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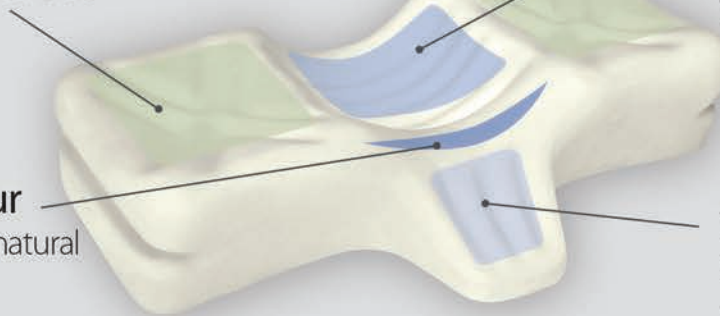
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Download any of our webinars at ChiroEco.com/webinar.

Expert Insights

Blogs by Anthony Lombardi, Mark Sanna, Drew Stevens, Josh Wagner, Kelly Robbins, Perry Chinn, Shawne Duperon, and the *Chiropractic Economics* editorial staff. Here's what's new:



EHR Guru

Patient appointments and reminders from a smart phone
Alex Niswander
chiroeco.com/niswander



Legal Secrets

What governs the payability—or reversal—of health plan claims?
Richard Quadrino, Esq.
chiroeco.com/quadrino



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Belief systems: The virtue of "stubborn"
Perry Chinn, DC
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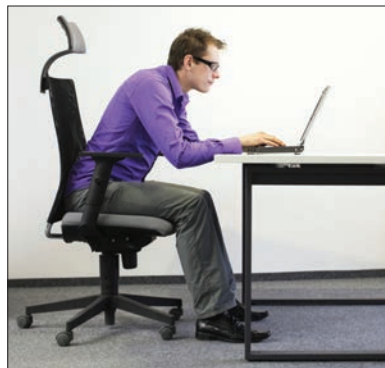


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ChiroEco.com/laser-therapy

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- ▶ LLLT may ease muscle fatigue before and after exercise

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Let me know what's on your mind:
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This book showed how systematic business processes, codified by manuals and training, are replicable and teachable. From this point we began to see businesses turning into chains, stores becoming franchises, on a scale hitherto not seen. It was logical, because of the 500,000 new businesses with employees that launch every year, only half survive five years, and only a third see their 10-year anniversary.²

The allure of owning a franchise is the hope that the business being purchased is a successful and proven design.

At the same time, a successful company can grow only as large as its market. A store that sells paint, for example, is limited by the number of customers it can serve in a given area. Opening a branch of that store in a new location is the easiest way to double sales and profits.

As a chiropractic practice is very much a business, the decision to launch one must be made carefully. And as the *E-Myth* suggests, success is more likely if the practice enacts deliberate systems and processes, written procedures, structured training, and time-tested design.

Should the practice thrive and escape the dangers all startups encounter, eventually the owner can consider expanding with satellite clinics in new demographic areas. In this issue of *Chiropractic Economics*, we'll show you how to put your best foot forward with a new startup, the finances of launching a satellite practice, and what goes into purchasing a franchise.

Whichever route you choose, you don't have to reinvent the wheel; take advantage of others' hard-won lessons.

To your success,

Daniel Sosnoski, editor-in-chief

References

- ¹ Gerber GE. (1988). *The E Myth: Why Most Businesses Don't Work and What to Do About It*. Pensacola, Fla.: Ballinger Publishing.
- ² U.S. Small Business Administration. "Frequently Asked Questions." https://www.sba.gov/sites/default/files/FAQ_Sept_2012.pdf. Published Sept. 2012. Accessed June 2015.

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Top Malpractice Attorney's **6 Recommendations** for D.C.s

*In my 34-year career, I've seen a lot,
including what factors really make a
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Among my recommendations ...*



Michele Quattlebaum, J.D.

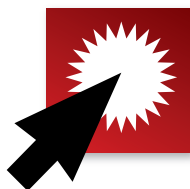
#4 ***It Can Happen to Any D.C.***

I have seen doctors sued by their 7th patient after they started practicing and seen a doctor sued for the first time a year after he retired. I have represented a doctor who got sued by the friend of the family he spent Christmas Eve with for 25 years. There is no anticipating when it can happen or to whom.

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Learn about Michele's other
recommendations by going to
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TOP NEWS

ACA efforts result in federal agency's clarification of PPACA language

At the urging of the American Chiropractic Association (ACA), the Centers for Medicare and Medicaid Services (CMS) has clarified a section of the Patient Protection and Affordable Care Act (PPACA) that led some states to improperly limit patient access to doctors of chiropractic and other qualified non-MD/DO healthcare providers.

On May 26, CMS withdrew and replaced an FAQ document on Section 2706(a) of the 2010 PPACA with one containing a more realistic approach to the issue of provider nondiscrimination. The new FAQ establishes a more reasonable standard for Section 2706(a) enforcement and is more in line with ACA's understanding of the issue.



To read the full article, visit ChiroEco.com/acaclarify.

Source: American Chiropractic Association, acatoday.org

George B. Curry becomes 18th president of ICA

George B. Curry, DC, DACS, FICA, LCP (hon.), recently stepped forward to serve as the 18th President of the International Chiropractors Association (ICA). A 1982 graduate of Palmer College of Chiropractic in Davenport, Iowa, Curry was sworn into office by Selina Sigafosse-Jackson, ICA secretary-treasurer, on May 1, 2015, at the 89th ICA Annual Meeting held in Atlanta.

Curry brings an impressive range of organizational and management skills, political insights, and clinical experience to his new leadership position with ICA, including active roles in his local and professional communities and a profound commitment to service.



To learn more about Curry, visit ChiroEco.com/icacurry.

Source: International Chiropractors Association, chiropractic.org

WFC Athens Congress exceeds expectations, brings together doctors from around the world

The 13th Biennial Congress of the World Federation of Chiropractic (WFC) was held jointly with the 2015 Annual Convention of the European Chiropractors Union (ECU) at the Athens Hilton Hotel in Greece from May 10 to 16. It was hosted by the Hellenic Chiropractors' Association, attracted over 900 delegates from 50 countries, and was the largest chiropractic conference ever held in Europe.

The meeting brought the chiropractic profession home to its Greek roots—the language that gave DD Palmer the word “chiropractic”, and the country that championed spinal manipulation and natural healthcare in the classical era.



For a detailed recap of the convention, visit ChiroEco.com/wfcathens.

Source: World Federation of Chiropractic, wfc.org

COLLEGE NEWS

Sherman College names Chiropractor of the Year, Regent of the Year

Sherman College honored alumni, chiropractors, and supporters during its 42nd Lyceum, a homecoming and continuing education event attended by hundreds of chiropractors throughout the U.S. and internationally. Lyceum is held on the college's campus in Spartanburg, South Carolina, and involves three days of seminars, special events, and other programs.

The college is proud to announce Dean DePice, DC, as Chiropractor of the Year, an award bestowed upon doctors who have, through their service, given extraordinary time and effort to advance Sherman College and the principled chiropractic profession. Pam and David Courtney, DC, have been named Regents of the Year. This award is presented in recognition of their outstanding and continuous advancement of Sherman College through participation on the college's Board of Regents.

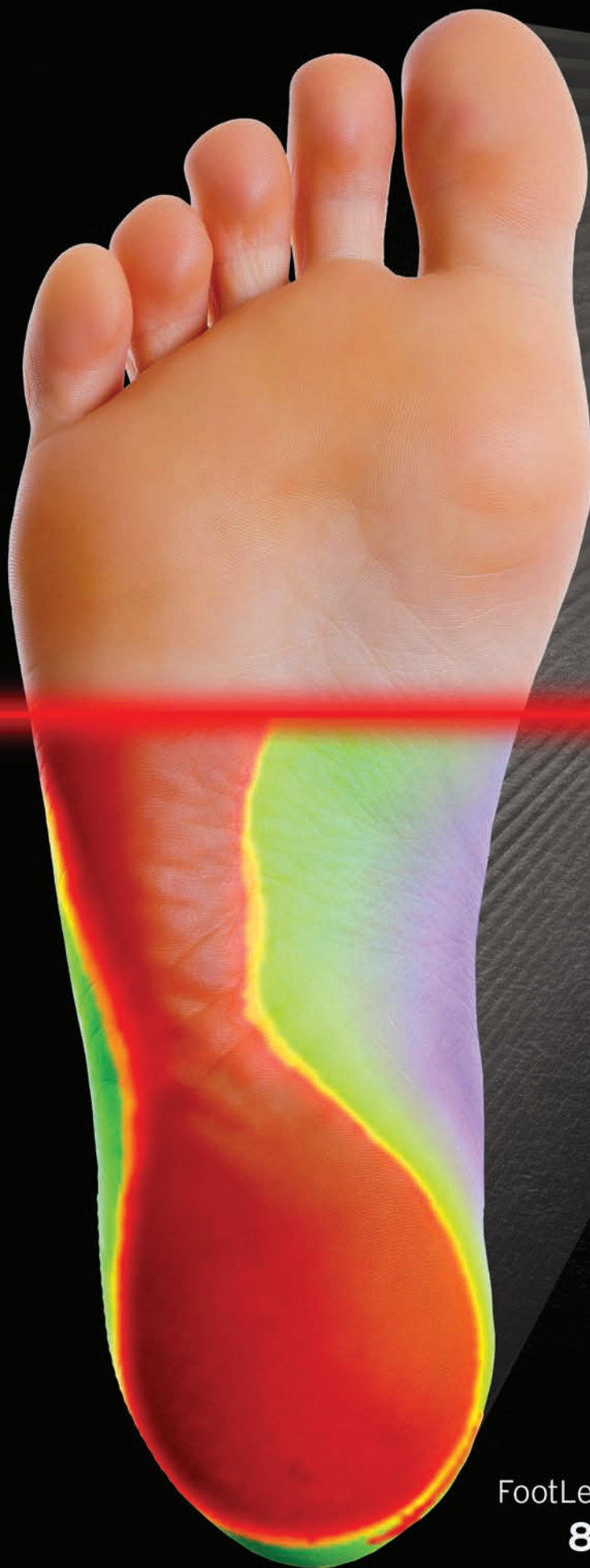


For the full list of awardees, visit ChiroEco.com/sccawards2015.

Source: Sherman College of Chiropractic, sherman.edu

Parker University researcher wins prestigious international research award

Parker University congratulates Xue-Jun Song, DC, MD, whose research was recognized as a winner of the Louis Sportelli NCMIC Original Research Award at the 13th World Federation of Chiropractic (WFC) Biennial Congress in Athens, Greece. “Parker University is proud to continue



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our legacy of significant research,” said Parker University president Brian McAulay, DC, PhD. “Research is fundamental to our mission and vision at Parker University.”

The paper was one of only three selected for recognition and was the only one selected from a North American college or university. The work, titled “Spinal Manipulation Attenuates Neuropathic Pain through Activating Endogenous Anti-inflammatory Cytokine IL-10”, was written by Parker University researcher Xue-Jun Song, MD, PhD, and co-authored by Harrison Ndetan, PhD, MPH.



To learn more about the research, visit ChiroEco.com/puaward.

Source: Parker University, parker.edu

INDUSTRY NEWS

Small practices grapple with HIPAA compliance rules

A recent survey on HIPAA compliance conducted by NueMD, Porter Research, and the Daniel Brown Law Group uncovered several issues with compliance in medical practices. Across the board, numbers relating to compliance or confidence in compliance were too low for comfort, especially within smaller operations. If your practice is struggling to keep up, there are a few easy first steps you can take to button up your compliance program.

You might have noticed a recent uptick in coverage on data breaches within healthcare. While a lot of news emphasizes hospitals and larger organizations, small covered entities are just as liable.



To find tips on improving your compliance program, visit ChiroEco.com/sphippaa.

Source: ZOG Digital, zogdigital.com

The National by FCA offers widespread opportunities for new practitioners

At The National, the Florida Chiropractic Association makes new DC assistance a primary focus. Taking place August 27 through 30 in Orlando, Florida, the largest annual event in the chiropractic industry offers topics for business success with cutting-edge clinical skill building.

“All of us have experienced the challenges of starting practice,” says FCA President Jeff Bos, DC. “And now it is even more so. There are simple and effective ways to overcome the challenges in the current landscape, and the FCA

is determined to help our future chiropractic leaders succeed.” New practitioners and students who are FCA members (membership is free for students and DCs in their first year of licensure) receive free admission to The National.



For further details about the convention, visit ChiroEco.com/thenational.

Source: Florida Chiropractic Association, fcachiro.org

Foot Levelers partners with insurance experts on new manual

Foot Levelers has partnered with five experts who have extensive knowledge in billing and coding practices for chiropractic professionals to create a Billing and Coding Guidelines manual for functional orthotics. The manual was created for chiropractors to reference as they navigate the insurance landscape, particularly the upcoming change from ICD-9 to ICD-10.

Insurance experts Kathy Mills Chang, MCS-P, CCPC; Mario Fucinari, DC, CCSP, DAAPM, MCS-P; Brian Jensen, DC; Marty Kotlar, DC, CPCO, CBCS; and Ken Murkowski, DC, DCCT, DAACA helped create the manual, which guides chiropractors through documentation, verification, coding, and billing for functional orthotics.



For more information on the manual, visit ChiroEco.com/flinsure.

Source: Foot Levelers, footlevelers.com

ChiroSpring announces addition of custom adjustment techniques

ChiroSpring practice management software recently announced the addition of custom adjustment techniques and spinal listings in the latest version of their innovative software. The inclusion of custom adjustment techniques not only allows doctors to specify exactly how they are adjusting their patient, but also gives them the flexibility to create their own adjustment style in the software.

While ChiroSpring has initially allowed doctors to choose from adjustment techniques such as Activator, Diversified, and more, doctors now have the ability to create additional adjustment techniques, and designate which method was used on a patient-by-patient basis.



To read more about the updates, visit ChiroEco.com/cspring.

Source: ChiroSpring, chirospring.com

HEALTH NEWS

F4CP highlights chiropractic in corporate health clinics

The Foundation for Chiropractic Progress (F4CP), a not-for-profit organization dedicated to raising awareness about the value of chiropractic care, announces the release of its landmark position paper, “The Growing Role of Doctors of Chiropractic in Corporate On-Site Clinics,” which reviews current industry trends and articulates the role of chiropractic care to optimize clinical and financial management of neuromusculoskeletal conditions among workforce populations.

Doctors of chiropractic are well trained and positioned as the first option for drug-free, noninvasive, and evidence-based back and neuromusculoskeletal pain management. In the workplace, low-back pain ranks second to upper respiratory conditions as a stated cause for loss of work, and treatment costs in the U.S. exceed \$50 billion a year, reports the *Archives of Internal Medicine*.



To read the highlights of the report, visit ChiroEco.com/chiro-onsite.

Source: Foundation for Chiropractic Progress, f4cp.com

Are you getting enough exercise?

Workouts that promise fitness with as little as four to seven minutes of high-intensity exercise a day are alluring. But can you really stay fit with such a small time commitment? “No,” says Howard Knuttgen, PhD, research associate in physical medicine and rehabilitation at Harvard-affiliated Spaulding Rehabilitation Hospital, in the May 2015 *Harvard Women's Health Watch*.

Knuttgen has a file of articles and ads dating back to the 1960s promoting exercise regimens that offer to keep you fit with little investment of either time or effort. “This is exercise quackery,” he says. “If a program sounds too good to be true, it probably is.” Exercise is any activity that uses muscles to generate force. The more force exerted, the more exercise. In general, aerobic workouts (also called cardiovascular workouts) call for moving the body by walking, running, cycling, rowing, swimming, or another activity. Strength-building workouts involve working against resistance. 



For further information on current exercise guidelines, visit ChiroEco.com/stayfit.

Source: Harvard Women's Health Watch, health.harvard.edu

How Much of YOUR MONEY will YOU LOSE This Year to **TAXES and DEBT?**

**You Better Bet the IRS and Your Banker Want to Keep
Padding Their Pockets with Excess Amounts of Your Money**



"For the first 25 years of practice I averaged 5 thousand dollars in savings and this year I will save over \$100K. I will also cut my income tax bill in half and will be debt free in seven years or less. When the student is ready, the teacher will appear."
Dr. Bill Hemmer



"I have completely changed how I look at my money. I have realized that just like with health, wealth is not created by treating symptoms but by changing the fundamental beliefs in how to deal with finances."

Dr. Zach Sedivy



"Why didn't they teach me this in school? If they had taught me this 20 years ago when I started practice I would be so far beyond where I am now. Today, thanks to Bruce, my practice is exploding!"

Dr. Robert Greene



"Prior to coaching with Bruce I had no retirement. Before starting the program if someone were to tell me how well we would do this year, I would think they were crazy!"

Thank God I was accepted into Bruce's program. It has been a remarkable year."

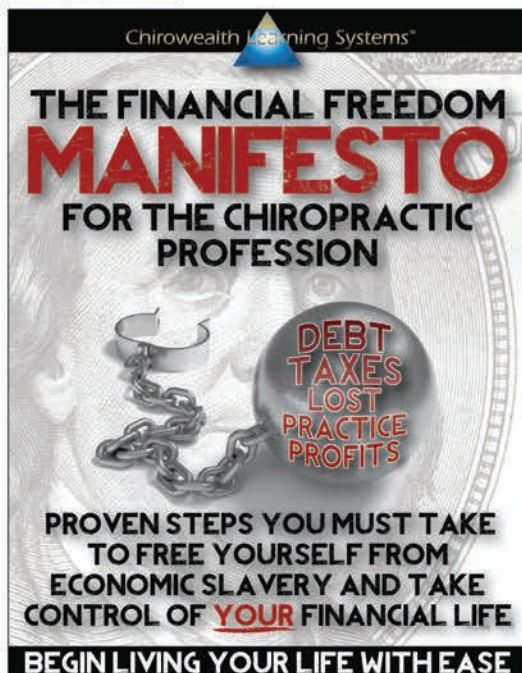


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CHIROPRACTIC ECONOMICS STAFF REPORT

THE FRANCHISE MODE OF CHIROPRACTIC DELIVERY ISN'T for everyone or every market. Yet, in the right circumstances, it can be a recipe for diversification, expansion, and reliable profits.

We reached out to John Lloyd, DC, CCEP, CCSP, who practices in Denver. A graduate of Logan University of Health Sciences, he spent his first 10 years in solo practice before making the decision to expand.

This story begins when Lloyd was in Tucson, Arizona for a bike race (he cycles competitively), and he went to a chiropractor beforehand for an adjustment.

"There were many people there, and they were having a great experience, and I got one of the best adjustments I've ever had," he says. This was the Principled Chiropractic style, and Lloyd has always preferred this type of hand-delivered adjustment.

Impressed, he spoke with the owner, who had been involved with The Joint chiropractic franchise for several years. "It was extremely convenient, being able to get an appointment as a walk-in. And I left with an impression of amazing quality," Lloyd says.

This got him thinking about branching out with multiple practices, and eventually he looked into becoming a franchise owner himself.

Today Lloyd is the owner of three regular practices, three massage practices, and is either the owner or part owner of 12 Joint locations. With regard to the franchises, he's thrilled with them. "It's a wonderful way to practice. What I enjoy about it is that there's less administration, billing, and coding, and it's more about deeply connecting with a patient and providing a service that they can pay for out of pocket."

The typical client comes to these

locations because of some pain or discomfort. "We don't do accidents or workers' compensation," Lloyd says. "We focus on helping people reduce pain due to subluxation, then transition to wellness and maintenance care to prevent pain from recurring."

It's understandable that some DCs aren't enthusiastic about the franchise model, and worry that it risks turning the art of the adjustment into a commodity. In reality, though, mainstreaming and normalizing chiropractic is one way of expanding the patient base and consumer acceptance.

"We perform a full exam in order to determine if the client is a good candidate for care," Lloyd says. "Then we educate each patient on what living well with a healthy spine means for them." Lloyd notes that some 20 percent of his new clients have never experienced chiropractic before.

Patients who are not a candidate for The Joint's services are referred to specialists; in fact, Lloyd refers 20 to 30 people a month to other chiropractors.

Some patients come in and get an Activator-type adjustment, but most opt for Diversified or drop technique.

Participation in care delivery is based on the goals of the owner DC. "Some want to work six days a week, and some only want to work three or four. The majority end up working 40 hours a week and, while they work fairly hard, they don't have to do any marketing or accounting, and they can focus on using their chiropractic skill," Lloyd says.

The idea of going to work at a franchise might be attractive for a new graduate, but Lloyd stresses that it isn't really a training or learning environment: "We expect our hires to be skilled and accomplished practitioners. Several are new graduates, yes, but most have two to three years' experience.




"The main thing we look for is someone with a great work ethic, who has already invested the time to learn to adjust people. Still, our training program is incredible." There are weekly calls for the practicing DCs, monthly training, CE credits, videos, and more.

When Lloyd decided to become a franchisee of The Joint, he flew to Arizona and met with corporate representatives before signing an agreement. Not only did he want a better look at the business model, but they also wanted to evaluate his suitability as an owner.

"They assigned a real estate broker to me and we toured sites and secured a lease. There's a territory assigned. Depending on the real estate process, time from site selection to day one of operations ranges from four to six months," Lloyd says.

In terms of traffic, he's seeing amazing results. "We're spending a decent amount on newspaper and TV advertising, but the majority of new patients are from referrals," he says.

If you're comfortable delivering chiropractic care but are looking for a framework that streamlines the business side of practice, this is one solution that's working out for entrepreneurial-minded DCs. 



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Shining examples

Three case studies shed light on the widespread benefits of laser therapy.

CARY BURNLEY, DC

IN A SINGLE DAY, THE AVERAGE DOCTOR OF CHIROPRACTIC IS confronted with cases ranging from overuse sports injuries, arthritis in the elderly, and work-related back pain. The chiropractic challenge is to develop programs and acquire the best tools to meet the needs of an extremely segmented patient population.

As you develop treatment programs for diverse patients, your arsenal should eventually contain modalities for a wide variety of conditions. What do athletes, weekend warriors, and aging populations have in common? The answer is simple: pain.

Providing lasting pain relief requires more than popping a pill. Creating a fundamental change on a cellular level is essential to making a prolonged impact on a patient's recovery. This long-term relief is why laser therapy is a modality worth considering.

Across the spectrum

Whether you're looking to complement soft-tissue work, kinesiology taping, or other manual techniques, laser therapy can serve as a strong adjunctive treatment. Laser therapy can also provide value as a standalone modality for conditions that are unresponsive to treatment and for patients who do not care for spinal adjustments.

Often, patients with nagging chronic pain feel an immediate difference when laser therapy is applied. These patients who are begging for relief when nothing else has worked can become your best word-of-mouth ambassadors.

Laser therapy is commonly used to treat tendinitis, adhesive capsulitis, sprains and strains, sports injuries, post-operative conditions, plantar fasciitis, and similar ailments that present with pain and inflammation.¹⁻³ Other common applications for laser

therapy are for symptoms related to postherpetic neuralgia, shingles, TMJ, and sinus issues. The results after treating shingles and postherpetic neuralgia have been life-changing for patients with debilitating chronic pain. The key to these results is providing each patient with the most appropriate dose of energy for his or her condition.

An important parameter to look for in a therapy laser is the ability to manually change treatment settings. You wouldn't give a 90-year-old woman the same adjustment as you would a 25-year-old collegiate athlete, so you wouldn't give them the same laser treatment either.

To provide the most effective dose of laser energy, you need the ability to adjust your settings for every condition. Other parameters you may alter during treatments include power, wavelength, and time. Be sure to understand the

concept of target dose; for consistent results you need to administer the correct amount of energy per square centimeter of tissue area.

The following three cases highlight the treatment parameters and results observed for conditions treated with laser therapy. These cases demonstrate the versatility of laser therapy across multiple conditions and patient populations.

Back in the game

One strong application for laser therapy is to accelerate athlete recovery times. Laser therapy is safe to use directly after injury, as long as there is no active hemorrhaging.

A high-school female soccer player presented with a high ankle sprain not long after incurring the injury. Upon initial evaluation by her orthopedic doctor, he predicted that she might be

out for the rest of the season. She was to wear a boot and be off her foot as much as possible for two weeks and then re-evaluate for a physical therapy plan.

Devastated by the consequences this might have to her upcoming full-ride soccer scholarship to a university, the patient's parents explored alternative treatment options. She was evaluated and then treated with a Class 4 deep tissue therapy laser.

Laser therapy was applied to her ankle and lower leg; the goal was to treat both the injured area and the inflamed surrounding tissue. This area represented a significant portion of her lower leg and required 7,200 joules to provide a therapeutic dose.

The first treatment lasted eight minutes and was administered at 15 watts. Her sprain was treated with conservative power output upon presentation because of its acuity. Many practitioners elect to treat acute conditions "low and slow." The goal is to provide the injured area with a therapeutic dose without treating it too aggressively in the beginning stages of an injury. Power then can be progressively increased based on patient response.

After positive results, the second treatment was administered at 18 watts, and the third was delivered at 20 watts. In both cases the patient received 7,200 joules to the affected area. After three treatments in four days, the patient went out of town for a week and rested her ankle.

She was then cleared by her physical therapist to return to playing soccer with no limitations after her third treatment. All of this occurred before she was scheduled to start physical therapy.

The patient had a total of four treatments and finished the season helping her team advance to the playoffs. Her speed of recovery and return to full-intensity performance came as a surprise to her parents, orthopedic physician, and physical therapist alike.

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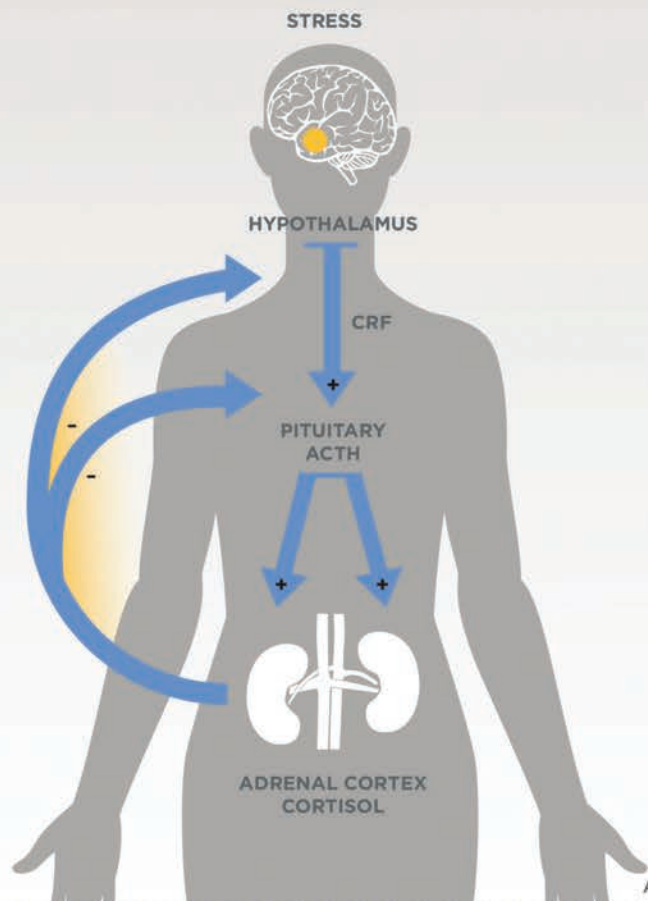


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Laser therapy can open the door to treatment options you never knew existed.

A glowing recommendation

A 68-year-old male presented with severe shingles. He could not lift his head because of the blistering on his neck, across his left trapezius, and along the nerve branches from the front of his chest to the back surrounding the scapula. He had been in this condition for weeks. Anti-viral medication, pain medication, and steroids failed to provide relief. He then turned to laser therapy as a last resort.

He was initially treated with 6,000 joules; this dose was applied to all blisters along the dermatome, additional nerve branches of the chest, and upper back on the left side. Treatment was administered at 8 watts for 12 minutes.

Laser therapy is noninvasive and can be delivered by noncontact methods—

therefore the patient tolerated treatments well. After the second treatment, he was 75-percent improved. With much of his range of motion regained, he could lift his head without pain.

He continued his treatments for seven sessions over a two-week period. At his seventh session he reported being symptom free. In the patient's words, "This treatment is amazing and has given me my life back. I will tell everyone I know about this. Especially those suffering as I was from shingles."

Seeing is believing

Many practitioners are reaching for high power, Class 4 laser therapy as an intervention for postherpetic neuralgia as more research supports it as an effective treatment for this uncom-

fortable condition.⁴ These cases are often the most transformative for patients, while offering high impact for practitioners. Many laser-therapy skeptics are converted to believers after seeing postherpetic neuralgia results.

A patient presented with postherpetic neuralgia on her face, a condition that had been persisting for two years. Her eyelid was drooping noticeably from the condition and she was in constant pain on the side of her face. If anything touched or brushed up against that area, the pain was intense.

The side of her face was treated, and care was taken to avoid her eyes by using laser-safe eye protection. After only one treatment, her pain was completely resolved. Two years of chronic pain halted after a few minutes of laser therapy. While many other treatments had been administered, this was the one that produced lasting results. She has not needed to return



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for further treatment.

Laser therapy can also be instrumental in alleviating tension headaches accompanied by neck pain and stiffness. Many report a 50 to 75 percent range-of-motion increase immediately post-treatment, and full headache resolution within an hour.

Go toward the light

Laser therapy can open the door to

treatment options you never knew existed. As more research emerges and patients and practitioners see real-world results, this treatment modality is on the brink of becoming widely accepted.⁵ This technology is not only effective for your patients but also serves as a liaison to practice growth and an increased bottom line.

With another cash-flow revenue stream, you set yourself up for referrals

from happy patients sharing their success stories with others in the community. The applications of laser therapy are vast—if you haven't looked into it yet, now is the time. ☺



CARY BURNLEY, DC is licensed chiropractor in Florence, Alabama, at Garrett Chiropractic Clinic. He graduated from Logan College of Chiropractic in Saint Louis in

2005. Burnley and his wife, Anna, moved to Florence to pursue opportunities in both of their specialties. He can be contacted at garrettchiro.com.

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Treatment of scoliosis

There are generally three treatment options for scoliosis—careful observation, bracing, and surgery. Observation is the most common, as most mild scolioses do not progress and cause few problems. Bracing is generally reserved for children who have not reached skeletal maturity and who have curves between 25 and 45 degrees. Surgery is used in the few cases where the curves are greater than 45 degrees and progressive.

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Test gently

Your aging patients will appreciate noninvasive assessment tools.

BY PAUL LING TAI, DPM

AS A HEALTHCARE PROFESSIONAL, YOU ARE OFTEN ASKED TO clinically evaluate the health of your patients and the ongoing effects of physiological aging. The baby boomers in particular, who are wealthy and following a healthier lifestyle, place emphasis on feeling better, living longer, and looking younger. Consequently, they are seeking help from physicians worldwide.

As people age, however, their hormone levels gradually and steadily decline. The endocrine and sexual glands produce fewer hormones than they once did, changing vital, active individuals to slower, weaker ones. In fact, every 10 years after the age of 20, people lose 15 percent of their hormones. A 70-year-old woman, for example, may have lost up to 75 percent

of her natural hormones.¹ For the next 14 years, baby boomers will be turning over 65 at the rate of 10,000 per day in the U.S.² As a result, hormone deficiencies may influence health more than previously thought.

Different types of hormones

More than 95 percent of the hormones in the bloodstream are bound and therefore biologically inactive. These are glycoproteins that are loosely bound to albumin and tightly bound to cortisol-binding globulins (CBG), sex hormone-binding globulins (SHBG), testosterone, and all forms of estrogen.

The remaining hormones in the bloodstream—a tiny fraction—are called unbound or free hormones, which are readily available for the receptors of

organs and tissues. They are the only hormones the body can use.

Physiology of saliva production

Saliva is produced by three major glands: The parotid, the sublingual, and the submandibular. The parotid gland is in front of the ears on the lateral portion of the mandible and it normally produces 30 to 40 percent of a person's saliva (up to 70 percent when stimulated).

The sublingual gland is located in the oral cavity beneath the tongue, and it produces 25 percent of a person's saliva (50 to 70 percent when stimulated with food). The submandibular gland is beneath the jaw and it produces about 5 percent of a person's saliva. Normal saliva production is about 1.5 liters per day, but with age, saliva

CLINICAL CONCERNS

production decreases to less than 0.5 liters per day, possibly due to salivary gland atrophy and hormonal imbalance.

Saliva is produced when blood, possessing both bound and free hormones, and lymphatic components traverse membranes on their way to the glands. According to two researchers, "Unconjugated plasma steroids, such as estradiol, testosterone, progesterone and other related steroids, are able to cross the salivary gland wall and diffuse to saliva regardless of the salivary flow rate."³

You may wonder how hormones can cross the salivary gland wall. In fact, any hormone with a molecular weight (MW) of less than 1,900 can penetrate the filtration membrane. The hormones testosterone, DHEA, cortisol, and melatonin are generally about 300 MW.

On the other hand, a CBG is approximately 50,000 MW, albumin is

typically 66,000 MW, and an SHBG sex hormone is about 115,000 MW. These are all too heavy to cross the membrane barriers, such that only the free hormones can cross over and enter the saliva. As a result, eight free hormones are readily present in saliva: testosterone, estradiol, cortisol, estrone, estriol, DHEA, progesterone, and melatonin.

Saliva testing technology

Key reasons for performing saliva testing are that it is noninvasive, inexpensive, painless, and convenient (for you and the patient). It offers accuracy by directly measuring biologically active or free hormones. As a general protocol, patients should take five samples of their saliva throughout the same day.

Published studies have shown that, when comparing saliva and serum methods, saliva is a more accurate

sample.⁴ It provides precise readings for testosterone bioavailability, especially for low levels.⁵ (Serum tests are often unreliable in this area.) Saliva testing also can measure hormones, such as testosterone in women or children, and estrogen in men.⁶

For example, in one study, 50 men, 55 women, and 11 children were assessed for serum testosterone via immunoassays and isotope-dilution gas chromatography spectrometry. None of the serum samples from the women and children were deemed reliable, as these populations have low (< 1.7 nmol/L) and very low (0.17 nmol/L) levels of testosterone.⁷

8 principles for accurate saliva hormone testing

Principle 1: Hormone cycles. Be aware of natural ebbs and flows of hormone production, such as during the menstrual cycle. *For example:* High



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estrogen levels occur during ovulation, and high progesterone levels circulate through the body around day 21 of the menstrual cycle. When you measure hormones, take exercise, medication, illness, and other factors affecting changes in hormone levels into consideration.

Principle 2: Multiple samples. Hormones are produced in high levels of pulsatility and squirts on regular intervals.

Clinical experience shows that five test samples give an average of about 80 percent accuracy, while single sample collections at random reflect only a 20 percent or lower rate of accuracy. The first sample should be collected in the morning, exactly one hour after waking, with the remaining four samples collected every three hours after the initial sample is collected. For the greatest hormone testing accuracy, gather all five samples three hours apart.

Principle 3: Proper sample gathering utensils. Cotton swabs should never be used when collecting a sample. Cotton salivettes, which are balls of cotton with cotton strings attached, have been shown to result in lower cortisol values. There is a high chance that cotton contains substances that interact with cortisol and bind hormones. This makes the cortisol unavailable for measuring. Spitting directly into a container using a small straw is preferred.

Principle 4: Purity of saliva samples. Before collecting saliva samples, patients must remember to wash their hands thoroughly with soap and water and use disposable gloves. Possible contamination will affect the accuracy of the test.

Principle 5: Mouth hygiene. To ensure this, patients should rinse their mouths with clear water right after eating or drinking, and should not eat nor drink one hour before a saliva sample

collection. Rinsing the mouth with clear water 15 minutes before a saliva sample is acceptable.

Principle 6: Blood sanitation. Blood in the saliva sample, from bleeding gums to mouth sores, can contaminate the sample. The rejection point of contamination is when blood leaves a red tinge in the saliva specimen. To avoid blood in the saliva, patients should not brush or floss their teeth before collecting a sample.

Principle 7: Proper sample collection containers. A saliva sample can be soiled by improper collection containers—the most common of all contamination mistakes. Because saliva hormones are small molecules that have a static electric charge, they tend to stick to plastic materials that have the opposite electric charge, such as polyethylene. The best plastic materials seem to be ultra-pure polypropylene and polystyrene, which do not bind the salivary hormones, as opposed to recycled plastic.

Polyethylene tubes and stoppers readily absorb free hormones, especially progesterone. Therefore, they can absorb up to 87 percent of progesterone on the walls of the container. Although glass is the best container option because it is completely absorption free, it's not always practical due to the risk of containers breaking during transport.

Principle 8: Exclusion of cortisol level studies. Using blood tests for cortisol levels may give inaccurate and false reports on stress, chronic fatigue, and obesity; the venipuncture itself is a severe stress factor to many patients and may result in false laboratory readings. It is difficult to get a correlation of blood sample cortisol levels to a physical or psychological stress event because no one can predict when or where these events are going to happen, nor will someone be

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available to draw blood samples during that time.

Saliva testing is easy and convenient. Multiple samples are gathered, which improves the chances of accuracy. Furthermore, saliva testing directly measures free hormone levels. It's also more accurate when measuring very low levels of free hormones.⁸

Accurately measuring free hormone

levels is essential to diagnosing, planning, and maintaining proper treatment, as well as balancing hormones for total health. **CE**



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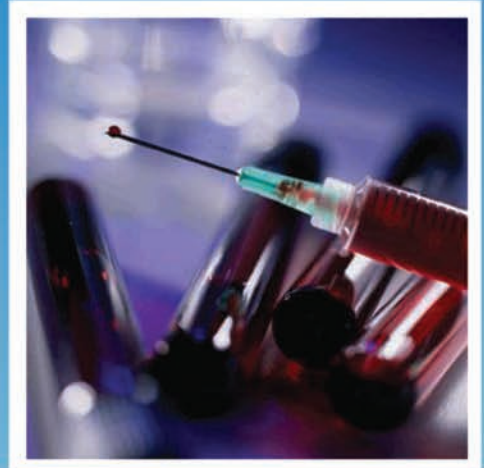
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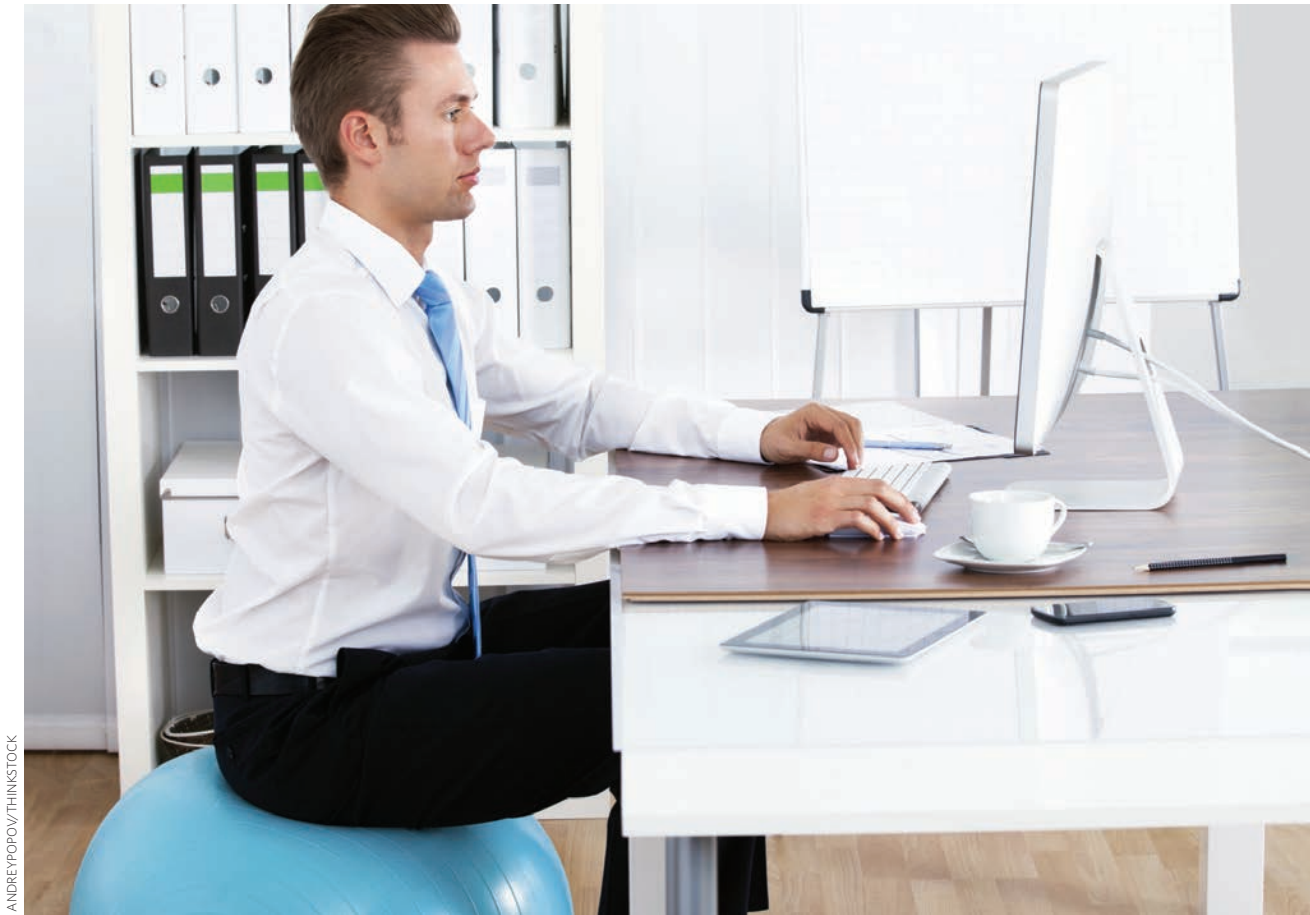
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Internal medicine

Take care of the people who work in your practice.

BY DAVID QUEZADA

YOU ARE OFTEN SO CONCERNED WITH ADDRESSING THE WELL-being of your patients that you may overlook the safety and wellness of yourself and your staff. Employees are critical to the success of any business. Therefore, employee health should be an integral part of your office's business strategy.

Chain reaction

Workplace injuries not only impact the injured employee but can also have a ripple effect on the business overall. Work-related injuries can be costly in terms of out-of-pocket expenses, lost productivity, and potentially higher insurance premiums. When employees are hurt and unable to perform their

duties, operations can be strained as others need to fill the gaps. This may involve overtime pay, temporary workers, or in some cases hiring a new full-time employee.

You can protect your practice and your employees by proactively implementing measures to improve workplace safety and wellness. Preventive programs can set up safeguards and result in both operational and cost benefits through fewer workplace accidents, increased employee retention, and better productivity. You can enhance wellness in-house by following these guidelines.

Review the risks

Creating a safer workplace begins with identifying and documenting potential

hazards and tasks that could lead to an injury. It also involves instituting proper safety procedures before employees use any equipment or materials. Documentation is especially important because it establishes a record that can be referenced in the event of an OSHA inspection or insurance audit.

You should start with yourself. Many of the manual techniques used in chiropractic therapy, such as spinal manipulation, can put stress on your joints, wrists, and lower back over time. You are also susceptible to repetitive motion injuries, as well as some of the most common but often overlooked workplace safety threats, including trips and falls from slippery floors or surface changes.

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Many of these injuries can be prevented by taking simple preventive measures. For instance, you can use table-assisted techniques or instrument adjusting as an alternative to the high-velocity, low-amplitude (HVLA) thrust for spinal manipulation. Requiring all employees to wear rubber-soled shoes at work can help prevent accidents.

Office support employees are subject to their own unique potential risks. A growing amount of research shows that increased time spent sitting and related health problems are taking years off lives. According to a recent survey by the insurance firm Employers, nearly 30 percent of small-business owners said their employees typically remain seated for more than an hour at a time. Workers in sedentary jobs are at a heightened risk of obesity and other ailments. Employees with more sedentary duties should be encouraged to take regular breaks, increase their movement, and rest their eyes.

Staff members who primarily work on computers should have monitor stands to ensure an ergonomically correct position and make sitting at work stations more comfortable. The Employers survey found that two out of five small businesses do not provide monitor stands to improve the posture and comfort of these employees.

Head to the train station

According to a study by Humana and the National Small Business Association (NSBA), 93 percent of small businesses say their employees' physical and mental health is important. More than 50 percent say it is "extremely important."

Therefore, a good first step is to document safety policies and procedures in writing. Making safety a fundamental component of your business requires training and empowering employees.

Safety training should be part of each new employee's orientation and reinforced routinely (on an annual basis at a minimum). Training sessions should also be held whenever new

processes, procedures, or equipment are introduced into the workplace. These sessions should cover how to identify hazards, prevent accidents, and respond to injuries.

Management must remain vigilant and insist employees follow safety policies. OSHA can fine businesses significant amounts of money for safety violations, so safety enforcement is another proactive cost-control measure for your organization.

Routine workplace safety audits, safety meetings, and annual safety training sessions are effective ways to enforce the rules. Business leaders must also evaluate their programs at least annually, or whenever new or previously unknown hazards are discovered.

Safety first

Taking steps to increase the overall safety and wellness of your employees needn't be expensive, but the investment can offer significant returns.

Direct connections have been made between wellness and healthcare costs, as well as between workplace safety and workers' compensation insurance claims and costs. When employers and employees commit to making wellness and safety a priority, they can expect to see expenses decline.

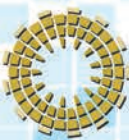
As such, safety and wellness should be intrinsic core values for all businesses. When your practice protects your employees, everyone benefits. The more you recognize this, the better off you and your staff will be. **CE**



DAVID QUEZADA is vice president of Loss Control Services for Employers, America's small-business insurance specialist, which offers workers'

compensation insurance and services. In this role, Quezada has helped many businesses take a strategic approach to risk management to improve their workplace safety and protect their most important assets—their employees. He can be contacted through losscontrol@employers.com or employers.com.

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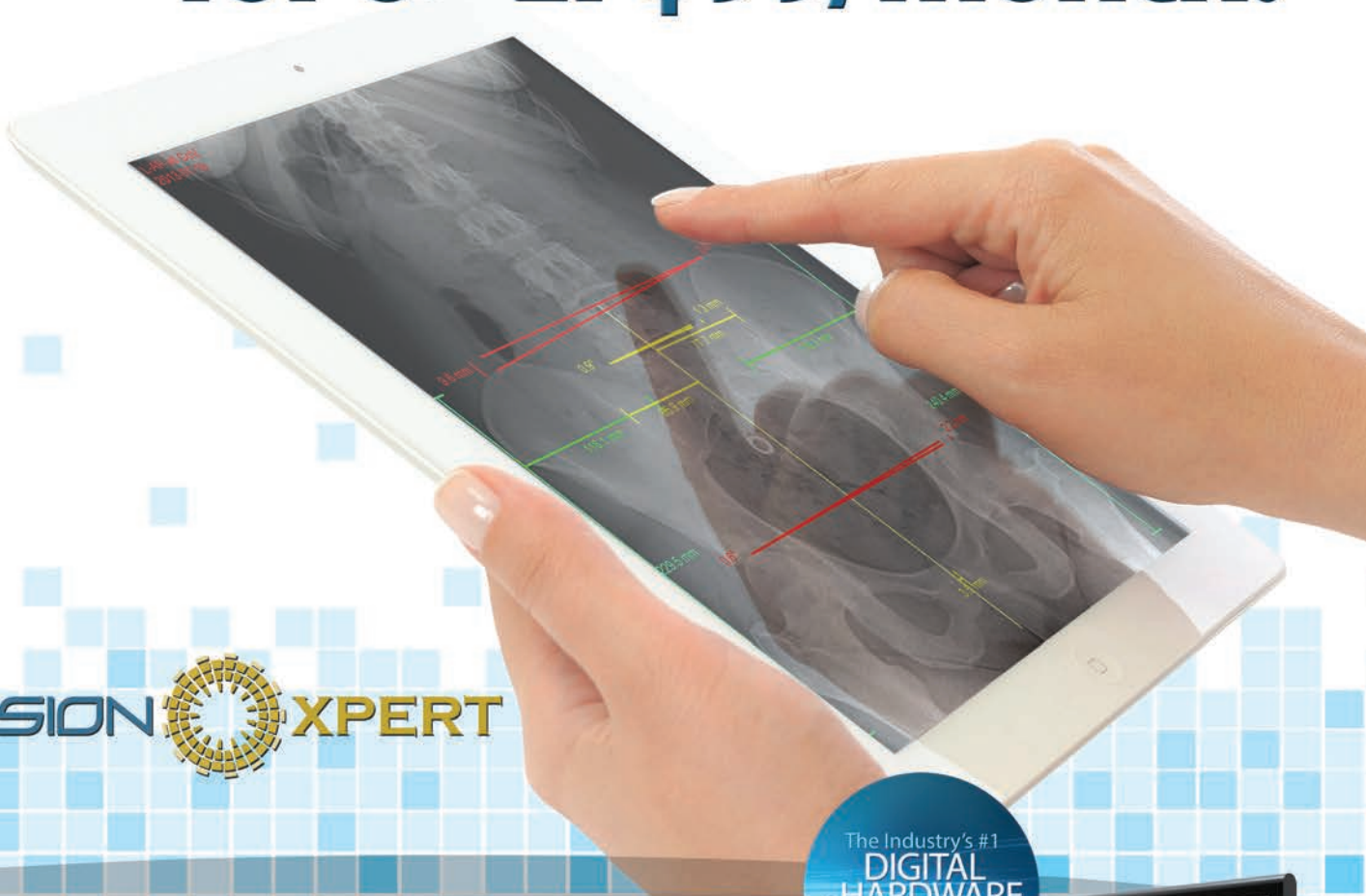
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Best advised

5 signs that you've hired the right consultant.

BY MONICA WOFFORD, CSP

CHANCES ARE YOU'VE LEARNED A FEW LESSONS THE HARD WAY IN your chiropractic career. One you deserve to skip is the price of hiring the wrong consultant.

Selecting a consultant is easy. But choosing the right one for the results you want is a bit more complex, though perhaps not as difficult as it may seem. The key is in learning what drives a consultant to work toward your success.

For many business owners, the temptation to resolve office issues by cutting a check is as extreme as the issues that need fixing. Though the best consultants with the most experience are not free, it's not money that motivates them.

Whether you seek advice on business expansion, growth, or change; help with hiring; or to reinvigorate your staff, the most effective consultants offer a mix of qualities that serve your interests first.

These five insights into the values of a sincere adviser aim to prevent the risk of having to let go of a bad hire before your problem is resolved.

With that in mind, your ideal consultant:

1. Lives for results. Consultants, coaches, and trainers have a gift for giving direction. The best ones dispense advice in such a way that you want to follow their lead. That doesn't mean you'll like everything they say or want to hear all their observations. But it does mean that talented consultants will guide you through improvements—even in areas you'd rather leave in the shadows.

Regardless of the task at hand, great consultants live for and thrive on results. A consultant's expertise is in helping clients achieve things they've not been able to do on their own or don't wish to do on their own time.

This means they'll help you overcome barriers, break through bad habits, and reach new levels of improvement if you're willing to do the work. The more you do and the more you are prepared to achieve, the harder they will work for you.

A good consultant will hold you accountable, help you create goals, and design milestones of celebration into the coaching process. This in turn allows you to be equally energized by the results of your hard work as your adviser is.

2. Applies objectivity. Whether the dilemma at hand involves tumultuous workplace dynamics, terrible employees, or that person who does just enough work to keep a job, a manager is usually too close to a problem to fix it. This is why a consultant is invaluable.

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Good consultants see through a lens of objectivity. They haven't worked in your practice, built it from the ground up, or made personal connections with your employees. An outsider has a fresh perspective on how things work—or don't work—in your office.

That objectivity offers a narrow window of opportunity, and it closes over time as someone works with you. This is not a style difference, nor an issue of expertise, but a matter of putting new eyes on the same issues you long ago tuned out or chose to ignore. Consultants will naturally see solutions you don't. Let them share their feedback if you want great results.

3. Wants to be a short-term partner.

Consulting is unlike therapy. The goal for the best consultants, with rare exception, is to go in, assess, address, and get out, rather than dragging out discussion of possible results for years.

This isn't a cavalier mindset but rather a reflection of the limited time for which consultants know their objectivity will have its greatest value. The best ones know that their maximum contributions occur in the initial phases and lessen over time. They also know that clients can experience varying degrees of project fatigue if the results take too long.

4. Is a walking vault. If you hear specific comments about a consultant's previous clients or details about a particular person they worked with, run away. Confidentiality is no laughing matter and the best consultants won't need to sign a document to guarantee it.

Details of your practice's inner workings are not for public consumption and you should have full confidence that the person with whom you share your most vulnerable business challenges will keep them private.


Anecdotes, examples, analogies, and hypothetical explanations are all helpful, but if you start hearing actual names, you'll know you're talking with

someone who thinks confidentiality is a marketing slogan instead of a bedrock principle.

Many consultants struggle with marketing their services in light of their inability to share the names of people they've helped. Ensure their lips are sealed by asking for examples and gauging their response. Ask them for references, which should be expected, but don't expect them to share specifics of their previous work.

5. Enhances your independence. Unless you wish to hire a consultant as an employee, there will come a time when he or she has to back off and let you try managing the issues yourself. The ideal consultant will have a roll-up-your-sleeves mentality before turning over the reins to you.

The goal of a good consultant is to help you maintain the results you've both created, and not make you dependent on his or her services. Consultants who are all show-and-tell might not value what happens when they are no longer paid to show up. The learner must work harder than the teacher. An expert adviser will make that easier for you.

If you're considering hiring help in the form of a consultant or coach, review these suggestions, conduct your interviews, and then make your choice without thinking twice. The ideal consultant with the appropriate leadership skills, personality, and motivation to meet your needs is well worth finding. 



MONICA WOFFORD is the CEO of Contagious Companies, an Orlando, Florida based training and consulting firm and a consultant in the chiropractic

industry. She works with chiropractic practices, healthcare, retail, hospitality, and government industry leaders to develop their leadership skills. She can be contacted about training, coaching, or consulting at 866-382-0121 or through contagiouscompanies.com.



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On the weighting list

Watch patients line up at the door for your comprehensive weight-loss services.

BY CAROLINE FEENEY

THE MODERN PERCEPTION OF WEIGHT LOSS HAS UNDERGONE A significant shift, especially in the realm of alternative medicine. With the push for safe and natural remedies, no longer is weight-loss confined to flashy claims for quick miracle cures and aesthetic perfection. Increasingly, the current conversation highlights the importance of long-term health, which involves a variety of lifestyle commitments. As such, the 70 percent of Americans who are overweight could benefit from your help as a chiropractor more than you realize.

Joint venture

A study published in *Obesity* in 2012 found a strong connection between bearing excess weight and pain. The research further emphasized obesity's association with musculoskeletal disease, caused by additional pressure on the joints.¹

The study should come as no

surprise—you likely witness this combination firsthand with a large proportion of your patients every day. You might encourage exercise and at times recommend a handful of nutritional supplements, but losing weight (and more importantly, keeping it off) requires multifaceted dedication.

With all-encompassing weight-loss services at your practice, you're apt to attract a whole new kind of patient base, one that perhaps never would have considered your care before. And multimodal treatment has a track record of success: In 2014, an analysis looked at patient files of adults who had undergone spinal manipulative therapy together with diet, nutritional intervention, and exercise. BMI and weight-loss measurements indicated the effectiveness of this varied approach.²

Full-body challenge

Since 1993 when he opened his practice in Gainesville, Georgia, Terry Crews,

DC, had always offered a limited amount of nutritional advice to his patients. But it wasn't until he implemented a full-fledged weight-loss program three years ago that he felt this portion of his practice was truly assisting his overweight patients. "We've really upped our game, so we can actually direct people in a way that we're not just selling supplements," he says.

Chad Goodman, DC, operates nutrition and weight-loss programs at his clinic in Utah as well. "The comprehensive nature of our programs is such that [patients] are following detailed, daily instructions at home while coming into the office for two to two-and-a-half hours once a week for therapies," he says. These therapies may include the use of body cleansing wraps for inch loss and infrared saunas for metabolic stimulation.

Treatment plans are tailored to how much weight needs to be lost and how long patients plan to keep you on as a

coach. Oftentimes, patients will visit frequently at the start of a program and taper off during the maintenance stage, but lifelong wellness is always the goal. “We instruct people on what to eat, how often to eat, recipes and menu plans, supplementation, and a complete detoxification and cleansing program,” Goodman says.

In getting their services off the ground, both Crews and Goodman worked with an outside company, which involved crafting a plan based on their practice needs. Crews had tried a few different weight-loss programs and found that some didn’t align with his treatment philosophy.

He dismissed those centered on targeting symptoms. He was looking for keen attention to the body’s internal rhythms and a focus on nutrient replenishment. “The root premise of what we do is get nutrition back into the body,” he says. It’s with this perspective that patients make the natural transition from weight loss to chiropractic, or vice versa. Overall, about 40 percent of Crews’ weight-loss clients become chiropractic patients.

Inside job

Although it may be tempting to immediately advertise any new services you take on to the public, Crews and Goodman recommend internal marketing at the start.

“If you have a solid practice set up, you already have tons of patients you can automatically market to,” Crews says. Goodman adds that the biggest challenge is always locating new patients: “If you can start with your existing patient base and offer incentives to have them invite friends and family, you can keep marketing costs down while growing a new clientele.” After five to six months, you may decide to expand your efforts, and your potential market will have broadened.

Depending on how long you’ve been practicing, both doctors agree that you

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“The last thing I ever expected to do was open up a weight-loss clinic.”

— Dr. Todd Singleton.



Back in 1983 when I decided to become a chiropractor, the furthest thing from my mind was offering weight loss. From the beginning, I noticed patients who smoked and ate toxic diets didn’t always respond as well to adjustments as healthier patients did.

So I began to put my sickly patients on nutritional programs. Because I saw such profound results with these patients, I eventually decided to put all patients on nutritional programs.

But I knew that some patients had no interest in changing the way they ate. Yet there was a group of patients who were willing—my patients who wanted to lose weight.

So I opened up a nutritional clinic disguised as a weight-loss clinic. The results were profound. Not only did I bring in \$25,000 in cash the first month, but patients who would have never come to see me for chiropractic started coming to see me for weight loss. Eventually patients would say, “So you are a chiropractor, right? Do you think you can help my sore back?” Within the first year, I was bringing in over \$100,000 a month in cash.

The key was that I put patients on nutritional programs that included very thorough eating instructions, recipes,

one-on-one accountability, emotional eating support, infrared saunas, whole body vibration, and Solutions4 body wraps.

I decided to teach other chiropractors what I was doing, and now I’ve had over 700 doctors visit my office in Salt Lake City to

take a look behind the curtains and see what I’m doing. It’s amazing to me that people will change their eating habits to lose weight, but not always for other health concerns. So rather than try to fight that fact, I have just used weight loss as the hook to get people into my practice.


Then when patients come in to lose weight, I am able to put them on a nutritional program that changes their life for the better. And since 95 percent of people who lose weight gain it back, I have also built up a maintenance practice so my patients have the resources they need to keep their weight off.

I’ve helped thousands of patients lose weight and now hundreds of doctors set up weight loss in their office. I would love to speak with you and answer any questions you may have about setting up a comprehensive weight-loss program in your office. The good news is you’ll be able to delegate this to your staff.



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CAROLINE FEENEY is the associate editor of *Chiropractic Economics*. She can be reached at 904-567-1559 or cfeeney@chiroeco.com.



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Countdown to takeoff

A new practice will fly or
flounder depending on your
mastery of startup basics.

BY TAMMY WORTH



The biggest decision you make as a chiropractor is also one of the first you confront after graduation and licensure: Become an associate DC or strike off on your own? For some, this is a question of safety versus risk, and making the wrong choice can have severe repercussions.

Established doctors confront many of these same issues when deciding to buy an existing practice or build a new one, or when moving to a new location. Because so much is on the line, we gathered some experts in this area for their advice on starting a practice and doing it right from day one.

T minus 4: Planning the purchase

According to **Mary Frost**, assistant professor of philosophy and practice management at Palmer College of Chiropractic, about half of all new graduates traditionally become associates and the remainder opt to open their own practice.

But in recent years, an increasing number of new doctors are choosing to branch out on their own—if not immediately, then within the first year after graduation.

“It’s so exciting for them and they see these possibilities that are available to them and understand what they will need to do,” she says. “They are doing it because a lot of them are entrepreneurs at heart.”

For those more-industrious chiropractors, opening a business can be a rewarding proposition, albeit one with greater risk. The keys to potential success are the legwork and planning that begin long before the office doors open for the first time.

T minus 3: Concentrate capital

The learning curve for most new chiropractors is about two years, says **Daniel Drubin**, DC, president and founder of 4th Dimension Management. Once a doctor has been an associate for that length of time, they will typically have learned all they can from the more-experienced practitioner.

The knowledge gained, though, will mainly be in the mechanics of direct care. While the new doctor’s skills may be honed over that short period, his or her business acumen often remains lacking.

“They still don’t know how to become successful (on their own) quickly enough before they run out of capital,” Drubin says. “If a doctor doesn’t get off to a fast start, generally by the time they get to month five, they are already hurting financially.”

For this reason, sufficient levels of financing and careful money management are crucial considerations for making a startup work.

One of the first steps most doctors will take is into a bank. When Frost began teaching years ago, lending for new grads was all but impossible to secure. But, she says, there has been a softening of the market in recent years.

In essence, all lenders really want to know is whether or not a person can pay off a loan.

“They want to make sure the borrower can generate a net income of four times the amount of the loan payment and, if they can do that, that’s good,” she says.

Understanding the income potential of a practice requires a good business plan and a budget, something Frost makes all of her students complete during their time in school. She also

makes them tally their business expenses including employee salaries, taxes, startup costs, and marketing.

Her students are then required to develop a personal budget, too, which includes student loan repayment and living expenses so they understand how much money it will take to meet those needs for a given period of time. Doctors need to think about potential sources of funds, taking into account the initial delay in reimbursement from insurers and third-party payers.

Drubin estimates \$10,000 to \$12,000 a month in overhead expenses as a minimum requirement, starting in month one. A doctor will need to establish lines of credit or amass cash to cover at least five to six months of expenses before the “gestation period” ends and he or she begins to break even.

Thomas Dorr, principal at Tom Dorr Business Consulting, says it’s relatively easy to get a general idea of when a business will go into the black. Doctors can estimate income by figuring the cost of a visit (\$60, for instance) multiplied by the number of patients seen per day. Most doctors work in 15-minute increments and the average patient comes in about 10 times a year. He recommends having two to three years of projections when approaching a financial institution and asking for money.

T minus 2: Securing the location

Because a chiropractic office is more of a target destination than an impulse location like a coffee shop, doctors normally don’t get much in the way of walk-in traffic. On the other hand, convenience and appearance are important to patients, so choosing the

Meet the experts



Mary E. Frost, DC, assistant professor of philosophy and practice management at Palmer College of Chiropractic in Davenport, Iowa.
palmer.edu



Daniel T. Drubin, DC, president of 4th Dimension Management, co-founder of Social4Chiros in Tucson, Ariz.
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tomwdorr@gmail.com



Susan Yates, owner of The Paragon Group in Monroe Township, NJ.
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right site can be crucial for success.

For this reason, **Susan Yates**, owner of The Paragon Group, recommends chiropractors open an office in a location where they already have contacts.

"Some go off where they don't know a soul, and it is harder to build a practice in that kind of area," she says.

Furthermore, whether opening in an unknown place or somewhere familiar, understanding the location demographics is fundamental. Teasing out census data can be helpful in determining where to land.

The typical chiropractic patient, according to Locus Chiropractic Demographics, has a median income of about \$40,000 and is between the ages of 25 and 54.¹ Women make most of the healthcare decisions in a family, so it is good to have a population of at least 55 percent women near an office. In addition, a large number of homeowners in an area indicates a stable

economic environment.

Frost recommends looking at a three- to five-mile radius from the practice site. In this area, a doctor will want to know how many other chiropractors there are. According to Locus, the ideal population-to-chiropractor ratio is about 2,500 to one.

Depending on the location, it is also good to note the population density. For urban areas, it is best to determine where there are 750 or more people per square mile; in the suburbs, 50 to 750 people; and in rural areas, about 50 people per square mile.

For a more complete understanding of an area, however, you want to look beyond its face-value numbers. In Bellingham, Washington, for instance, Dorr says the city center is inhabited predominantly by liberal, health-conscious people. Its suburbs are home to more conservative residents, who might be less likely to access



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chiropractic services.

Chiropractors should walk through a potential neighborhood to see if there are good schools, shopping areas, and things people will want to be near. If at all possible, your target area should be in a growth phase. Dorr says it is wise to look for synergistic businesses like alternative medicine practitioners and fitness centers in the general location you are considering.

"If [chiropractors] have a chance to locate near a co-op food store, they will attract people of similar demographics," he says. "They know it might work because it will be a place they would want to live and work."

As for the building itself, Drubin says it is wise to rent a space around 2,000 square feet in size. Rent and utilities should amount to no more than 10 percent of a doctor's revenue.

Dorr thinks paying any more than that is too much for a fledgling practice.

Drubin recommends opting for a five-year lease with a "generous tenant improvement package." Be aware that it may take 60 to 90 days of build-out time for a new practice, so chiropractors should try to get a contract that allows them to forego paying rent until they are able to actually begin practicing.

If possible, a downtown location or one near commuter routes is a good choice.

"Quiet neighborhoods don't get as much exposure from signage," Dorr says.

T minus 1: Building your brand

The advice Yates gives DCs when they are moving to a new town is to go to a different diner for lunch every day and hand out your card.

The only way to get people walking through your door is if they know your practice exists.

"Contact PTAs and get speaking engagements, and join the Rotary and Lions and Kiwanis clubs," Yates says. "Building a patient base is so important."

Frost recommends talking with other professionals and getting involved in community events. She requires all of her students to take part in two community service events that are not overtly about marketing.

"This makes the community know that they (the new DCs) are going to be active and want to help them," she says. "If someone already likes you, you are easier to call."

All DCs should also expect to put a certain percentage of expected revenue into marketing, but the specific amount depends on the stage of practice life. Marketing is heaviest for a new practice, and chiropractors should plan to budget up to 10 percent of their projected revenue on marketing activities for the first two to three years. The next couple of years, it could go down to 5 percent, and mature offices should allocate about

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Real estate realities

After you've chosen a city and state for your practice, Mary Frost, DC, offers the following considerations for finding the right site:

Building basics

- ▶ Is the building visible from all drive-by directions?
- ▶ Is there sufficient parking?
- ▶ Is there good access and if it is not on the first floor, is there an elevator?
- ▶ Is the building X-ray compatible?

Leasing list

- ▶ How long is the rent locked in and is any increase limited to a mutually agreed-upon formula?
- ▶ If the landlord decides to sell, do you have first right of refusal?
- ▶ Is there an agreement regarding what improvements can be made and who pays for them?
- ▶ Does the landlord agree not to rent to other DCs?
- ▶ Have you reviewed the lease with an attorney?


2 to 3 percent over time.

DCs can throw energy into marketing even if they don't have the money for it, especially during the startup phase of the practice. A digital presence is a necessity and, along with a website, it is good practice to be on Facebook and Twitter.

A balance between internal and external marketing is good to have, and Drubin says the quickest and least expensive way to get patients is through public speaking.

"I always tell chiropractors they have two primary responsibilities—taking great care of their patients is No. 1," Drubin says. "And when they are not doing that, market like a maniac. You have to spend as much time working *on* a practice as in the practice."

Liftoff at last

Whether launching your first practice or your fifth, many of the same considerations apply. As the experts make clear, leaving things up to chance isn't an option. Failing to plan is planning to fail. And planning for success is the first step toward realizing the thriving, growing center of chiropractic health that is the practice of your dreams. 



TAMMY WORTH, a freelance writer based in Kansas City, Missouri, specializes in business and healthcare subjects. She can be contacted at tammy.worth@sbcglobal.net.

Reference

¹Locus Chiropractic Demographics. "The Ten Essential Demographic Factors." <http://www.locusmap.com/support/the-ten-essential-demographic-factors>. Updated Sept. 2012. Accessed June 10, 2015.



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The relationship business

Build your network before building your practice.

BY DREW STEVENS, PHD

RUNNING A PRACTICE CAN BE QUITE DIFFICULT. YOU HAVE STAFF to manage, people to treat, appointments to make, and bills to pay. Yet of all the daunting things that a chiropractor is responsible for, the most important one, is marketing.

Some DCs, however, are leery of marketing activities as this is an area not addressed in college and it can feel like a burden. As a result, many DCs will do anything to avoid it even though it's both an important and necessary facet of practice.

The truth is that without marketing, you have no patients. And when there are no patients, the bills don't get paid. Many chiropractors have gone out of business for failing to prioritize their business promotion efforts.

Marketing methodology

To counter marketing apathy, embrace the power of relationships. *For example:* During the search for a new car for my daughter, we settled on a model and began speaking with the salesperson. After a brief chat, he spoke to me about my objectives, what I was hoping to accomplish, and what hobbies I enjoyed. We left there not with one new automobile—but four.

Building a business is not about sales, marketing, social media, or other tactical considerations, rather it's about relationships. People (your patients) want to do business with those they want to build a relationship with. When discussions shift to values, the fees are less important because the purpose is based on your wisdom,

expertise, and presence.

And then there is marketing clutter. The average consumer hears and sees over 6,000 marketing messages a day. They are ubiquitous across 600 television stations, 15,000 radio stations, 480 million websites, 150,000 magazines and periodicals, and over 1 billion tweets and Google searches every day. Even if you are marketing aggressively, it can be difficult to stand out.

In addition, chiropractors and other healthcare professionals, due to the nature of their professional education and clinical studies, seem to take pride in telling anyone who will listen that they are not marketers, as if marketing or self-promotion is distasteful. But the fact is that every chiropractor in business today is indeed a marketer

(albeit some are better than others). No chiropractor should look down on marketing—it's a necessity.

Welcome the law of attraction

Marketing today is difficult even for large corporations due to the flood of information that potential customers see. People are increasingly adept at tuning out commercial messaging. Around the world, advertisers will

spend nearly \$600 billion in 2015, according to new figures from eMarketer, an increase of 6 percent over 2014. Given these numbers, you should consider a different methodology in order to acquire, convert, and ultimately retain new patients.

What you need is the law of attraction. You're in the relationship business. But your prospective patients are going to be loath to enter into

agreements with total strangers, just as you are wary of entering into a relationship with a new vendor or supplier.

Additionally, chiropractors and other healthcare professionals are generally unable to put in enough of their own time and money to attract people through a single campaign. Therefore, you must establish several pipes or pathways to draw people into your practice.

Focus on the types of activities that interest you most. Engage in opportunities that you're most passionate about and comfortable with to attract prospective patients. Here a few of the many approaches you might consider:

Writing articles. There are more newspapers in circulation today than ever before. The multitude of newsletters, websites, and regional and local magazines and newspapers are starving for material. Articles are usually in the range of 500 to 1,000 words. With good content and a solid byline, your message can be in the hands of hundreds or thousands. You don't have to write often, but you'll get great exposure.

Building a website. On average, Americans conduct about 12 billion Web searches per month. It is imperative for every doctor to have a good website that explains the value you provide and how prospective patients can find you. Numerous resources can aid you in website development rather inexpensively. But don't cut corners—your site must look professional.

Networking. Chambers of commerce and business associations exist for a reason: When others become aware of your services and the value you provide, they want to learn more. And people do business with those they know and trust. Interacting at this level is a good way to build quick relationships. Don't be a wallflower—actively participate and you might gain huge referrals.

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your work, they'll want others to share in it.

These are just a few of the many methods you need at your disposal. You don't have to do them daily nor are these necessarily the easiest. But they are foundational activities that you should deploy to become known in your community, engage in relationships, attract prospective

patients, and gain new revenue.

In some ways, a chiropractor is no different than a large manufacturer, a fast-food restaurant, or a big-box retailer. You have to make it easy for prospective patients to find you. You need to think big and in terms of building new friendships rather than being fearful of marketing. Immerse yourself in the laws of attraction and you'll experience more happiness in your profession. **CE**



DREW STEVENS, PhD, is a practice management expert with more than 30 years of experience. His most recent book is *Practice Acceleration*, published by

Greenbranch Publishing. He can be contacted at 877-391-6821 or through drewschiropracticmarketing.com.

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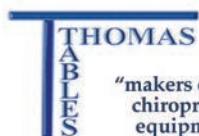


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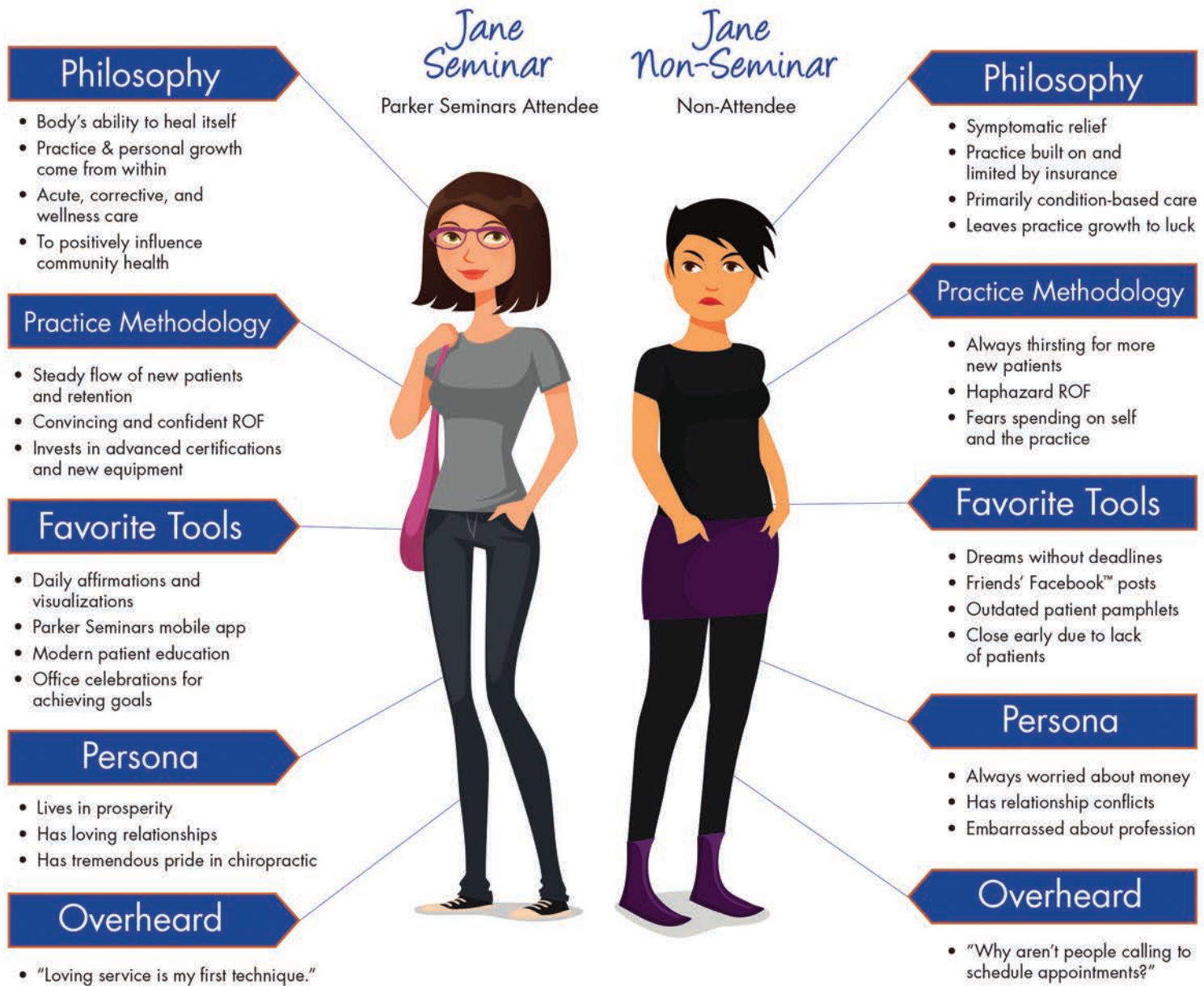
Internal production: The body constantly produces free radicals as a byproduct of normal metabolic functions.

Stress factors: Aging, trauma, medications, lack of sleep, disease, infection, and stress accelerate the body's production of free radicals.

Chain reactions: When a free radical steals an electron to balance itself out, it creates a new free radical in the molecule from which it stole the electron.

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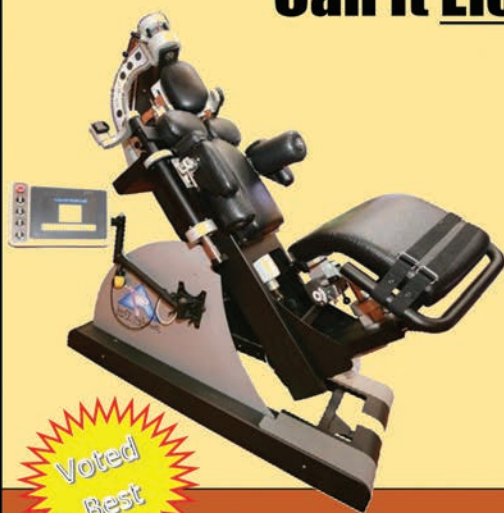
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WITH THE GOAL OF STIMULATING FRESH REVENUE SOURCES and services, it's not unusual for an established chiropractor to branch out and start a new operation in the same or a related field. Few chiropractors realize, however, that Uncle Sam stands ready to become a partner—though not always an advantageous one.

But if you play your cards right, Uncle Sam in the form of tax laws will not only pick up part of the cost of starting that new venture, but will often allow the losses from a secondary activity to reduce the income tax bills generated by self-employment, wages, investments, or the primary business.

Write me off

In most cases, the necessary expenses of carrying on a trade or business are tax deductible. But if there is no busi-

ness entity, business tax deductions don't apply. Fortunately, special rules exist for the expenses incurred in starting a business as well.

Anyone who pays or incurs startup costs and subsequently enters into a trade can expense and immediately write off up to \$5,000 of those costs. But the \$5,000 deduction amount is reduced dollar-for-dollar when the startup expenses exceed \$50,000.

Organizational costs are in a separate class from startup expenses but are subject to similar rules. An incorporated practice can, for instance, choose to deduct up to \$5,000 of organizational expenses incurred in the tax year in which it begins business.

The balance of startup or organizational expenses, if any, is amortized over a period of no fewer than 180 months, beginning with the first month of business.

Extending an office branch

Many chiropractors have multiple business activities. In almost every situation, you must determine whether the new activity is a subsidiary of the existing practice or if the IRS will view it as a separate operation. If it can be argued that the addition is really an extension of the original practice, a significant write-off is available.

To illustrate, suppose you operate a profitable practice and decide to build a warehouse at the same location for online sales of health supplements. Your startup expenses amount to \$70,000 and include the cost of hiring staff, setting up bookkeeping and an operations manual, as well as advertising and promotional efforts. If this were an integrated operation, you could immediately deduct the startup costs. If not, the rules require they be capitalized and amortized.

Find a hobby

Income from any source is usually taxable. Fortunately, the losses from a money-losing activity (existing or new) can be used to offset the income from other sources. With hobbies, or activities that are not engaged in for profit, the expenses are generally deductible only to the extent of income produced by the hobby.

Some expenses are tax deductible regardless of whether they are incurred in connection with a hobby (such as taxes, interest, and casualty losses). If, however, the activity is engaged in for profit—meaning that it operated with the intent of making a profit—many activity-related expenses are deductible even if they exceed the income from

shareholders, exercise substantial control over the incorporated operation, or regularly use corporate funds to finance personal expenses.

Funding secured

Good times or bad, often the most difficult decision during startup or expansion is where to seek funding.

Generally, there are two ways to fund a business: debt financing or equity financing. With the debt route, financing capital is received in the form of a loan that must be paid back. With equity, capital is received in exchange for part ownership.

Putting money into a practice, or taking money away, is not something to be tackled by amateurs. Money invested

Good times or bad, often the most difficult decision during startup or expansion is where to seek funding.

that activity. Any losses can offset income from other sources.

The general rule is that an activity is presumed not to be a hobby if profits result in any three of five consecutive tax years. Without profitable years, anyone operating a secondary activity or hobby can, if asked, prove there is intent to earn a profit using IRS guidelines.

Corporate perks

Whether starting a new venture or expanding an existing one, consider formalizing the operation by incorporating or forming a limited liability company (LLC) to obtain personal liability protection and earn advantages in fees, sales, financing, and taxes. Incorporated startups or expanding enterprises won't escape IRS scrutiny under the hobby rules.

Corporations (both S and C), LLCs, and limited partnerships do offer protection to owners for the debts of the corporation. Sometimes it's enough that the principals are majority

in a practice can be withdrawn with a tax bill on any profits from the sale of that capital investment. On the other hand, a loan can be repaid tax-free if it is a bona fide, arm's-length transaction.

By the accounting books

No single accounting method is best for all businesses. Both the cash and accrual accounting methods have their pros and cons. The basic difference between the two lies in the timing of revenue and expenses.

The cash-basis method realizes revenues when money comes in and expenses when money is paid out. Cash-basis accounting doesn't recognize accounts receivable or payable. Only when a bill is paid does an operation recognize an expense.

Your practice must use the same accounting method to calculate taxable income in your bookkeeping records as it does to operate the venture you're branching out from. Your accounting method must clearly show income.

The passive trap

Material participation rules limit the deduction of losses from passive activities in which the taxpayer does not "materially participate" in the activity. Generally, losses from passive activities may not be deducted from nonpassive income (such as wages, interest, or dividends).


An individual materially participates in an activity if he or she is involved on a regular, continual, and substantial basis during the year (the facts and circumstance test), or if the individual participates in the activity for more than 500 hours during the year (the 500-hour test).

Can I pick your brain?

Access to legal, accounting, and other expertise is essential for rapid growth when expanding a practice. In addition to legal advice, seek accounting services to set up the new operation's books, auditing, taxes, and retirement planning.

The first step to finding the right professionals requires an inventory of resources and, most importantly, your budget for that counseling. Determine beforehand how much of the work will be done by outside assistance and what tasks will be internally.

The IRS can both tax and underwrite practice expansion costs. On the one hand, it stands ready to tax all income. On the other, many of the expenses incurred by an expanding or new venture can be used to offset income.

Will the IRS view your new or expanding practice as a tax business? 



MARK E. BATTERSBY is a tax and financial adviser, freelance writer, lecturer, and author located in suburban Philadelphia. He can be reached at 610-789-2480.

DISCLAIMER: The author is not engaged in rendering tax, legal, or accounting advice. Please consult your professional adviser about issues related to your practice.

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The online resource for future doctors of chiropractic.

Can I run this place without you?

BY ANTHONY J. LOMBARDI, DC

DID YOU EVER NOTICE THE NO. 1 REASON COMPANIES HIRE someone is because they are in need of their services? The opposite is true as well: People who are no longer needed are soon let go. It seems obvious but it's a necessary thing to remember. In 2014, Walmart eliminated 2,300 middle management positions so they could be even more competitive in the marketplace.

This is happening in chiropractic offices across the U.S., too. Clinic owners are asking themselves (about their associates), "Can I run this place without you?"

Associate doctors have to realize that math has a lot to do with their existence in a clinic. If they aren't focused on growing their patient base, then their future will be uncertain—especially if their numbers consistently fall short of expectations.

Adding up the math

Say a clinic owner sees four patients an hour at \$75 per visit, and the associate doc sees two patients per hour at \$75 each. If the clinic receives 50 percent of the associate's fees, then the clinic makes \$75 an hour (two visits at \$75 is \$150, minus 50 percent equals \$75). But what happens if the clinic owner realizes that he or she can make the same \$75 per hour by seeing one more patient per hour through improving the clinic's assessment and treatment systems?

The lesson of Wally Pipp

In high school, a quarterback wants to start every game and never miss a practice. Because if a coach sees someone else do well in the position, it means there are other options available. As an illustration, consider the case of Wally Pipp.

Wally Pipp was the starting first baseman for the New York Yankees in 1925, until one day he took a game off because he had a headache. A young player named Lou Gehrig took his place and played that day. In fact, Gehrig played the next 2,129 consecutive games in Pipp's place.

This is why it's so important not to miss work, and why you should make yourself as valuable as possible. Do as much as you can to build your practice, and this includes putting in long, productive hours until you make an unforgettable impression. Then you will be needed and valued accordingly.

Make an impressive impression

To make yourself indispensable in the eyes of a clinic owner, you need to be able to do something they cannot or will not do. This usually includes

- ▶ working late hours;
- ▶ working weekends;
- ▶ seeing insurance, auto insurance, and work-injury cases;
- ▶ pounding the pavement to promote yourself;
- ▶ giving talks and presentations to

companies, organizations, and schools; and

- ▶ acquiring a niche skill like acupuncture, LMT, ART, etc.

These are also things that will help you later build your own successful practice. There are no gimmicks, no tricks—it's all hard work coupled with the implementation of a structured clinical and business system.

A place to embrace

If you are willing to learn from the clinic owner and embrace the clinic's assessment and treatment approach, and if you build a patient base over 12 to 18 months, then you will have developed something the clinic owner cannot live without.

The key to an associateship is to learn, but the larger mission is to use it as an opportunity to build your own practice. If you make it a priority to be a valuable part of wherever you are, then you will be able to build yourself a prosperous future.

So the ultimate question is: Can we run this place without you?



ANTHONY J. LOMBARDI, DC, is the creator of the Exstore Assessment System. He is a consultant and treatment provider to professional athletes in the

NFL, NHL, and CFL. He can be contacted at info@hamiltonbackclinic.com, exstore@usa.com, or through hamiltonbackclinic.com.

On April 21st Your Website Took a Major Hit From Google

... if your website was not compatible with Google's NEW mobile-friendly algorithm.

According to Google and their new ranking algorithm,

"Starting April 21, we will be expanding our use of mobile-friendliness as a ranking signal. This change will affect mobile searches in all languages worldwide and will have a significant impact in our search results. Consequently, users will find it easier to get relevant, high quality search results that are optimized for their devices."

Google modifies their ranking algorithms constantly. Why is this April 21, 2015 update so important?

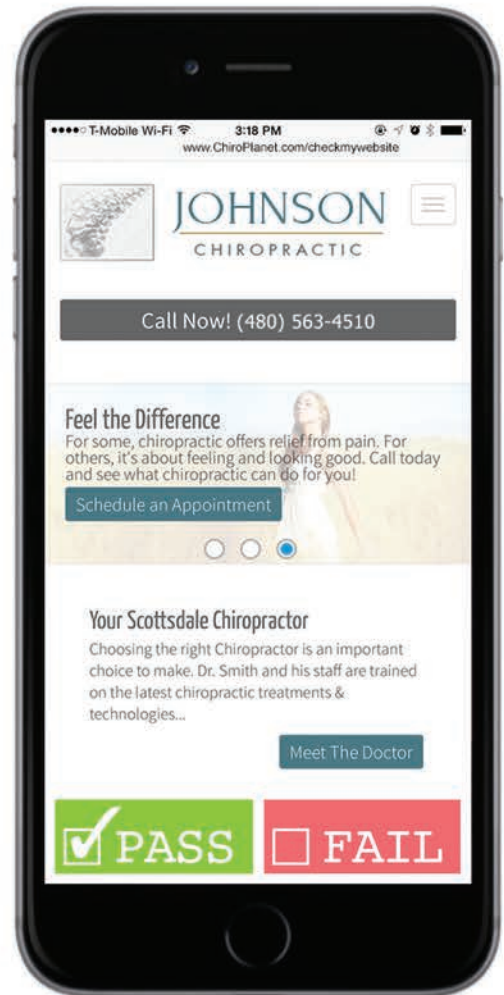
Since 2014, mobile internet usage has exceeded desktop usage with that trend increasing through 2015. Additionally, 48% of users start their research on search engines when looking for a business. Research also shows that local search on mobile phones has the highest conversion rate compared to both desktop and tablet searches. In short, mobile search is important to your business. The importance of having a mobile-friendly website, as newly defined by Google, has never been higher.

Did your current website provider fail to educate you on Google's new mobile search requirements?

On April 21, 2015, Google updated their mobile search ranking algorithm. This change has impacted millions of websites and mobile search results. Did your current website provider fail to provide you with proper knowledge of this update and other critical changes impacting your business? Perhaps it's time to reconsider which companies are truly valuable and proactive partners in your business success vs. just another company repeatedly processing your credit card.

How do I determine if my website meets Google's new standards?

Many businesses believe their websites to be mobile-friendly when in fact, after the recent April 21, 2015 implementation of Google's new standards, they are not. To assist, ChiroPlanet has designed and is now offering free of charge, a simple yet accurate solution for small businesses wanting to evaluate their website's mobile friendliness using Google's new standards.



FREE Mobile Friendliness Report

To learn whether or not your business website meets these new standards and obtain your FREE Mobile Friendliness Report visit, www.ChiroPlanet.com/checkmywebsite

Each Mobile Friendliness Report indicates whether the website passes the new Google mobile-friendly requirements and includes the specific reasons when it does not.



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Aug. 1-2	Graaston Technique M2 Advanced Training	Miami	Graaston Technique	888-926-2727
Aug. 1-2	Graaston Technique M1 Basic Training	Tampa, FL	Graaston Technique	888-926-2727
Aug. 2	KT4: Kinesio Taping Specialty Neurological Concepts	Hanceville, AL	Kinesio Taping Association	888-320-8273
Aug. 8	KT3: Kinesio Taping Clinical Concepts	Albuquerque, NM	Kinesio Taping Association	888-320-8273
Aug. 8-9	Insurance Consulting/Peer Review Certification Program: Session #3	Chesterfield, MO	Logan University	800-842-3234
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Aug. 8-9	CEAS II: Aging Workforce Ergonomics Solutions Certification Workshop	Boca Raton, FL	Back School of Atlanta	800-783-7536
Aug. 9	KT4: Kinesio Taping Specialty Sports Orthopedic Concepts	Albuquerque, NM	Kinesio Taping Association	888-320-8273
Aug. 14-15	KT1 & KT2: Kinesio Taping Fundamentals & Advanced	Phillipsburg, KS	Kinesio Taping Association	888-320-8273
Aug. 14-16	Tennessee Chiropractic Association Annual Convention	Franklin, TN	Tennessee Chiropractic Association	615-383-6231
Aug. 14-16	Loomis Institute Seminar One	Denver	Loomis Institute of Enzyme Nutrition	800-662-2630
Aug. 15	CE Event: Posture Rehab Exercise, Assessment, and Therapy	Little Rock, AR	BodyZone	770-922-0700
Aug. 15-16	Graaston Technique M1 Basic Training	Anaheim, CA	Graaston Technique	888-926-2727
Aug. 15-16	Graaston Technique M1 Basic Training	Cincinnati	Graaston Technique	888-926-2727
Aug. 21-23	Loomis Institute Seminar Two	Madison, WI	Loomis Institute of Enzyme Nutrition	800-662-2630
Aug. 22	KT3: Kinesio Taping Clinical Concepts	Jackson, MS	Kinesio Taping Association	888-320-8273
Aug. 22-23	FAKTR: Functional and Kinetic Treatment with Rehab	Denver	Southeast Sports Seminars	864-580-0077
Aug. 22-23	Basic Acupuncture Certification Program: Session #4	Chesterfield, MO	Logan University	800-842-3234
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Aug. 22-23	Graaston Technique M2 Advanced Training	Philadelphia	Graaston Technique	888-926-2727
Aug. 23	KT4: Kinesio Taping Specialty Neurological Concepts	Houston	Kinesio Taping Association	888-320-8273
Aug. 27-30	CE Event: Posture Rehab Exercise, Assessment, and Therapy	Orlando, FL	BodyZone	770-922-0700
Aug. 29-30	Graaston Technique M1 Basic Training	Houston	Graaston Technique	888-926-2727
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Sept. 12	KT3: Kinesio Taping Clinical Concepts	North Richland Hills, TX	Kinesio Taping Association	888-320-8273
Sept. 12-13	KT1 & KT2: Kinesio Taping Fundamentals & Advanced	Abilene, TX	Kinesio Taping Association	888-320-8273
Sept. 18-19	Ergonomics Assessment Certification Workshop	Chicago	Back School of Atlanta	800-783-7536
Sept. 18-20	Loomis Institute Seminar Two	Denver	Loomis Institute of Enzyme Nutrition	800-662-2630
Sept. 19-20	KT1 & KT2: Kinesio Taping Fundamentals & Advanced	Ocala, FL	Kinesio Taping Association	888-320-8273
Sept. 19-20	Graaston Technique M1 Basic Training	Miami	Graaston Technique	888-926-2727
Sept. 19-20	Insurance Consulting/Peer Review Certification Program: Session #4	Chesterfield, MO	Logan University	800-842-3234

For a searchable list of more seminars and show dates or to submit your event, visit ChiroEco.com/datebook.



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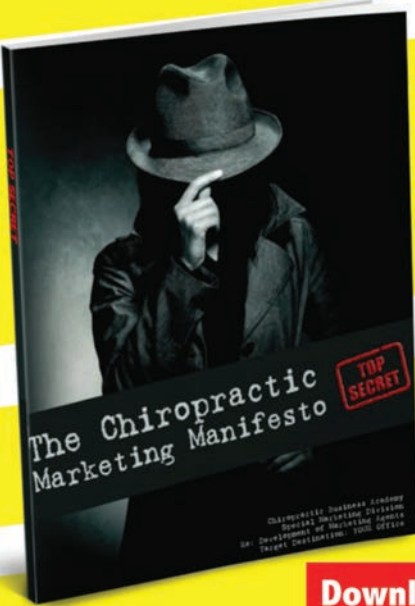
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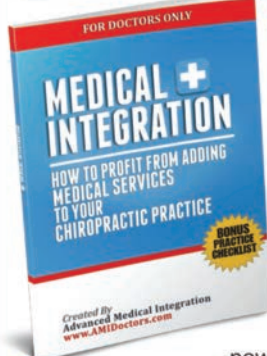
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