

A message from Dr. Ronald J. Farabaugh.....

After years of organization and hard work **The Medical Referral System™** is now a reality...*and available to you*. I've included several samples of letters, research summaries, forms, etc., below. **We've just updated the program with 12 new letters related to some very interesting research produce in 2004-2008!** Allow me to briefly explain this program and provide an answer to most important question facing a chiropractic practice: **How can one generate large numbers of quality new patients?**

Simple: We suggest building **relationships** using monthly letters, research summaries, report forms, documentation forms, PowerPoint templates, and an implementation manual....our system!.

The Medical Referral System (MRS) is a system and proven strategy that shows chiropractors how to build relationships with medical professionals in their community. **Relationships** build trust.....and a steady pipeline of **quality referrals** that helps build a strong and profitable practice. It's that simple!!

The Medical Referral System has five components:

1. 12-60+ **Letters** (related to specific research summaries) to send to local medical professionals of all disciplines.
2. 12-60+ **Research summaries** to be sent along with the cover letters.
3. 30+ **Forms** provide in two categories:
 - (a) basic documentation forms (therapeutic withdrawal and discharge summary forms, etc.) and
 - (b) 1-minute, at-a-glance faxable forms to communicate with medical professionals. These forms offer an alternative to time-consuming narrative reports, even though narratives are the preferred method of communication about specific patients.
4. **PowerPoint templates** that you customize to your office then send to local medical professionals to introduce/educate them about chiropractic and your office.
5. A 33 page **Implementation Manual** to guide you through the process of starting this program so you can generate a pipeline of referrals, improve your documentation, thus improve the financial stability of your practice.

No program like this exists anywhere else in the United States. If you desire to build relationships and generate referrals from medical professionals, this program is a must. Due to the size of this program, materials cannot be sent by email.

If you'd like to order either program, **MRS Basic** (12-24 letters/research summaries) or **MRS Complete** (60+ letters/research summaries) just complete the order form found on this website www.chiroltd.com and either mail or fax the completed form. If you have any questions, please do not hesitate to **contact this office at 614-898-0787 or call toll free: 1-800-241-7262.**

Sincerely,

Ronald J. Farabaugh, D.C.

Sample Letter:

Letter # 160: SMT, Medication, Acupuncture for Chronic Mechanical Pain

RE: SMT, Medication, Acupuncture for Chronic Mechanical Spine Pain

Dear Dr. xxxxxxxx,

I've had numerous patients relate that their primary care physician or specialist questioned the efficacy of spinal manipulation for the treatment of chronic spine pain. So I thought I'd send you another study (Muller, Giles. **Long-Term Follow-Up of a Randomized Clinical Trial Assessing the Efficacy of Medication, Acupuncture, and Spinal Manipulation for Chronic Mechanical Spinal Pain Syndromes.** JMPT. January 2005 Vol. 28, No. 1, pages 3-11) comparing the effectiveness of spinal manipulation, medication, and acupuncture for chronic mechanical spine pain. This was a follow-up study to an earlier work investigating the short-term results of these treatment regimens.

My clinical experience, in combination with a thorough review of the literature, reinforces my belief that singular treatment interventions are doomed for failure, while a well-rounded multidisciplinary approach improves our patients' chances of remaining functional and enjoying life. The paper states, "There is still sparse conclusive knowledge about the absolute efficacy of any intervention for chronic spinal pain syndromes, although Giles et al found a high level of patient satisfaction with a multidisciplinary team approach to spinal pain syndromes."

If you find yourself with a patient non-responsive to treatment, I would encourage you to consider a trial period of spinal manipulation. For many chronic pain sufferers, spinal manipulation in combination with traditional medical care and exercise works very well.

If you have any questions please don't hesitate to give me a call.

Sincerely,

xxxxxxxxxx, D.C.

Sample Research Summary:

Research Summary # 160

Muller, Giles. **Long-Term Follow-Up of a Randomized Clinical Trial Assessing the Efficacy of Medication, Acupuncture, and Spinal Manipulation for Chronic Mechanical Spinal Pain Syndromes.** JMPT. January 2005 Vol. 28, No. 1, pages 3-11.

Objective: To assess the long-term benefits of medication, needle acupuncture, and spinal manipulation as exclusive and standardized treatment regimens in patients with chronic (>13 weeks) spinal pain syndromes.

Study Design: Extended follow-up (>1 year) of a randomized clinical trial was conducted at the multidisciplinary spinal pain unit of Townsville's General Hospital between February 1999 and October 2001.

Patients and Methods: Of the 115 patients originally randomized, 69 had exclusively been treated with the randomly allocated treatment during the 9-week treatment period (results at 9 weeks were reported earlier). These patients were followed up and assessed again 1 year after inception into the study reapplying the same instruments (i.e., Oswestry Back Pain Index, Neck Disability Index, Short-Form-36, and Visual Analog Scales). Questionnaires were obtained from 62 patients reflecting a retention proportion of 90%. The main analysis was restricted to 40 patients who had received exclusively the randomly allocated treatment for the whole observation period since randomization.

Results: Comparisons of initial and extended follow-up questionnaires to assess absolute efficacy showed that only the application of spinal manipulation revealed broad-based long-term benefit: 5 of 7 main outcome measures showed significant improvements compared with only 1 item in each of the acupuncture and the medication groups.

Conclusions: In patients with chronic spinal pain syndromes, spinal manipulation, if not contraindicated, may be the only treatment modality of the assessed regimens that provides broad and significant long-term benefit.

Clinic Name and Address

PATIENT UPDATE

Patient: _____ Date: _____ File #: _____

Dear Dr. _____,

This note is provided to update you on the status of your patient. He\She has responded:

- ___ as anticipated,
- ___ more quickly than anticipated,
- ___ slower than anticipated,

with regards to his\her main complaint of _____.

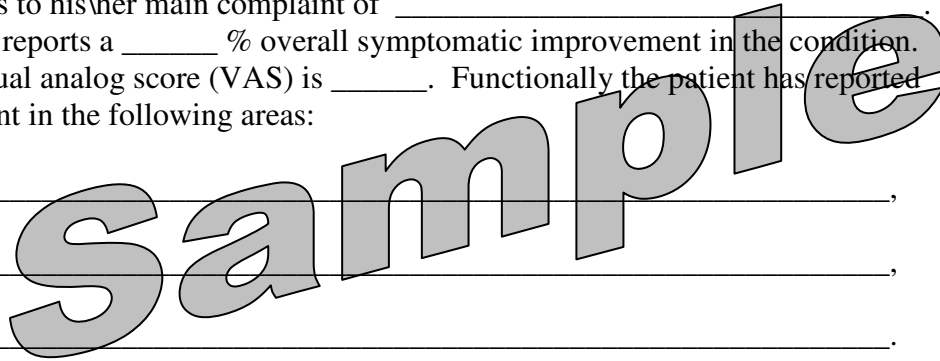
The patient reports a _____ % overall symptomatic improvement in the condition.

Current visual analog score (VAS) is _____. Functionally the patient has reported improvement in the following areas:

_____.

_____.

_____.



He\She is currently being seen on a _____x\wk basis and is scheduled for a re-evaluation in _____ weeks. Assuming no complications develop, we anticipate releasing the patient from care at either full recovery, or maximal medical improvement on or about _____.

Again, thank you for allowing me to participate in the care of your patient.

Sincerely,

Signature of Physician