DATE: October 8-9, 2011
TITLE: Cox® Seminar/Part III -- The Cox® Technic System for Management of FBSS, Cervical, Thoracic, Low Back, Pregnant Back Pain
TIMES: Saturday 8am-5pm, Sunday 8am-Noon
INSTRUCTORS: James M Cox DC DACBR; Ram Gudavalli PhD; certified doctors
TOTAL CE HOURS: 12
LOCATION: Opryland Hotel, Nashville TN

PROGRAM DESCRIPTION:
☐ THE VISION: Dr. Cox envisions Part III Cox Seminars as the course for the technique and its integration into healthcare and the chiropractic practice to shine. Part III highlights the latest in Cox Technic research, application, treatment refinement, clinical success. Dr. Cox will present research and recent published statistics, but he opens the weekend to Dr. Gudavalli to share research and attendees to share their experiences from working in integrative facilities to private practice, from treating the common neckache to the most painful arm pain and leg pain. Part III is the forum to enhance the ORAL TRADITION of Cox® Technic’s clinical success with documentation.
☐ THE METHOD: Lead by Dr. James Cox, founder of the Cox® Technic System for Flexion-Distraction and Decompression Adjusting, clinical applications, protocols and outcomes are presented for clinical success in relieving pain from cervical, thoracic, lumbar, pregnancy-related pain and other conditions.
☐ THE FOCUS: Part III delves into the clinical aspects of incorporating Cox® Technic protocols into the healthcare plan of the patients who come into the office. Part III shares successes, challenges, research outcomes.

PROGRAM TOPICS:
☐ Spinal Literature Highlights - Dr. Cox will share some of the latest literature findings and their impact on clinical practice.
☐ Federally Funded Research Findings that, among other excitements, guide a new application Cox Technic.
☐ Cox® Protocols - Dr. Cox will demonstrate hands-on application of Cox® protocols. Dr. Gudavalli uses the force transducer.
☐ FBSS - Failed Back Surgical Syndrome (Post Surgical Continued Pain) as a more prevalent condition coming to chiropractors for help is defined. Cox Technic for this condition’s care is highlighted.
☐ Cervical Spine
☐ Pregnancy-related back and leg pain radiculopathy
☐ Synovial Cyst
☐ Thoracic Spine adjusting
☐ Spinal Nutrition
☐ Basic Rehabilitation
☐ Community and Healthcare Colleague Outreach
☐ Clinical Case Reports - video, photos, discussion
☐ Examination, Patient Report of Findings,

PROGRAM OUTLINE:
HOUR 1 Spinal Research Literature Update
☐ PTs, DCs, DOs - Spinal Manipulation’s Role
☐ Latest published data on spine biomechanics and treatment: Chiropractic’s Role
HOUR 2 Cox® Technic Research and Application Update - Cox and Dr. Ram Gudavalli
☐ featuring Loyola/Palmer Cervical Spine Biomechanics research update.
☐ featuring the pressure transducer to measure forces during Cox® Technic application
☐ Ram Gudavalli, PhD, principal investigator of flexion distraction spinal manipulation federally funded research studies will present the biomechanical spine changes during flexion distraction (foraminal patency, intervertebral disc space increase in height, intervertebral disc pressure reductions, and range of motion manipulation). Comparison of flexion distraction spinal manipulation clinical outcomes compared to medical care for low back and leg pain and neck and arm pain will be delivered. The on-going NIH grant to study the biomechanics of the cervical spine under flexion distraction adjusting and the creation of a sham model which is being collaborated by Palmer College and Loyola Stritch School of Medicine and the Hines VA Hospital will be updated.
☐ Chiropractic flexion distraction and decompression biomechanics and clinical outcomes comparing chiropractic and medical care - data from Health Resources and Services Administration of the Department of Health and Human Services federally funded research studies:
☐ Neuropaxia to neurortlesson decision making in treating failed back surgical cases
☐ Synaptic relays of sensory and motor information in flexion distraction manipulation
☐ Long term follow up outcomes comparing medical and chiropractic manipulation of chronic low back pain
• The five effects on the triple joint complex under flexion distraction manipulation.
• Effect of distraction on disc degeneration in laboratory studies
• Changing face of chiropractic spinal manipulation in the growing incidence of spinal stenosis in our aging population
• Disc prosthesis - pros and cons
• Lipson principle of post surgical metaplastic proliferative fibrocartilage as a recurrent disc herniation - 2 cases reported
• Pre and post MRI studies of herniated disc and stenosis patients under conservative care - and do they mean anything?
• Precautions and tolerance testing in treating post surgical patients with flexion distraction and decompression manipulation based on the study of Panjabi, Willen, Wildereth, Schonstrom, Cox

HOUR 3
• Continuation of Research from Hour 2
• Cox® Documentation: Admitting, Coding, Decompression
  o Cox® Technic as spinal manipulation and decompression: A discussion of the intervertebral disc pressure reduction on flexion distraction and decompression adjusting with the stenosis reduction changes with flexion distraction adjusting. It is important to describe the clinical federally funded studies that have been and are on-going for the National Institutes of Health in documenting the biomechanical changes of the human spine during chiropractic spinal manipulation, namely flexion distraction.

HOUR 4
• Cox® Examination: Physical & Radiological Evaluation Discussion and Demonstration
  o Includes demo how radiology plays a role in exam with clinical findings
• Cox® Patient Education and Report of Findings

HOUR 5
• Cox® Rehabilitation
• Cox® Spinal Nutrition Essentials

HOUR 6
• Cox® Technic Awareness Building: Online, In-Community, In-Practice
  • How to base outreach on research and published literature

HOUR 7
• Cox® Technic in Clinical Practice
  o A Presentation/Discussion of Patient Case Reports - moderated by James M Cox DC DACBR
  o Cervical and/or lumbar stenosis, spondylolisthesis, disc herniation cases will be presented from Dr. Cox’s practice and attendees’ clinics who bring cases (exam findings and imaging) for discussion.
  o Technique Demonstrations incorporated

HOUR 8
• Cox® Technic in Clinical Practice (continued)

HOUR 9
• Cox® Technic Treatment Demonstration and Protocol: FBSS / Post Surgical Continued Pain Syndrome
  o Presentation of condition, examination findings, literature
  • Comparison of spinal manipulation to surgical outcomes for treatment of spinal stenosis and herniated disc patients
  • Failed Back Surgical Syndrome Defined (new term: Post Surgical Continued Pain Syndrome)
  • Plan for future research project(s) - participation opportunity(ies) explained
  • Costs & Management Options
    1. Comparison of spinal manipulation to surgical outcomes for treatment of spinal stenosis and herniated disc patients
    2. How much does chiropractic cost?
      a. Boyle / Weinstein / Juratli / Murphy
      b. Carey - why do 10% of cases cost 95% of the expense?
    3. Epidural steroid injection factoring into the surgical and non surgical care of post surgical cases and its value to the chiropractic physician
• Stenosis & Surgery and the FBSS/Post Surgical Continued Pain Patient
  1. What are the true outcomes of spinal surgery with and without fusion?
  2. What are realistic expectations for spinal manipulation in treating post surgical continued pain syndrome?
  3. The vital rapport between patient and doctor in these complex presentations?
Possible presentation of data collection by certified practitioners in the treatment of spinal surgery with postsurgical continued pain, both with and without fusion, in a Purdue University cooperative study. The program is presently being established and will be presented and opportunity for participation will be given to ten attendees.

- Demonstration of flexion distraction and decompression chiropractic procedures in the treatment of the above mentioned failed back surgical cases.
- Cases via imaging: Chiropractic flexion distraction and decompression spinal manipulation for the failed back surgical case (or those not receiving perceived expectations from surgery).
  1. Post surgical bolt and plate persistent and/or recurrent pain
  2. Vertebroplasty persistent pain following the procedure
  3. Degenerative spondylolisthesis: incidence, presentation of four cases with adjacent level fusion stenosis due to ligamentum flavum hypertrophy, disc herniation, and developed degenerative spondylolisthesis
  4. Ligamentum flavum hypertrophy stenosis case. How much relief represents a successful clinical outcome?
  5. Herniated disc adjacent to level of a disc prosthesis in a 20 y/o female
  6. Pre and post MRI study of an L4-L5 and L5-S1 herniated disc protrusion following endoscopic surgery - an interdisciplinary surgical and flexion distraction approach to treatment
  7. Three level decompressive laminectomy for spinal stenosis treated post surgically for continued pain
  8. 47 year old female with low back and right first sacral nerve root sciatic pain following L5-S1 laminectomy
  9. Surgical fusion for L4 degenerative spondylolisthesis and hip arthroplasty in an 80 year old man with left lower extremity sciatica. The 50% rule importance in such a case.
  10. Extraforaminal L5-S1 sequestered disc surgically removed with facetectomy and its post surgical care
  11. Discogram positive L4-L5 herniated nucleus pulposus in a 41 year old female successfully treated for right sciatic pain following epidural steroid and physical therapy care failed to relieve the pain and surgery is recommended

HOUR 10
Pathologies Revealed
- Pathological cases of back pain presenting patients from Dr. Cox’s patient library will be shown to aid in your diagnostic approach to spine pain. Included will be: plasmacytoma, multiple myeloma, metastatic carcinoma from breast, prostate, colon, ochronosis, Paget’s disease, synovial cyst, diastematomyelia, Arnold Chiara syndrome, brucellosis, sarcoidosis, Gas Nuclear disc herniation, ependymoma, astrocytoma, giant cell tumor, unicameral bone cyst, osteoblastoma, osteogenic sarcoma, nephrolithiasis, neuroblastoma, osteochondroma, and other pathologies for differential diagnosis of back pain.

HOUR 11
- Cox® Technic Treatment Demonstration and Protocol: Synovial Cyst
- Cox® Technic Treatment Demonstration and Protocol: Thoracic Spine / Long-Y-Axis
- Cox® Technic Treatment Demonstration and Protocol: Pregnancy / Sidelying
- Cox® Technic Treatment Demonstration and Protocol: Scoliosis / Mehta exercises

HOUR 12
- Cox® Technic Treatment Demonstration and Protocol: Cervical Spine/Arm Pain
  - Presentation of biomechanics, examination findings, literature, treatment
  - HRSA research grant updates and outcomes (clinical comparison and biomechanics)
  - Disc pressures in ranges of motion and long-y-axis
  - Published Literature: Cox® Treatment of Cervical & Thoracic Conditions, Herniated Nucleus Pulposus & Stenosis
  - Case Reports on video
  - Treatment Demonstration and Hands-on
- Closing Comments / Q&A

INSTRUCTIONAL METHODS:
- Instructors will give prepared lectures.
- Powerpoint presentations, imaging pictures, and videos will enhance the lecture format.
- Hands-on demonstration and practice utilizing The Cox® Table for flexion-distraction and decompression will demonstrate technique.
- Question & Answer sessions will be included in each section.