

SYLLABUS

Title: Non-Surgical Spinal Decompression

Instructor: Dr. Luke Henry

CE Hours: 12

I. COURSE OBJECTIVES

This course introduces nonsurgical spinal decompression as a useful physiotherapeutic modality for the chiropractic physician, using computer technology to improve upon limitations of older traction methods. With particular emphasis on the evidence-based management of spine pain, disc disease, and radicular symptoms, the class also offers a current research review and management strategies for chronic and difficult cases, and case studies to interest the experienced clinician. Indications and contraindications and the management of patients with red flags and yellow flags, motor vehicle trauma, work and sports injuries are covered. Risk management includes coding, compliance, and documentation. The use of decompression devices is advised as part of a multifaceted treatment approach, also including manipulation, low-level laser therapy, active care, and healthy lifestyle advice when in the best interest of the patient.

II. COURSE OUTLINE

HOOR ONE

Introduction

- Decompression for the doctor of chiropractic
- Why consider adding decompression?
- History of spinal traction and decompression
- What is spinal decompression?
- Decompression vs. traction

HOOR TWO

- Equipment comparisons
- FDA clearance
- Physiological effects and goals of treatment

HOOR THREE

Back and neck pain – leading causes of disability

- Epidemiology of back and neck pain
- Disorders of intervertebral discs
- Pathophysiology
- Radiculopathy
- Spinal stenosis
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HOOR FOUR

Indications

- Bulging disc
- Herniated disc
- Degenerative disc disease

- Facet Syndrome
- Sciatica
- Neck pain
- Back pain

Contraindications: relative & absolute

- Acute fracture
- Dislocation
- Gross instability
- Infectious disease
- Inflammatory arthritis
- Severe osteoporosis
- Metastasis
- Abdominal aortic aneurysm
- Deep vein thrombosis
- Pregnancy
- Prior surgery with hardware
- “Red flags”
- “Yellow flags”

HOURLY FIVE

Comorbidities and complicating factors

- Diagnosis
- History
- Outcomes assessment
- Physical examination
- Diagnostic imaging
- X-ray
- MRI / CT
- Electrodiagnostic testing (NCV / EMG)

HOURLY SIX

Treatment Protocols

- Lumbar spine
- Cervical spine
- Procedures for proper patient harnessing
- Angle of distraction
- Treatment waveforms
- Ensuring patient safety and comfort
- Monitoring patient progress
- Maintenance / supportive / preventative care

HOURLY SEVEN

Multimodal treatment approach

- Adjunctive therapeutic modalities
- Electrical stimulation

- Hot / cold
- Myofascial release
- Bracing
- Pain is often complex and has multiple causes
- Eliminating pain generators
- Pre-decompression
- Post-decompression
- Reducing post-treatment symptoms
- Low-Level Laser Therapy (LLLT) photobiomodulation
- Therapeutic exercise / rehabilitation
- Home care

HOURL EIGHT

Comparison to alternative treatments

- Pharmaceuticals
- The opioid crisis
- Epidural steroid injections
- Spine surgery – costly and invasive
- Discectomy
- Laminectomy
- Fusion
- Cord stimulator

HOURL NINE

Risk Management

- Documentation
- Billing & Coding
- Insurance company medical policies
- Compliance

HOURL TEN

- Ethics & boundaries
- Limiting liability
- Informed consent
- Regulations
- Controversies & criticisms
- When to refer for co-management, injections, or surgical consultation
- Communicating with other physicians

HOURL ELEVEN

Research summary

Decompression for the personal injury patient

Workers compensation injuries

Motor vehicle trauma

Case studies

HOURL TWELVE

Case Studies (continued)

Review / Quiz