specialty television networks. Among the programs included in the buy are *Connect*, *Power and Politics* and *The National* on CBC News Network; *Real Housewives* and *Rich Bride on Slice*; *Cracking Antique* and *Disaster DIY* on HGTV; *House* and *Survivor* on Global television; *Breakfast Television* on CP24; and *American Idol* on CTV. There is also a social media component to the campaign, which includes Facebook.

"We're very excited to roll out the campaign, which is the culmination of a great deal of effort by the OCA and Anderson DDB team," says OCA President Dr. David Brunarski. "This is an ad that is very much aligned with the strategic direction of the OCA and, making use of television and social media is an exciting way to get our message out to our stakeholders." ●



A message from



[chiropractic.on.ca](http://chiropractic.on.ca)

## INFORMATION & LEGISLATION

# Protect yourself from Professional Identity Theft

Professional identity theft is the unauthorized use of a health care provider's name and health professional college registration number.

Below are a number of tips to help you avoid professional identity theft:

1. Health care providers who have suspicions or evidence of professional identity theft are encouraged to contact the Investigative Services Division of the Insurance Bureau of Canada (IBC) directly at [kquinn@ibc.ca](mailto:kquinn@ibc.ca).
  - a. IBC frequently publishes alerts that are sent to all member insurance companies, which advise members that a certain practitioner is no longer associated with a certain rehabilitation business.
2. Periodically audit the claim forms that a health care facility submits using your name and registration number, or request a copy of any documentation—such as treatment plans and invoices that are prepared—in which your name and registration number are referenced.
3. Be aware of the conditions, billing codes and dollar amounts being billed for your professional services.
4. Health care providers should not sign blank treatment plans.
  - a. Also, when preparing a treatment plan, ensure the patient's signature (consent) is obtained after the plan and its associated costs are reviewed with the patient. In other words, patients should generally not be asked to sign blank treatment plans either.
5. When you leave a health care facility, notify the facility in writing that your name and registration number may no longer be used.
6. If you have concerns about business practices that may be suspect, you can contact IBC's anonymous "Tips" line at 1-877-IBC-TIPS (1-877-422-8477).

IBC is the national trade association of the property and casualty insurance industry. IBC would like to work with Ontario's health care industry to prevent professional identity theft in Ontario injury claims. ●

# Update on changes to WSIB Program of Care

The WSIB has introduced changes to the Acute Low Back Injuries Program of Care (ALBI POC), an evidenced-based health care delivery plan that describes treatment that has been shown to be effective for injured workers with a low back injury.

As of March 28, 2011, all workers with a new low back injury must be treated in the ALBI POC. The WSIB will only pay for treatment provided through the ALBI POC for workers who begin initial treatment within six weeks of the date of injury or recurrence. The fee-for-service will not be covered as a first-line care.

If you have not previously treated a patient through a POC, you must be on the provider list. The provider directory form is available on the WSIB website at [www.wsib.on.ca](http://www.wsib.on.ca) or on the members' side of the OCA website under Resources / WSIB Information.

If you feel that your patient is not suitable for the POC or requires more care after the POC, you must contact the WSIB (416-344-5739, or toll free at 1-866-716-1299) after the completion of the ALBI POC. It is imperative that this contact occur immediately at the end of the six-week POC. WSIB will not pay for additional fee-for-service care that has not been pre-authorized.

For injuries that occurred prior to March 28, 2011, the previous rules apply.

The WSIB has provided a new reference guide and quick reference tool, along with a fee schedule and appropriate paperwork that will be required to be completed for your patients. These resources can be found on the OCA members' website, or on the WSIB website, [www.wsib.on.ca](http://www.wsib.on.ca) under Programs of Care.

If you have any questions, you may call WSIB's health care practitioner access line, at 416-344-4526 or 1-800-569-7919 or contact Dr. Rajwani, Health Policy Officer, at the Ontario Chiropractic Association at [mrajwani@chiropractic.on.ca](mailto:mrajwani@chiropractic.on.ca). ●

## INFORMATION & LEGISLATION

# Revisions to WSIB Form 8

The Workplace Safety and Insurance Board (WSIB) has revised the Health Professional's Report (Form 8) and related fees.

Effective March 28, the new Health Professional's Report (Form 8) is available for chiropractors to complete for initial assessments of workers. The form is available on the WSIB website, ([www.wsib.on.ca/files/Content/FormsNewForm8/0008A\\_March2011.pdf](http://www.wsib.on.ca/files/Content/FormsNewForm8/0008A_March2011.pdf)).

This form is being transitioned in and will replace the old form. Presently, you can use either form but OCA recommend that your office transition to the new form over the coming weeks. PMP will be offering the revised form as part of the July, 2011, update.

Page 3 of the new form includes functional abilities information. A copy of Page 3 (only), once completed, should be given to the worker to give

to his or her employer. Page 3 of the form also provides return-to-work information. This information will eliminate the use of the FAE form on the first visit. FAE forms submitted on the same date as the new Form 8 will not be paid.

Chiropractors are advised to ensure that the worker signs Page 3 under Section F. The worker's signature authorizes the release of information to the employer.

**For further information on these changes, visit ([www.wsib.on.ca](http://www.wsib.on.ca)), or call the Health Professional Access Line at 416.344.4526 or 1-800-569-7919. ●**

# OCA Online Renewal Update

OCA members will receive their annual renewal packages in early July. Once received, members will be able to renew their OCA membership and PMP license. Again this year, renewal invoices will be available online, allowing members to update their profile and make payment arrangements at their own convenience. OCA's secure web-based services make it faster and easier for members to order products and services.

Members can also enhance their clinic's visibility to potential patients with access to online marketing tools, including a free micro-site hosted on the OCA public website, as well as a dynamic chiropractor locator.

OCA has implemented the following changes for this year's renewal:

### OCA Membership

- Following a two-year freeze, there will be a small (2 %) increase on membership dues for the 2011–2012 fiscal year.
- OCA will be simplifying its membership categories to better align with CCA categories. This will affect dues for members who are currently within the CMCC Faculty, Life and Affiliate categories. More details will follow in the June issue of the OCA News.

### OCA Patient Management Program (PMP)

- Following a three-year freeze, there will be an increase of \$20 on the Associate license fee

- Following a two-year freeze, there will be an increase of \$5 on the Non-DC license
- Master license fees are not affected
- Primary users (Master licensees) will now be able to renew/pay for their Associate DC(s) to simplify the renewal process

**PMP Renewal – Important Reminder:** If you are the primary user (Master licensee) on your program, both your PMP and OCA membership must be renewed. Associate DC(s) using PMP must have renewed PMP in addition to renewing their OCA membership. Non-DCs are renewed during the Master DC renewal process. Offices will not receive an update CD until all practitioners listed on the program have renewed.

The OCA membership and PMP license renewal deadline is July 31, 2011.

Online invoicing is a great way to reduce paper consumption and mailing costs. We have worked diligently to ensure OCA's online services are secure and easy to use and work toward better serving OCA members. Member support of our online renewal process is greatly appreciated.

**Members can request a paper invoice to be mailed or for assistance with completing online renewal, please contact the OCA at 416-860-0070, or toll-free at 1-877-327-2273. ●**

## RESEARCH

# Help chiropractic research continue to flourish in Canada

By Dr. David Leprich

For those of us in active practice, life is busy — at times hectic. We are case managers for each patient. We develop and maintain our practices. We hire and train staff and manage the clinic. We deal with ever-changing auto insurance regulations and rules for billing to employment benefit plans.

All of the responsibility can be a bit overwhelming, but I am never happier than when working with patients in my clinic. One “thank you” from someone who can now return to work or go for a walk with his children makes up for the stresses of daily practice.

One of those stressors, the impact of negative publicity, seems to be greatly diminished of late. I suspect our research program may have something to do with this.

Despite the success of this program, there are challenges. Our efforts in seeking government funding for research have been successful, but far greater results will be needed to fulfill our goals for the program.

Only a minute segment of our profession is involved in active research. Compared to the medical profession, we have just begun to scratch the surface. Yet, we have managed in just a few years to establish a research consortium that is multidisciplinary and includes 16 chiropractors working at universities across Canada. Of that group, 10 have been installed as chiropractic research chairs and/or professors.

While we are still in the early stages, the results of the work being done by our very own research team are having a strong, positive impact. And we are getting noticed! Dr. Craig Chamberlin, Dean of Kinesiology and Health Studies at the University of Regina states “a research chair is an important component of a faculty’s research success, providing for protected time to engage in research, supporting and enhancing the research activity within the faculty.” The September *Quarterly World Report* of the WFC describes the “flourishing chiropractic research scene in Canada.” Finally, a release from the University of Manitoba indicates that the institution’s new chiropractic position “will advance research related to spinal manipulation and pain management for conditions such as neck pain, back pain and degenerative disc disease.”

Through the development of the research program and the success we have had placing our chiropractic researchers, we have met and



Dr. David Leprich

conquered a number of challenges. If we are to go much farther, we need your help.

In past articles, I have asked you to become a member of the CCRF. Many OCA members have responded with bronze (\$125) and silver (\$500) tax-deductible contributions. Your participation continues to be vital, however now I am asking you to look a little farther. A few contributions at the benefactor (\$10,000) or heritage (\$25,000) level would have a huge impact on our ability to reach our goals. You may have a patient who is a potential donor seeking a worthy cause. Perhaps a beloved family member has specified that upon their passing, a portion of the estate be used as a contribution to research. Go to [www.canadahelps.org](http://www.canadahelps.org). Do it today. ●

*Dr. David Leprich is a member of the CCRF's Board of Directors, and has previously served as President of the Niagara Chiropractic Society, Director of the OCA and President and Chairman of the Board of the Canadian Chiropractic Association (CCA). He is the theatre chiropractor for the Shaw Festival Theatre in Niagara-on-the-Lake and is a chiropractic disability consultant to the St. Catharines General Hospital and the Niagara Health System.*

## RESEARCH

## Demystifying Research

As part of our ongoing efforts to support our members in their delivery of evidence-informed, high-quality care, the OCA is very pleased to announce its newest member benefit: a preferred member subscription rate to the Research Review Service. Demystifying Research is a series of articles written by RRS Founder and President Dr. Shawn Thistle. To read other articles in the series, go to the RRS website, at [www.researchreviewservice.com](http://www.researchreviewservice.com).

### Part II:

## What kind of research consumer are you?

By Dr. Shawn Thistle

Excerpted and reprinted with permission from RRS

How many journals do you read each month?

How many papers do you analyze and apply to your patient care each year?

If you're uncomfortable with the answers to these questions, don't worry, you are definitely not alone. This is a growing problem and, in a health care environment where our patients are better educated and more discerning than ever before, it is a challenge for all health care professionals. In fact, many would essentially have to stop working just so they could keep up with the volumes of material that are published every month in reputable, peer-reviewed journals!

That does NOT mean that we don't have a responsibility to address this issue, however.

To further complicate matters, there is a distinct disconnect between the researchers and those in the field. I will discuss researchers in an upcoming article but for now, the simple fact is that we generally don't know the people who generate research and dedicate their lives to it, nor do we know the patients who



Dr. Shawn Thistle

## OCA's newest member benefit

The OCA and RRS are pleased to announce that OCA members can now save 50% on a one-year Professional Subscription (applicable for new subscribers and as a renewal for existing subscribers).

To subscribe to the service for the OCA member price of \$74.50 plus HST, use the member coupon code OCACHIRO and follow these instructions:

### For new subscribers:

1. Go to [www.researchreviewservice.com](http://www.researchreviewservice.com) and click on the **SUBSCRIBE NOW** link in the menu on the right side of your screen.
2. On the subscription plans page, choose the Professional 1-Year plan (**Note: your coupon code will not work if you select any other plan**).
3. Fill in your registration information (name, email, username and password).
4. Click **Send Registration**.
5. Go all the way through to the checkout page, and click **I agree to Terms**.
6. Enter the coupon code OCACHIRO (which is case sensitive) in the field below and click **Append**.
7. Click **Checkout**.
8. Your personal account will then be established. You will receive an email notification once registration is complete.

### Existing Subscribers:

The coupon code above can also be entered to renew your existing account. Simply log in using your username/password, go to **My Subscription** (located in the Subscriber Menu in the right side column) and click **Extend/Renew**. Next, select the Professional 1-Year plan and enter the code when prompted.

**If you experience difficulties during registration, email [support@researchreviewservice.com](mailto:support@researchreviewservice.com) for prompt assistance.**

**If you have questions about RRS, please email Dr. Shawn Thistle, at [shawn@researchreviewservice.com](mailto:shawn@researchreviewservice.com).**

Continued on page 10 ►

## RESEARCH

*Continued from page 9* ▶

participate in these studies. This leaves many wondering, “How can it possibly matter to me, my patients, or my practice?”

If you will indulge me, I will leave you today with some homework. One thing I have noticed since I started Research Review Service is that most of us have a love-hate relationship with research. As research “consumers” who must integrate this essential knowledge into our practice to the best of our ability, most of us fall into one of the following patterns of research consumption:

1. Those who have not updated their knowledge since graduation and do not consult the literature for any reason. They rely on their own experience to guide their patient care.
2. “Fair-weather research consumers,” who often inappropriately trumpet positive results of mediocre-quality research to serve their beliefs or interests, while turning a blind eye to higher-level evidence just because they don’t like the results.
3. Those who integrate current research, to the best of their ability, into their patient interactions, while keeping in mind that the two other crucial pillars of evidence-based care (or what I like to refer to as evidence-informed practice) are patient preferences and clinical experience.
4. Those who forget that patient preference and clinical experience are also important, relying solely on stringent research findings to dictate their treatment approaches.

In my opinion, the most concerning groups are the first and the last. The goal of this article series, and indeed the purpose of the Research Review Service (RRS), will be to help you shift your habits closer to those in the third group, while sensibly avoiding the downfalls of the fourth. The first step is to ask yourself: Which one most accurately describes you?

**Catch the third instalment of *Demystifying Research in the next issue of the OCA News.*** ●

## Benefits of maintenance care for chronic back pain

A recent study by the Rheumatology and Rehabilitation Department of Egypt’s Mansoura University, provides emerging evidence on chronic back pain, spinal manipulation and maintenance care.

The study, titled “Does Maintained Spinal Manipulative Therapy for Chronic Non-specific Low Back Pain Result in Better Long-term Outcomes,” was published online in January by the journal *Spine*. Of an enrolment of 93 eligible patients, 60 with chronic non-specific low back pain lasting at least six months were randomized to receive the following options:

**Option A:** 2 treatments of SHAM SMT over a one-month period.

**Option B:** 12 treatments consisting of SMT over a one-month period, but no treatments during the subsequent nine months.

**Option C:** 12 treatments over a one-month period along with maintenance spinal manipulation every two weeks for the following nine months.

### Results

After the initial one-month period of treatment, both spinal manipulation sub-groups identified significantly lower pain and disability scores in the control group. After 10 months, patients who had received spinal manipulation on a regular basis over the entire 10-month period had significantly lower pain and disability scores than those patients who had SMT for only one month. The Oswestry Disability Index and VAS scores were used as outcome measures.

### Discussion

The study showed that chronic low back pain patients who received maintenance care over a ten-month period of time following their initial treatment had better results regarding post-treatment pain and disability levels than those that had stopped chiropractic care after one month of care.

Chiropractors have advocated the benefits of regular care and this study shows a positive trend toward the use of maintenance care in the management of chronic non-specific low back pain. ●

## Advocacy Day 2011 draws enthusiastic crowd at Queen's Park

*Continued from page 1* ▶

the Canadian Memorial Chiropractic College. These discussions are designed to strengthen the role that chiropractors can play in Ontario's health care system."

NDP Health and Long-Term Care Critic and Nickel Belt MPP France Gélinas and former Health Minister Elizabeth Wither, MPP for Kitchener-Waterloo, also took to the podium to address the assembled guests at the event.

As in previous years, Advocacy Day served to reinforce the relationships formed with MPPs at the riding level by OCA's volunteer Riding Designates. Ms. Gélinas personally expressed her thanks to OCA member Dr. Mike Brosseau, who travelled from Sudbury to meet with her earlier in the day, while Huron Bruce MPP Carol Mitchell was eager to meet with her constituent OCA Riding Designate Dr. Carolyn Wood.



**Dr. Carolyn Wood Riding Designate for Huron Bruce with her MPP Carol Mitchell.**

*"Chiropractors have been helping Ontarians for a very long time. It is time for the government to do its part, by fully integrating Chiropractors into interdisciplinary care team as well as giving Chiropractors permission to practice to their full scope."*

— **France Gélinas, MPP,  
Nickel Belt**

"I think this Advocacy Day 2011 went a long way in building and strengthening our high-level and grassroots relationships at Queen's Park," said OCA President Dr. David Brunarski. "It was a highly impactful event, which speaks to the great work of the team involved in its organization, and to the valuable contributions made by our Riding Designates." ●

## Address to the House by Brant MPP Dave Levac

*"It is indeed a pleasure to rise in this House and offer a warm welcome to representatives from the Ontario Chiropractic Association, who are with us in the Legislature today.*

*"Mr. Speaker, it might interest you to know that the Ontario Chiropractic Association represents approximately 3,000 of the province's practicing chiropractors. As accomplished health professionals who deliver care to over 1.2 million patients in the province, chiropractors provide diagnosis, treatment and preventive care for disorders related to the spine, pelvis, nervous system and joints. OCA members are committed to educating patients and the public about their health, while empowering them to make informed decisions about treatment options and their overall wellness.*

*"For the third year running, groups of chiropractors will be meeting today with MPPs and government officials to talk about the contributions made by the profession to the health care system, and share experiences from our various constituencies.*

*And of course, Mr. Speaker, it would not be a Queen's Park Day without the Ontario Chiropractic Association's reception for all MPPs. A number of the OCA's members have traveled from ridings all across Ontario to be here today to let us know how they are making a difference for patients living in our communities. I encourage each and every member of this House to attend the reception that the Ontario Chiropractic Association is hosting this evening here in Committee Rooms 228-230 from 5 to 7 p.m. so that you can meet the OCA representatives from your riding. I hope to see you there."*

— **Brant MPP Dave Levac**  
Apr. 12, 2011

## CONTACT US

If you have a new address, or email address you can now log on to membership services on the members' side of the website and update your information. By keeping your email address up to date you help us to keep you better informed on important issues facing the profession. If you are currently receiving OCA information by regular mail, updating your profile with an email address will ensure timely updates of the information you need.



**Call us at 416-860-0070 or 1-877-327-2273, or email [oca@chiropractic.on.ca](mailto:oca@chiropractic.on.ca).** ●

## INTERPROFESSIONAL COLLABORATION

## Student challenge brings health care disciplines together

The National Health Care Team Challenge, an interprofessional student team event that promotes teamwork and collaboration among students, was held last month as part of the 2011 National Health Sciences Students' Association's (NaHSSA) annual conference, hosted jointly by CMCC's Interprofessional Education Council (IPE Council) and the InterProfessional Healthcare Students' Association (IPHSA) from the University of Toronto (U of T).

Participating in this year's Team Challenge were interdisciplinary teams from McMaster University, the Michener Institute, Queen's University, the University of British Columbia (UBC), the University of Ottawa and the University of Toronto.

For the challenge, each student team — made up of representatives from a number of health care disciplines, including medicine, pharmacy, social work, occupational therapy and chiropractic — is provided the same case to work on, with the goal of developing a collaborative, interprofessional patient/client-centred plan of management. On the day of the event, student teams present their plans to an audience of clinicians, academics, community members and students, to be judged on the quality of the management plan and level of collaboration.

CMCC student Amber Purins participated in the event as a member of the U of T team, which had first won the university's own competition before going on to the national contest.

"I really enjoyed the experience," says Purins, who was joined on the team by occupational therapy student Evgenia Erenburg, social work student Katy Morrow, pharmacy student Olivia Ng, medical student Yin Chan and Occupational Therapy Faculty Mentor Isabella Cheng.

"Our team was really diverse and it was really neat to see first what everyone else knew and how they would approach it... There were definitely some professions — like occupational therapy and social work — that I learned a lot about. Before working with those students I didn't really understand their scope of practice, I didn't realize they could contribute so much."

Purins notes that the competition also helped demonstrate the value of including chiropractic.

"My team was very well versed in a lot of different fields, but I think they were surprised as well about how much we are exposed to at CMCC, particularly the medical student. It really opened everyone's eyes."

Asked whether she thinks team-based collaborative care is going to be the new norm in Ontario's health care system, Purins says she hopes so.



Judges for the March 11 competition were, from left, UBC College of Health Disciplines and Family and Community Medicine faculty member Dr. Christie Newton, speech and language pathology patient Paula Square, U of T medical student Daniel Rosenfield, and NaHSSA President Dr. Luciano Di Loretto.



A student participant in the 2011 National Health Care Team Challenge addresses participants.

"I hope it's something that more students are exposed to, because that's definitely where it has to start. I know a lot of the universities are really stressing interprofessional collaboration and I know CMCC is really stressing that too. I think if we keep encouraging our students to do that, it will lead to a truly patient-centred health care system, where everyone is working together."

Judging the event were NaHSSA President and recent CMCC graduate Dr. Luciano Di Loretto, UBC College of Health Disciplines and Family and Community Medicine faculty member Dr. Christie Newton, U of T medical student Daniel Rosenfield and speech and language pathology patient Paula Square.

"This was a truly fantastic display of various health professional students working together as a team to develop a patient-centred, inter-professional plan of management," says Dr. Di Loretto. ●

# Chiropractors and pharmacists in a family health team: Unlikely allies in the collaborative management of pregnancy-related low back pain

John J. Riva, BA, DC; Iris E. Krawchenko, RPh, BScPhm, CGP; Jessica M.S. Lam, BScPhm; Fiona E. O'Sullivan, BSc, MD, CCFP; Elizabeth C. Stanford, BSc

\*This article was originally published in the March/April 2011 issue of the **Canadian Pharmacists Journal**, a peer-reviewed publication of the Canadian Pharmacists Association. It is reproduced here with permission of the CPJ. Ottawa, Canada: Canadian Pharmacists Association, 2011.

## Introduction

Although chiropractors often practise independently, there is evidence that a growing number are being integrated into multidisciplinary care environments.<sup>1,2</sup> Co-management, openness to discussion and patient interest have been found to be key factors for developing a chiropractor's involvement within a collaborative care setting.<sup>3</sup>

With the introduction of Bill 179 in Ontario, pharmacists will potentially be able to extend their scope of practice to improve their focus on clinical care activities. The Ontario Government is investing in collaborative care as a means of optimizing access to a wide range of health professionals to make best use of limited resources in the delivery of primary and specialty health care.<sup>4</sup> In an effort to ensure that chiropractors in Ontario are practising to their full potential, a scope of practice review has been recommended by the chiropractic profession.<sup>5</sup>

This case report provides an example of the overlap of scopes of practice between pharmacists and chiropractors, emerging as a new common ally group in patient care. Both the pharmacist and chiropractor have been co-located within a family health team (FHT) environment for more than 5 years.

## Case history

A 25-year-old female was referred by her family physician to a chiropractor for non-pharmacological treatment options regarding pregnancy-related low back pain (PLBP). The patient had a history of knee joint pain, flat feet, asthma, iron deficiency and gastroesophageal reflux disease. At the time of presentation, the medication regimen included:

- Pulmicort Turbuhaler 200 mcg, one puff twice a day
- Bricanyl Turbuhaler 0.5 mg, one puff every 6 hours, as needed
- Ferrous fumarate 300 mg, one capsule daily
- Diclectin 2 tablets at bedtime, 1 tablet in the morning and 1 tablet at noon
- Acetaminophen 325 mg, 1–2 tablets every 6 hours for pain, as needed

The patient was self-medicating with the acetaminophen 325 mg for PLBP, with minimal benefit. The patient presented with progressively worsening neck, middle and low back pain. These symptoms were limiting her ability to work. The chiropractor initiated care that included spinal manipulation, education on posture, muscle techniques and pacing strategies and pregnancy-specific exercises.

The chiropractor offered the patient samples of an over-the-counter (OTC) natural health product (Biofreeze) to use as a pain control adjunct. The chiropractor suggested that the patient confirm with the co-located community pharmacist that the product was appropriate both during pregnancy and with her current medication list. Biofreeze is a unique cold therapy gel formulated primarily with menthol to provide local pain relief.<sup>6,7</sup> The pharmacist reviewed the active ingredients in the suggested natural health product and determined that Biofreeze was not recommended during pregnancy.



## Pregnancy-related low back pain

PLBP is common, leads to loss of work, interferes with normal daily life and tends to increase as pregnancy advances.<sup>8</sup> Approximately 1 in 3 pregnant women will experience PLBP.<sup>9</sup> Symptoms typically begin during the 18th week of pregnancy and peak in intensity between the 24th and 36th weeks.<sup>10</sup>

A recent systematic review including 6 preliminary studies found chiropractic care to be beneficial for the treatment of PLBP.<sup>11</sup> As well, a systematic review of 8 randomized controlled trials found that physical therapy interventions commonly administered by chiropractors, such as pregnancy-related exercise and acupuncture, reduced pain intensity and back-pain related sick leave.<sup>12</sup> Despite these findings, health care providers often lack knowledge on PLBP management strategies and fear harm to the fetus by recommending treatment.<sup>13</sup>

## Pregnancy risk categories for medications

One of the most important considerations during pregnancy is the potential for risk with medication use. To address medication risk, the United States Food and Drug Administra-

tion (FDA)-assigned pregnancy categories are typically used by pharmacists and medical physicians in clinical situations. The purpose of the FDA categories is to facilitate drug choice prior to fetal exposure, rather than provide information on how to manage the pregnancy.

The FDA-assigned pregnancy categories were initially deemed to facilitate ease of use, however, it has been noted that these categories oversimplify the complexity of weighing the risks to the fetus against the benefits of adequate management of maternal medical conditions.<sup>14, 15</sup> It has been reported that the most important and relevant data should be derived from human studies to provide a higher degree of rigour of safety information in human pregnancy.<sup>16</sup>

In response to these concerns, the FDA made an announcement in May 2008, stating that they will replace the A, B, C, D and X classification system with a model consisting of 3 sections.<sup>17, 18</sup> As part of this new classification system, a therapeutic alternative section will be included to summarize the evidence discussed. This is in keeping with scope of practice changes favouring an interprofessional approach.

### Co-management approaches

The following summarizes the perspectives taken by the various health care providers in this case report. Each provider focused on his or her area of expertise to address the patient's needs during her pregnancy. In settings such as this with co-located providers, team-building skills are necessary for establishing good working relationships.

#### Family physician

The patient presented in the 18th week of gestation with worsening low back pain as well as new thoracic spine and right hip pain. It was described as getting "really bad." She could not get comfortable at night due to the pain. Recently, minor painful symptoms had also started at the left medial knee and symphysis pubis. She had a long-standing foot diagnosis of structural pes planus (flat feet).

To address this worsening presentation of PLBP, the patient was referred to the co-located chiropractor. The patient was also advised to be fitted for custom orthotics, in order to help with the pes planus.

#### Chiropractor

The goal of chiropractic care in this patient was to offer management of PLBP to allow the patient to continue working up to delivery. As pregnancy progresses, there is a combination of biomechanical changes and a ten-fold relaxin hormone increase affecting the ability of the back and pelvis to function properly during weight-bearing activities.<sup>19</sup>

Care was initiated to address both pain and instability in joints of the back and pelvis. As with medications, there are obstacles to physical care during pregnancy. Most physical maneuvers need to progressively change from prone to side lying as pregnancy progresses, making care more problematic. As well, contraindications exist with common nonpharmacological pain control modality devices such as transelectrical nerve stimulation and electrical muscular stimulation.

A recent randomized controlled trial of Biofreeze combined with spinal manipulation in 36 subjects showed significant reduction in low back pain.<sup>20</sup> As such, the patient was offered some samples of Biofreeze gel and told to discuss the appropriateness of its use during pregnancy with the co-located pharmacist.

#### Community pharmacist

When making any pharmacotherapy recommendations to women who are pregnant, a thorough assessment of the drug's safety for the fetus and mother is necessary. Once this patient identified that she was pregnant, an assessment was done to determine the clinical safety data of Biofreeze. The active ingredients in Biofreeze gel are menthol 3.5% and camphor 0.2%. According to the FDA Pregnancy Categories, both menthol and camphor are rated in the Pregnancy Risk Factor C Category. Medications in this risk category should be used only if the potential benefits justify the potential risk to the fetus.

The chiropractor was informed of this and concurred that the product, as pain control adjunct, should not be used. The potential for gains in this instance was minimal, since current chiropractic care was already offering a moderate degree of improvement and the patient was able to work. The patient was informed and did not use the Biofreeze gel.

### Knowledge into practice

- Pharmacists could benefit from practical knowledge on the nonpharmacological approaches to pain management.
- Chiropractors recommending natural health products should consider using a pharmacist in complex drug profile cases.
- Co-location facilitates mutual respect and sustainable collaborative practice.
- It is important for pharmacists to communicate with other health professionals about programs, such as MedsCheck, that are available for patients.

### Implications for clinical practice

As a follow-up to this case, the Ontario MedsCheck Program<sup>21</sup> was described to the chiropractor as a possible method to enhance patient medication safety for future cases. Ontario's MedsCheck program was launched on April 1, 2007. It is intended for use with patients having a chronic condition and taking 3 or more prescription medications. A MedsCheck appointment is a one-on-one consultation with a pharmacist for approximately 30 minutes once per year. It assists patients in better understanding how their medications work and may interact with each other and with OTC medications they may be taking, potentially improving their adherence and identifying any drug-related problems.

The MedsCheck program provides a formalized framework where chiropractors can refer patients to pharmacists to address these issues. Patients often use OTC products or natural health products to self-treat chronic pain.<sup>22</sup> Patients may also ask their chiropractors questions about other nonprescription treatment modalities. In the context of this case, a MedsCheck appointment could enhance patient and provider pregnancy care decisions in conjunction with an existing public service such as Motherisk.<sup>23</sup>

Conversely, during patient interactions and MedsCheck appointments, pharmacists may identify patients who could benefit from or would prefer nonpharmacological treatment modalities for pain and make a referral to a chiropractor. Examples of this are:

- During pregnancy or other clinical situations limiting drug use
- When adverse drug reactions have occurred
- Being at maximum doses of pain medication
- For patients who prefer a nonpharmacological approach

The MedsCheck document follows the patient to the chiropractor so they can then review the pharmacology being used for pain management.

In this case report, access to the patient's electronic medical record (EMR) was provided to the co-located pharmacist and chiropractor. With patient consent and appropriate rec-

ords release, the pharmacist and chiropractor documents were added to the patient's medical record. Using the common EMR allows all health care providers involved in patient care to communicate on a common platform. This helps to reduce system-based errors. It also offers opportunities to identify both additive solutions and care limitations by reviewing multiple previous case progressions.<sup>24</sup>

## Conclusion

Chiropractors using natural health products in their practice could benefit from education on a pharmacist's core competencies. Likewise, as pharmacists' scope of practice increases to allow further direct patient care decisions, they could benefit from clinical education on nonpharmacological approaches to pain management.

Limitations of our conclusions include the rigour of a case report and applicability to other collaborative environments. There were also strengths to our conclusions. Pharmacists and chiropractors have been collaborating in this

family health team practice setting for more than 5 years. This indicates that this collaboration is sustainable over time.

Using the example of a pharmacist and chiropractor, who have both held very separate areas of practice, in part due to their perceived scopes of practice, offers some insight on the value of team-building skills on collaboration when translated to other professions whose scope of practice overlap to a greater degree.

*From the Department of Family Medicine (Riva) and the Michael G. DeGroot School of Medicine (Stanford), McMaster University; Dell Pharmacy (Krawchenko) and the Hamilton Family Health Team (O'Sullivan), Hamilton; and the Toronto Western Hospital (Lam), Toronto, Ontario. Contact [rivaj@mcmaster.ca](mailto:rivaj@mcmaster.ca).*

**Acknowledgments: We would like to thank Andrea Endicott, BSc, LLB, who reviewed content for this manuscript during its development.** ●

<sup>1</sup> Dunn AS, Passmore SR. Consultation request patterns, patient characteristics and utilization of services within a Veterans Affairs medical center chiropractic clinic. *Mil Med* 2008;173:599-603.

<sup>2</sup> Johnson C, Baird R, Dougherty PE, et al. Chiropractic and public health: current state and future vision. *J Manipulative Physiol Ther* 2008;31:397-410.

<sup>3</sup> Allareddy V, Green BR, Smith M, et al. Facilitators and barriers to improving interprofessional referral relationships between primary care physicians and chiropractors. *J Ambulatory Care Manage* 2007;30:347-54.

<sup>4</sup> Bill 179: Regulated Health Professions Law Statute Amendment Act. 1st Reading, May 11, 2009, 39th Legislature, 1st Session, 2009. Ottawa (ON): Legislative Assembly of Ontario; 2009.

<sup>5</sup> Health Professions Regulatory Advisory Council (HPRAC) consultation to the Ministry of Health and Long-term Care on Interprofessional Care. Responses to Discussion Guide by the Ontario Chiropractic Association. Submitted to HPRAC May 28, 2008. Available: [www.hprac.org/en/projects/resources/hprac-1458May30OntarioChiropracticAssociation.pdf](http://www.hprac.org/en/projects/resources/hprac-1458May30OntarioChiropracticAssociation.pdf) (accessed September 22, 2010).

<sup>6</sup> Airaksinen OV, Kyrklund N, Latvala K, et al. Efficacy of cold gel for soft tissue injuries: a prospective randomized double-blinded trial. *Am J Sports Med* 2003;31:680-4.

<sup>7</sup> Green BG. The sensory effects of L-menthol on human skin. *Somatosen Mot Res* 1992;9:235-44.

<sup>8</sup> MacEvilly M, Buggy D. Back pain and pregnancy: a review. *Pain* 1996;64:405-14.

<sup>9</sup> Wu WH, Meijer OG, Uegaki K, et al. Pregnancy-related pelvic girdle pain (PPP), I: terminology, clinical presentation, and prevalence. *Eur Spine J* 2004;13:575-89.

<sup>10</sup> Gutke A, Ostgaard HC, Oberg B. Pelvic girdle pain and lumbar pain in pregnancy: a cohort study of the consequences in terms of health and functioning. *Spine* 2006;31:E149-E155.

<sup>11</sup> Stuber KJ, Smith DL. Chiropractic treatment of pregnancy-related low back pain: a systematic review of the evidence. *J Manipulative Physiol Ther* 2008;31:447-54.

<sup>12</sup> Pennick V, Young G. Interventions for preventing and treating pelvic and back pain in pregnancy. *Cochrane Database Sys Rev* 2007;2:CD001139.

<sup>13</sup> Vermani E, Mittal R, Weeks A. Pelvic girdle pain and low back pain in pregnancy: a review. *Pain Pract* 2009;10:60-71.

<sup>14</sup> Law R, Bozzo P, Koren G, Einarson A. FDA pregnancy risk categories and the CPS: do they help or are they a hindrance? *Can Fam Physician* 2010;56:239-41.

<sup>15</sup> Doering PL, Boothby LA, Cheek M. Review of pregnancy labeling of prescription drugs: is the current system adequate to inform of risks? *Am J Obst Gynecol* 2002;187:333-9.

<sup>16</sup> Public Affairs Committee of the Teratology Society. Teratology Public Affairs Committee position paper: pregnancy labeling for prescription

drugs: ten years later. *Birth Defects Res A Clin Mol Teratol* 2007;79:627-30.

<sup>17</sup> Food and Drug Administration. Federal Register: Proposed Rules 2008;73:30831-68.

<sup>18</sup> Feibus KB. FDA's proposed rule for pregnancy and lactation labeling: improving maternal child health through well-informed medicine use. *J Med Toxicol* 2008;4:284-8.

<sup>19</sup> Colliton J. Managing back pain during pregnancy. *Medscape Womens Health* 1997;2:2.

<sup>20</sup> Zhang J, Enix D, Snyder B, et al. Effects of Biofreeze and chiropractic adjustments on acute low back pain: a pilot study. *J Chiropr Med* 2008;7:59-65.

<sup>21</sup> Ontario Pharmacists' Association. MedsCheck. Available: [www.opatoday.com/index.php?option=com\\_content&view=article&catid=45:pharmacistsandpatients&id=81:medscheck&Itemid=182](http://www.opatoday.com/index.php?option=com_content&view=article&catid=45:pharmacistsandpatients&id=81:medscheck&Itemid=182) (accessed January 27, 2011).

<sup>22</sup> Roumie CL, Griffin MR. Over-the-counter analgesics in older adults: a call for improved labeling and consumer education. *Drugs Aging* 2004;21:485-98.

<sup>23</sup> Motherisk: Treating the mother — protecting the unborn. SickKids. Available: [www.motherisk.org/prof/index.jsp](http://www.motherisk.org/prof/index.jsp) (accessed September 22, 2010).

<sup>24</sup> Riva JJ, Muller GD, Hornich AA, et al. Chiropractors and collaborative care: an overview illustrated with a case report. *J Can Chiropr Assoc* 2010;54:147-54.

## INTERPROFESSIONAL COLLABORATION

# Ontario's chiropractors building physician relations with innovative workshops

*As part of OCA's ongoing efforts to raise the profile of the profession among our health care stakeholders and generate awareness about the value of collaborating with chiropractors, the association is seeking out opportunities to provide content to relevant organizations and publications. The following story appeared in the April online newsletter of U of T's Centre for Interprofessional Education.*

As the province of Ontario continues to move towards collaborative team-based care, the Ontario Chiropractic Association (OCA) is providing the profession with innovative interprofessional education (IPE) programs to assist with the changing environment.

Working in partnership with Canada's largest chiropractic school, the Canadian Memorial Chiropractic College (CMCC), the OCA has developed a series of physician-chiropractor (MD-DC) communication workshops to go beyond simply learning about interprofessional care (IPC) to advancing the skills of chiropractors in communicating and practicing with IP concepts.

MD-DC teams facilitate the interactive workshops that bring together chiropractors to learn common language and communications principles to improve patient information sharing and ultimately, patient care. The workshops consist of small and large group sessions, individual study time and opportunities for participants to share their own ideas and materials, reflecting on their own experiences.

"Our members have told us that this is a priority for them and we know based on the way health care is moving that it is important for us to deliver practical IPE workshops" says Dr. Bob Haig, OCA CEO.

"The overwhelming response from our members indicates that we are moving in the right direction, and we will continue to provide opportunities that enhance IPC practices."

To date, there have been two workshops held with additional ones scheduled to take place in other areas of the province this spring.

**For more information, contact Elizabeth Armstrong, OCA Manager, Stakeholder Relations at : [earmstrong@chiropractic.on.ca](mailto:earmstrong@chiropractic.on.ca).** ●

# Electronic medical records a tool that aids collaboration

An increasing number of collaborative primary care models in Ontario now include chiropractors who, though unfunded, practice within the team, utilize the electronic medical records (EMRs), and participate in shared care and patient education on a fee-for-service basis.

Both the physicians and the patients benefit from having chiropractors as part of collaborative team-based care, and their integration onto the clinic EMRs can significantly strengthen the collaborative process.

EMRs are computer-based medical records, which facilitate health professionals' access to patients' data at any particular location. In addition to being used by nurses and physicians, EMRs are being used by a wide range of other health providers including pharmacists, mental health workers, chiropodists, social workers, dietitians and chiropractors. In these contexts, the chiropractors are part of interprofessional teams that include a physician's family practice; the use of the EMR facilitates the management of their shared patients.

OCA members Dr. Ryan Larson of Kitchener and Dr. Clara Leung of Toronto both practice in collaborative interprofessional teams and are also integrated on their clinics' EMR.

"You can imagine a paper chart passing around from person to person and see the inefficiencies. Now everyone involved with a patient's care can have instant access to an accurate and up-to-date chart," says Dr. Leung.

There is a wide spectrum of EMR integration at clinics across the province — some use it solely for scheduling appointments and billing insurance companies, others use it more substantially, to manage all patient visits with all the allied health professionals on the team including submission and viewing of lab tests and diagnostics.

"The quality of data is better than what appears on paper because the templates force us to be more disciplined in how we record and provide information," says Dr. Leung, adding that when all of the health care providers have easy access to diagnostic test results for a patient, redundant testing can be reduced or eliminated altogether.

"I had a patient who was waiting for particular results that typically she would have waited to see a physician for, but with the EMR, I was able to communicate her results much faster and save physician time."

**Continued on page 17** ▶

## COMMUNITY OUTREACH

## In Profile

**WHO:** Dr. Kelly McAllister  
**PRACTICE:** McAllister  
 Chiropractic,  
 Oshawa and Campus  
 Health Care Centre  
 (Durham College and  
 UOIT)

**OCA Member:** Four years



Dr. McAllister is a third-generation chiropractor in her family, following in the footsteps of her father, grandfather and great-aunt. Working at the front desk of her father's practice in high school, Kelly was exposed to chiropractic from an early age.

"Having been exposed to all the things chiropractors can do, and seeing first-hand the variety of cases they are involved in, I knew it was for me," she says.

When she's not treating patients, the CMCC graduate dedicates a considerable amount of her time doing outreach at Durham College and the University of Ontario Institute of Technology (UOIT).

**Q. What types of outreach do you do?**

**A:** The majority of my outreach activities are campus events. My office is located within Durham College and UOIT, so we participate in

their health fairs, awareness days and campus fundraisers. I also do a lot of work with the HR departments, hosting staff lunch n' learns on ergonomics, stretching at your desk and healthy eating. The college also has its own health and fitness promotion program that I help out with by doing talks on nutrition and stress. Just recently, I gave a lecture to a fourth-year kinesiology class after being approached by the professor. Additionally, I do outreach with the faculty members and participate in a "vendors alley" with other health practitioners and service providers that are based on campus.

**Q. What types of materials or resources do you use?**

**A:** I do a lot of core stretches and interactive outreach, so I find the interactive outreach sheets to be helpful. I also use Fit Tips and, for obvious reasons, the Pack it Light program. The college and university have a mandatory laptop rental program where students use school laptops and carrying bags. I decided to go to the purchasing department with the *Pack it Light — on the go!* material for adults and spoke to them about the importance of using the right bags. As a result they decided to switch to a more back-friendly bag for the program.

**Q. What do you see as benefits to your outreach?**

**A:** Public awareness is by far the biggest benefit. I find I am able to breakdown down myths many people associate with chiropractic care — a lot of people think that chiropractic is something that you need to always come in for once you start going. As we know, that simply isn't

**Continued on page 18** ▶

## Electronic medical records a tool that aids collaboration

**Continued from page 16** ▶

Dr. Larson adds that in his experience, the system has also introduced greater efficiencies in clinic administration, including billing.

"There are standard templates and automated options that allow common clinical citations to be stored and reproduced easily. In addition, we can see each other's [other team members] insurance forms that have been submitted, including their diagnosis and history of patient. As well, I can log into my account and see a quick list of updates in treatments and information for any of my patients. This not only saves time in possible duplication, but also allows me to provide more informed care."

When asked about his favourite benefit of using the system, Dr. Larson cites the improved communication among the practitioners in his clinic.

"We're compelled to use common terminology," he says. "There is a stronger emphasis on using patient treatment language all team members understand."

Still, there's always room for improvement, and both Dr. Leung and Dr. Larson's clinics are focusing on more complete notes, keeping better records and improving communication among the health care team.

"Continuous improvements in patient care allow us to better understand the possible roles and contexts for chiropractic within these primary health care organizations," says Dr. Leung. ●

## In Profile

Continued from page 17 ▶

the case. Being able to educate the audience on what we are capable of is extremely important.

### Q. How do you identify your outreach opportunities?

**A:** Nine times out of 10 I am approached because I've gone out and made myself known on campus. At first people didn't know who I was or what I could do, but I spent a lot of time getting out there and sending out promotional material and participating at student and staff events. Now after getting involved, the faculty, staff and students know where we are and also know we are available to help out with whatever they need. My approach is generally talking to those I have met through outreach to ask about other opportunities or sometimes some of my patients provide me with names of people I can contact.

### Q. What are some tips or advice you can offer to other chiropractors regarding participation in outreach events?

**A:** Interactive is best. It keeps the experience fun, interesting and, most importantly, it engages them. Getting their attention and keeping them interested is important, so think about the audience you are talking to and try to come up with fun things that apply to that group. There is no sense talking to seniors about marathons. Discuss topics that relate to your audience. Also, be sure to talk *with* them not at

them. This is what building relationships is about. Lastly, keep in mind to be short and clear. People don't always have two hours to donate out of their day but often they can make time for a half-hour talk or event. If you take this approach, you are more likely to get your foot in the door, get asked back or recommended to someone else. ●

*The OCA's Community Outreach Program is an ongoing success because of the grassroots involvement of hundreds of OCA members across the province. These members are actively engaged and participating in outreach, including tradeshow, employer talks and a variety of other public events, to raise the profile of the profession. In Profile showcases members who are actively and successfully engaged in reaching out to their communities.*

**Planning an outreach event and need material/support, or looking for tips on how to get more engaged in your community? Contact Krystyn Firka at 416-860-7182, toll-free at 1-877-327-2273, ext. 7182 or by email at [kfirka@chiropractic.on.ca](mailto:kfirka@chiropractic.on.ca).** ●

## IN MEMORIAM

### Dr. Mark Victor Reiss

The OCA regrets to inform members of the recent passing of Dr. Mark Victor Reiss of Essex. A member of CMCC's Class of 1993, Dr. Reiss will be deeply missed by his family members, his wife Christine Cooper, and his children Shayna, Joshua, Justin, Julia and stepson Joel Cooper, as well as the many patients he cared for in his Essex Chiropractic & Rehabilitation Clinic. The OCA extends its deepest condolences to the Reiss and Cooper families at this difficult time.

### Dr. Robert Dean Thurlow

The OCA is deeply saddened to announce the passing of Dr. Robert Dean Thurlow. A member of CMCC's Class of 1952, Fellow of the Chiropractic College of Radiology and a Diplomate with the American Chiropractic Board of Radiology, Dr. Thurlow went on to become an Associate Professor of Radiology at his alma mater. In addition to the 40 years of dedicated care he provided for his patients in Hamilton, Dr. Thurlow served his profession in many capacities throughout his long career: as an Examiner in Clinical Competency with the College of Chiropractors of Ontario, an Insurance Consultant with the OCA, a member of the Canadian Society of Chiropractic Evaluators and Past President of the Chiropractic College of Radiation. Dr. Thurlow was a much respected member of the OCA family, serving for many years on the association's Board of Directors, and as President from 1979 to 1981. In 1986, Dr. Thurlow received the OCA's highest honour, being named Chiropractor of the Year. The OCA extends its deepest sympathy to the Thurlow family. ●

OCA NEWS & EVENTS

# OCA Practice Realities Panel takes opportunity to share with CMCC students

On March 24, the OCA was a participating sponsor for CMCC's Practice Opportunity '11 student event. Held at the Markham Holiday Inn, the program featured keynote speaker Dr. Michael Brown, MD, DC, a Physical Medicine and Rehabilitation and Pain Medicine specialist with post-graduate training in orthopaedics, neurology and sports medicine.

Students were also invited to attend the OCA's ever-popular Practice Realities panel presentation. The discussion provided various perspectives on being successful in practice and also highlighted potential challenges new graduates can experience as they begin their practice careers. This year's participating panellists were OCA members Dr. Emily Danson, Dr. Steven Lester, Dr. Shar Rai and Dr. Katherine Tibor, who shared their personal experiences with CMCC students. The session was moderated by Dr. Moez Rajwani, who stripped away some of the misconceptions of early practice and answered student questions.

OCA Practice Realities panel student evaluation results proved positive, with more than 90% reporting that they had an excellent panel experience. "Great reality check – very motivating," wrote one student who attended the panel discussion. "[The session] was very useful in what to expect after graduation and encouraging us not to give up."

All students also had access to the much-anticipated tradeshow following the panel presentations. The tradeshow included 50 exhibitors and 30 chiropractors, who were onsite to share their opportunities for students from each of CMCC's four years. The OCA occupied two booths at the event to promote the benefits of membership, and OCA programs and services, including PMP.



Students at CMCC's Practice Opportunity '11 found the OCA Practice Realities Panel informative and encouraging.



OCA's Practice Realities presenters included, from left, Dr. Katherine Tibor, Dr. Emily Danson, Dr. Steven Lester, moderator Dr. Moez Rajwani, Student Committee Chair Dr. Joel Weisberg and Dr. Shar Rai.

This event was an excellent opportunity for students to network, share information and help prepare for the future. All in all, students found it to be an exceptionally rewarding day. ●

## Welcome new members

*The OCA is pleased to welcome our newest members:*

- |                               |                     |
|-------------------------------|---------------------|
| Dr. Mark Butkus               | Dr. Matthew McGrath |
| Dr. Michelle Capriotti-Leggat | Dr. Paul Meyer      |
| Dr. Janice Elenbaas           | Dr. Sara Molnar     |
| Dr. Peter Fraser              | Dr. Andrea Nalli    |
| Dr. Alykhan Jamal             | Dr. David Ogilvie   |
| Dr. D. Timothy Labelle        | Dr. Ryan Rullitis   |
| Dr. Frances Leblanc           | Dr. Erika Sabourin  |
| Dr. Tyler Linn                | Dr. Keira Swenson   |
| Dr. Ed Lubberdink             | Dr. George Tester   |
| Dr. Tonya Luby                | Dr. Sarah Ytsma     |

*We look forward to serving you for many years to come.* ●

**MEMBERSHIP RESOURCES**

# LCD touch screen monitors and PC hardware products discount program



OCA members have access to special rates for LCD touch monitors and PC hardware products through Info-LaSalle Inc.

Members can purchase products separately or choose a complete package for their office computer solutions. ChiroWrite – OCA’s clinical notes software was designed for touch screen monitors and Tablet PCs. Please mention that you are an “OCA member” when contacting Info-LaSalle to obtain member pricing.

**For more information, please contact Info-LaSalle at 1-877-964-3428. You may also visit Info-LaSalle on its website, [www.infolasalle.com](http://www.infolasalle.com).**

Product/Description	OCA Member Price
Wall mount brackets	\$29
NEC 19" touch screen monitors	\$499
MiniBOX with Core2Duo processor, 1G, 80hdd and Windows XPPRO	\$499
Package — NEC 19" touch monitor, MiniBOX, wall mount brackets, rear-mount back-to-back bracket kit for MiniBOX, short 10" cable for rear-mount MiniBOX	\$1099

*All pricing is subject to applicable taxes / Shipping cost not included*

# Canada’s Wonderland offers discounted rate for OCA members



OCA members have access to Canada’s Wonderland special group discount for tickets. Canada’s Wonderland is the perfect place for family fun. With exciting rides and attractions and a top-rated waterpark, the park offers something for everyone.

**To order tickets,**

- visit [www.canadaswonderland.com](http://www.canadaswonderland.com)
- Choose **tickets / corporate partners**
- Type in company ID code: **ocamember**
- Purchase tickets online and print.

**May 8 – August 28**

Regular One Day - Online (3 day advance) \$33.99 + tax = \$38.41  
 Regular One Day - Online (less than 3 day advance) \$36.99 + tax = \$41.80

**May 8 – October 30**

Regular Pay Once Visit Twice \$46.02 + tax = \$52.00  
 Junior/Senior One Day \$28.32 + tax = \$32.00

**OCA members are welcome to extend the savings to family and friends.**

## MEMBERSHIP RESOURCES

### OCA online services update

OCA members are taking advantage of the enhanced Web-based services that include free microsites for members hosted on the OCA public website, as well as a dynamic new chiropractor locator. To date, 670 active member micro-sites have been launched. Online invoicing has been effective in reducing paper consumption and mailing costs. We've worked hard to ensure OCA's new online services are secure and easy to use. Your ongoing support on this initiative is greatly appreciated.

Please contact us if you have any questions. Thank you for your patience and understanding as we work toward better serving you.

**For more information please contact OCA at 416-860-0070 or 1-877-327-2273.** ●

### Have you created your micro-site yet?

As an OCA member you can now create your own personal Web page on the OCA's main site to profile your practice to potential patients. Micro-sites feature:

- A photo and biographical information (education, credentials)
- Clinic address and graphic (photo or logo), contact information, including website, hours of operation, map and directions (up to four clinics can be displayed)
- Services offered, practice focus, languages spoken
- Wheelchair accessibility and parking information
- An appointment request button (email)



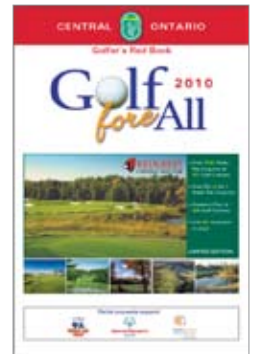
Your micro-site is a great way to connect with prospective patients, who will be able to search for you by location or by name. Visit the OCA members' website, at [www.chiropractic.on.ca](http://www.chiropractic.on.ca), and sign on to register for your micro-site. ●

### Golf Fore All 2011 now available

"Golf Fore All" 2011 is now available offering tremendous green fee discounts at many of Toronto and South Central Ontario's finest public, semi-private & resort courses (visit [www.golfforeall.ca](http://www.golfforeall.ca) for a complete listing of courses & offers).

#### Features:

- 1000 coupons at 184 courses
- Weekend play at 141 courses
- Over 500 Two for One Coupons
- Junior coupons
- A great gift item for any occasion



New additions for 2011 include Deerfield, Glenway, Horseshoe Resort, Lora Bay, Timberwolf, Tyandaga and more! Golf Fore All 2011 is the perfect gift for that special staff member, patient, friend, or family member.

The regular retail price of Golf Fore All 2011 is \$59.99 + \$6 shipping + \$3.30 tax = total \$69.29. OCA member pricing now **\$52 all in** (includes tax and shipping).

Visit the members' side of the OCA website under OCA Member Benefits to download an order form today. ●

### Insurance as simple as 1-2-3



As the leading provider of group home and auto insurance, TD Insurance Meloche Monnex makes purchasing insurance for your car, your home and your recreational vehicle as easy as 1, 2, 3. First, you can take advantage of preferred group rates. Second, you get great coverage. Third, you receive outstanding service.

It's all about service and keeping it simple! Request a free, no-obligation online quote today and you could win one of two Honda Insight hybrids, plus \$3,000 for gas (or \$30,000 in cash).

**For more details, visit: [www.melochemonnex.com/oca](http://www.melochemonnex.com/oca) or call (toll-free) 1-866-258-3036.** ●

## PMP BITS & BYTES

### HCAI Coding Webinar

On March 11, the OCA offered a coding webinar for the Health Claims for Auto Insurance (HCAI) system presented by Viivi Riis, Senior Health Advisor for HCAI at the Insurance Bureau of Canada (IBC). Due to overwhelming response, the webinar was repeated Apr. 6 and was recorded to be made available on the OCA website. The webinar detailed using ICD-10 and CCI codes for HCAI Web and PMP users.

During the webinar, participants were able to ask questions; many of which were answered live during the sessions. Responses to additional questions are detailed below.

#### PMP questions:

**Q. I work at a chiropractic clinic that just started using HCAI, but we would like to start using PMP as well. Would we need to contact all of our adjusters when we switch over to inform them?**

**A.** No, you do not need to contact the adjusters. You are able to select either PMP or the Web application for your submission method. You cannot use both.

**Q. How do I switch from Web application to PMP?**

**A.** Access the HCAI website from your Internet browser at [www.hcai.ca](http://www.hcai.ca). Click the **Manage** tab at the top of the screen; then click **Facility Management**. Scroll down the screen until you locate the **HCAI Submission Method** on the right. Beside **\*PMS Integration**, select **Yes**. Beside **\*PMS Vendor**, type **PMP**. Beside **\*PMS User Name**, insert a username for your office that is different from your HCAI username. Click **Save**.

**Q. How do you upload the PMP OCF forms to HCAI?**

**A.** The latest PMP update has a desktop icon named **PMPHcai**. Clicking on this icon will open the interface and selecting the **Connect to HCAI** button will send all forms in PMP that have been completed for HCAI.

**Q. When submitting to HCAI through PMP, it asks for a "PMS user ID." Is this clinic-specific, or does each user of the clinic have their own PMS password to send invoices?**

**A.** The PMS username and the PMS password are unique and used for the whole clinic, regardless of who is submitting OCFs. The clinic has one Facility Number, one PMS Username and one PMS Password. Each practitioner in your facility has their own provider ID. The facility number and user name and password reset are located on the **Facility Management** tab in HCAI. The provider ID is found when viewing the **Facility Information** report under the **Reports** menu in PMP HCAI. ●

### PMP Statistical Report — complete it for a chance to win the Cruise of a Lifetime

A unique opportunity is offered to PMP users to help the profession by participating in the PMP Statistical Report.

The anonymous report provides the OCA with trending and demographic data about the profession that is essential in informing the association's strategic planning, government and public relations efforts and marketing initiatives. For example, in gauging the health of the profession, the list below shows that the average total number of discreet patients seen and the average total income have not declined since OHIP delisting in 2004.

Variable	2004-05	2005-06	2006-07	2007-08
Total Patients Seen	543	582	554	548
Total Income*	154,877	156,760	154,763	154,978

\* reflects the total income adjusted for inflation

Participation in the PMP Statistical Report is voluntary; however, we cannot overemphasize the value of your contribution. Anonymity is assured, as all results will be pooled by the OCA auditors so the OCA receives no information about you, your practice or patients. **When you complete your stat report you are invited to submit your name to be entered into our "Cruise of a Lifetime" draw.**

If you have already completed your stat report, please accept our thanks. If you have not yet completed the report, we urge you to take a few minutes to do so today. The stat report reminder will cease to appear on your PMP screen after April 30, but **you can still participate with assistance from the PMP support department (1-800-561-7361) until May 20, 2011.** ●

**PMP BITS & BYTES**

## Just 5 minutes can win you a Cruise of a Lifetime

Essex chiropractor Dr. Dave Schippel says his wife thought he was joking when he called to tell her he'd won a cruise. His own reaction to the news wasn't much different.

"It was a complete shock when we got the phone call," he recalls.

The phone call came last spring, shortly after his office had completed the PMP Statistical Report — an voluntary submission of anonymous practice data that helps the OCA track practice and industry trends and informs the association's marketing and advocacy initiatives on behalf of its members. PMP users who submit the report are automatically entered into a draw for a chance to win a Cruise of a Lifetime, courtesy of the OCA.

"I would have done the stat report anyway," says Dr. Schippel with a laugh. "It's a simple process. It only takes 5 minutes."

Winning the cruise made the effort doubly worthwhile.

"Our favourite stop was Saint Martin," he says of the voyage in the Caribbean on board the Celebrity cruise line's ship Solstice last year.

"It was the first cruise I've ever been on. The food on the boat was fantastic, all the shows were excellent, and the accommodations were incredible. The service was just amazing. You basically have your own butler assigned to your room who makes sure you have everything you need."

Dr. Schippel says he would recommend completing the stat report to all his fellow PMP users and plans to complete it again for 2011. And, while the odds don't favour his winning a free cruise for a second year in a row, he and his wife enjoyed their trip so much they're already planning their next voyage.

"Probably an Alaskan cruise this time," he muses. "And definitely with Celebrity Cruises."

*If you have not yet completed the report, we urge you to take a few minutes to do so today for your chance to win a Cruise of a Lifetime. The stat report reminder will cease to appear on your PMP screen after April 30, but you can still participate with assistance from the PMP support department (1-800-561-7361) until May 20, 2011. ●*

## Save the date — Pathways to Practice 2011

Pathways to Practice, the OCA's professional development day, promises to provide the tools you need to help put you on the path to success.

The event will be held Oct. 1, 2011, with a program that will feature resources, information, products and services to help you enhance your practice and meet the needs of your patients.

Attendance at OCA educational courses, seminars, workshops and conferences can be counted toward the CCO's Structured CE requirements.

**Remember to mark your calendars for this exciting event. More details will be coming soon. ●**

OCA PRESENTS

Pathways to Practice 2011

October 1<sup>st</sup>, 2011

Ontario's Premier Event  
for Chiropractors and Office Staff

## ESSENTIAL DATA SERVICES

# Can your business withstand the loss of critical data?

What would happen if tomorrow you lost all the data on your servers, laptops and/or PCs, and you didn't have an updated backup to get your business back up and running?

**essential**  
DATA SERVICES



**Protecting your data isn't just critical ... it's essential!**

## Remote backup hosting

Essential's solution protects data from hardware failures, errors and unforeseen disasters by storing backup and archive copies in secure off-site electronic vaults. They protect thousands of computers — all connected together via the Internet. When you lose your data, you usually suffer one or more of the following: loss of patient information, loss of patient confidence, lost productivity and/or employee downtime. Essential will back up your data daily for \$21.95 per month. There are no long-term contracts, and you may discontinue at any time\*.

**Essential Data Services Inc.**, a division of Infinity Network Solutions Inc., provides Internet-based off-site data storage, disaster recovery, and document management solutions to small and medium-sized businesses. Essential offers highly reliable, automated backup and recovery services, enabling customers to store and access critical information more easily, consistently and efficiently than ever before.

Security is a very vital aspect; data is available to the owner or an authorized party only. Partnered with TELUS Canada, Essential co-locates its backup systems on which your vital information is stored. The TELUS data centre is one of the most technologically advanced locations in North America; all external walls are reinforced with structural steel bracing and are bullet resistant. Video Surveillance — inside and outside — is monitored by on-site security 24/7, and Biometric Scanners are used in conjunction with ID card readers to guarantee enhanced, authenticated access to the co-location.

**Contact Nathalie Plourde at 416-860-0070 or 1-877-327-2273, ext. 7184 or email [nplourde@chiropractic.on.ca](mailto:nplourde@chiropractic.on.ca) for more information.**

*\*30 day notice required.*

### Key Benefits

- Automatic backup daily
- Encryption; access to data available to customer only
- Protected from disaster such as flood and theft
- Backups hosted at one of the most secure locations in North America
- Easy, fast restoration. Data is available 24/7

### Support

- Backup client software license
- Monitoring of the backup
- Remote installation and configuration of software
- Daily email reports that detail and confirm last backup
- Telephone & remote support during business hours
- Emergency support after business hours

### System Requirements

- Windows XP Professional (32 bit and 64 bit)
- Minimum 128MB Memory (Recommended 512MB)
- Minimum 100MB of available disk space (Recommended 250MB)
- Internet connection

OCA CHIROWRITE

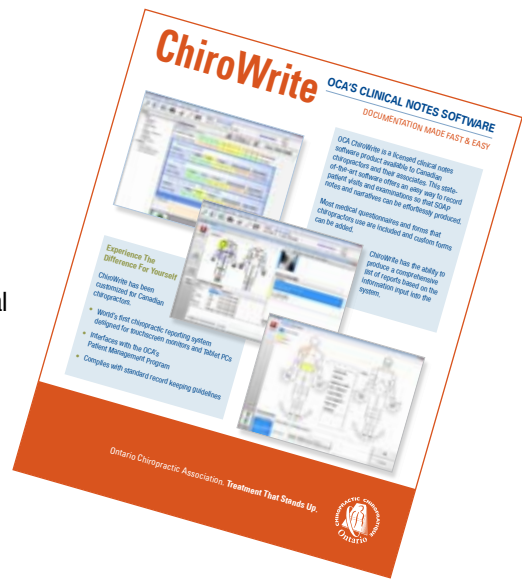
# ChiroWrite special — Limited Time Offer!

Take advantage of a special price for a short-term ChiroWrite license. This special license expires July 31, 2011, so act quickly to maximize your return.

ChiroWrite is a licensed clinical notes software product available to chiropractors and their associates. This state-of-the-art software offers an easy way to record patient visits and examinations so that SOAP notes and narratives can be produced easily. The program comes complete with many of the questionnaires and forms chiropractors use most often, and custom forms can be added.

ChiroWrite has the ability to produce a comprehensive list of reports based on the information inputted into the system. ChiroWrite interfaces with the OCA's Patient Management Program, saving you time and eliminating the need to enter patient demographic data into both programs. The program will run on a standard desktop computer, laptop, touch-screen, or tablet PCs.

This special rate enables chiropractors to license the ChiroWrite software until July 31, 2011. A renewal fee applies for those wishing to continue licensing after Aug. 1st, 2011.



Pricing for PMP users		
	Licensing fee until July 31, 2011	Renewal fee after July 31, 2011
1 <sup>st</sup> DC	\$199.00 + tax = \$224.87	\$599.00 + tax = \$676.87
Additional DC	\$109.00 + tax = \$123.17	\$339.00 + tax = \$383.07
Non-DC	\$49.00 + tax = \$55.37	\$149.00 + tax = \$168.37

Pricing for Non-PMP users		
	Licensing fee until July 31, 2011	Renewal fee after July 31, 2011
1 <sup>st</sup> DC	\$219.00 + tax = \$247.47	\$699.00 + tax = \$789.87
Additional DC	\$139.00 + tax = \$157.07	\$439.00 + tax = \$496.07
Non-DC	\$49.00 + tax = \$55.37	\$149.00 + tax = \$168.37

For a video demonstration of the ChiroWrite program, visit the OCA website, [www.chiropractic.on.ca](http://www.chiropractic.on.ca).

For a limited time, a minimal investment allows you to test one of the most powerful SOAP notes programs on the market. Take advantage of this special rate today. Please contact Liz Pridham at 416-860-4163 / 1-877-327-2273, ext. 4163, or [lpriham@chiropractic.on.ca](mailto:lpriham@chiropractic.on.ca).

# OCA's PMP & ChiroWrite

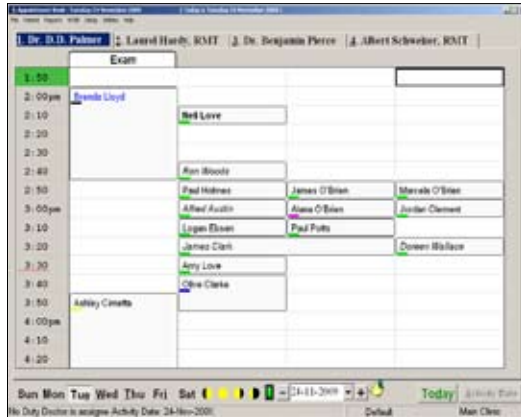
MEETING ALL YOUR CLINICAL SOFTWARE NEEDS

The Ontario Chiropractic Association is pleased to offer the Patient Management Program and ChiroWrite software packages. When licensed together the two programs interface to provide all your clinic software requirements. PMP has been a trusted source of patient management for 18 years, meeting industry and practitioner needs. It was, and continues to be developed by chiropractors for chiropractors.

## PMP

OCA'S PATIENT MANAGEMENT PROGRAM

PUTTING EXPERIENCE INTO PRACTICE



Developed by chiropractors for chiropractors

- Interfaces with ChiroWrite, OCA's Clinical Notes Software
- Maintain patient schedules and book appointments easily
- Variable time intervals and vertical & horizontal booking
- Patient billing and account management
- Customizable multiple practitioner platform
- Technical support provided by staff with chiropractic office experience

## ChiroWrite

OCA'S CLINICAL NOTES SOFTWARE

DOCUMENTATION MADE FAST & EASY



Experience the difference for yourself

- Interfaces with PMP, OCA's Patient Management Software
- Comprehensive list of reports available
- Copy prior visit information
- Customize exam, SOAP & report templates
- Scan or save images and X-rays and include in patient files

For more information on OCA's PMP and ChiroWrite programs contact Liz Pridham at 416-860-4163 or email [lpriidham@chiropractic.on.ca](mailto:lpriidham@chiropractic.on.ca). You can also visit our website at [www.chiropractic.on.ca](http://www.chiropractic.on.ca).

Ontario Chiropractic Association. **Treatment That Stands Up.**



## PRACTICE OPPORTUNITIES

**ASSOCIATE OPPORTUNITY** at an established clinic in Petrolia, ON (southwestern Ontario). Diversified, Thompson, acupuncture and orthotic therapy an asset. Email inquiries to [doctorkjs@gmail.com](mailto:doctorkjs@gmail.com).

**THINKING OF EXPANDING**, relocating or owning your own rehab clinic? Excellent (and perhaps a chance of a lifetime) opportunity to move into a very successful 22 year chiro/physio/rehab clinic space (3,500 sq.ft) located in the heart of Maple. Just take over the lease. More info contact [mapleclinic4lease@rogers.com](mailto:mapleclinic4lease@rogers.com) view clinic photos at [www.mediafire.com/?teb7aw0iqxae99](http://www.mediafire.com/?teb7aw0iqxae99).

**MULTIDISCIPLINARY CLINIC** in Southern Burlington for a part-time associate to join our team. Experience an asset but will consider all applicants. Call/fax 905-333-4888 Email: [thlmanagement@cogeco.net](mailto:thlmanagement@cogeco.net).

**ASSOCIATE WANTED** for excellent opportunity to work in Windsor suburb. Established practice for over 17 years. Please email: [windsorchiro@hotmail.com](mailto:windsorchiro@hotmail.com).

**OFFICE IN OTTAWA** seeking energetic independent contractor. Our clinic is located in a highly visible location, enjoys a stellar reputation and has highly trained, enthusiastic staff. Email us at [woodroffeic@hotmail.ca](mailto:woodroffeic@hotmail.ca).

**INDEPENDENT CONTRACTOR POSITION** available in trendy Ottawa neighbourhood. Email [dmorman@backinbalancechiro.ca](mailto:dmorman@backinbalancechiro.ca).

**BURLINGTON CHIROPRACTORS!** Are you currently practicing and looking for a change? Come join our health team at the Burlington Natural Health Centre. We have 4 half-days (plus Saturdays) available. Our brand new fully equipped building is located at 1066 Brant St. Independent contractor arrangement. Please call Dr. Tony Adams for details. 905-634-8598.

**EXCELLENT OPPORTUNITY:** Seeking enthusiastic licensed chiropractor to join multidisciplinary clinic in London, Ontario. Recent graduates welcome to apply. Forward cover letter and résumé to [hmc.postings.dc@gmail.com](mailto:hmc.postings.dc@gmail.com).

**MULTIDISCIPLINARY CLINIC** located in Ottawa looking for an evidence-based chiropractic associate. For more information contact [inbalancechiropractic@bellnet.ca](mailto:inbalancechiropractic@bellnet.ca).

**WE ARE SEEKING** a motivated evidenced based chiropractor to join our successful multidisciplinary clinic on the Hamilton mountain. The candidate must be dedicated to begin and cultivate a patient base with a long-term outlook. Professional mentorship and guidance provided. Acupuncture and Myofascial release knowledge an asset. Various remuneration options available. If you are looking to start a successful practice without the capital investment, we would like to hear from you. Visit [www.harvardrehab.net](http://www.harvardrehab.net), email résumé: [info@harvardrehab.net](mailto:info@harvardrehab.net).

## PRACTICE FOR SALE/LEASE

**ESSEX COUNTRY PRACTICE FOR SALE.** Multidisciplinary/rehab practice with great referrals and patient base. Great salary with bonuses. Contact: [swchiro@hotmail.ca](mailto:swchiro@hotmail.ca).

**MULTIDISCIPLINARY PRACTICE FOR SALE** in beautiful Oakville. Fantastic location with tremendous growth. Existing therapists to cover overhead expenses. Serious inquires only. Email [oakvillepracticeforsale@gmail.com](mailto:oakvillepracticeforsale@gmail.com).

**MULTIDISCIPLINARY PRACTICE FOR SALE** in North York. 8+ years corporate location on Yonge Street, near subway. Email: [northyorkpractice@gmail.com](mailto:northyorkpractice@gmail.com).

**MULTIDISCIPLINARY PRACTICE** in central Mississauga for sale. Serious inquiries only. [misschiro@gmail.com](mailto:misschiro@gmail.com).

**HOME/PRACTICE FOR SALE:** Mississauga, 30+ years, large 5 room clinic, attached 4 bedroom home, huge potential, great location on busy thoroughfare. 905-624-4123.

**PERFECT OPPORTUNITY** in Brampton to earn instant income with extremely low overhead! Shared expenses, clinic available 3 full + 2 half days/wk. Take over existing files and chattels. Email [dr\\_fratnik@yahoo.ca](mailto:dr_fratnik@yahoo.ca).

**PRACTICE FOR SALE: LEAMINGTON, ON.** 30-year practice, original practitioner, same location 25 years. Please contact [littletree@bellnet.ca](mailto:littletree@bellnet.ca) or 519-736-9199 after 7 p.m.

**CHIROPRACTIC PRACTICE FOR SALE:** Well-established practice for sale in growing community, one hour east of Toronto. Good mix of acute and wellness patients. Reliable flow of new patients and reactivations plus solid maintenance base. Flexible closing. Email [drjohndc@rogers.com](mailto:drjohndc@rogers.com).

## LOCUMS

**PATHMARK LOCUM SERVICE** the number one locum service in Ontario, solely dedicated to the chiropractic profession. We specialize in providing locums and associates, practice sales/purchases. We would love to assist you. 1-800-265-8043 or email [pathmark@pathmarkinc.com](mailto:pathmark@pathmarkinc.com). Check out our new DO IT YOURSELF website at [www.locums4you.com](http://www.locums4you.com)... this site will save you time and money!

**PERMANENT, PART-TIME AND LOCUM STAFFING SERVICE:** Let MDSS help resolve your staffing needs. Our professional practitioners are available for chiropractic and physiotherapy locums and permanent placements. MDSS offers a three month guarantee on all permanent placements, pre-screening of all candidates and no retainer. Contact us at 905-428-6377 or 1-866-482-6377 or email [mdss1@rogers.com](mailto:mdss1@rogers.com) or at [www.mdss.ca](http://www.mdss.ca).

**LOCUM REQUIRED** from mid September to end of October in established south Barrie office. Current hours Tuesday 9-12; 3-7; W/F 3-7, Th/Sat 9-12 – may be somewhat modified if necessary. Practice is diversified, ART would be an asset, and Acupuncture required. Please email [drslhudson@gmail.com](mailto:drslhudson@gmail.com) for more details.

#### MOTIVATED AND BILINGUAL

**CHIROPRACTOR** with 3 years experience owning her own practice. Available for short or mid-term locums (office coverage/ maternity coverage) in Windsor, Ontario area. Trained in Diversified Technique as well as Thompson Terminal Point Technique, Extremity Adjusting, Bio-geometric integration technique (BGI), Network Spinal Analysis Certification Level 1, Paediatrics and pregnant women adjusting (ICPA certification), Arthrostim and some Activator, SOT and A.K. knowledge. Now available from May 2011 to December 2011. Contact Dr. Myriam Lacerte at 418-844-3592 or 514-652-4571 or email [dremyriam@yahoo.ca](mailto:dremyriam@yahoo.ca).

**GREAT SUMMER LOCUM OPPORTUNITY** with an 11-year established practice. Starting June 27 - August 29/11 – M,W,F and Sat. (optional). Located in a North Toronto private club. Multidisciplinary clinic with a great team of professionals. Supplies, parking and meals provided. Acupuncture certification a must. [chiromccabe@aol.com](mailto:chiromccabe@aol.com) or 416-274-2117.

#### SPACE AVAILABLE

**GREAT OPPORTUNITY** for inter-practitioner referrals. In ever-growing Baden (10 minutes from KW). Large, bright rooms for rent. Includes many extras! Call 519-590-5477.

**HIGH TRAFFIC PLAZA** with Tim Horton's across from GO station in growing neighbourhood! Lease your own space OR share space and costs with Dentist beside medical office in NW Brampton. Inquiries contact Liz at [fletchersmeadows@gmail.com](mailto:fletchersmeadows@gmail.com).

#### EQUIPMENT

**WANTED - TRITON DTS TABLE.** Call 416-262-3659. [amitofoz@hotmail.com](mailto:amitofoz@hotmail.com).

**LEASE TRANSFER** for Theralase laser available. Excellent product in great condition. Use to treat a variety of acute and chronic conditions. Contact [carol@427health.com](mailto:carol@427health.com).

**TRIUMPH AUTO-ELEVATION CHIROPRACTIC TABLE.** Multiple drop pieces. Excellent condition. \$3,000 OBO. [chirotable@hotmail.com](mailto:chirotable@hotmail.com).

**TREATMENT TABLES FOR SALE.** Elite Chiropractic Pump Elevation Lift E3-1 and 4 Ann Unicare Aleco tables for sale. All tables are in excellent condition. \$1,500 plus HST for Elite table and \$500 plus HST for massage tables, OBO. Please contact [info@rosedalenaturalhealth.com](mailto:info@rosedalenaturalhealth.com) or 416-926-0084.

## OCA Classified ads — now online

Classified advertisements in the *OCA News* are accepted from OCA members on the basis of a charge of \$1.45 per word or number or combination of letters. This amount includes HST. Payment must accompany submission of the ad.

Now — in addition to placing your classified ad in the *OCA News* you also have the option of placing your ad online. Visit the OCA website at [www.chiropractic.on.ca](http://www.chiropractic.on.ca) under [Home / News & Events / Classified ads](#).

The cost for online classified is the same as for the print version at \$1.45 per word. Your ad will remain online for a period of 4 weeks.

If you are interested in placing an ad please visit the OCA website to fill out a classified ad submission form and send to Linda Baldasio at [lbaldasio@chiropractic.on.ca](mailto:lbaldasio@chiropractic.on.ca). For more information contact 416-860-0070 or toll-free 1-877-327-2273.

***The inclusion of classified ads does not imply that the OCA or the chiropractic profession has reviewed or endorses the products, services or opportunities so advertised.***

