

## The Door Is Open -- At Least Knock

Theodore Oslay, DC

Today's discussion will concern itself with a topic that seems to be on a very large number of doctors' minds. I continue to get calls on a daily basis addressing some variation of the question, "How can I position myself to treat more patients with cumulative trauma disorders, especially from companies?" The answer is actually easier than you think. Ask doctors Whitman from Indiana, Finney from Illinois, or Osmond from Maryland. They are a few examples of primary physicians chosen for involvement in cases of cumulative trauma injuries for companies that have over 400 employees. One company that size would make a sizable impact on any office. These doctors were contacted because here was a need and they were ready to fill it. Along with that service there are pre-employment physicals that need to be done. (Yes, I realize the new ADA laws commence as of this July, and no there will not be a problem if the proper protocol is followed). Finally, and probably most important to the longevity of the practice is the exposure to the employee population.

The role that you play as company doctor is not the historical role that is familiar to most of our experience curves. The "bad guy that sends you back to work" is not the role you take. As we work with companies, it has become very clear that the physician has to be a trusted and fair component of the system, and more and more enlightened companies understand that fact. Therefore, employees see you as an expert in a matter in which very few physicians have any understanding, and they trust you because of it. The techniques that are available for the treatment of these disorders are extremely effective (about 86 percent reduction across the board for most companies) and are becoming more and more accepted. I am beginning a study based on this treatment for cumulative trauma with a nationally known medical clinic that specializes in these disorders. The door can't be opened any wider to allow the opportunity for chiropractors to offer an effective avenue for treating these soft tissue disorders.

It is up to you to properly educate the employees about soft tissue and the importance of correcting it when damaged -- at home, on the job, or in the car. The resulting opportunity to see these patients aside from work-related injuries should not be overlooked.

Second, the majority of companies have placed the doctors on retainer. It gives them the security of a team player and, from the doctors standpoint, it is nice to have that monthly income in addition to the service they render for treatment. Remember, you are well worth that retainer; your time is valuable and the companies know it. As you begin to work with these companies as a team player (not a yes man), you will be able to educate them as well. Your relationship will be one of growth. Becoming a trusted ally to the company is extremely important as managed health care moves into the driver's seat. This relationship with one or more companies will help your position in the general health care arena. Be advised it is coming; the straight cash practice of bygone days will not yield the same living for the doctor practicing in that manner. Yes, you will be able to exist, but the general population does not have the savings they did 25 years ago; many families are struggling just to get by. Sorry guys, but I just don't believe you will get too many \$1,500 case fees written out before you start the care. I sincerely hope I am wrong.

I would like to close today by relating some highlights of the last module at Lewisburg, Tennessee,

hosted by a large facility that is affiliated with the automotive industry. It is a Japanese joint venture that accommodated quite a number of plants from all over the United States. The doctors that were working within the companies also attended as honored guests, and there was great interaction between the companies, the medical and chiropractic doctors, and a select group of working people from the line of the hosting plant. Barriers were broken and that same group will be meeting in the Detroit, Michigan area at yet another hosting plant. Again, the doctors enjoyed themselves and there was a tremendous bonding of team members at individual plants when sitting side by side in a common cause. The topic in July will be compliance to the new ADA guidelines while still conducting aggressive and effective screening procedures that have consistently shown a reduction in new injuries by 89 percent over the last five years, specifically for cumulative trauma exposure of the upper extremities.

Next time I will touch on the ADA law of July 1992, as well as some general topics that have been requested.

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