

Convergence: Bringing The DC, MD And Attorney Together

In Less Than 30 Seconds

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Can you imagine a world in which the DC, MD and Attorney all view the patient from the exact same perspective? They may disagree on approach to treatment but they will agree on the veracity of the patient's complaint of pain – the illusive, subjective claim which thus far has been impossible to quantify. Other than weddings and funerals, where all agree on the appropriate emotion, getting everyone on the same page with regards to a patient's condition is more complex.

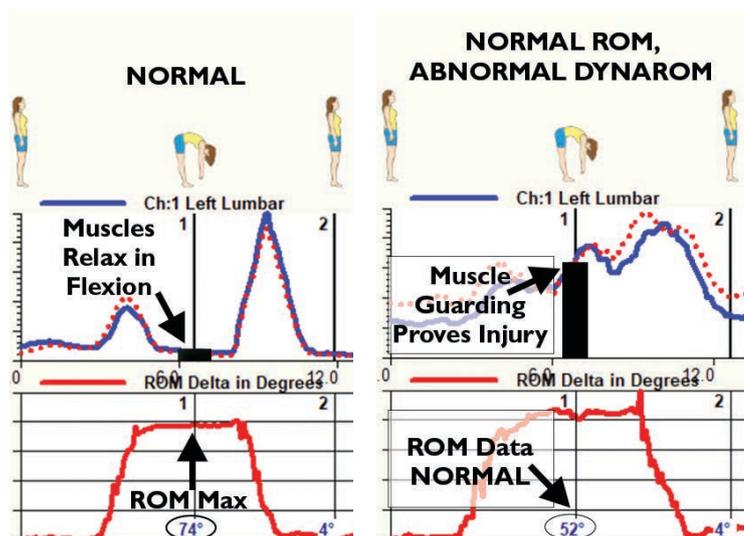
Philosophy, although fundamental to our view of patient care, can be questioned and debated, has a tendency to lead to divergence, and cannot be presented as a logical argument to a jury. Science, on the other hand, has a greater impact because of proofs that, over time, become indisputable facts. Facts are undeniable from any perspective. As the old saying goes, "A picture is worth a thousand words." Or to put it more precisely, the visual image speaks a thousand words. It is solid, visual proof. Graphs and charts, being visual mediums, provide very formidable and convincing evidence when proving facts. Everyone can see the visual representation of the data, and agree on the meaning of the image.

In a recent PI case, the power of this visually-persuasive data was extremely clear. The plaintiff's side included a chiropractor, a medical doctor and a PI Attorney. And although the MD and DC did not necessarily agree on treatment, what brought them together as a unified front was the DynaROM data. Both the medical doctor and the chiropractor viewed the results of the graphical DynaROM test as abnormal, validating the patient's claim of pain. Moreover, the IME expert for the insurance company decided to quit rather than rebut the interpretation of the DynaROM data. The result? Not only did the MD, DC and PI Attorney agree, but the jury did as well, leading to an unprecedented \$1 million jury award in a case which would have settled for \$90 thousand in mediation. The insurance defense attorneys had no effective means of invalidating the results of this powerful tool because there were too many credible sources supporting its use.

The credibility of the DynaROM to both the MD and PI Attorney is, in part, due to it being presented as the Gold Standard in the latest edition of the AMA's publication *The Practical Guide to Range of Motion Assessment*. The lack of rebuttal from the insurance expert is due to the fact that the game has changed. In the old days, it was

opinion vs. opinion; the expert with the best CV won the case. With our new evidence based, data driven paradigm opinions become irrelevant and ineffective – because objective data determines the outcome. In a separate case where both sides utilized the DynaROM, experts for both the insurer and the plaintiff agreed that the patient was injured. The graphs from both sides appeared identical, which was most upsetting to the defense attorneys, as the plaintiff's expert did not attempt to conceal his findings. Both plaintiff and defense experts (a DC and two physiatrists) agreed, and the case was settled in the patient's favor.

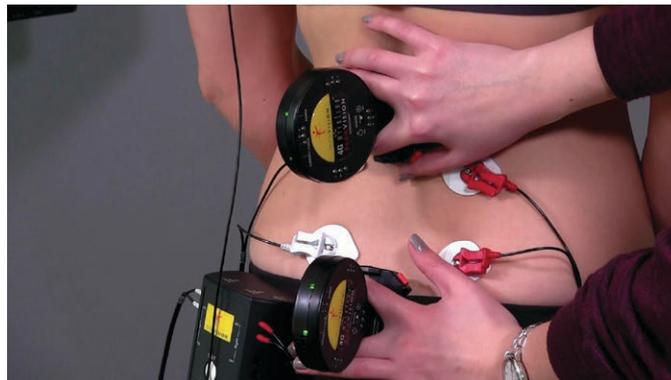
Convergence has a greater impact than just this PI case. The respect, which comes with having a tool which can prove presence or absence of soft



tissue injury, leads to the chiropractor being viewed as an equal and valued member of the team. The MD, DC and PI Attorney all build their case around the DynaROM data, creating a cohesive front which is difficult to refute. Additionally, this allows chiropractors to defend their position, as far as treatment, due to the fact they have data to show the injury to be real, and also to show progress over time.

John Gerhardt, MD, corroborated by Geisser (University of Michigan), the inventor of modern range of motion technology, determined that range of motion, when augmented by simultaneous measurement of muscle guarding, significantly increased the sensitivity and specificity of range of motion measures. Clinically, he found that 70% of his patients with muscle guarding and pain demonstrated normal range of motion values. The DynaROM quickly and easily presents muscle guarding in an objective, quantitative manner. The process is simple: one performs range of motion measures as usual, but with ECG electrodes attached to measure the muscle guarding component. DynaROM has been established through US Patent #9,808,172 B2 specifically for its ability to evaluate for soft tissue injury.

In the medical / legal arena (Merritt vs. Florida DOH), the validity of the DynaROM for evaluating soft tissue injury was challenged to the State Supreme Court level, defended by 300 insurance companies, the State of Florida, 9 expert witnesses and 75 attorneys. Only one expert and one attorney represented the chiropractic profession and its use of the DynaROM technology. Despite millions of dollars spent by the insurance companies, DynaROM was established as valid in the lower court, Superior and Supreme Court levels, and led to a statute in the State of Florida acknowledging the DynaROM as an "Approved Diagnostic Device" requiring reimbursement from insurers in personal injury cases. This landmark case supported the CPT code (96002, 96004) and led to inclusion in the American Medical Association's Medical Text. (Both the case files and Superior Court video can be reviewed at www.dynarom.com.)



Eighty years ago BJ Palmer pioneered the chiropractic use of medical technology to create a scenario in which DCs provide objective data that would not be questioned by medical doctors. Would you trust a cardiologist who believes that a stethoscope is adequate for evaluating heart conditions, i.e. that the EKG is unnecessary? A chiropractor practicing PI without the DynaROM is like a cardiologist practicing without the EKG.

We live in an evidence-based world, and data is paramount in any successful practice. We need to consider what BJ suggested in 1938 and that is to "provide proofs that are the last word and incontrovertible." If BJ Palmer were alive today, we have absolutely no doubt that he would fully integrate the DynaROM in each and every patient treatment.

References:

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