

## Nebraska Says "NO" To SCASA

Editorial Staff

With the recognition of the Straight Chiropractic Academic Standards Association (SCASA) by the U.S. Department of Education in 1988, many states have been asked by SCASA to consider if graduates of SCASA colleges may be licensed in that state. This has brought about often heated debates between individuals and organizations.

Graduates of SCASA colleges are currently only able to be licensed in: Arizona, Arkansas, Delaware, District of Columbia, Hawaii, Maine, Michigan, Minnesota, New Hampshire, New Jersey, New Mexico, Pennsylvania, South Carolina and Washington.

Most states have yet to feel a need to address the issue. They are apparently content to accept only graduates of colleges accredited by the Council on Chiropractic Education (CCE). A number of states, such as California and Florida, have elected to pass regulations which are prohibitive to graduates of SCASA colleges.

What are the issues?

Why are many states keeping SCASA graduates out?

Every debate has two sides, the question of licensing SCASA graduates is no different. Nebraska is the latest state to wrestle with the issue. The following are excerpts of the testimonies presented on September 6, 1990, before the Nebraska Board of Examiners in Chiropractic which is part of the Department of Health of the State of Nebraska.

The board is considering the adoption of this regulation:

"Accredited college of chiropractic" means a school or college which maintains accreditation by the Council of Chiropractic Education and is approved by the Department upon recommendation of the Board.

It is important to remember that Nebraska has never accepted a student from a SCASA college for licensure.

Those who testified for SCASA:

*Thomas Gelardi, D.C.*  
*President*  
*Sherman College of Chiropractic*

*Terry Rondberg, D.C.*  
*President*  
*World Chiropractic Alliance*

*Michelle Miller*  
*Student*

*Sherman College of Chiropractic*

*William Volk, Ed.D*

*President*

*Pennsylvania College of Straight Chiropractic*

*John Hart, D.C.*

*Nebraska-licensed chiropractor*

*LeRoy Moore, D.C.*

*Executive Director*

Straight Chiropractic Academic Standards Association

Those who testified for CCE:

*Jerome McAndrews, D.C.*

*National College of Chiropractic*

*James Winterstein, D.C.*

*President*

*National College of Chiropractic*

*John Miller, D.C.*

*President*

*Council on Chiropractic Education*

Note: Interestingly enough, neither the ICA nor the ACA were represented at this hearing.

SPEAKING FOR SCASA

Speaking against the regulation. Thomas Gelardi, D.C., the president of Sherman College of Chiropractic (a SCASA chiropractic college):

"I believe that Boards of Examiners are supposed to be there to protect the public. I believe that the public is best protected by having options. It improves quality of care; it lowers cost. I believe that the public is intelligent enough to know where they want to study chiropractic and the kind of doctor they want to go to ...

"I believe that this should be one of the options that should be available to the citizens of Nebraska and I ask you to give it serious consideration."

Dr. Terry Rondberg, D.C., president of the World Chiropractic Alliance:

"In the local arenas and in the national arenas the professional progress of chiropractic, and I noted this in Arizona and in several other states where I have been able to testify -- Our professional progress was being stifled because we were being perceived as having constant in-house fighting and turf battles within our profession ...

"Over and over again in different states I have seen people who are in positions of power or authority, and most of them deservedly because of their hard efforts and work on behalf of the profession, tend to become -- have a desire to ingratiate themselves or win some points in their association that they work very hard in."

William Volk, Ed.D. the president of the Pennsylvania College of Straight Chiropractic:

"The basis for my consideration here, if I can say it, might be more a level above what we have been talking about before. We have been talking about being exclusionary without provocation; we're talking about being prejudiced; we are talking about being discriminatory. We have a legitimate minority here against which rules are being made, regulations are being proposed to try and stamp out ...

"Here we are talking about denying any individual who has gone to a SCASA approved college the right to sit for the Board. You're denying individual rights. That is totally wrong in this country."

LeRoy Moore, D.C., the executive director of the Straight Chiropractic Academic Standards Association (SCASA):

"I think what we're saying here today brought up the issue of diagnosis, and I think that will probably be discussed more, but contrary to belief, SCASA colleges are not anti-diagnostic colleges. They do not see the purpose of a chiropractor as conforming to the objectives of allopathic medicine, that is in the diagnosis and treatment of disease. But no one can approach a particular health care system and address certain things without making decisions as to whether they can render their service in a competent and safe manner ...

"It revolves around differing viewpoints, and those I think have been espoused pretty much today, you know, one being the straight chiropractor who takes a more conservative approach to chiropractic, sees chiropractic as a limited health care profession, whose objective is to correct vertebral subluxations through chiropractic adjustments. The mixer chiropractor takes a much broader approach, feels it's a chiropractor's responsibility to diagnose and treat a broad spectrum of diseases and conditions, using a wide variety of procedures and modalities."

In addition, Dr. Thomas Gelardi, president of Sherman College, was provided with an opportunity to speak a second time:

"The big difference in the two practices is that when a patient visits a straight chiropractor, they are told in the beginning that our examination is not for the purpose of determining medical problems. 'You may have a medical problem; you should go to a medical doctor to find out. Don't stop taking your medicine; don't stop going to medical doctors. Get your diseases and symptoms diagnosed from a medical clinic. But remember that there is a striving within the body to contribute to its own healing and subluxations diminish that striving. We will examine your spine and if in the course of the examination ...

"One of the big problems with malpractice is the patient expectation. What do they think the doctor is doing? Do they think that they are trying to alleviate this cough? We tell them, 'We are not trying to alleviate a cough. A cough could come from many reasons, and we are not prepared within our office or by training to really diagnose those kinds of conditions. If you want to know what might be causing that condition, you should see a medical doctor' ...

"We are saying that we correct subluxations, not as a cure for diseases, but just that your body functions better without subluxations than it does with subluxations ...

"We will make every test necessary to assure that it is safe to give an adjustment. We do not make tests to see who needs a medical doctor. We say, 'Go to a medical doctor, because we may overlook something and we are not trained in that point.'"

SPEAKING FOR CCE

Speaking for the resolution.

Jerome McAndrews, D.C., a former executive vice president and board member of the International Chiropractic's Association, vice president of the Council on Chiropractic Education, president of the association of Chiropractic Colleges, and president of Palmer College of Chiropractic in Davenport, Iowa:

"Both groups (straight and mixer) felt that diagnosis was an important part of the preparation of and practice of a doctor of chiropractic. In fact, many if not most states, Nebraska among them, required during the formative years of the chiropractic profession that all practitioners in the health care field report both infectious diseases and social venereal diseases to the State, requiring diagnostic acumen and practice. So the division of the two camps in the chiropractic profession historically was based on therapy and not whether or not diagnosis was a valid part of a chiropractic practice and whether it was required to assure the safety and welfare of chiropractic patients.

"In approximately 1972, a new educational philosophy emerged which espoused the new philosophy that diagnosis was now an inappropriate part of the practice of the straight chiropractic. Two institutions espousing the same highly limited philosophy were opened. The initial institution sought accreditation by the Council on Chiropractic Education, only to be denied after due process said accreditation. This due process included a full appeal ...

"Our member (CCE) colleges also feel a state is well advised in its effort to represent the public to help assure that primary care practitioners are qualified to either provide health care for their patients or to be able to make an intelligent referral, a process requiring, in our opinion, diagnostic training and practice."

James Winterstein, D.C. the President of National College of Chiropractic:

"The basic foundation of any healing art lies in its ability to properly diagnose the patient condition, for without that ability, appropriate treatment measures cannot be determined. It is not just a matter of whether or not the patient will or will not benefit from chiropractic care, but also whether or not there is underlying pathology that might preclude chiropractic care, whether that be the correction of a simple adjustment of a simple subluxation or some broader form of treatment, or that might dictate the need for immediate medical or surgical care ...

"In a paper published by the SCASA titled 'A Compilation of the History, Policies, and Character of the Association,' meaning SCASA, we find the following statement: 'The pivotal point in the division of the two branches -- that is, chiropractic and straight chiropractic -- centered around the direction of chiropractic objectives. One branch fully endorsed the position that the objective of chiropractic was the diagnosis and treatment of disease. The other branch was just as firmly committed to (a) fighting the objective of diagnosis and treatment; and (b) espousing the sole objective of removing interferences to the body's own propensity to heal itself.'

"It is apparent then that even though the bulletins of the straight chiropractic colleges list courses in diagnosis, it is the clear intent of the accrediting agency, SCASA, to 'fight the objective of diagnosis and treatment.'"

John Miller, D.C., the President of the Council on Chiropractic Education and president of Palmer College of Chiropractic - West.

"The fact of the matter is CCE college graduates are sufficiently trained in the area of diagnosis so that they will be in a position to refer patients patients who are beyond the scope of their license of

training to treat. SCASA graduates are not.

"The issue goes to the heart of why we submit this Board should adopt the proposed regulations. Since the issue is so important, let me develop the issue further ...

"SCASA and its colleges utterly reject the principle that a chiropractic student should be trained in diagnostic skills. Quite simply, SCASA feels that it is unnecessary. SCASA schools totally reject the notion that there is a sum of scientific knowledge which has been learned independently of the chiropractic profession which is nevertheless necessary for a chiropractor to possess so that the chiropractor be in a position to diagnose patients and refer those who are not candidates for chiropractic care to professionals who may appropriately treat them ...

"It is important for you to recognize, our attorneys say, that CCE is an organization which would not exclude any chiropractic college from status with it for reasons which were not soundly based on the failure of that institution to meet certain written educational standards. Professional standards aside, education standards is the issue of accreditation."

The primary issue appears to be diagnosis. This is the area that the CCE and SCASA seemed to disagree the most.

At the conclusion of the testimonies, Dr. Russell Sawyer, the chairman of the Board of Examiners for Chiropractic in Nebraska summed up the diagnosis issue:

"I think that the Nebraska law requires doctors of chiropractic not only to examine patients but to make diagnosis. We have just heard that that is not part of chiropractic as a certain group of people see it ...

"I would like to say this about our Board of Examiners. We have published and instructed every chiropractor in the state of Nebraska that before they make a cervical adjustment, they perform a diagnostic test known as Georgia's Cerebral Vascular test. If a doctor refuses to do that, he is in violation of this Board. It's part of the practice of chiropractic in this state. It is a diagnostic test ...

"The question comes to mind: Why do we have examining bodies at all? Why is there a Board of Examiners in medicine or optometry or dentistry or chiropractic, not only in Nebraska but in any state in the union?

"The answer, as I see it, is that these boards have a mandate to protect the public the best way that they know how."

After the testimonies were given, the proposed regulation was passed unanimously by the Nebraska Board. The regulation will now be forwarded to the Board of Health for review and approval. Following approval by the Board of Health, the regulation will be sent to the Attorney General. The Attorney General will review the regulation for authority and constitutionality. Once approved by the Attorney General, it will be sent to the Governor for final review and approval. After being signed by the Governor, the regulation will be filed with the Secretary of the State and become effective five days later.

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