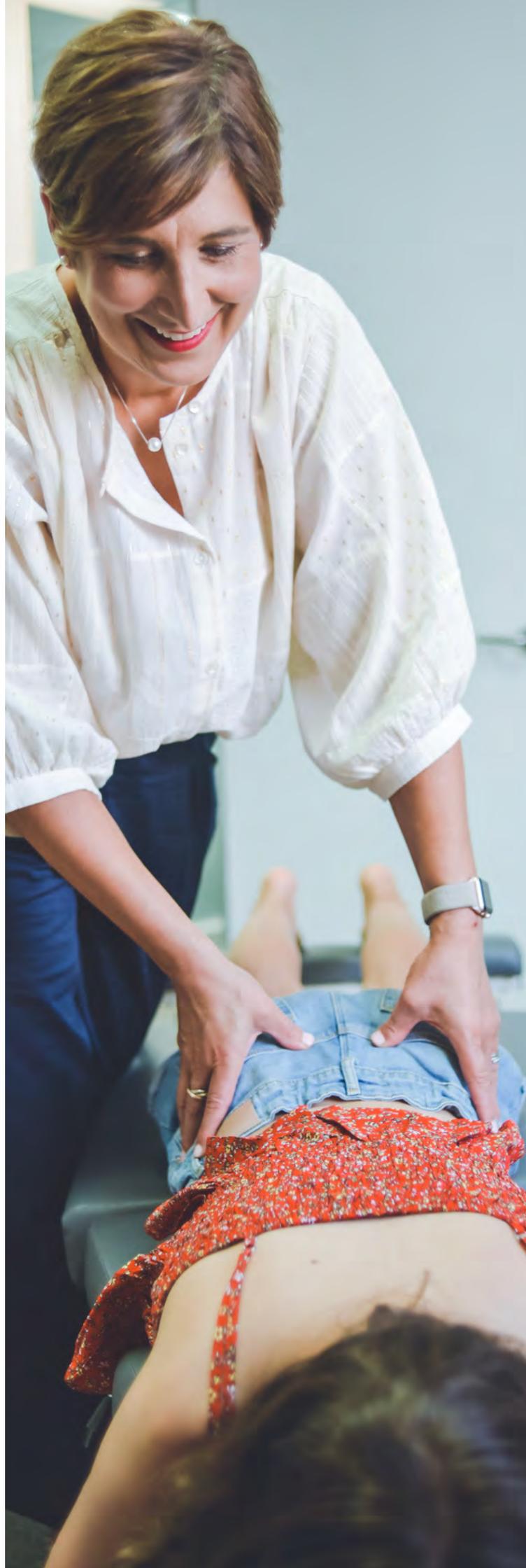


# ASRF CASE REPORT PROJECT GUIDE

2021

The Impact of Chiropractic  
on Stress, Immunity  
and Adaptability



# WHY CASE REPORTS?

*"A credible case report is able to capture the art of chiropractic in a science-based manner imbedded in philosophy." (Dr. Phillip Ebrall)*

Perhaps the greatest misunderstanding in research is the idea that case reports are low level evidence and that randomised controlled trials are what we need most of all.

In truth, case reports are a seamless match for the chiropractic approach. They give us an eye for the individualised approach to care, clinical relevance, and a trail of breadcrumbs that can lead to bigger studies. We can't do these bigger pieces of work if we don't first have these indicators of where to look and what to look for.

Case reports allow us to hold on to the detail and narrative lost to larger studies. They also allow

us to capture the transformations you encounter in your practice in a way that is relevant to other chiropractors, other recipients of chiropractic care, and indeed to researchers who are building their larger trials.

There's only one problem: writing up a case report can often be the last thing on a chiropractor's mind. Putting pen to paper can be daunting. You can be forgiven for asking "Where do I even start?" But we've got a way around that.

Let's work together to get this done, to capture the transformations you witness in practice without you having to do the hard work in writing them up.



**WE ARE MAKING THIS EASY:  
THIS IS WHAT WE NEED  
FROM YOU.**



## STEP 1: CHOOSE A CASE

For this project, we are looking for cases that are non-musculoskeletal in their presentation. By filtering out things like back and neck pain as *primary* concerns, we can narrow in on things related to stress, adaptability and immunity, which are areas of interest for the Foundation and for chiropractic more broadly.

2020 was the year of the pandemic. We know that stress can be physical, chemical or emotional, and we know that subluxations are related to either trauma, toxins and stress, so we are sure there were lots of non-musculoskeletal complaints that presented in your clinic.

Don't wait too long on this! If there is a case that springs to mind, write it down. That is most likely a good lead. There are two consent forms included in this pack, one for you and one for your patient. Both need to be signed and returned. The patient consent form guarantees that all identifying details are removed and anonymity is protected in any documentation that arises from this project.

Make sure you thank your patient (once they have read the information form and given their consent). This is an incredible service to chiropractic as case reports play a significant role in the chiropractic evidence base, and the way we can talk about the benefits of chiropractic.

## STEP 2: GIVE US THE BACKGROUND

This is as simple as telling us the details about this person and how they presented to your practice. We need to know basic things like:

- Age and gender (if disclosed)
- Were they new to chiropractic, or was this a recommencement after a cessation of care?
- What was the chief complaint they presented with, and any relevant medical or family history?
- What did they say about how they felt prior to commencing their care plan?

Now, we know how much many of you like typing. Thus, we are happy for you to record a voice memo on your phone or tablet and email it to [casestudy@spinalresearch.com.au](mailto:casestudy@spinalresearch.com.au) or text it to 0432 763 538 along with your name. We do *not* need names or addresses of patients.

# STEP 3: TELL US WHAT YOU FOUND

The good news is that most of this detail should already be in your notes. We are specifically interested in any pre-care tests or assessments you performed and what you found and diagnosed when you performed them. Please include any pre-existing diagnoses or other concurrent courses of medical or therapeutic interventions.

Included in this package is a diagram of the spine in both front and lateral views. You can mark any subluxation listings and make notes on this, or you can send us a copy of your notes if it is all there. If possible, de-identify the person first. We will shred these notes once we are done.

We just ask that the notes are legible. Again, if a voice memo is easiest for you, simply record a voice memo and send it to the email or phone number listed in step 2. The aim of this step is to tell the story in as much detail as you can, so please do this whichever way feels most natural to you.

**“Evidence from case reports is the path from the specific to the general, up from one patient then across and through another clinician’s filtration, down to their patient.”**

**(Phillip Ebrall)**

# STEP 4: TELL US WHAT YOU DID



Whether by voice memo, a copy of your notes, or by filling out an email, tell us what you did. Which checks, adjustments or therapeutic interventions did you use? How long was the person under care for, and did they follow that course of care according to the agreed schedule? Were there other interventions? If so, what were they?

The more detail you can give, without identifying them, the better. This includes any specific adjustments, techniques or protocols you are following.

Please include any challenges that took place over the course of care, as well as any self-reports of progress that the individual may have made over the course of the care plan.

Again, this detail may already be in your notes. We will work with whatever information you can give us in whatever format it comes.

# STEP 5: TELL US WHAT HAPPENED

Finally, tell us what happened during and after the course of care. How did the patient respond? Were there adverse events? How did the condition change or resolve under care?

The more detail you can give, the better. This includes, if possible, a paragraph or two from the patient detailing the differences they felt or perceived during and after care.

If pre-intervention checks or diagnostic tests were repeated post-intervention, please include this detail too.

It is important that we have evidence, something to compare in terms of pre-care/post-care, so the detail in this step is vitally important. If you have any thoughts as to the clinical significance of this case, or the mechanisms by which the changes may have taken place, add them in too! But don't make it hard for yourself: voice memos are fine.

## AND THAT'S IT!

From here, we do the hard yards. We do the literature review, the discussion section, the referencing, sorting and analysing. We will be in contact if we have any follow up questions or any pre-publication issues and we will keep you posted the whole way along.

You will be credited as the author of the case report, and listed alongside other contributors in the final document produced by the Foundation.

Thanks for being part of an exciting and important initiative that maps out what is happening in chiropractic practices across Australia. In focusing on the non-musculoskeletal presentations, we may gain precious insight into the impact of chiropractic care on stress, immunity and adaptation. This is a huge contribution to research. We couldn't do it with *you*.





## THE CHEAT SHEET

1

Choose a case, and discuss the project with the person whose case you wish to include. The consent forms need to be signed by both you and the person who has agreed to be in the case study, but they don't need to be sent until you've got all the information together.

2

Pull together the background information. What was the presenting complaint? What was the person's age, sex, medical or family history? Did they have any existing diagnoses? All this information is likely to be in your notes already. If not, send us a voice memo including all this detail.

3

Tell us what diagnostic measures you took, and what you found when you did them. This includes any x-rays, static or motion palpation, range of motion findings, subluxation listings, or any other tests and examinations you did as part of the patient history. Again, this should be in your notes. Either send us a copy of that, or pop us a voice memo.

4

Tell us what you did by detailing any adjustments or therapeutic interventions you used and how the person under care responded. Please be detailed! Let us know how many times per week they saw you, and which adjustments and therapies you performed. Photocopying your notes is fine. So is sending us a voice memo.

5

Tell us what happened. How did the person respond? What did they say about how they felt? What do you think this means in terms of clinical applications? What evidence do you have to support this? Please supply these to us to include in our report if necessary.

# PATIENT INFORMATION FORM

## **PURPOSE**

You are being asked to allow your chiropractor to use information about your chiropractic experience to write what is called a case report in collaboration with the Australian Spinal Research Foundation. This is completely voluntary, but your case has interesting or unique elements that may add to our understanding about chiropractic care.

Case reports are used to share information experienced by one patient during their clinical care that may be useful for other chiropractors. The initial intent for this case report is to go into a collated report by the Australian Spinal Research Foundation. This report, or any part within it, may be published in print or on the internet for others to read, and it may be presented at conferences.

## **ANONYMITY**

Please read this form carefully. Take your time to make your decision and be sure to ask any questions that you have. Your information being used for this case report includes your chiropractors notes, any relevant xrays or other tests, and a statement by you (if you are willing) about how you felt about your care and what happened as a result of it.

Your chiropractor, the Australian Spinal Research Foundation, and the Contractor they are using to collate this report (Clare McIvor Writing and Communications) are obligated to protect your privacy and will not disclose your personal information. Any identifying information such as name, medicare number, or contact details will be removed. When the case report is published or presented, your identity will not be disclosed. You will be kept anonymous.

Although your personal information collected or obtained will be kept confidential and protected to the fullest extent of the law, there is a small risk associated of weakened confidentiality by virtue of your unique experience.

## **VOLUNTARY PARTICIPATION**

You will not directly benefit from participating in this case report. The information that can be shared with other health care professionals, however, may improve the care that is received by others in the future. Allowing your information to be used in this case report will not involve any additional costs to you. You will not receive any compensation.

Taking part in this case report is voluntary. You may choose not to take part or you may change your mind at any time. However, once the case report is written and published, it will not be possible for you to withdraw it.

# PATIENT CONSENT FORM

Your signature below means that you have read the patient information form and have asked any questions you may have had about how your information will be used. It means that you give permission to allow your information to be used in this case report.

By signing this form, I confirm that:

- The case report has been fully explained to me and all of my questions have been answered to my satisfaction
- I have been informed of the risks and benefits, if any, of allowing my de-identified information to be used in this case report
- I understand that my name, address and any identifying information will be de-identified to protect my anonymity
- I have been informed that I do not have to participate in this case report
- I have read each page of this form
- I authorize access to my de-identified health information (medical record) as explained in this form
- I have freely and voluntarily agreed to participate in this case report

Name of Participant: \_\_\_\_\_

Name of Legally Authorized Representative  
(if participant cannot sign): \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

# CHIROPRACTOR CONSENT FORM

I have carefully explained to the subject the nature of the ASRF Case Report Project, provided them with the patient information form, and obtained and supplied the patient consent form.

I hereby certify that to the best of my knowledge the person who is signing this consent form understands clearly the nature, involved in their participation and their signature is legally valid. A medical problem or language or educational barrier has not precluded this understanding.

- I give ASRF and their project partner, Clare McIvor Writing and Communications, permission to publish in any and all appropriate publications or platforms.
- I understand that the Chiropractor/s listed in the form below will be acknowledged as the Author/s of any resulting Case Report. If more than one Chiropractor is listed, all will be listed in the citation in the order in which they are listed below.
- I understand that the ASRF will be acknowledged as having funded and facilitated any resulting Case Report, and that the ASRF has the right to free distribution and promotion of said Report.
- I understand that the intellectual property on the finalized and collated report (which includes numerous other case reports in collaboration with other chiropractors) belongs to the Australian Spinal Research Foundation.
- I understand that this case reports inclusion in the finished document is subject to approval from our Research Committee and may not be used if it does not fit within the project scope.
- I understand that all submissions must be received by the Foundation by June 30th in order to be considered, and I will be kept informed of progress.

Name of Chiropractor: \_\_\_\_\_

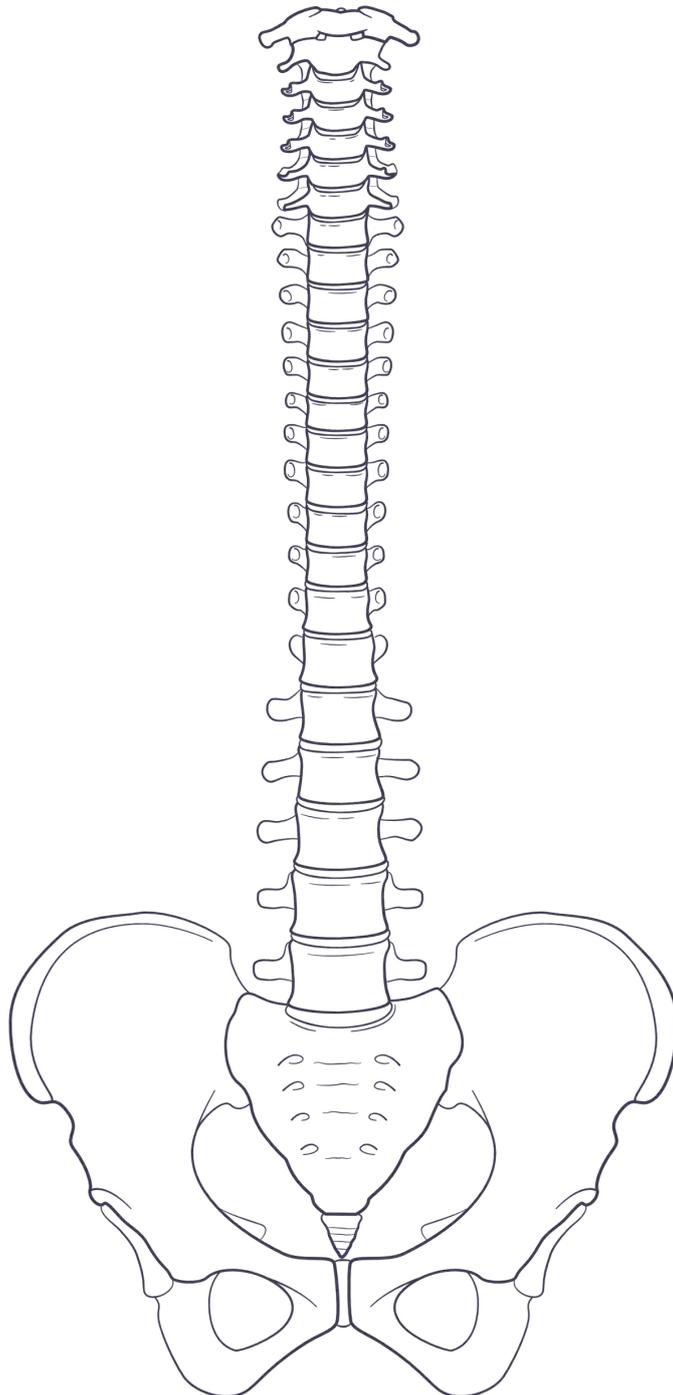
Signature: \_\_\_\_\_

Date: \_\_\_\_\_

# SUBLUXATION FINDINGS

In the interest of ease, we have included these next two pages should you prefer to note the subluxation findings against a diagram of the spine. If you have clear, comprehensive and legible notes you'd prefer to supply, then ignore these next two pages. If you think it will help, then x marks the spot.

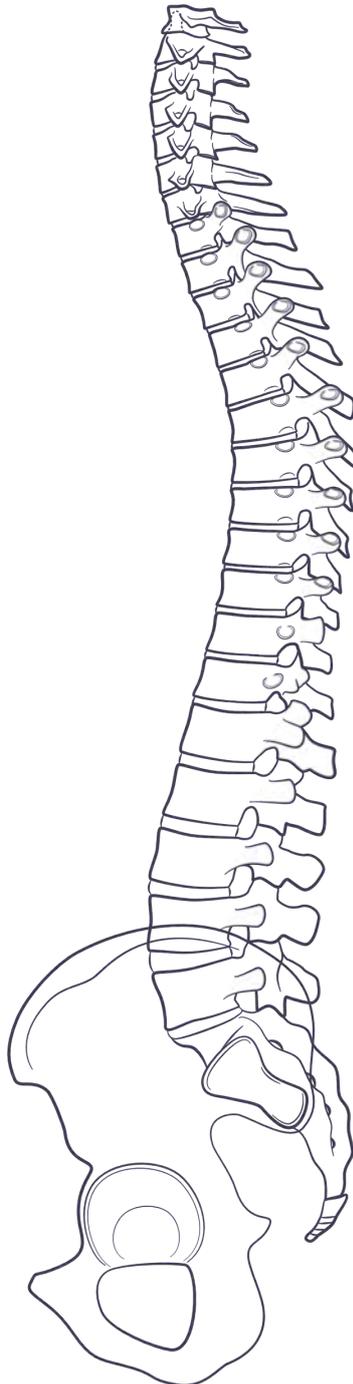
## SPINE - FRONTAL VIEW



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## SPINE - LATERAL VIEW





# ASRF THANKS YOU

Our commitment to furthering understanding and facilitating research about the vertebral subluxation is what drives us. We know that research is currency, and we firmly believe that what we offer to the world as chiropractors and members of the chiropractic tribe is unique and special. Thus, embarking on this case study project is a privilege we don't take lightly, and we thank you for your participation.

As mentioned above, all intellectual property will remain with the Australian Spinal Research Foundation. We have engaged Clare McIvor Writing and Communications, a long time friend of the Foundation (who you may know as the ASRF blogger) to work with us on this.

Clare and her team are as committed to the integrity, confidentiality and reliability of chiropractic research as we are, so you can be assured that your data is being treated securely and with complete observation of privacy law.

We can't wait to see what emerges from this exciting project. Thank you once again for taking part.

