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The Seven Essentials to Getting Great Recovery Results and Excellent Legal Help for any Spinal Ligament Injuries



“Don’t make your injury experience worse by choosing the wrong doctor or the wrong attorney to assist you.”

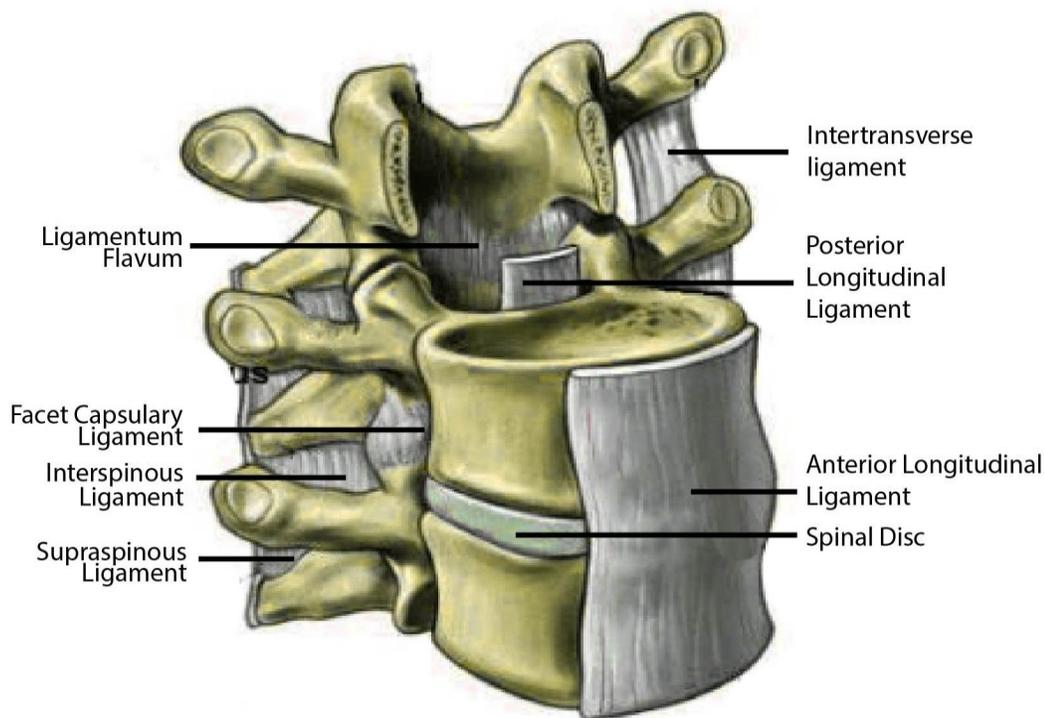
Written by: Jeffrey A, Cronk, DC, JD CEO American Spinal Injury & Impairment Consultants and the Director of Education for Spinal Kinetics.

1. If you suffer from back or neck pain of any kind there is a good chance you have a spinal ligament injury that has yet to be discovered.

Upon hearing spinal ligament injury, your first thought may be “that can’t be the problem, it sounds too benign.” While I cannot begin to teach you everything there is to know about this type of injury, I can and will improve your ability to be a much better consumer and help you shop the market for much better results, i.e., locating an educated, informed doctor who knows what this condition is, and more importantly how to accurately determine where and how severe it is if you have this type of injury!

If you think that you have injured your spine in an auto accident, work activity, sports activity, slip and fall or any of the hundreds of other ways to injure your spine, this paper is written for you!

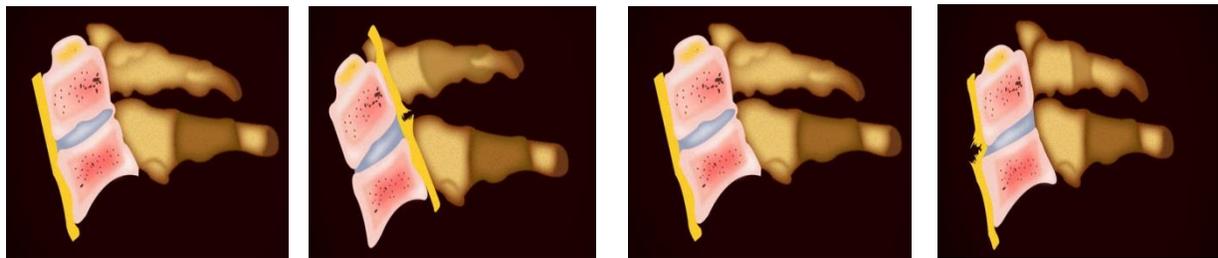
I am going to share with you what too many doctors that treat the back and neck simply do not know, maybe omit? → Or worse seem to go right on by.



Undamaged spinal ligaments keep the spine in perfect alignment. (1)

When the spinal ligaments are damaged they allow the spine to significantly misalign during use. This is the number one reason why so many people suffer from back and neck problems.

When spinal ligaments are no longer able to hold the spine in alignment, this is what they look like:



Normal

Excessive Angulation

Normal

Excessive Translation

The first thing you need to know is that ligaments are the tissues in the human body that hold your bones together. Wherever two or more bones are held together they form a joint and those joints are connected by a set of connective tissues called ligaments. The bones that make up your ankle, knees, ribs, wrist, shoulders and of course spine are all held together and perfectly aligned by their ligaments. In the case of your spine these spinal ligaments perform two functions: First, they completely hold the vertebra (spinal bones) in alignment during an activity; this allows your spine to perform perfectly without injury, pain or discomfort. Second, these spinal ligaments have another, powerful function that is just now being fully understood. It is now known that each of these ligaments contain very advanced pressure receptors called mechanical receptors (or mechanoreceptors). These imbedded mechanoreceptors convert pressure from the ligaments into an electrical signal that tells the body to make instantaneous muscle adjustments around the joint according to need. These adjustments are instantaneously made to both protect the spine from injury and support it perfectly through any activity that you are trying to put it through. So these mechanoreceptors tell the muscles exactly what is needed at any instant at any level for any activity. As long as they are not damaged or taken offline they perform flawlessly!

However, some of these mechanical receptors are designed to cause pain; significant, dull, sharp, aching pain when the ligament has been damaged. This is to continually protect the joint by warning you that what you are doing or about to do is irritating the damaged joint, which could cause the joint to be further damaged if you persist with the activity.

This is a brilliant system that we need to explore further so it can become apparent to you just how easy it is to determine the severity and location of any spinal ligament injury!

To begin with we need to understand that when a force suddenly overwhelms a spinal joint and forces it out of alignment the ligaments are over stretched or torn. This can leave the joints looser, lax and out of alignment, which causes these pain receptors to turn on, again, so that you do not further damage the joint or the ligaments.

This injury is called a sprain, or in this case a spinal sprain. Sprains provide you with a very sharp pain or a very attention grabbing dull ache. Anyone that has sprained their ankles knows how painful a simple injury to the ligaments can be. It is unbelievable the pain you can receive from the mildest form of an ankle sprain. The common term for a spinal ligament injury caused by an auto accident is called whiplash injury. That is because of the “whipping” motion that occurs during the accident. Regardless, it is a spinal ligament injury and it causes a degree of instability to the spine itself.

Medscape¹ one of the top medical sites in the world openly educates the public about spinal ligament injuries to the neck or lower back and the following symptoms:

- Neck pain
- Back pain
- Lower back pain
- Shoulder pain
- Scapular pain
- Pain going down the arms
- Pain going down the legs
- Numbness, tingling or a sense of weakness or heaviness in the legs or arms
- Visual disturbances
- Ringing in the ears
- Difficulty swallowing
- Difficulty breathing
- Bladder or bowel dysfunction

Unfortunately each one of these conditions can become permanent if you do not reduce your risk by working with a knowledgeable doctor that completely understands how to properly diagnose and treat this type of injury *early*. Early is the key! The sooner the better!

However, finding a doctor that understands how to properly diagnose this type of injury is not easy. As a matter of fact I have taught more programs specifically geared to the spinal ligament injury than perhaps anyone in the country today. I can tell you first hand that 90% of the doctors treating these injuries do not know how to determine the severity and the location of this condition. In all of my years of experience, I know that if a doctor does not know how to properly diagnose and determine the severity and location of your spinal condition, your chances for an optimal outcome are significantly reduced.

This means that your risk of having any of the conditions listed above becoming a permanent part of your life is astronomically increased! Getting the right doctor is imperative to reduce this risk and is what this paper is all about.

2. The spinal ligament injury is the number one cause of pain, disability and expense in the market today. To seriously reduce your risk of all three, you will want to work with a doctor that fully understands this condition.

We have produced a video that explains the horrible results that people with these spinal ligament injuries have retained in the past. The results have not been good! For example, here is a piece of research:

In one of the longest studies ever performed on whiplash-injured patients looked at the health status of said patients 17 years after injury. **55% of the patients still suffered from pain caused by the original trauma.**²

This means that no matter what doctor these patients treated with, 55% of the tem had the same problem 17 years later! Do not become a statistic by treating with a doctor that does not specialize in the rehabilitation of this simple condition!

Here is another interesting bit of research that addresses the myth that your pain is created “from your mind”.

This study found that essentially **100% of those who are suffering from chronic pain caused by a whiplash injury will have an abnormal psychological profile with standard assessments.** The only way to resolve the abnormal psychological profile was to successfully treat the chronic spinal pain; psychotherapy was not able to improve the abnormal psychological profile nor was it able to improve the patient’s chronic pain complaint.³

Thus, your pain is *not being caused* by the abnormal psychological profile, rather your pain is *causing* the abnormal psychological profile. If your doctor seems to be indicating that it is “all in your head,” then perhaps it is time to remove that doctor from your care.

The area where the physical problems of spinal ligament injury are most heavily documented is whiplash, although a ligament injury is a ligament injury no matter where you get it from; work, home, sports etc. The mechanism of an auto accident is very well studied because we carry insurance to cover our injuries and the injuries that

we can cause others. This injury has been so heavily studied because there is so much money is at stake!

In May of 2015 the National Highway Traffic Safety Administration⁴ put out a report which looks back at trends in highway accidents and provides the American taxpayers a report of their findings:

In 2010, there were 32,999 people killed, 3.9 million were injured, and 24 million vehicles were damaged in motor vehicle crashes in the United States. The economic costs of these crashes totaled \$242 billion... In Appendix A...The results indicate a feasible range of societal harm from motor vehicle crashes **from \$546 billion to \$1.12 trillion in 2010**, with lost quality-of-life accounting for between roughly half and three-quarters of all societal harm respectively.

That's a lot of money and a lot of money at stake, which is why this is such a heavily studied injury.

As listed in the study, nearly 4 million people a year are injured in automobile accidents. From our research above if you take this condition lightly over 2 million of you are going to be chronic and potentially suffering with the same problems and more 17 years later! This means that that the pain and those problems are now classified as chronic: which technically is labeled such for any condition that persists for more than three months.

To be clear, this means that over 2 million people develop chronic conditions from this one mechanism---EVERY YEAR! Injury is the primary cause of chronic pain and chronic pain is a serious problem today. According to the National Institute of Health Report in 2014 over 100 million American Adults suffer from chronic pain⁵, and according to the Mayday Fund over 20% of Adolescents⁶ suffer from it---there is no bigger health problem in the world today than chronic pain. We believe the world deserves better solutions and it starts with your doctor.

It is really important to understand that in order to get out from the 55% you have to find a doctor to help you as quickly as possible.

Now there is another point that I absolutely must hit home with you and any family member or loved one that you know: "Injury is the initiating event to the disease called chronic pain". Dr Jeffrey A Cronk, DC, JD

So if you want to look further at studies that show just how bad doctors' results are with patients that have been treated for these injuries, please watch *Whiplash Statistics Don't Lie* on YouTube (<https://www.youtube.com/watch?v=st5bwC411VU>). This is put out by one of the Top Spinal Ligament Injury Testing Companies in the United States called Spinal Kinetics (www.TheSpinalKinetics.com) Spinal Kinetics in the leader in the testing procedure that allows doctors to accurately determine the severity and location of spinal ligament damage.

Now let's talk about costs, your costs, your money and why it is so necessary to stay out of the following money pit. If it is not enough to avoid chronic pain---how about avoiding chronic costs or better yet caustic expenses that can leave you quite poor!

The American Pain Society, one of America's most prestigious medical societies, explains in their 2007 publication of lower back guidelines the following:

Medical treatment for chronic low back pain is estimated to cost **\$9,000 to \$19,000 per patient annually**, and interventional treatments cost a minimum of \$13 billion in 19908. Additional costs are associated with days lost from work due to low back pain. Low back pain is the most common cause for chronic or permanent impairment in U.S. adults under the age of 65, and the most common cause of activity limitations in persons under the age of 45.⁷

In another recent study on chronic pain published in the Journal of Pain, the average American can spend north of \$12,000.00 per year in additional medical expenses treating their chronic pain. After ten years that is \$120,000.00 which is a lot of deductible and copay expenses. This is BIG, BIG business and we want to keep you out of this expensive money pit!

This is why it is so important to choose your doctor wisely!!! Your health and your future finances can severely depend on it!

3. There are too few doctors that know how to properly diagnose this condition.

What is a diagnosis? According to Wikipedia a diagnosis is the identification of the nature [inherent or inseparable features] and cause of a certain phenomenon. The nature of the condition or cause is *what* you always see with it. With Hepatitis C there are things that you always see with it, and that is the nature of Hepatitis C infections. With moderate to severe spinal ligament injuries the one thing that you always see is *excessive joint motion*.

When trying to resolve an unwanted body condition if your doctor has the right cause or the complete diagnosis, and applies appropriate treatment that has been proven to successfully correct the condition, the condition will usually resolve in a timely manner. Getting the right diagnosis is *not* an easy step, but you can tell when you have it---because the condition will begin to resolve---usually it will do so expediently.

An important study in the *Agency for Healthcare Research and Quality* finds that nearly 10% to 30% of all diagnosis's in America are wrong⁸. Although misdiagnosis is quoted to occur around 40% of the time, and that is a huge number, I am going to tell in my 25 plus years of experience that it is at least twice that high when it comes to spinal ligament injuries.

Trisha Torrey, Patient Empowerment Specialist at AboutHealth.com explains the following about misdiagnosis:

When a healthcare provider considers a patient's symptoms of illness or injury, reviews the evidence, but arrives at the wrong conclusion about the name or source of that illness or injury, a misdiagnosis results...The wrong name is given to an illness or injury...the treatment recommendation could also be wrong, resulting in further illness or debilitation. The treatment the patient really needs, which would result from a correct diagnosis, is delayed or never takes place.⁹

This is the biggest problem with spinal ligament injuries themselves and is the main reason why they are the number one cause of pain and disability in the world today; *too few doctors know how to properly diagnose them!*

So the question remains, how do you diagnose the spinal ligament injury?

Remember, spinal ligaments do two things: they hold the bones in perfect alignment for activity in order to perform without injury and they coordinate all muscle activity via their mechanoreceptors communication. When mechanoreceptors get damaged and go offline they provide the spinal muscles with corrupted communication, causing inappropriate muscle support, instability and pain!

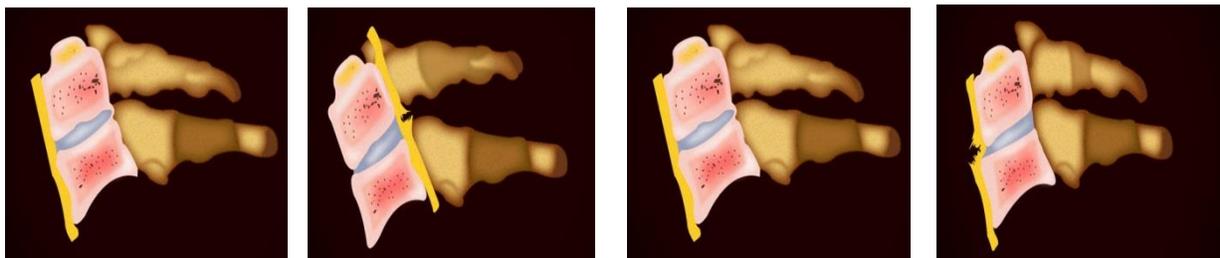
Knowing what a body part does means you can test to make sure it is doing it right! If spinal ligaments keep your spinal bones aligned during use; then you can x-ray those parts while you are using them to see if this alignment is being maintained. From these images (x-rays) we can accurately measure your spinal alignment patterns and look for the *excessive motion* which is the *nature* of this type of injury.

Remember what I said earlier, when a force suddenly overwhelms the spinal joints and forces them out of alignment the ligaments are over stretched or torn leaving the joints looser or lax. The mechanical receptors (mechanoreceptors) that communicate with the muscles for support turn off and the pain receptors can be turned on. This injury is most commonly called a sprain.

So when a force from an auto collision does damage to your spinal ligaments



They are no longer able to hold the spine in alignment and this is what they look like:



Normal

Excessive Angulation

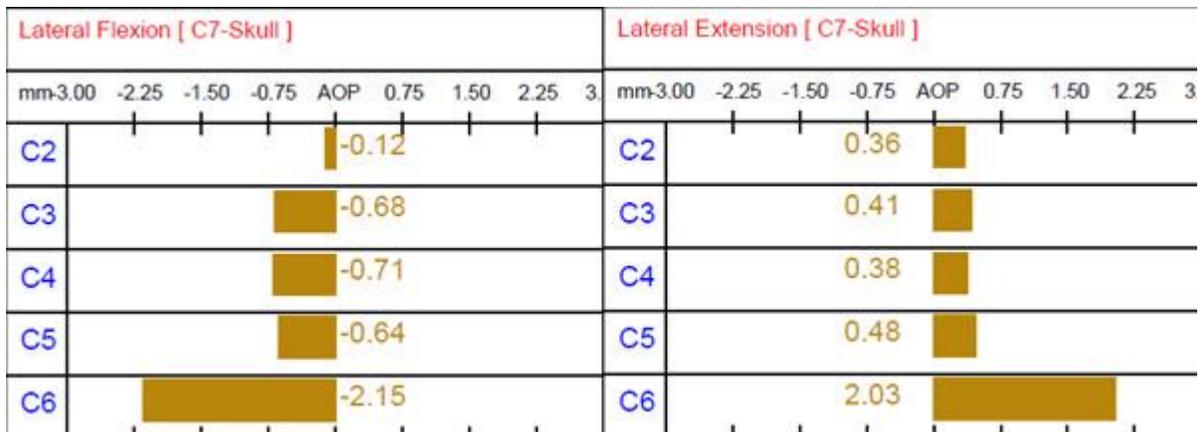
Normal

Excessive Translation

See how in the normal ligament keeps the spine aligned but when it is damaged it allows it to slip? Remember spinal ligaments hold vertebra (spinal bones) together and keep the joints aligned; when they are damaged they cannot keep alignment and the joint will show excessive motion in one of two forms: a “back and forth” motion called translation motion or bending motion that causes excessive joint angulation. This is *not*

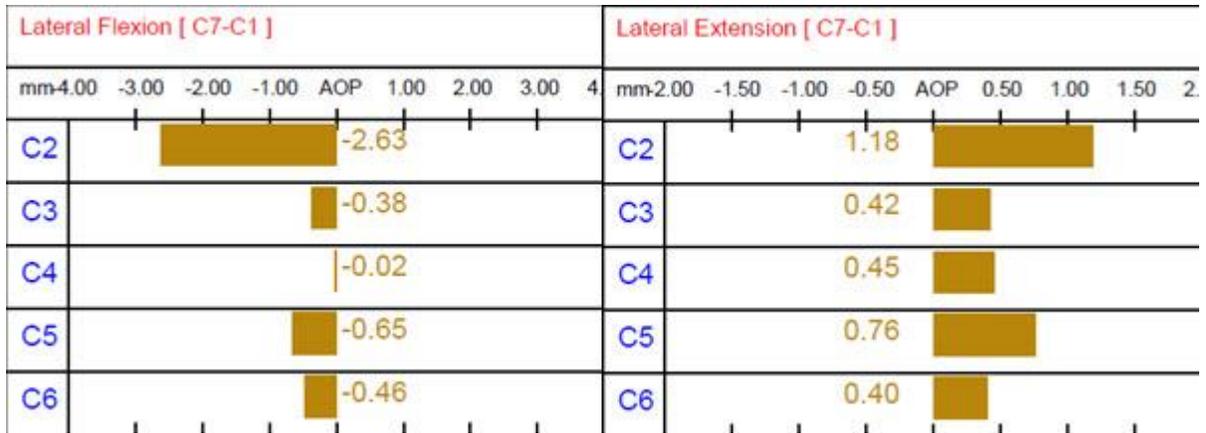
diagnosable on an MRI; it is diagnosed with a simple set of special x-rays called stress x-rays and a sophisticated measurement analysis called a Computerized Radiographic (X-ray) Measurement Analysis or CRMA for short. This specialized technology will allow any radiologist to accurately measure the intersegmental motion patterns of your cervical and lumbar spine and tell your doctor where the most damaged units are based on their excessive motion patterns.

I am going to give you a lesson as a consumer. Translation patterns are how much the vertebra is moving or slipping front to back. There is a normal range, an abnormal range and a severely damaged range. Look at the example translation charts below, which are from real studies.



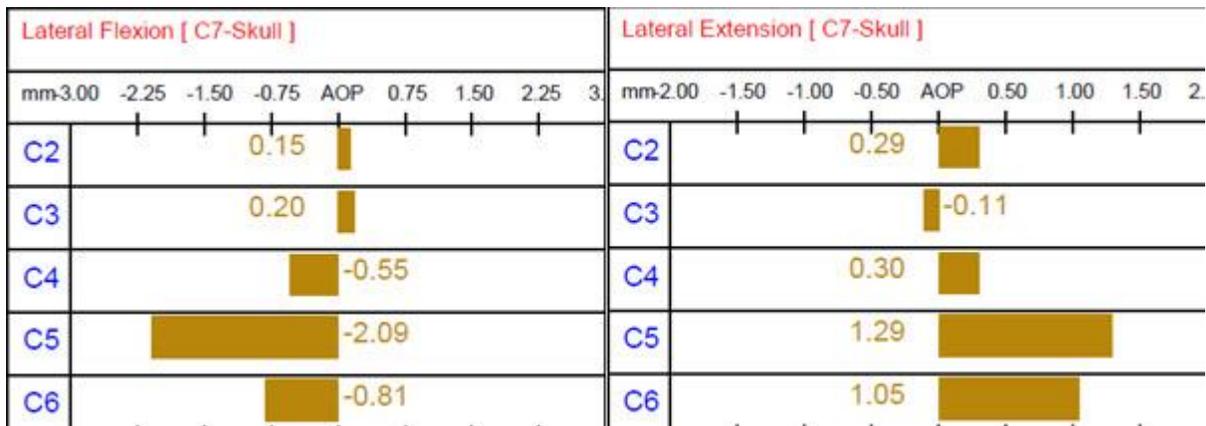
Where there is more than 1 millimeter of excessive translation it is abnormal and anywhere there is more than 3.5 mm of aggregate motion we have a severe ligament problem. In this case, there is 2.15 mm plus 2.03 mm adding up to 4.18 mm at Cervical Vertebra number 6 (C6). If I ask you to look at the chart and identify where the problem is, I think you will agree it is very apparent that the problem is at C6. Any doctor now could make this diagnosis.

Take a look at a very common injury pattern with those that suffer with headaches.



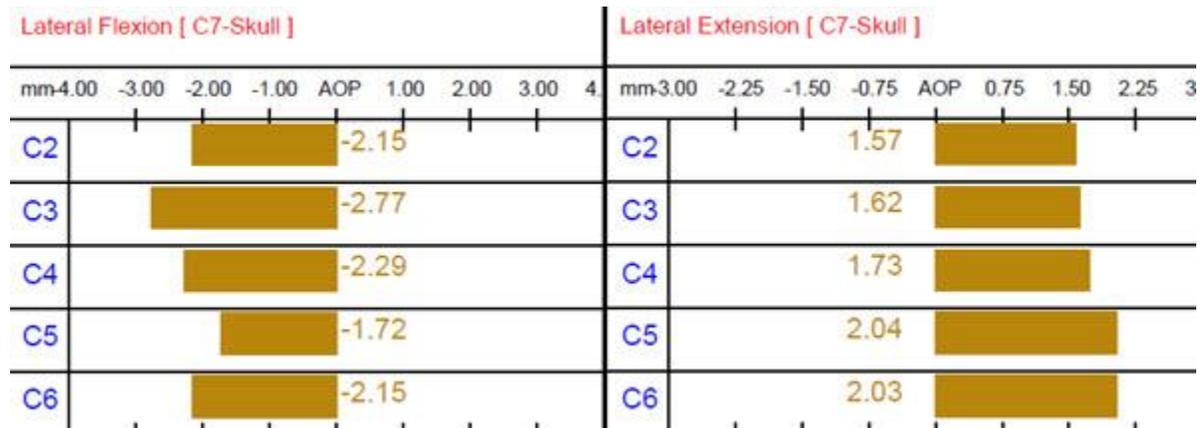
At C2 or Cervical Vertebrae 2 right? C2 = 3.81 mm which is severe.

How about this one?



At C5 and C6 right? How hard is this?

How about this one?

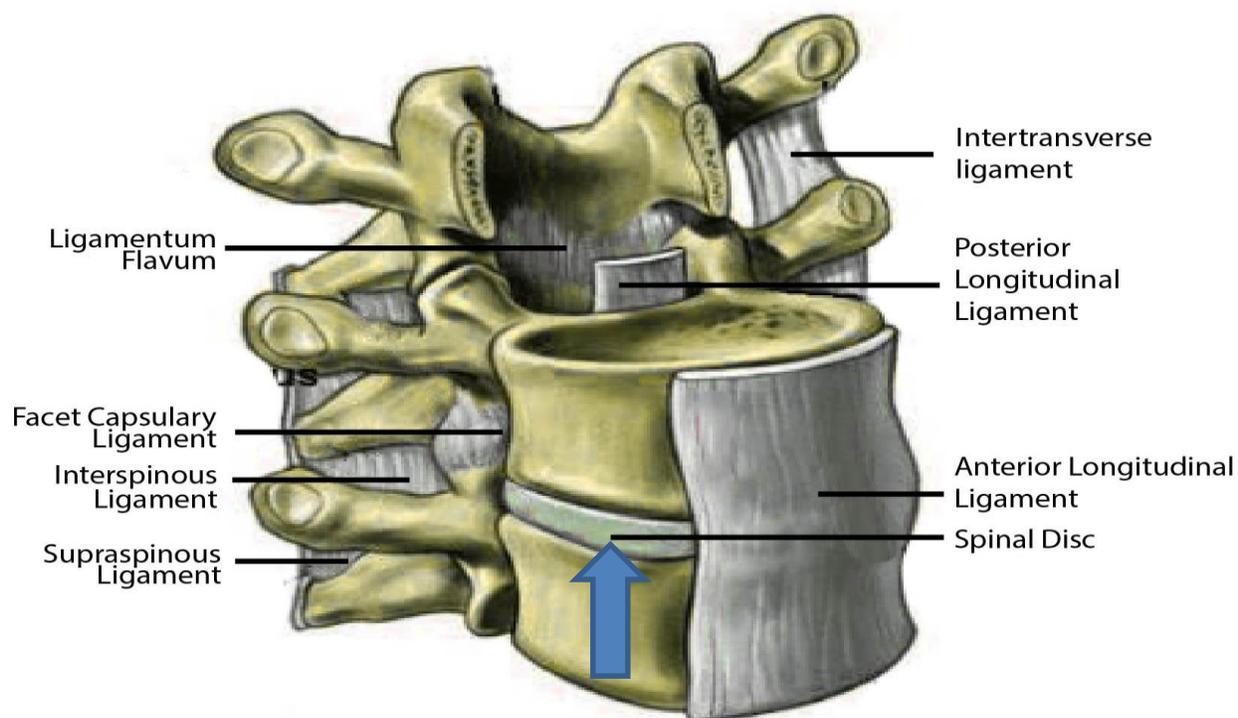


All of spinal ligaments here are indicated to be severely damaged. The point is this; the location and determination of a spinal sprain injury is determined by the amount of abnormal or excessive motion in the individual vertebral motion units.

What I have shown here are the basics, and unfortunately in some cases you will now know more than your doctor about this condition. Spinal sprains (ligament injuries) are accurately measured and determined with this simple test. Your doctor really cannot accurately determine this without a good set of stress x-rays and a CRMA test.

This test and its findings are so important that the test *should be performed independent of the treating provider!* That way there is no bias entered into the study.

Remember, excessive spinal motion is not found on an MRI. An MRI is a test to determine if you have a *disc* injury, independent of an excessive motion study like an x-ray and CRMA. The disc is a spinal ligament and is *one of the ten* total ligaments that hold your vertebrae together. The image of the spinal ligaments below illustrates that the disc is in between the vertebra and acts as a cushion pad between them.



In the spine it is reported that the total amount of specialized ligaments is about 220. These ligaments hold the spine in perfect alignment and directly communicate information to 120 specialized muscles that allow you to use your spine without pain. Of these 220 ligaments, 23 are called discs, which mean that the discs represent less than 10% of the ligaments in the human spine! An MRI can only study the discs and therefore has some extreme limitations in a spinal ligament injury analysis. As a matter of fact too many doctors today think that if you have a negative MRI you do not have a spinal ligament injury, but nothing could be further from the truth! Ligament injuries cause excessive motion and excessive motion is not tested with an MRI!

The spinal ligament injury specialist today is a provider that knows how to use the special spinal x-rays and the CRMA Procedure to determine the severity and location of the spinal ligament injury through an excessive motion study of your spine *as well as* an MRI to appropriately study the ligaments called discs.

Getting any spinal ligament injury accurately and fully diagnosed is the first step to recovery and it is the most important step when you have this type of injury. Do not take this lightly, never work with a doctor that does not understand and apply the basics explained here. The risk of long term chronic pain or other chronic problems combined with the long term expenses are far too great!

If a doctor or their office staff cannot answer these three basic questions you are probably not in the right office. The questions are:

- 1 Doctor, could I have an injury to my spinal ligaments? If the answer is yes then ask:
- 2 Can spinal ligament injuries cause a patient significant long term problems if they go undiagnosed? If the answer is yes let them explain all about it (remember the symptoms above that are associated with this condition) and then ask this most important follow up question.
- 3 How do you or your clinic accurately diagnose this condition? They should answer that we do an intersegmental motion study with special x-rays and a CRMA procedure, followed by an MRI if they feel it is necessary. If they cannot quickly tell you this, then you are probably not in the right place.

Your health is too important to turn it over to a doctor that is unfamiliar with the condition that you have. If you had cancer would you try to train your treating doctor or would you expect them to be an expert already? The spinal sprain is no different. I would never let any loved ones of mine treat with a doctor that does not fully understand the condition that they are treating. This is rampant, and in my experience it is why this relatively simple condition is now causing so many people to suffer. Choose your doctor wisely!

4. Too many professionals today think of this condition as “just a soft tissue injury”.

When it comes to spinal ligament injuries you will hear so many people involved say these unfortunate words: “It is just a soft tissue injury.” This saying is rampant today with many doctors, attorneys, insurance adjusters, and insurance executives. It is rampant with those that do not fully appreciate what a soft tissue injury is. Nearly 100% of the time the person or professional saying it cannot tell you how this injury is properly evaluated and diagnosed, nor can they tell you the list of common symptoms that are attributed to this injury.

There are two things about soft tissue injuries: what they are and how the minimization of the spinal soft tissue injury came to be. Remember this condition causes more pain and expense than perhaps any other condition there is. A series of studies emerging from the Global Burden of Disease 2010 Project clarifies the worldwide health burden of musculoskeletal conditions, particularly back and neck pain, in crystal-clear fashion, with *low back pain identified as the number one cause of disability worldwide and neck pain the fourth cause.*¹⁰

This report also states that musculoskeletal conditions such as low back pain, neck pain and arthritis affect more than 1.7 billion people worldwide and have a greater impact on the health of the world population (death and disability) than HIV/AIDS, tropical diseases (i.e. malaria), the forces of war and nature, and all neurological conditions combined. Thus this report is stating that these so called “just soft tissue injuries” have a greater impact on the health of the world population than all the aforementioned conditions *combined!*

Remember a spinal ligament injury can cause you to have any of the following conditions and it may affect you permanently:

- Neck pain
- Back pain
- Lower back pain
- Shoulder pain
- Scapular pain
- Pain going down the arms
- Pain going down the legs
- Numbness, tingling or a sense of weakness or heaviness in the legs or arms
- Visual disturbances
- Ringing in the ears
- Difficulty swallowing
- Difficulty breathing
- Bladder or bowel dysfunction

Do not take this condition lightly and do not work with any doctor, attorney, or any other professional that does either!

But let’s look at this “it’s just a soft tissue injury” myth a little further and you may understand how it came to be.

First the body is composed of both soft and hard tissues; the hard tissues are called bones, anything other than the bones is categorized as a “soft tissue.” The heart, brain, spinal cord, etc. The soft tissue is the worst kind of injury that you can have!

Now let me tell you the story of how the world’s most problematic condition got commonly tagged and attempted to be minimized as “just a soft tissue injury”. This story is filled with money motivation rather than sound medical science.

In the 1980s all healthcare was pretty much paid unchallenged and all providers were covered. Think about that for a moment, all patient care was paid without question! This time period today is often called the Mercedes Eighties, as it provided doctors with an excessively great pay. As a new chiropractor entering practice in the late 80’s I experienced first-hand what it was like to have all patient exams, x-rays and treatments covered, with virtually no limits. Chiropractors at that time could see a patient over two hundred times for the same problem whether it resolved or not and their care was all covered. There was no such thing as evidenced based medicine or evidence based chiropractic care, or evidenced based osteopathic care, etc. At that time and still today,

any primary care provider (MD, DC, DO) could treat a patient with a spinal ligament injury.

During the 1980s to late 1990's an unfortunate thing started to show up in the market. Whiplash became very common in auto injuries and this brought into the picture the professional personal injury attorney to help patients resolve their injury claims. This time period was insanely lucrative for both the attorneys and doctors that worked with these injuries. But what made this so bad is that the system rewarded these professionals more if the patient did not recover quickly or better yet if they did not recover at all!

You see in the 80's and 90's the typical settlement for an auto accident case was three times the medical expenses that were expended trying to rehabilitate the patient. This, of course, produced problems and abuses that lead to the minimization of this condition by the insurance industry. The how and why that occurred may not be apparent at first so let me explain.

You see during that time if I am your attorney, and I want to make money and the market educates me that your settlement is going to be three times your medical expenses and I get 33% of the settlement, what do I want you to have, \$2000.00 in medical expenses or \$30,000.00? If you have \$2000 in medical expenses you the client get \$2000, I the attorney get \$2000.00 and the doctor gets their \$2000 for the services that they rendered. But with \$30,000.00 in medical expenses we would settle for \$90,000.00 and I, the attorney, get about \$30,000, you the patient get \$30,000.00 and the providers get their \$30,000.00 bills paid for.

You can see where this had the potential to lead to?

Patient care seemed to be more about numbers and business and less about results. The environment at the time actually rewarded providers for poor results and penalized great results. If you could completely correct serious injuries for less than \$3000.00 in total care bills, many attorneys simply would not work with you because it cost them too much money in reduced settlements.

At that time there was no rhyme or reason or sound clinical rationale as to what diagnostic testing doctors did or why. It was just, the more the better and the more expensive, better yet. No one seemed to be incentivized for being able to produce cost effective results.

Now in the mid 1990's general healthcare reimbursements to doctors dramatically changed and this new managed healthcare started to significantly reduce medical, chiropractic and osteopathic reimbursements. A small percentage of these doctors started to specialize in auto injuries because there were no reductions in payments in

this area of insurance reimbursement. The largest providers at the time were marketing their practices in a big way, often having the largest yellow book ads and the most local bill board ads, as did their counterpart attorney's. It was wildly lucrative and none of it was based on how good you were as a treating doctor, or as an attorney for that matter. Things were out of control.

In the 2000's insurers started to fight back with programs to reduce these expensive medical, chiropractic, and osteopathic procedures with two significant means:

1. Systemized claims management programs that replaced humans with artificial intelligence software, one of the first most known being the insurance industry program called "Colossus". With Colossus the insurance industry could replace human emotion with a calculated and emotionless artificial intelligence that spoke a new language and completely changed the game when it came to issuing monetary compensation for injury. Gone were the days of settling for three time's medical expenses.
2. The new artificial intelligence was combined with the development of a very intricate system of "insurance fraud" procedural programs designed to fight the abuses that had occurred in the 80's and 90's. How else would you address this issue?

These procedures were successfully used to reduce the insurance costs for spinal ligament injuries or any injury for that matter. Remember spinal ligament injuries are very common in situations like automobile accidents. Everyone in the field was a target of these programs; especially the doctors that were trying to bring attention to just how serious these spinal ligament injuries could be!

In order to minimize these spinal ligament injuries called in slang terms "whiplash" the insurance industry began a systematic campaign and called this type of injury "just a soft tissue injury". This was done in the artificial intelligence system that the adjuster adjudicating these injury claims interfaced with every day. If you had a back or neck injury, these were just then considered a "soft tissue injury" and therefore they were minimal with no real need to pay out any benefits.

What was much worse was that any doctor that was trying to show how these injuries were more than "just a soft tissue injury" were attacked. They were often attacked as fraudulently trying to make something out of nothing for personal gain. Patients at the time (and still today) were attacked as malingerers or people who were faking injury for money.

Doctors that can find and properly diagnose spinal ligament injuries are some of the best doctors in the world at treating these injuries, yet they can still be the subject of attack. Some have had serious trouble with insurance companies attacking them as

fraudulent providers simply because they find the significant injuries that can legitimately require more benefits for the patient. For a number of years it almost seemed like these doctors were hunted for sport with little recourse other than for the doctor to go away, which is why unfortunately some of the best providers did not strive to work in the injury environment. They simply did not like the adversarial attacks that often came with the medical legal aspect of these types of cases. These attacks over the last 15-20 years are well documented in official court records.

Today there is overwhelming evidence that these are actually some of the most problematic injuries that you can have. Slowly we are starting to see the best doctors coming back into the injury field. We are also starting to see the doctors that are the best at getting results being rewarded with less insurance harassment and less allegations of fraud. At least from my professional point of view of 25 years this seems to be true.

In this time period, personal injury attorneys seemed to buy right into this idea that these spinal ligament injuries were just soft tissue injuries. It became common to have them push this idea onto the doctors that they routinely worked with. But worse, they began to steer providers away from the imaging procedures that identified these injuries themselves (x-ray, CRMA, MRI). How this was done is that they would call and let the doctor know that they did not approve of the testing and would advise them that they would stop with their referrals if they continued to test! This led to the worst scenario that could occur in the spinal injury field which was the, "The Blind leading the Blind". The attorneys, knowing nothing of the injuries themselves, began to direct care by directing their clients treating doctors on what imaging procedures they should or should not do. This was and is still being done today, in order to maximize profits and minimize settlement difficulty because all they were imaging was "just soft tissue injuries", which were of no value therefore neither were the procedures that accurately identified them. I cannot tell you how many times I have heard this from both attorneys and the doctors in the field that work with them.

All of this led to minimizing the condition, and in my experience making it now the number one cause of pain and disability in the world today. If you are in an auto accident and you come out of six months of care with chronic low back pain and get a settlement of \$2500.00 in your pocket for your pain and suffering, you then are sent on your merry way. This happens all the time with no one asking how is that patient who now suffers from chronic low back pain going to cover the \$9000.00 to \$19,000.00 costs the American Pain Society says you are going to have in a year¹¹? I am not saying that everyone who gets a back injury should get hundreds of thousands of dollars, what I am saying is that consumers need to choose the professionals that they work with very carefully so they can reduce the risk of a negative outcome both physically and financially.

So you see greed and ignorance of this condition have played a very significant role in allowing it to rise to the epidemic condition that it is understood to be today.

As a matter of fact today the worse accident you can have is not from the first injury, but rather from the second one; working with professionals, doctors and attorneys that do not understand the condition itself. That it could cause problems that may be permanent, painful and progress, which could have been potentially avoided altogether!

The key today is finding the providers, doctors and attorneys that understand this condition and can produce great rehabilitation results and can document in a way that significantly assists you with getting any benefits that you are rightly entitled to. An aligned team will always produce much better results!

5. The American Medical Association and other consider this to be one of the most significant injuries that you can have.

The biggest problem in the medical legal system with injuries, compensation etc., was how do our doctors objectively and standardly determine if permanent body damage has occurred with an injury? Second problem was if permanent damage was agreed upon how do we objectively and standardly determine the effect that this injury would have on a person's ability to perform their basic activities of life without pain, discomfort, or suffering. This monumental task was accomplished in 1970's when the AMA published the first *Guides to the Evaluation of Permanent Impairment* which could be easily renamed the "Guides to the Evaluation of Permanent Injury" because that is exactly what impairment is: a condition that injures the person's ability to function.

This book is the "Kelly Bluebook" of body damage and every doctor treating injuries and every attorney representing injury cases should be very familiar with it. They should readily be able to use it to represent to anyone that you have a permanent injury, and the level of negative effect on a person's life this injury is agreed to have. By the way the word objective means anything that can be verified by others. The chair you may be sitting on can be verified to exist by others, how you feel in it cannot.

When we look at the AMA Permanent Injury Guides I think the stated purpose of this book says it all. "The primary purpose of the guides is to rate impairment to assist adjudicators and others in determining the financial compensation to be awarded to individuals who, as a result of injury or illness, have suffered measurable physical and/or psychological loss."¹² That is to say these books are made so that anyone can look up injuries to any body part and see what the agreed upon negative consequence is, or an *impairment rating*. Let's say you have excessive motion of the spinal segment from a ligament injury that is ratable. I look up the injury and this book states that everyone

agrees this injury can cause a negative consequence to 25% of your activities of daily living, which is reported as a 25% whole person impairment. 25% whole person impairment means 25% of your activities of daily living may be negatively influenced by this injury. While this is not a perfect system, it does prove that the condition exists, it will negatively impact your life, it is not all in your head, and it is a worldwide agreement.

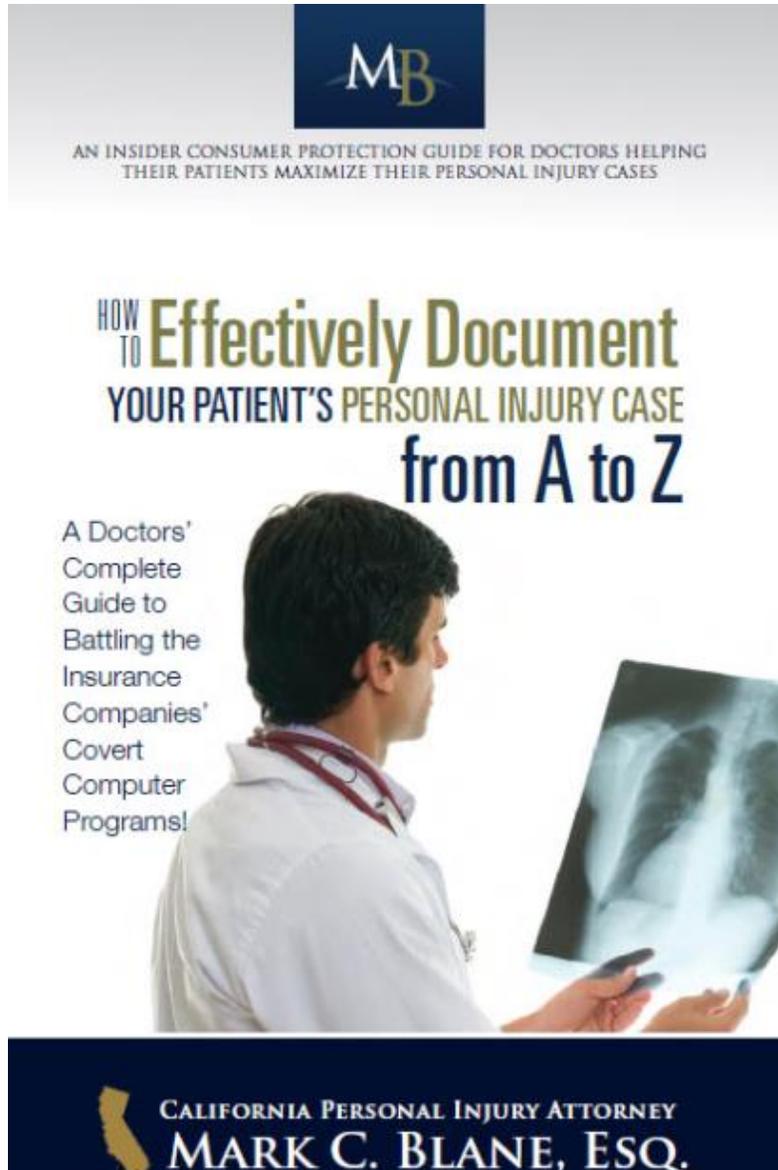
Now the key to this is it is not the treating doctor, your doctor that is stating this---IT IS THE AMERICAN MEDICAL ASSOCIATION!

So any injury doctor or injury attorney that is not fluent in impairment rating and the AMA's permanent injury assessment is way out of touch and can seriously reduce your compensation benefits, causing you to possibly be responsible for very large unpaid medical bills.

Once again, Spinal Kinetics put out a very good short video on the AMA guides called *Spinal Ligament Injuries --Was the AMA Wrong?* Found below.

<https://www.youtube.com/watch?v=ofmpiE5BP6g>

Mark Blane, a San Diego personal injury attorney, states this about the AMA Guides in his book *How to Effectively Document Your Patient's Personal Injury Case from A to Z* "...your biggest piece of medical evidence in terms of allowing your patient's lawyer to argue or substantiate appropriate case settlement value is, besides your actual documented injuries, is whether your patient has a medically documented impairment to a function of a body part or parts." He also states the following about the spinal ligament injuries. "This is probably the worse soft tissue injury diagnosis you could have from an accident. Essentially, it is a ligament instability injury. It affects the neck and lower back (the mid back is protected by the rib cage)" He goes on to say, "This could occur in a rear-end collision that damages ligaments of the spine. Such damage can affect your vertebra's proper range of motion. Blood can stagnate and cause poor blood supply in the spine, which can lead to degenerative conditions such as bone degeneration and early arthritis. You could also experience continual pain long after the accident. Post-accident, you should make sure to seek medical attention and the advice of a knowledgeable injury attorney. Some doctors and injury lawyers routinely miss these medical diagnoses."¹³



This book can be purchased on the Amazon Website.

The bottom line is this; you should always work with a doctor that knows how to find this condition. As a matter of fact I believe that this injury (the spinal ligament injury Mark speaks of here) is so important, so well documented in how you find it that any doctor that misses this injury should be found guilty of malpractice; if the patient can be shown to have suffered avoidable consequences as a result!

Why work with any doctor or lawyer that does not clearly understand your injuries?

6. Regarding this type of injury, the insurance industry has very specific documentation requirements for both your doctor and your attorney.

The insurance industry is often made out to be the bad guy in injury work and in my experience this is usually not the case, even though they too have caused huge issues in this area! When it comes to your benefits documentation is the absolute key! Who are the bad guys then? The bad professionals are the professionals that do not even know the basics of what any insurer needs for documentation. Insurers today still use artificial intelligence to adjudicate claims, which means that the adjuster who is going to complete a claim for you will be asked a series of questions from a computer. Computer Sciences Corporation owns the Colossus insurance software program and this is what their company states about that program on their company website:

Your adjusters can quickly interpret medical reports and look up **definitions of injuries**, treatments, complications and **permanent impairments** using AMA 5th edition data. **Through a series of interactive questions**, Colossus guides your adjusters through an **objective** evaluation of medical treatment options, **degree of pain and suffering**, **degree of permanent impairment** to the claimant's body, and the **impact of the injury on the claimant's lifestyle**. At the conclusion of a Colossus consultation, a summary of the claim is provided, **including a recommended settlement range**.¹⁴

Understand that in order for an adjuster to easily answer the questions that the computer is giving them, the answers have to be found in BOTH your doctors' reports and your attorney's report. In other words the attorney also has to state the same documentation facts if they are involved in the claim resolution process. So here are the typical questions.

- 1 **What are the injured parties' documented injuries?** All injuries are coded with an international coding system language called and International Classification of Disease 9th Edition code (ICD9). So the proper codes are entered in into the system which means your injuries go into it as long as they were identified and properly coded. Look up any injury on the internet and you will see that it has a corresponding ICD9 code. Sprain of the cervical spine is listed at 847.0 so 847.0 would go into the computer if you had this injury. If the doctor noted ligament laxity as an injury you would see a code for ligament laxity of the spine as 728.4, etc. If the environment update to a ICD10 they have to use ICD10 code.

- 2 **What are all the care procedures that were delivered to the insured by any health care provider?** These are also specifically coded in all of your medical records with international procedural codes.

- 3 **Does the injured party have any permanent injuries identified with a Permanent Impairment Rating?** This is the way the insurer knows that you have some sort of permanent problem; no impairment rating, no permanent problem.
 - If you have a permanent impairment it will ask how much? This is in the form of a number i.e. 2%, 10%, 25% etc.
 - If you have a permanent injury it may ask if this permanent injury now keeps you from doing any kind of activity that prior to the accident you could do. This is called any loss of enjoyment of life factors. These are things that you can no longer do as a result of your injuries. It is very important that they are included and well documented in your doctors' notes and in what is called your attorneys demand package. The insurer needs to know what you CANNOT do that you could do before the accident.
 - The adjuster will also be asked if there are any activities that you can do but only under duress since the injuries occurred. These are called Duties under Duress factors. Things that are now uncomfortable to do, but you can still do---they are just interfered with due to discomfort that is directly the result of your injuries.
 - If you have permanent impairment the software may also ask the adjuster to indicate if there is any documented future care needs that will be required to manage your permanent injury. This is called future care expenses that may be projected or anticipated to help manage your situation.

These actually make sense and all of this information is factored into a claim to adjudicate what benefits you are rightfully entitled to. These are logical and make complete sense but they are almost never found to be completely or accurately documented in either your doctors' notes or in your attorney's benefits demand package. This can cost you a lot of benefits and leave you with some very large bills that you may end up being personally responsible for.

So notoriously what happens is you received large care bills in which the doctor's documentation does not support the need for so your insurance company denies the bills and does not pay for the care. Your attorney takes this poor documentation and passes it onto the insurer because they do not know how to correct it. The unfortunate

result of both of these activities by both professionals is that your access to your rightful injury benefits is unnecessarily denied.

Let me explain this using another example; lightning strikes a huge oak tree next to your house and it crashes into the side of your house and damages (injures) two floors of your home, but your home repair contractors significantly under document the damage. Your insurer wants to pay for the damage that was documented which is a much lower number than will cover the actual damage. You may think the insurer is trying to rip you off and so you go out and hire an attorney. The attorney now does not know how to document your house damage properly so they cannot fix the problem---back documentation as so they just supply the original crappy documentation that is causing the problem in the first place. Is the result likely to change---no of course not—but now you have bad benefits and you have the attorney to pay as well, losing even more benefits.

This is exactly what I have experienced to be happening every day with injury benefits.

And when this under-reporting happens; of course the insurer is going to think that some sort of fraud is being perpetrated, and of course your attorney and even your doctors will all say it is the insurance company just trying to save money, while in fact it may indeed be the ineptness of both your attorney and your doctors that may be the problem.

So in summary you doctors and attorney must report these basics in their reports. They must report:

- 1 All of your injuries and care properly coded.
- 2 Any permanent damage must be reported with an AMA impairment rating.
- 3 Anything you could do before injury and now cannot do as a result of your injuries, called Loss of Enjoyment of Life Factors
- 4 Anything that you could do pain free prior to the accident and now can be done but only under duress, called Duties under Duress Factors.
- 5 If you have permanent injuries identified, all of your future care your doctor may be advising that you may need has to be formally documented by your doctor (s) and reported by your attorney.

Pretty simple yet 98% of the files that I have ever checked from both the doctor and the attorney are missing this basic information. That is why it is so important to find a doctor and if needed an attorney that understands these documentation needs. Otherwise you could seriously suffer financially with loss of rightful benefits that were RIGHTFULLY denied, simply because of documentation blunders that could have been avoided.

7. It is very important to have a doctor and an attorney that understands all of these simple points.

Why any have doctor treating you that does not understand the condition that you have or even worse, is missing what you really may have? Doctors who understand this spinal ligament injury know how to properly image it (X-ray, CRMA, MRI). They know how to properly identify both the severity and the location of this type of injury. If they do not and you are treating with them, in my experience your chances of an optimal recovery can be significantly reduced, which means that you may needlessly suffer for the rest of your life. Before you treat with any doctor for a spinal ligament injury, a sprained back or neck, for whiplash, make sure the doctors knows how to locate and determine the severity of this injury. How hard is it for a doctor to take some x-rays and send them for an accurate spinal intersegmental motion study of the injured area? It's not hard at all, so do not tolerate those who do not know what you now know!

Today it is equally irresponsible to just hire any person injury attorney to help you. You are going to be paying them a good chunk of your money for what in many cases is not so much legal work on their part, which is why they do not charge by the hour in personal injury cases. Now I am not saying that personal injury attorneys do not work but I am saying that they do not do much legal work and rather just become more of a settlement broker than an attorney. I say this because law is practiced in a courtroom, yet it is reported nationally that only 4-5% of any injury cases ever end up in court---4-5%!

Since you are going to be paying them a good amount of your money out of any of your benefits, you should hire an attorney that understands both your condition and what the insurance companies documentation needs and they should be able to explain both to you. They also need to understand what the common testing procedures are for these injuries, i.e., x-ray, CRMA, MRI. They need to be familiar with injury coding to make sure all of your injuries are properly listed in their final demand report. They need to include your impairment rating, your loss of enjoyment of life (LOE) factors, and any DUD, Duties under Duress factors from your permanent injuries.

If these BASIC things are not in their final report to the insurer for your settlement request your chance of getting a fair benefits package are slim to none in my experience. Your medical records are yours and you can get a complete copy of them anytime you want to. Remember it is stated that 40% of diagnoses are wrong and this can cause you injury, and in some cases a lifetime of avoidable pain and suffering. If you think something has been missed or is missing in your file you can ask your provider to correct that.

When you hire an attorney, they are working for you and anything in their files including their demand package or settlement report is yours. You can ask your attorney to review it with you at any time and I highly recommend that you do. Have them thoroughly explain everything that is in it and, if the above stated items are not in it, have them explain why. Remember they are working for you---you are their employer if you will. If you want something reported to the insurer by them, you have every right to demand that they do it for you.

Doctors and attorneys are paid very well. They may whine that is not the case, but usually they whine from some of the nicest neighborhoods in America. It is okay that they should be pressed to be highly effective and in my professional experience the doctors and the attorney that are truly good at what they do will not mind at all. As a matter of fact they will appreciate an educated consumer.

I really hope that you will take the time to apply what you have learned here. Do not take these spinal injuries lightly. Find a doctor that knows or specializes in this type of injury and then follow everything they say to do in the letter. Ask questions yes, but follow what they say to do as they have usually put many before you successfully through this process!

I want to conclude with my thanks for taking the time to read this through to the end and to give me the opportunity to provide you with some insight that can truly help either yourself or the people that you care about. Thank you.

I also want to thank the truly gifted doctors that have persisted through the storm of misinformation that has existed, and instead stayed the course and truly provided great results for the many patients that suffer through these injuries!

I want to thank the attorneys that have stayed current on both the significance of these injuries and what the insurance industry documentation needs are? These are the attorneys that do NOT interfere with patient care, but rather become a huge support to both their client and the doctors that serve that client.

Lastly---use the information in the report to help you choose your medical and legal help wisely, your health and finances can be detrimentally affected, perhaps permanently with the wrong choices---so choose as wisely as you can and always ask questions! Remember these professionals are working for you!

Thank you for sharing this time with me!

Sincerely,

Jeffrey A. Cronk, DC, JD

CEO American Spinal Injury & Impairment Consultants

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