## Dynamic Chiropractic



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## **The Pros and Cons of Limiting Your Practice**

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A question more and more chiropractors are facing today is whether they should limit their practice to the treatment of one specific problem or problem area. Yes, limiting a practice is becoming en vogue. We are seeing sports injury clinics, headache specialists, decompression practices, neuropathy practices, personal injury practices and many more types of limited practices.

Should you limit your practice?

There is no correct answer to this question because each doctor's situation is different. There are too many variables in education, such as where you went to school, which instructors you had and what postgraduate courses you've taken. Obviously you can't specialize in something you've not been adequately trained for.



I once had a doctor ask me if I could teach him how to develop a scoliosis practice. I said, "Sure, but what training have you had in fixing scoliosis?" His answer was, "None ... I just adjust them." I didn't accept this doctor as a client because I wasn't going to help an amateur say he was a specialist. I told him to call me back when he took the necessary post-graduate training on how to fix scoliosis.

Other variables include the doctor's experience and expertise, since each of us is better at treating some health problems more than others. And you must also consider what services are being provided by the other health care practitioners in your area. If there already are several sports injury clinics, the market may be flooded. Conversely, if no one is specializing in sports injuries, demand may be high.

Another variable is the doctor's location, since some specialties are geared more toward one demographic group than another. I'll use a sports injury clinic as an example. A sports injury clinic located in an area of mostly young adults is likely to fare much better than one located in a retirement community.

The main argument in favor of limiting a practice is that by specializing in one area, a doctor can become extremely good at treating it. If all you do is treat headache patients, you're bound to become an expert. All your reading and post-graduate work can be concentrated on helping people with headaches and you can focus all your energy on this problem. You can train your entire staff regarding your specialty. You can buy equipment geared exclusively toward your specialty.

Being a specialist gives you a focused advertising and promotion theme. As a result, you can easily market yourself to a great reputation. Other doctors can refer you patients in your area of expertise that they are unable to help. This can be extremely rewarding.

When you become known as the headache doctor, in theory, everyone suffering from headaches

will come to you. A problem occurs when you have limited your practice to one health problem or a too narrow specialty. Very few people will come to you. This author had a client who limited his practice to lactating babies with colic. Obviously, a too narrow specialty and he failed. This author had two specialties - disc problems and whiplash - and he had no shortage of new patients.

You've just read the biggest negatives of limiting your practice. No matter what you specialize in, there will only be a certain percentage of the population that needs your kind of care. This may be counterproductive for a number of reasons, both philosophical and practical. You became a doctor to help people, not to exclude them. And that's exactly what you're doing when you limit your practice. In essence, you're telling everyone suffering from conditions other than your specialty that you don't treat them. You are turning away people who need your help.

Suppose you limit your practice to the treatment of headaches. Even if you get every headache patient in town, there will be thousands of other people who need care you don't offer. If someone comes to you for his headaches, he may not tell you about his back pain because he knows you have a limited practice. This not only limits your growth, but it also deprives the patient of needed care.

This problem is easily counted by a well thought out and implemented marketing plan. A wellmarketed practice produces all the new patients you can care for. There are other drawbacks to a limited practice. It prevents you from expanding your expertise and it sets arbitrary limits to your intellectual horizons. This creates fertile ground for boredom. Too many doctors see the success of some limited practices and decide that's the way they want to go. What they don't see is the potential financial danger of a limited practice.

Today's fitness craze can make the lure of a sports injury practice very tempting because of its generally younger clientele. The rising number of personal injury cases can make that limited area of practice appealing as well. There's no question that some doctors have built very lucrative limited practices. But the doctors who have successful sports injury, personal injury or other types of limited practices worked long and hard to build them. And they usually had extensive marketing campaigns. In some cases, they were very fortunate. In nearly every case, their practices weren't built over night.

The doctor who thinks he can limit the patients he will see to a specific area or condition and expects immediately to have a busy and financially viable practice is fooling himself and is playing Russian roulette with his practice. How do you pay the bills while you're trying to build your limited practice? And what happens if your limited practice is less successful than you projected it would be? If you're a new doctor, you're probably facing staggering student loan and equipment payments. Why do something that could increase your financial hardship? If you're already in practice, why do something to jeopardize your established clientele?

By this point, you probably think there are a lot more negatives to a limited practice than there are positives. And some of you who've been around awhile may ask me this question: "Pete, didn't you specialize when you were in practice?" Yes, I did. I had a disc problem and sciatica practice and drew patients from hundreds of miles. I also had a very successful whiplash practice and saw a lot of traumatically injured patients. But I had a specialized practice, not a limited practice. I also saw headache and nutrition patients. And I continued to treat sports injuries.

## Specialization Is Good, Limitation is Not

I encourage doctors to specialize, but only after they've established themselves as "general practitioners." Specialization should be an addition to your practice, not a replacement. Once you

have a solid base of patients, find an area of chiropractic you're especially good at or one that you especially enjoy. Or, find an area of specialization not being offered in your community.

There are many health problems that a chiropractor treats and even many more variations to a chiropractic practice. It is folly to believe you can be equally skilled in treating each condition and variation. If you're going to specialize, specialize in one of your strengths. Then become the best doctor you can possibly be at treating that specific condition. Take post-graduate courses. Attend seminars.

After you've mastered one area of specialized care, find another and learn all you can about that specialization. Successful doctors become a master at treating one condition after another. Specialization provides you with satisfied, enthusiastic and happy patients. Patients who will refer. That's how practices are built – through specialization and not limitation.

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