2021 SB 2060

Senate Industry, Business and Labor Committee Senator Jerry Klein, Chairman January 11, 2021

Chairman Klein and members of the Senate Industry, Business and Labor Committee, I am Ben Bucher, CEO, Towner County Medical Center in Cando, North Dakota. I am here to testify in opposition to Senate Bill no. 2060. I ask that you give this bill a **Do Not Pass** recommendation.

In addition to being the CEO at Town County Medical Center, I am also a licensed Family Nurse Practitioner board certified in family medicine. I provide specialty care in treatment of chronic diseases such as diabetes and cardiovascular disease. My concern is with section 12 of the bill which would allow a licensed chiropractor to perform a preparticipation evaluation for participation in sports.

I want to start by saying chiropractors play an important role in health care delivery system for our patients. The chiropractic profession is a well-respected profession. Clearly chiropractors are experts in the diagnosis and treatment of musculoskeletal issues. I personally receive routine care from my local chiropractor at Towner County Medical Center. My opposition to this bill starts with all of the other systems besides the musculoskeletal system that are involved with a high school sports physical.

The ND high school sports physical starts with a review of past medical history, surgeries, medications, and allergies. Based on this information, the clinician needs to assess if any of the athletes' past medical history, surgeries, or current medications will put them at risk of an athletic injury. Does a chiropractor have full pharmacological and medical knowledge to be able to assess this?

Next the form asks the provider to screen for depression and/or anxiety. This is done with a PHQ-4 questionnaire (Patient Health Questionnaire). Do chiropractors have the training to recognize and diagnose behavioral health issues?

The history portion of the exam continues with a focus on the athlete's cardiac history. Several family history questions are combined with current symptoms the athlete may be experiencing that may be related to an undiagnosed cardiac condition. An undiagnosed cardiac condition, more specifically hypertrophic cardiomyopathy, is the greatest risk for sudden death

for high school athletes. In fact, we see this every year across the United States. If you've ever heard of a basketball player suddenly collapsing on the floor and dying, the likely cause was undiagnosed hypertrophic cardiomyopathy. The full cardiothoracic history is then combined with a physical examination of the cardiothoracic system. This includes listening to lungs sounds for the presence of clear bilateral lungs sounds, wheezes, rhonchi, or stridor, just to name a few sounds that may be heard. Does a chiropractor have the training to know what step is next or what is meant if any of these sounds are auscultated on a pulmonary examination? During the cardiovascular examination, the clinician first listens for appropriate heart rate and rhythm. Is there an underlying arrhythmia that may reveal a cardiac condition? Next the clinician assesses for appropriate heart sounds. Is there the presence of a murmur, a friction rub, or a gallop? If a murmur is present, the type of murmur needs to be assessed. This could mean a systolic murmur or a diastolic murmur and the severity of the murmur needs to be measured. Some murmurs are benign and will have no impact on the athlete's performance. Other murmurs, if not correctly identified, can result in serious injury or even death if undetected. At the conclusion of the cardiothoracic examination, if the clinician feels as though more tests need to be performed to assess if the athlete is in appropriate health to compete in sports, an EKG and an echocardiogram may be ordered. The EKG should be interpreted by the ordering clinician. My question here is if a chiropractor has been trained to perform a full cardiothoracic examination and trained to identify all of the issues I've just discussed; able to decipher various types of heart sounds, tones, rhythms, murmurs and what these findings mean. Furthermore, if needed, is a chiropractor able to order an EKG? Are they trained to interpret an EKG? Are they able to order an echocardiogram and make a decision of the athlete's ability to compete in sports safely based on the results of this echocardiogram?

I don't intend to continue to explain the entire assessment that is included in a sports physical in such fine detail, but I would like to list a few more health systems that are included in the sports physical that need to be assessed by an appropriately trained clinician. Other systems that need to be assessed include: Head, Eyes, Ears, Nose, Throat, Hearing, Lymph node assessment, Abdomen, Neurological, and Skin. You may have known a high school athlete that was prevented from participating in sports because they were diagnosed with mono during their sports physical. The athlete did not know they had mono going into the examination, they likely had no symptoms of mono. However, the mono was diagnosed during the examination based on physical findings and confirmed via blood tests. Are chiropractors able to order laboratory blood tests based on physical examination findings? Another important system I listed was skin. I'm not sure of the training chiropractors have with dermatology. Perhaps you've heard of a high school wrestler who could not compete in sports due to ring worm. This ringworm, or fungal skin infection was discovered during the physical examination portion of the sports physical. If undetected, ringworm is highly contagious, and in a sport such as

wrestling, it's not hard to imagine how quickly this skin condition would spread. Thankfully, the treatment of ringwork is quite simple; the clinician would order a topical or oral anti-fungal medication. Even if a chiropractor were able to detect this skin condition, would they be able to order the appropriate medications to treat it?

While I understand not all skin conditions are contagious and a small rash may not stop the athlete from competing, unfortunately, too many parents treat the annual sports physical as the child's annual physical. Ideally the sports physical should be in addition to a child's annual wellness visit or annual physical. We may only see this child in our clinic one time per year, as most children this age are in good health. This is why it is even more imperative that the child receive a full and thorough medical history and physical/psychological examination from an appropriate family practice provider. This may be our only chance to identify an undiagnosed condition.

Thank you. I would be happy to address any questions you may have.

Respectfully Submitted,

Ben Bucher, CEO
Towner County Medical Center