

Chiropractors in the Hospital

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It has always been my feeling as a chiropractor, that one of my main missions in life was to keep people out of hospitals. Then came the opportunity to be on the staff of Doctors Hospital in Houston, only 30 miles away. Knowing the administrator, quality control director, other personnel and a number of the doctors, I decided to seek privileges. My main purpose was to promote chiropractic.

My expectations have been exceeded. Doctors Hospital is one of the finest hospitals anywhere, with total acceptance of the chiropractic department by nurses, doctors, the physical therapy department, the anesthesiologists, etc. A number of the chiropractors are doing manipulation under conscious sedation and, in some cases, total anesthesia.

One of my former patients was lifting on the job and twisted and hurt his lower back. He came in antalgic and in some pain, but not acute. He was examined, x-rayed, and treated with excellent results, and returned home for a good night's rest. The following morning the patient returned to his job to take care of paperwork. He sneezed and felt extreme low back and left leg pain. That afternoon he returned to this office in such extreme pain that I was unable to get him on and off the table, much less do any kind of manipulation. With the help of two other people, we laid the patient down in the back seat of the car. I called the orthopedic surgeon who had me send the patient directly to the emergency room for co-admittance by the surgeon and myself. The patient received medication for pain, and was happy to get some relief. During the next few days he received a CAT-scan, MRI, and myelogram. The disc problem was pinpointed at the L3-5 level. I checked on the patient regularly and found him to be most appreciative that I was looking after him, seeing that he got good care, and keeping him informed of everything regarding his condition. Symptoms persisted and surgery was scheduled. The morning of surgery his family seemed greatly relieved that I was in attendance. The patient was very pleased that I would be with him during surgery, an easiness and appreciation that is hard to explain, although very real. During surgery we found the disc had ruptured and two large pieces of disc were removed from directly on the nerve, which would have never responded to manipulation. With the removal of the disc particles we knew the patient would be free of pain. I observed dramatic improvement during follow-up visits in the hospital and as the patient returned to my office for more care.

In summary, I am convinced the patient, the chiropractor, the surgeon, and the hospital are all better served through cooperation and understanding. What a tremendous difference from past experiences with the patient giving up on chiropractic, going to an unfriendly surgeon who, more times than not, indicated that you either had no place in the case, or that you were a detriment, and the patient was left with a lingering negative impression of chiropractic.

I appreciate working together with many new specialists and members of the health team as colleagues, not adversaries. Give this some thought when you are offered the opportunity to serve on a hospital staff.

