

Safe Practices

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Critical opponents of SCASA, particularly CCE representatives, claim that straight chiropractic is unsafe. They rely heavily on a New Jersey malpractice case, *Rosenberg v. Cahill*. The case involved a chiropractor who was accused of failing to recognize a tissue abnormality after examining x-rays. The chiropractor defended his case by claiming he was a straight chiropractor and was not duty bound to notice tissue abnormalities. What these critics never mention, though, is that the chiropractor in this case was a graduate of New York Chiropractic College, a CCE accredited institution, and that he was not adhering to the criteria for patient safety as promoted and emphasized by SCASA and taught at SCASA accredited colleges. According to these criteria, the chiropractor was in error. Among these criteria in the interest of patient safety is that of the chiropractor being responsible for the recognition of unusual and abnormal findings which present themselves during the course of the chiropractic examination, findings which could have a bearing on or be contraindicative to the administering of chiropractic care. It is the responsibility of the chiropractor to report any such findings to the patient. It is the responsibility of the chiropractor to inform the patient that it is outside the area of chiropractic expertise to offer advice as to significance, diagnosis or treatment of such non-chiropractic findings.

The chiropractor, however, does not have a duty to practice medicine. In fact, quite logically, he is statutorily prohibited from doing so. This is evidenced in several court cases. In the issue of safety, though, the argument is not whether using medical diagnosis is in the interest of patient safety, as some have said. Patient safety is not determined by medical diagnostic procedures unless the patient is being evaluated for medical needs. If you're promising medical care and/or medical results, then you should use medical procedures. If you're promising chiropractic care and/or chiropractic results, then you should use chiropractic procedures. It means the difference between medical diagnosis and chiropractic analysis (using this term to more accurately distinguish it from medical diagnosis, avoiding confusion and further creating the proper expectation in the patient). It is only logical that practitioners interested in treating medical conditions should use the medical diagnostic methods needed to find them. It follows that when someone is exposed to medical diagnostic testing, it is this logic that makes them expect that his medical conditions are being addressed. The patient's safety is best served, then, when the expectation matches the service.

In a Michigan case, the *Beno* case, The Court found that:

It is true, as a defendant notes, that many of the differential diagnostic techniques are not, in and of themselves, dangerous to the patient. However, the potential harm occurs because the patient may be led to believe that the chiropractor is capable of detecting [non-chiropractic health ailments]--- Thus, the patient may believe that no other physical problems exist and may fail to seek appropriate medical care.

One of the most clearly stated court decisions on this came out of Wisconsin in the *Hintz* case. The decision included that the chiropractor had a duty to determine if chiropractic care was needed or contraindicated for a chiropractic condition. The Court held that a chiropractor does not have a duty to make a medical diagnosis or medical referral, noting that:

Although chiropractors are permitted to use some medical tools when analyzing and treating a patient, this overlap does not transform the practice of chiropractic into the practice of medicine.

[B]ecause implicit in a requirement that a chiropractor refer a patient to a medical doctor is the imposition on the chiropractor to make a medical determination that the patient needs medical care, such a determination could not be made without employing medical knowledge. Because a chiropractor is not licensed to make such a determination, we hold that a chiropractor does not have a duty to refer a patient who is not treatable through chiropractic means, to a medical doctor.

Straight chiropractic as taught at SCASA colleges is in accordance with the laws, the courts, and with logic and rational thought on the issue of patient safety and safe chiropractic practice.

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