

**Initial Draft of CCGPP Best Practice Document is Released**

The Council on Chiropractic Guidelines and Practice Parameters (CCGPP) has released the long-awaited initial draft of their Best Practice document. The culmination of more than two years of work, the draft is intended to provide clinicians, patients, payors, regulators and others with a tool to incorporate careful analysis of the current state of the scientific literature with clinical expertise and patient care options. We value input into the process from all stakeholders and hope you will assist us with getting word out that the document is available for comment.

Production of this document has followed a carefully designed, scientifically based set of procedures intended to comply with the most rigorous and up-to-date international standards of best practice document development. Part of that process involves a carefully designed, pre-established search strategy of the scientific literature, with papers rated for scientific validity and utility. Areas of inconclusive or contradictory evidence were subjected to accepted consensus methodology, and the entire document is intended to be as transparent as possible, allowing users to determine the bases of recommendations and relevant source data for conclusions.

Stakeholders, including chiropractic providers, patients, third party payers, students, and others, are being asked to provide feedback regarding the draft document through a survey mechanism on the CCGPP or Spine.com websites. The draft can be accessed at [www.CCGPP.org](http://www.CCGPP.org), and lay users can access an abbreviated version at [www.spine-health.com](http://www.spine-health.com). Stakeholder organizations, including state associations, national associations, chiropractic colleges, and other interested organizations, are invited to provide specific comments, preferably by organizing a committee of interested members to review and comment on the document. Comments should be sent electronically to the organization's CCGPP representative as noted below or directly to the CCGPP office at [ccgpp@sc.rr.com](mailto:ccgpp@sc.rr.com).

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At a minimum, comments should address the same issues as those in the survey being used by individuals. This document is a draft and subject to revision based on specific criteria. While one important standard of best practice development is transparency, another equally important trait is editorial independence. Any substantive changes in conclusions or recommendations will be made solely by the independent CCGPP Commission based only on submission of relevant documentation sufficient to support a change in conclusion. All organizations and individuals should submit relevant supporting literature (electronically as a WORD or PDF file) with their comments.

The CCGPP appreciates your patience and generous support of the Council's important work, and look forward to your participation in this worthwhile and historic effort. Comments will be accepted through July 10, 2006.

**U.S. House Passes Legislation to Expand Military Access to Chiropractic**

**Measure calls for analysis of extending chiropractic care to reservists, retirees and dependents**

The U.S. House of Representatives recently approved pro-chiropractic language that would require the Department of Defense to ensure that chiropractic care is available to all members of the armed services through U.S. military treatment facilities worldwide. The language, backed by the American Chiropractic Association (ACA) and the Association of Chiropractic Colleges (ACC), was passed on May 11 as part of HR 5122, the National Defense Authorization Act for Fiscal Year 2007.

**Cont'd...on opposite page**

**CCGPP Best Practices Document**

Must Become a Political Issue Quickly!

by Jeffrey A. Cronk, D.C.

**I**N CASE YOU HAVE NOT HEARD, S. 1955, which would have had a potentially devastating effect on the profession of chiropractic, has been stopped in the senate! In the process of stopping it, some monumental organization occurred. A potentially devastating threat began an alignment process, and the profession went under acute care. A profession which for years has been in the state of chronic disease of disorganization and dis-unification, unified and organized! Doctors from different backgrounds—straights, mixers, philosophical based, evidenced based, doctors from all techniques, doctors from all of the various schools—united! At least 20 or more State Associations participated in weekly teleconference calls to organize and effectively direct this acute unified force. National organizations, for the first time, had something on which they could agree and for which they could unify.

The result was that a symptom went away—though none of us should think for a moment that an actual cure took place—as the adjustment was administered, but now the process of alignment needs to occur. Chiropractic must now continue in corrective care so that it may experience optimal health.

Chiropractic, as a body, has been anything but in a state of optimal health. Our dis-organization and lack of unity has lead to many misalignments, with little or no organized feedback and regulation. Our schools are not booming and many of them are in real conflict; our regulatory boards have had scandals and have given the field reason for upset; our national organizations quibble; special interest groups and individuals within our profession have crossed over and aided the external environment to weaken us further. Yet, despite all of this, we are surviving—though perhaps less optimally than we can—and will continue to survive, if we live what the majority of us teach and demand that our leaders further the process of organization and unity so that we may begin corrective care.

S. 1955 was a wake-up call and its best attribute was that it united us. We must now stay both united and organized in order to develop great internal body feedback and regulation, so that we can experience optimal health. We must, as a profession, continue to clean up—putting aside

our individual interests for that which is for the greatest good of our profession as a whole, so that we are not always at the mercy of a hostile external environment. If you do not think the external environment is hostile, realize that Medicare has interpreted that care beyond twelve visits may be fraudulent, and the National Insurance Crime Bureau has estimated that \$100 billion dollars each year is paid in fraudulent medical bills (<http://www.statefarm.com/media/insback.htm>).

I can think of no better place to strengthen both our intra-professional feedback and regulation than the Council on Chiropractic Guidelines and Practice Parameters (CCGPP) "Best Practices Document," a document not to be taken lightly as we all must live with it, and be judged by it. Most of us know that "Best Practice Documents," like the earlier Mercy Document, can cause further dis-unity and dis-organization to our body.

In perhaps a month or so, the first chapter will be released, "The Low Back Best Practices Draft." This will be followed by drafts on the neck, extremities, etc. You must individually read this document, which can be downloaded at the [www.ccgpp.org](http://www.ccgpp.org).

If you, like me, believe that this document does not fulfill its intent, then you must do something about it. It is not time to be emotional; it is time to be effective and our example is S. 1955.

We must demand that our political leadership provide feedback and regulate what our body is allowed to put out as representing us as a whole.

Do not sit back and think that this does not involve you, read the document and decide, and do it quickly. You matter and so does your opinion. If you do not like the CCGPP Low Back Document, immediately call your state and national political leaders and find out what they are going to do about it? Do not let emotion enter in; instead, organize! Let's once again just be effective, and continue on our profession's corrective care program—if not for ourselves, for the benefit of the millions of patients that rely on our care.

*Jeffrey A Cronk, DC, is a licensed chiropractor since 1988, and is the president of National Injury Diagnostics. Dr. Cronk can be reached for questions or comment at 715-833-8533 or e-mail at: [info@nationalinjurydiagnostics.com](mailto:info@nationalinjurydiagnostics.com). TAC*

"The passage of this language is a victory for our men and women in uniform, as they are one step closer to accessing the chiropractic care they need and deserve," said ACA President Richard G. Brassard, DC.

The bill, as passed by the U.S. House of Representatives, would require the Secretary of Defense to develop a plan for providing chiropractic health care services to all members of the uniformed services, as mandated by Public Law 106-398, National Defense Authorization Act for Fiscal Year 2001. In addition, HR 5122 would require the Pentagon to study the cost and feasibility of expanding the chiropractic benefit to military dependents, retirees and reservists.

According to ACC President Frank Zolli, DC, "The progress that has been achieved to date with the inclusion of doctors of chiropractic in both the DoD and Veterans' health care systems could not have been achieved without the grassroots assistance of chiropractic state associations, colleges, doctors and chiropractic students. Thank you for this critical support."

To view HR 5122, go to <http://thomas.loc.gov>. Within the text of HR 5122, section 712 deals specifically with the chiropractic benefit. TAC

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**Dr. Robert C. Gordon,  
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FRCCM, DAAPM.**

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- July 20-22 - Jersey City, NJ
- August 17-19 - Jersey City, NJ (proctoring)

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