

# HOW TO AVOID THE PE BEING THE FINISH LINE FOR YOUR PATIENTS – PART 2

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In this training, we're continuing on from Part 1, so make sure you've completed that training before beginning this one. Part 1 finished with the Report of Finding 2, with the focus on timeline, ongoing process and ultimate goal, and we finished by reviewing their handout.

Now, the process continues with the ongoing visits, all the way up to the end of the PR. Remember, there is no such thing as 'the most important visit' (see 'most important visit' training!). Each and every visit gives you an opportunity to improve your patient's health and function, to demonstrate that you did so, and then to broaden their health perspective.

## VISIT TO VISIT – REINFORCING THE MESSAGE.

### BROADEN PERSPECTIVE

- Explaining and asking about the subluxation.
- Explaining the way you are being holistic – the why and what.
- Start predicting the types of changes they will experience – relevant to them (eighty-year-old granny may not be concerned about adding years to her life!).

### TIME LINE

- In predicting those changes, some will be a long way ahead. You can say, 'in the months ahead....' Or 'the changes I see in my patients as they are nearing maintenance care are...' or other such things. Now you are pre-framing a future of greater wellbeing that stretches way beyond those 6 or so weeks of initial care.

### PROCESS, NOT FINISH LINE

- As the visits progress, start to reference the PE. Get excited about it, predict what you'll see, and more importantly, repeat your message: After the PE, I will recommend further care, based on how well you progress. For most people that means gradually reducing frequency of adjustments as you get better, with more emphasis placed on you looking after yourself.
- Also repeat your ultimate goal: John, my ultimate goal for you is to have you feeling fantastic, tests back to normal, and functioning well again, and keeping you in shape with a monthly adjustment. The purpose of that is to not only help you continue to improve, but also to prevent you from going back to where you started in another few months or years. You are giving them two reasons to continue:
  - o Continued improvement – I refer to this as opposed to maintenance at this early stage, as we can't talk about maintenance until they have reached a much higher functional and health status.
  - o Not going back to where they were. This is a powerful motivator for many people – not losing what they have gained.

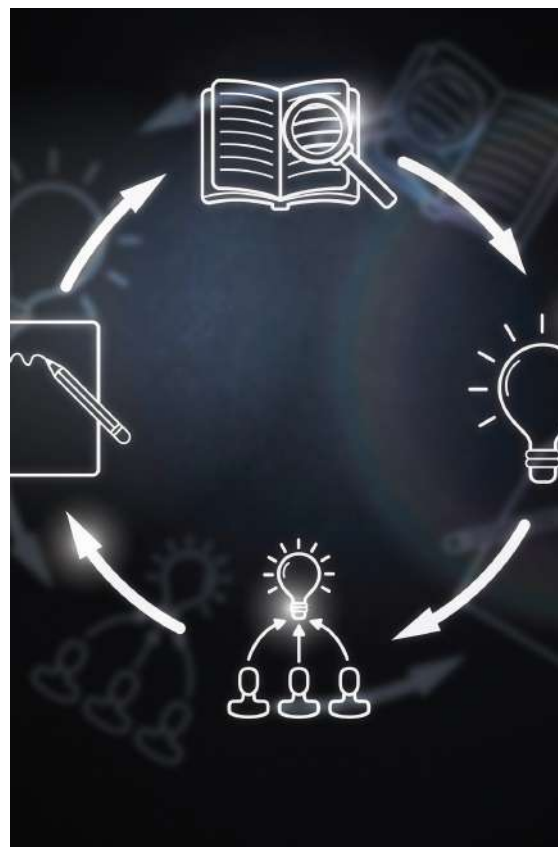


## IMMEDIATELY PRIOR TO PE

Set out exactly what will happen: On your next visit, John, we'll do your progress examination and repeat all the tests that were abnormal on your first visit. As well as that, I'll be asking lots of questions related to all the things you told me about when you first came in.

The visit after that will be your progress report. On that visit, we'll go over all your results from the Progress Examination (please, never use PE, CE, etc with your patients!), and discuss what's best for you from there. On that visit, I'll recommend further care, which generally becomes less frequent as your function improves. I'll base that on your overall progress from the tests and how you're feeling.

Being super-clear on the process. This is NOT and end point, but a progress check to see that we're on target and make the necessary adjustments to our schedule (and any other advice or adjunctive care) to continue their progress as swiftly and completely as possible.



## THE PROGRESS EXAMINATION (PE)

Set out exactly what you're going to do this visit: John, on this visit, we'll first repeat all those test that showed up abnormal on your first visit. Then I'm going to ask you lots of questions about everything you told me on that visit. Then we'll do your adjustment.

Thank them for filling in the progress exam form (or arrange for this to be completed post adjustment if not done). By the way, are you noticing the similarity to the Report of Findings?

On your next visit, we'll go over all these results and what's best for you from there.

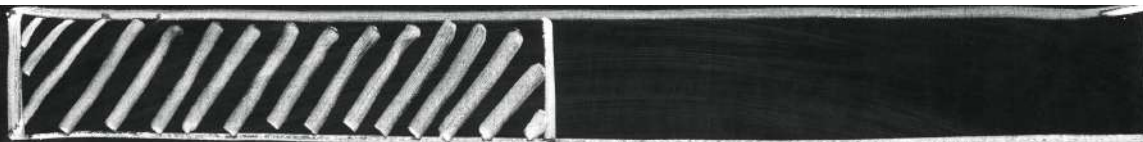
Tell them up-front, so they don't expect you to do a report on the spot. This avoids disappointment. The time for review both respects the process of you actually contemplating their case and creates respect and anticipation for the results from the patient.





## MAKE SURE YOU DO THE FOLLOWING ON THIS VISIT:

- Tell them of all changes and non-changes. That's much better – that was quite weak last time. Do you remember that from last time? There was no reflex at the elbow on your first visit! That's still the same.
- Tell them (briefly), or even better, ask them what it means. That's great, do you know why that's stronger now?
- Ask in great detail about every single sign and symptom you recorded in the first visit.
- Give them a brief overview, without too much detail. That's great, John, some really good changes. You're not as good as you can be yet, but you are improving well.
- Repeat what's going to happen: On your next visit, we'll go over all these results and what's best for you from there. On that visit, I'll recommend further care, perhaps becoming less frequent (give more concise info here if you are more certain, but not if you aren't) as your function improves.
- Lastly, repeat ultimate goal. John, my ultimate goal for you is to have you feeling fantastic, tests back to normal, and functioning well again, and keeping you in shape with a monthly adjustment. The purpose of that is to not only help you continue to improve, but also to prevent you from going back to where you started.



## THE PROGRESS REPORT (PR)

Once again, explain exactly what you're going to do this visit: John, on this visit, we'll go over your results from our progress examination and set out what's best for you from here on.

Sit down with them, prior to the adjustment, to go over your results.

**Review symptoms:** John, when you first came in, you had headaches, ..... Now, you have no headaches, much less of ..... and still some .....

Give them a detailed description of what and how much has changed, as well as what hasn't changed.

**Review Test Results:** When we look at your tests, now, you had 15 abnormal tests on your first visit, and now, 6 of those 15 have come back to normal, and 3 of the remaining 9 have improved.

As above, quick synopsis (I point to the numbers I have written while I do this, to help the visual dominant types) followed by more detail. Explain what the change means and ask questions (eg. do you know why that is?)



That's a great result, just what we hoped for at this point.

Also let them know how that fits with your expectations (eg. Just what we expected; better than I expected; slow, but still heading in the right direction). If it fits within your expectations, that's comforting to them, even if they secretly hoped they would be at 100% by now. If you are showing your confidence that all is going as it should be, they will feel more confident in your recommendations.

You're not as good as you can be, but you're heading in the right direction.

Let them know that they are heading in the right direction, but by no means are they 'there'. This does two things:

1. Assures them that there is much more room for improvement (I often state this fact).
2. Re-enforces that we are part way along a journey, not at an end-point.

### **Set out the next schedule**

John, any care from here is about making sure you continue to improve, and also making sure you don't go back to where you were on your first visit.

Again, restate those two reasons for continuing.

I'm going to recommend that:

- We continue on at 2x/week for ..... weeks
- Drop to once per week for .... Weeks

Set the appropriate schedule based on your findings (taking into account symptomatic and functional change, rate of change, previous care and damage/age/chronicity)



### **Set expectation for next CE and CR**

At the end of that period of time, we'll review your tests again, and I'll make recommendations as to what's best for you at that stage.

Again, re-stating the nature of the care – an ongoing process punctuated by re-examinations to ensure that progress and appropriate care and recommendations are being made and followed.

### **Re-state the ultimate goal**

Of course, John, my ultimate goal for you is to have you feeling fantastic, tests back to normal, functioning really well, and keeping you in shape with a monthly adjustment.

Does that make sense?

Asking this question is a quick check-in to make sure they're on the same page. Do not proceed if not the case. More on this in 'Report of Findings' and 'Handling the Crisis Care Patient'

There it is! Repeat this process over and over. The process becomes more of a conversation with a partner over time, rather than 'setting it out' for them at the beginning.