



THE PROFESSION

## Action Steps to Define Our Role in Health Care

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Chiropractic has a distinct lack of professional identity. If we do not define our role, others will place us where they “think we fit in,” which will most likely be in a minimalistic role at best. Each of us needs to take the situation seriously; here are some action steps we can all take.

### Unity Without Uniformity

In my [February column](#), I discussed chiropractic’s identity crisis and the characteristics Rosner identified which can serve as the foundation to bring a sense of continuity within the profession. In the 1980s, the chiropractic mantra was “Unity without uniformity”; perhaps now with Rosner’s assessment of the profession, we can revisit that theme.

In addition, Rosner recognizes the various trends in chiropractic that can be polarizing, yet still concludes: *“The strongest assets of chiropractic include that it embraces a model of holistic, preventive medicine by embracing a model of neurological imbalance in which form follows function.”* This model presents hope in defining chiropractic’s health care space.

Chiropractic doctors commonly self-identify related to style of practice (sports, pediatric, nutrition), philosophical basis (vitalism, neovitalism), political agenda (changing scope-of-practice laws) or general focus of practice. Once self-identified, our allegiance to a subgroup does not readily change and according to Good, *“Attempting to unify the profession under a single identity is fruitless.”* He then presents the rhetorical question, *“Would it not be more prudent to try to live in peaceful coexistence and with mutual support?”*

### Our Profession’s Values Should Reflect Core Human Values

Good proposes a magnanimous challenge for the profession. He contends, *“The best way forward is to embrace the ideals of truth, respect, and tolerance”* that reflect the core human values of justice, temperance and prudence.

Justice is simply doing the right thing for the right reason. It is fulfilling our relationships to others,

giving them what is due to them. With patients, that can relate to putting aside a philosophical or personal stance when recommending care or even in your fee schedule. Be honest with yourself and with them about the right choice for their health care. For colleagues, meet them where they are in their subgroup camp.

Temperance as a core value is way beyond skipping alcohol. It is self-control of your emotions and thoughts, and a well-ordered control for the pleasures of life. A temperate decision is a reflective one; a decision that weighs the pros and cons (justice again) and is willing to resist self-fulfillment if needed.

For patients, it may mean checking our pride and ego at the door and referring them to another DC who uses a different technique. For colleagues, temperance keeps pride in check; your technique, philosophy or adjustments vs. theirs.

Prudence is considered the charioteer of all virtues. Similar to temperance, it is not simply being reserved and conservative. In fact, the prudent decision is often bold, strong and may even be controversial. It is a well-thought-out decision, based on the facts, assessed truthfully and with the objective of achieving the best solution for all those involved.

#### Practice Identity: Essential Elements

Good and Rosner both agree that our diversity can be used to benefit the profession in its struggle to define ourselves. Good calls for us to raise the bar morally and ethically to a higher standard, while Glucina presents us with yet another path to defining our role in health care - developing your individual practice identity as the cornerstone of chiropractic's professional identity; one based on clinical excellence, professionalism and integrity (justice).

As an example, let's look at the intake process for a new patient. An exceptional new-patient experience will improve your practice, your Google reviews, and enhance chiropractic's identity from the ground up. This can define your office as professional, unique, and patient-focused with a natural approach to getting patients to their health goals.

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Practice Tip: Impress first-time patients, especially those who scheduled online, with traditional customer service at the front desk. Greet each patient within 30 seconds of entering the office (even if it is a smile), smile, introduce yourself, welcome the patient and offer to shake hands. Chiropractic is relational; start that process the moment the patient arrives in the office.

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Doctors, greeting the patient in the consultation room also follows traditional customer-service checkpoints. Smile, greet the patient by name, introduce yourself and welcome them to the office. Ask the patient how they would like to be addressed, specifically, beyond pronouns. If they were referred by another patient, ask them to thank the referring patient for sending them to the office. If it was an internet referral, mention your goal is to "wow" them enough to write a Google review, too.

Be well kept. You never get a second chance to make a first impression. Polished shoes, clean, unwrinkled scrubs, pressed lab coat; whatever your look, be sharp, clean, and put together.

The consultation is important and can be offloaded to a staff member if legally allowed where you practice. Get the standard information: prior treatment, consultations, medications, supplements, surgical history, allergies. Gather details about why they came in today with the traditional

questions: onset, palliative and provocative factors, quality of pain, radiation or referral of pain, site(s), and temporal factors.

If they exercise, ask how much, how often and get specifics relative to machines vs. free weights, group training, remote, in-person, warm-up, cooldown, and whether they follow a training cycle or if all workouts at the same intensity. Show up inquisitive.

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Practice Tip: Ask about prior chiropractic care and if a certain technique or procedure was really enjoyed or disliked (no need to make the same mistake as the last DC). Explain what to expect for the remainder of the visit, and finish with asking the patient what they hope to achieve by visiting your office.

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Beyond technology, a thorough orthopedic, neurological and chiropractic examination that wows the patient can be performed in 10-15 minutes. In addition, you now have an accurate diagnosis, which leads to better outcomes. However, stacking technology and tests alone does not suffice. The doctor needs to examine the patient and then discuss the need for testing - a simple example of justice in real life.

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Practice Tip: Organize your orthopedic and neurological exam on patient positioning. Do all standing tests first, followed by seated, supine and finally prone. If their condition limits certain positions, you will need to modify the process. Be sure to include a postural and spinal exam.

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Regional examination is always appropriate; however, since chiropractic takes a whole-body approach, a whole-body exam underscores our purpose - to treat the entire person, not just the pathology / pain.

Maybe the patient with neck pain will mention they can't do heel walking due to plantar fasciitis; or the sciatica patient has elbow tendinopathy that was elicited with resisted wrist extension. You can treat or refer these conditions out. It is about exposing them to a whole-body chiropractic approach to build your personal reputation and our identity as a holistic, natural system of healing.

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Practice Tip: Call, do not text, your patients after the first and second visits to see how they are doing and to answer any questions. It is invaluable.

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Chiropractic will never be outsourced overseas and will always have a demand. We need to embrace our commonalities, celebrate our diversity, and treat each other and our patients with respect, truth and tolerance. As our marketshare grows, our diversity will be identified as the cornerstone of natural, evidence-based, trusted, holistic care.

### *Resources*

- Gliedt JA, Perle SM, Puhl AA, et al. Evaluation of United States chiropractic professional subgroups: a survey of randomly sampled chiropractors. *BMC Health Serv Res*, 2021 Oct 5;21(1):1049.
- Good CJ. Chiropractic identity in the United States: wisdom, courage, and strength. *J Chiropr Humanit*, 2016 Sep 15;23(1):29-34.
- Glucina TT, Krägeloh CU, Spencer K, Holt K. Defining chiropractic professional identity: a

concept analysis. *J Bodyw Mov Ther*, 2023 Jul;35:75-83.

- Rosner AL. Chiropractic identity: a neurological, professional, and political assessment. *J Chiropr Humanit*, 2016 Jul 20;23(1):35-45.

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