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Written testimony of Keith Overland, DC, CCSP

For

Children's Committee

House Bill 6722

2/17/15

Dear Senator Bartolomeo, Representative Urban and members of the Children's Committee:

My Name is Dr Keith Overland, I am a Chiropractic Physician in Norwalk CT and I live in Wilton CT. Over my 33 year career in Connecticut, I have focused my practice on the treatment and prevention of sports related injuries. In fact I was honored to serve as Chairman of the Connecticut Governors Committee on Physical Fitness and Health for 4 years. In addition I was also appointed to serve as a member of the State of Connecticut Board of Chiropractic Examiners. Most recently I have just completed my term as President of the American Chiropractic Association and now serve as the Chair of its Legislative Committee.

Professionally, I have served on the medical team for the NY Mets baseball team, The 2002 United States Olympic Speed Skating Team and for many years as a doctor and board member of the Nutmeg State Games here in Connecticut. I also have worked as a team doctor on the sidelines of several local high schools.

The experiences in my roles outlined above and as a 30 plus year practitioner gives me the confidence to ask you to favorably support an amendment to House Bill 6722 that would add chiropractic physicians licensed under chapter 372 to the list of health care professionals in Bill 6722. Due to this exclusion the patients whom we serve are being asked to make unnecessary additional appointments and expend additional costs for a duplicative service.

Yesterday, a 16 year old young man came to my office with his dad. Both are long time patients. He was in a state wide wrestling championship on Saturday. As it turns out he was thrown to the mat by a competitor and experienced sudden head trauma and neck pain. He was not evaluated by the ATC at the tournament. He presented to my office on Monday morning. He had a mild headache and moderate neck pain. After speaking with the athlete and his dad, I decided to administer the most current sport concussion assessment tool called SCAT3 and performed a complete neurological assessment for traumatic brain injury. I determined that he had a mild concussion and sprained neck. I reviewed all of the symptoms, the necessary diagnostic steps, and the recommended treatments

for his care. Of course like all athletes his first question was if he could compete in the "New England's" this weekend. I explained that given the findings we can offer all of the necessary treatment to prepare him to play. However based on an updated evaluation we would have to wait until the end of the week to make a return to play decision. I then realized that based on the 2010 law I could not make the return to play recommendation.

In looking at the law I was surprised to see that he could be assessed by an MD, a DO, a physician's assistant, an advanced practice register nurse and or an athletic trainer, but not a doctor of chiropractic.

While I would not expect your committee to be fully familiar with the education, training and regulations surrounding each health care profession licensed in the state, it does make sense for you to understand that the current law excludes the profession that has educational hours that are equal to or far exceed those in the list of professionals currently named in the law.

For example the Council on Chiropractic Education, the chiropractic education accreditation arm approved by the United States Department of Education, states all doctors of chiropractic must be trained to act as primary care providers (physicians). More specifically, in Connecticut at the University Of Bridgeport College Of Chiropractic according to their immediate past Dean of the college says regarding their preparation for clinical practice:

"Students are provided a strong foundation in head and neck anatomy, neuroanatomy, neurophysiology, neuropathology, biomechanics and kinesiology in the first two years of their training. All students perform extensive dissection of the head, neck and brain on human cadavers. A series of clinically oriented courses build upon these basic science concepts, beginning with physical examination of patients and detailed orthopedic and neurological assessments. Clinical science coursework relevant to traumatic brain injury and concussion include epidemiology, pathophysiology, signs and symptoms, differential diagnosis of epidural and subdural bleeding, concussion and post-concussive syndrome, diagnostic imaging, neuroplasticity, field assessment and principles of management. Throughout the didactic curriculum and the clinical internship, students work with case scenarios emphasizing traumatic brain injury. Students may also obtain training in types of technology used in evaluating athletes before and after head trauma, including the OptoJump optical gait system."

You will find that several of the professions listed in the current law simply do not have this level of training and preparation for evaluation and treatment of Concussion patients. (If you would like to review a comparison of training in Neurology in the various professions I would gladly provide you with those figures.)

-In my patients' case I mentioned above, if my examination and test results indicated that further medical evaluations were necessary an appropriate a referral to the neurologist would be made.

- If in my patients case he did not fit the criteria as described in the SCAT3 sport concussion assessment tool for return to play. My patient would not be allowed to return to sport.

-Like in any other profession a qualified licensed professional should be able to practice to their scope of practice as defined by state law and regulations. One such regulation currently allows a student patient to be returned to sports activity if the doctor of chiropractic removed him/her from such activity. This law in my view inappropriately supersedes a public act that has served the public well for almost 30 years.

In summary, a chiropractic physician licensed in the state of CT is trained to examine, diagnose, manage, co-manage or refer any and all patients who enter their office. This includes patients with symptoms of concussion.

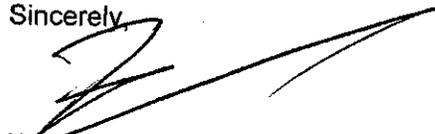
I certainly understand the current concerns regarding the epidemic of concussions in our society and the need for up to date guidelines on care and management. However, like virtually every other profession we are required to maintain 48 hours of CE every 2 years. This allows us to stay current with the literature on concussions and virtually all other conditions we care for. Concussions are no different and shouldn't be treated as such.

I urge you to take another look at the extensive education, skills and training by our Connecticut Chiropractic physicians. I am certain you will soon be reminded of the high quality of care we offer Connecticut citizens. By singling out one condition and forcing my patients to seek additional evaluations and/or care by another provider seems unnecessary, burdensome, costly and a poor public health policy.

I would be happy to provide you with any additional details, sources, or answers to any questions.

Thank you for your consideration.

Sincerely,



Keith Overland, DC, CCSP, FICC

