

Why Certified Diplomate Chiropractic Sports Physician?

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This is in reply to various articles I have read in chiropractic publications questioning the necessity of a postgraduate sports program. I believe the answer lies in areas of communication, special biomechanical considerations, public perception, and legal issues.

Communication

As in any endeavor, communication is vital. Just as we have our own language, beliefs, and techniques (subluxation, innate and universal intelligence. A.K., S.O.T., Activator, the various biomechanical groups, etc.), so too does the sports medicine and therapy world. By understanding their world, we have the ability to communicate with them about what we do with a verbiage and logic that is difficult to deny. This was evident at the American College of Sports Medicine's annual convention where, for the first time, chiropractors were requested to participate. Three chiropractic sports physicians chosen by the ACA Sports Council presented well-received topics. This, in turn, helped to open the door for chiropractors to treat the athlete on a more level playing field.

It is also important to understand the language of any particular sport. The terms "switching," "wizard," "quarter nelson" in wrestling; "clip," "crack back block," "spearing" in football, etc., are not only necessary for helping to diagnose the condition but help athletes feel more comfortable and have more confidence in treating physicians.

I do not want to give the impression that I believe certified/diplomates are the best chiropractors. Proficiency should be based on an individual's knowledge, application of that knowledge, and the results obtained. I am saying that they should be recognized, on a whole, as experts in chiropractic sports injuries for their ability to recognize and treat athletic injuries and be able to return the athlete to their sport in a safe and effective manner. This is done by knowing the mechanism of injury, degree of injury, the rehabilitative techniques to stabilize and strengthen the biomechanics of the involved area, and areas of compensation. I believe sports doctors further separate themselves from a general practitioner by knowing the biomechanical demands of a specific sport on the involved tissues. This is an important consideration when allowing athletes to return to their sport. The doctor's recommendation is critical since an athlete has a small window of opportunity to participate in a seasonal sport at various levels of competition. With this accomplished, I also feel chiropractic as a whole can treat and rehabilitate spinal injuries better than any other profession.

Public Perception

When individuals present themselves as sports physicians or purport to treat sports injuries, they imply that they understand and have been trained in the total treatment and rehabilitation of an athletic injury. In *The Spine in Sports*, Barton L. Sachs, M.D., describes the knowledge that a sports physician must possess: "It's important to have a conceptual understanding of the various sports activities, the categorization of diagnostic entities, and appropriate treatment plans with

emphasis toward rehabilitation and understanding of equipment needs, and training regimes." A postgraduate education program lays the basic foundation for doctors to fulfill this understanding. The public expects this from doctors who call themselves sports physicians. The medical profession is addressing this educational need through its courses given by The American College of Sports Medicine. Osteopaths have fellowship programs on the subject. The ACA's Council on Sports Injuries and Physical Fitness has worked hard to satisfy this need by creating the 100-hour certification course and now the additional 200-hours leading to the diplomate designation. Degrees are one criteria the public uses to guide them toward making selections of who best fulfills their needs.

Legal Issues

The athlete going for that football scholarship, with literally tens of thousands of dollars at stake, had better be given the correct information on how and when they can participate again. If he goes back into competition too soon, based on the doctors recommendation, and is injured as a result, what basis of knowledge is one going to rely upon to defend one's decision? Many of us can imagine the line of questioning an attorney would take on this subject. For those of you that cannot imagine, read chapter ten of Risk Management in Chiropractic, "Protection Strategies in the Sports Medicine Practice." If the decision is made to rest the athlete, and another doctor or trainer returns that athlete to competition successfully, I can assure you word will travel fast in the sporting community of your overconservative recommendations. The ramifications of such decisions goes deeper than money on this issue; they go to the perception in the athletic community of denying a person the ability to compete, to achieve a dream, to fulfill a goal, to participate with comrades, and carry with them the positive values garnished from this microcosm of life called sports.

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MARCH 1992