Diagnostics for PT ISSUE 6

TRANSFORMATIVE LEADERS OF PT!

Meet the Pain Whisperers Panetta PT Offers Patients Hope

Across the U.S. Diagnostics Ribbon Cuttings & Expansions

DIAGNOSTIC STUDY

TREATING BACK PAIN AND SCIATICA IN TWO WEEKS

PLUS

Rehabilitation Benefits of Electrodiagnostics in Treating Back Pain and Sciatica



Join the most elite physical therapy private practice owners in the country at our engaging, educational and life-changing event.

Register for the groundbreaking 2020 Hands-On Diagnostics Summit in San Antonio. This is the only conference of its kind. Meet fellow PT Private Practice owners from across the U.S. who are enjoying the many benefits of adding Diagnostics to their practices. Learn the HODS Master Plan to achieve 5-10X profits; 62% better patient management and much more. Attend this practice-changing event and earn CEUs.

Agenda Highlights:

 Discover the Secrets to Bypass **Reimbursement Cuts** • Unearth the Hidden \$500,000 Profit in your Private Practice Meet HODS Members from Across the U.S. Attend Numerous Clinical **Workshops** Enjoy Eye-opening Mastermind Sessions with Top PT Private **Practice Owners** Create a Robust, 7-Figure Revenue Stream with Diagnostic Testing Implementation in your Private Practice • Offer your patients a reason for HOPE for their pain, via **Diagnostics tools** Join the Visionary Team of PT **Pioneers that Comprise HODS**

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FROM THE EDITOR

2020 is really here. When I was a child, I imagined a very different place than we see today.

As in all childhood dreams, my expectations were both beyond the possible yet also too timid. Technology has brought us the awe of instant access to fast-paced, evolving information and modern science keeps astonishing us with non-stop discoveries including life-saving medical treatments and cures. Though the current state of PT can be challenging, I see an abundance of beauty, disruptive positive ideas and optimism blooming today in physical therapy.

In this issue of Diagnostics for PT, you will take a journey into the future that is now a reality for Physical Therapy. Gone are the days when referrals were the sole lifeblood of a PT private practice. Forget the hardships of facing constant, lower reimbursements since there are now successful new systems – created by modern-day PT visionaries, who offer success for everyone in private practices.

Today, direct access to patients – with no referrals needed – is not only possible but also preferable for any private practice owner. Gone are the chains of relying solely on physicians or others, since even the heavy weight of dwindling reimbursements has solutions.

Read the expansive, explosive and life-changing interview with the 2 PT leaders who have changed the very landscape of clinics across the U.S.: Chad Madden and Dr. Dimitrios Kostopoulos. Their independent programs offered to the PT community are proven ways to turn your failures and fears upside down and embrace the success and stability you and your patients desire and deserve.

In this issue we reflect the optimism that captures the true spirit of all physical therapy.

Discover the success of Dr. M. Sabbahi, a brilliant doctor who shares his innovative research technology treating back pain. Your patients will thank you!

Read about a clinic owned by Roy Adams, located in the Indiana heartland, who was inspired by Dr. Sabbahi and created his own success story using Diagnostics in his private practice.

Enjoy some good news sent to us from 2 different women-owned PT practices from different ends of the country: Kentucky and Alaska. Look no further to see how Diagnostics helped two very different private practices expand and celebrate with the support of their communities.

When it comes to pain, meet the Panetta PT team, and see why the marriage of Diagnostics such as EMG and MSK Ultrasound work seamlessly with the Chad Madden systems, resulting in patients who show up in great numbers to find something no one else has yet offered many people in pain: hope.

If you look at the many success stories found in these pages, you will also feel a sense of hope.



Achieving your dreams – no matter your age or location – is possible today, in this brave new world of 2020. Just move forward!

Best, DIANE LILLI Editor-in-Chief Diagnostics for PT

Diagnostics for PT

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Medicare has announced a 15% reduction in reimbursement for PT when services provided by a PTA on top of an 8% across the board fee reduction of all PT services.

Dr. Dimitrios Kostopoulos DPT, MD, PhD, DSc, ECS Co-founder of Hands-On Diagnostics, Invites you to register for a free webinar:

"How to Bypass the Medicare Reductions for Physical Therapy"

In this free webinar you will learn:

- Why Medicare reductions can affect general reimbursement
- Diversification concept and its application to PT Private Practice
- What the implications of the Medicare reductions are for your practice
- How to calculate the cost of this reduction: it may not be what you think
- How to use a proven system to bypass current & future reimbursement reductions

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ABOUT THE AUTHOR:

Having been exposed to Physical Therapy for most of her life, Therese chose to continue in the family legacy of helping people live more comfortably and to help eliminate the pain people experienced when injured or after surgery. In 2013, Therese graduated from Stony Brook University where she received her Doctorate of Physical Therapy. In 2010, Therese graduated from Duquesne University with a Bachelor of Arts concentrating on interdisciplinary perspectives of health and wellness. Therese gained experience and training in a variety of settings during her clinical internships which included working in acute care/rehabilitation, early intervention/preschool and school age settings as well as outpatient rehabilitation and women's health.

Why Diagnostics & Breakthrough PT Marketing = Success in our Practice

By Therese Panetta–Young, Panetta PT

With direct access and the BTPT marketing - we are driving in patients directly from the public more and more. We are the ones responsible not only to come up with a diagnosis but also we must create a plan of care that outlines clearly to the patient how we are going to help get them from point A to point B. Ultrasound helps our team do that competently and confidently.

First we use the ultrasound to understand the extent of their injury. There is so much we can learn and see.

For example, for our shoulder patients; looking directly at the RTC muscles with ultrasound we can quickly identify if its tendinitis or tendinosis.

The most important reason to distinguish between tendinitis and tendinosis is the differing treatment goals and timelines. When we see tendinosis, we can explain to the patient there is no inflammation going on here. That is why anti-



Therese Panetta-Young of Panetta PT working with people at a recent workshop, where she utilized MSK Ultrasound

inflammatory medications will not work for your problem. In fact, they can do the exact opposite to the healing process as NSAIDs have been associated with inhibited collagen repair.

Our PTs are responsible to give the patients an educated estimation for the number of visits needed to fix the root cause of their problem. Using the ultrasound, we can help create an effective and accurate treatment plan factoring in the timeline for healing based on where they fall on scale & the severity of the condition.

We can take a dynamic video of a patient moving into abduction and then show them how it's not gliding and it's starting to bulge. We say, "This is what impingement looks like." Next, we put our hands on the patients and use our manual skills, as Dan Neff demonstrated, to decrease the impingement. We can go back and do another video and tell the patient "now it's sliding much better." We explain to the patient that not only do we see inside to the part of your body that is taking all the stress and causing you to feel pain but we take a step back at your whole body and look at the biomechanics of how you are moving overall to identify the reason that damage is occurring in the first place.

Sometimes we use it as a tool to help rule out that there isn't an RTC problem or tear in the shoulder at all. For example, I had a patient come in recently with difficulty reaching his arm up. He has a prescription for PT to the shoulder and he was waiting for authorization to get an MRI from his doctor. He had seen an orthopedic surgeon who already started telling him he would most likely need an RTC repair and they would continue to discuss his options after he gets the results of the shoulder MRI.

Using my clinical skills during a routine physical therapy examination I suspected it was not a pathology of the shoulder at all. I did a full Shoulder ultrasound and was able to clearly visualize all structures to be fully intact and healthy. Next step was to do the NCV/ EMG. We were able to identify a brachial plexus injury causing almost complete paralysis of the shoulder.

I feel fortunate we dedicated the time to learn these new skills as they have elevated us as professionals. Since we started implementing the diagnostic testing, we have become more autonomous and proficient providers.

Optimum Health and Wellness Physical Therapy Expands in Alaska

Diagnostics Touted as Breakthrough for PT

"For some patients, this has been a real game changer. The test is so quick and also very easy to perform. It's non-invasive, which has been very positive for patients as well. Our patients do not need referrals either – they can book directly with us."

Kelly Chick Comstock

Optimum Health and Fitness owner Kelly Chick Comstock happily cuts the festive red ribbon in her new location, which is double the size of her prior practice.

A cutting-edge physical therapy practice, founded on the delivery of personalized, comprehensive, and highly skilled physical therapy services, has now added state-of-the-art equipment and expanded Diagnostics technology to provide world class healthcare for local southeast Alaskan residents in its brand-new location.



Optimum Health and Wellness Physical Therapy, owned by visionary Kelly Chick Comstock, is proud to be offering a new model for physical therapy with Diagnostics at its forefront.

The pioneer spirit is alive and well in Ketchikan. People in Ketchikan are made of hearty stock and share a deep community bond that is tangibly felt by any who visit or choose to make Ketchikan home.

Kelly arrived in Alaska in 1995 for just a brief contract with Peace Health Hospital, but fell in love with the small island community, and has stayed on to change the landscape with her resilience, passion and determination to bring premium quality physical therapy services to locals.

She founded 'Optimum Health and Wellness Physical Therapy' in 2011 beginning with an emphasis in craniosacral therapy, then expanding into fitness, and growing her services and staff to now include electrodiagnostic testing and musculoskeletal ultrasound in addition to personalized skilled physical therapy services.

Offering Diagnostics for PT has led the practice to dramatically grow and also offer patients Diagnostics right in their hometown.

Referring to the addition of MSK Ultrasound to her practice, Chick Comstock said it's opened up new revenue streams plus better options for her patients.

"For some patients, this has been a real game changer," said Comstock. "The test is so quick and also very easy to perform. It's non-invasive, which has been very positive for patients as well. Our patients do not need referrals either – they can book directly with us."

The success and visionary spirit of Optimum Health and Wellness has resulted in a robustly expanding staff and now doubling of the physical clinic space to provide these services. The next time you imagine Alaska, envision one of the most elite PT teams in the U.S., offering Diagnostics to patients who no longer need to fly to the mainland for help with their issues.

"In regards to MSK Ultrasound, the customer satisfaction and amount of education and knowledge they get about their conditions is outstanding," she noted. "Being able to see what their pain is has resulted in extremely positive reactions from patients. Many of our patients also follow our recommendations, because they have a clear understanding of their issues."

To learn more about this HODS Approved Diagnostics Center, visit https://emgtestnearme.com/optimum-healthand-wellness-physical-therapy-and-diagnostics/





TOP: The ribbon cutting was packed with residents, business owners and patients. ABOVE: Guests were greeted with the sounds of success upon their arrival at the ribbon cutting in Ketchikan, Alaska.

Treating Back Pain and Sciatica in Two Weeks

Dr. M. Sabbahi, Professor Emeritus, Texas Woman's University, Houston, Texas

ower back pain (LBP) and sciatica is the 21st century nemesis and technology-age dilemma. Long I time sitting at your computer, longer period driving and lack of exercises exert unwelcomed load on our spine. Current evaluation and treatment unfortunately does not address the mechanical aspect causing the problem of LBP. Recent technology emanating from research using Electromyography (EMG) and nerve root testing during lying (unloading) and standing (loading), using H-reflexes (a nerve root function test) address the mechanical load on the nerve root during lying and standing (static test). Not similar to MRI or CT scan that take a snapshot of the spine in lying, the H-reflex test evaluate the mechanistic changes/effect of the compromised nerve root during static condition in lying and standing. This is followed by a mechanical/mechanistic testing of the compromised nerve root in the symptomatic leg during standing while patient move in different directions (8 directions) while testing the Soleus H-reflex. This will be carried in 3-D mode (Dynamic test). No other testing mechanism can test such loading on the nerve root in 3-D. Results of the static test (lying and standing) identify the limb side with more nerve root impingement; the direction of the pressure on the nerve root and the degree of such pressure during unloading and full loading. Results from the dynamic tests identify the trunk posture causing maximum nerve root decompression/release associated with maximum H-amplitude recovery. We call this posture, the Optimum Spinal Posture (OSP). The dynamic test also identify the trunk posture causing maximum nerve root compression/ impingement with H-amplitude depression. We call this posture the Unwanted Spinal Posture (USP). These two postures, OSP and USP are used to chart the treatment and management protocol. Treatment may include DIRECTION-SENSITIVE EXERCISES and 24/7 protocol including the sitting posture and sleeping posture.



Fig. 1. A spinal segment with disc herniation bulge (left) and a spinal segment with an illustration of possible direction of nerve root impingement in advanced arthritis.

PERIODS	INITIAL		MIDDLE		FINAL		MAINTEN ANCE	
WEEKS	1	2	3	4	5	6	7	8
Unloading exercise (prone)	3 x/y	week						
Partial loading (sitting)		3x/w	eek					
Full loading (standing)				2x/w	reek	1x/w	eek	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
Exercise types	Mo b. Ma nip.	Mo b. Ma nip.	Mo b. Ma nip. Stre	Mo b. Ma nip. Stre	Mo b. Stre ngt	Stre ngt Mo b.	Str eng Mo b.	Endurance in neutral posture
			ng	ng				

Using Innovative Research-Based Technology

Guest Faculty of Hands-On Diagnostics

Sitting for more than 7 hours/day in a posture that cause nerve root compression will not result in nerve root recovery. Similarly, sleeping in a posture that cause nerve pressure all night (8 hours of sleep/day) may result in severe morning pain in patients with LBP. Therefore, we instruct our patient to apply a book under his/her cheeks during all-time sitting. This posture will take off the pressure from the nerve root and make the driving/sitting time a treatment and not injury times.

Similarly sleeping in the OSP as designed in our office take off the pressure from the compromised nerve root causing a significant relief from the pain during sleep times.



DIRECTION-SENSITIVE EXERCISE (DSE) THERAPY is the next cardinal treatment approach. All physical therapists and chiropractic medicine exercises the patients in all movement direction causing possible injuries

and irritation to the compromised nerve root. Our innovative DSE therapy literally push the disc back to its normal place in the spinal segment causing a permanent nerve root relief. Completing this DSE protocol in daily physical therapy sessions and at home resulted in CENTRALIZATION OF THE PAINFUL SYMPTOMS TO THE SPINE. Such centralization phenomena provide an evidence that the compromised nerve root is moving to its natural position especially when the central spine pain is minimized. The whole testing and therapy protocol have been demonstrated to provide complete neural recovery in two weeks with daily/intensive therapy. Specific DSE therapy protocol must be followed by the patient for optimal recovery.

It is safe to say that with such aggressive and scientific technique the compromised disc can be return to almost normal condition with no to minimal return of the symptoms.

This technique has been developed based upon our research in neuroscience for the last several years, on healthy subjects and more than 2,000 patients with LBP and radiculopathy.

This technology provides significant relief in patients with large disc, up to 19 mm. in the lumbosacral spine.

An important aspect of this technology is that it is not dependent on medication or chemical substances that may cause unwanted side effects. It is non-invasive, show immediate effects and lasting results. Patient's symptoms decreased 30-40% after the first session, 50% after 2nd session with symptoms elimination within two weeks.

We have followed up our patients during the last several years post termination of the treatment protocol and showed sustained improvement/results with almost none of our patients required spine surgeries.

It is important to note that patient screening is important because some patients might not be a candidate for this treatment protocol. Patients with 3rd degree spondylolisthesis, patient with severe central canal stenosis and patients with prior spinal surgeries including spinal fusion may not benefit from this treatment protocol. We have 93% success rates in patients who are a possible candidate for the treatment protocol especially patients with sciatica/radiculopathy and disc problem up to 19 mm. bulged disc.

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Above: MRI scan before and at the end of the treatment program.



Fig. 2. A: Dynamic testing of soleus H-reflex in a patient with radiculopathy showing the reflex amplitude in the neutral stand and in different movement directions with the USP (decreased signal) and OSP (recovered) signal amplitudes. **B**; Location of the stimulus electrodes, **S**: stimulus electrode, **R**: recording electrode, **G**: ground electrode.

Table 2

Soleus H-reflex amp, MRI, pain intensity, and functional data; before and at the end of the treatment program.

Limb	Evaluation	Soleus H-reflex a	mp; mv	SLR	VAS	ODS	MRI disc
		Prone	Standing				herniation size
Right	Before After	4 1.5	4.5 2	90° 90°	0 0		
Left	Before After	0.01 3.25	0.01 2.75	30° 90°	7/10 1/10	96% 10%	19 mm 4 mm

*SLR: Straight Leg Raise, VAS: Visual analogue scale, ODS: Oswestry Disability Scale, mv: millivolts.

Sleeping posture RSB+LR a		Sitting posture Book under (R) ^{Hip} f
Exercise RSB + LR Unloading b	C C C C C C C C C C C C C C C C C C C	Partial loading g
Full loading In RSB + LR C		Partial loading h
Manipulation RSB+LR (Prone) d		Manipulation in RSB+LR During sitting İ
Manipulation RSB+LR (Weighted Vest) e		Strengthening Left Paraspinal muscle Book under R Hip j



"An MRI doesn't tell the whole picture. 80% of people who exhibit no symptoms would have a disc injury. When I do an EMG on someone, I can see the nerves' issues and help them. With EMG I see how well the nerve is conducting impulses and at the same time, we can also take pictures of nerves with MSK Ultrasound. This means we have two ways to evaluate. It's the X-Ray vision I wish I always had!" - Karen Eckardt

Meet the Pain Panetta PT Offers

Chad Madden Breakthrough PT Marketing Workshop Systems

By Diane Lilli

hristina Panetta and Panetta's COO Karen Eckardt are always busy in their bustling clinics, but when it comes to managing pain their energy knows no bounds. Panetta PT in Long Island is famous for a good reason: patients who have had no hope about dealing with issues find solutions at this modern, lively and always friendly practice that offers MSK Ultrasound and Electromyography (EMG).



Karen Eckardt utilizing EMG on a patient.

Panetta said their success is a combination of their intensely personalized professional care; the addition of Diagnostics and Breakthrough PT Marketing workshops systems to their practice and their fierce commitment to always being open to expanding their knowledge of PT.

"All things we promote are a true expansion of our services," Panetta noted. "Because of Diagnostics such as MSK Ultrasound and EMG, we have much better outcomes with patients. At the same time, improving average reimbursement is great for our practice, which the Diagnostics offer us. And, due to our training, we have board certified PTs in Electrodiagostics testing so we can fully bill Medicare for professional and technical components."

Panetta explained that it breaks her heart that much of the public comes to them with no sense of hope, since they have been told by numerous doctors that their conditions are untreatable or must be addressed via surgery.

Whisperers Patients Hope & Solutions

+ Hands-On Diagnostics for Patients = Perfect Blend for LI Practice



A crowd responds to the question: Are You In Pain?

"It may be patients are told they need a knee replacement but they are too young and will have to wait four or five years," said Panetta. "Or patients are told they have a herniated disc in their back that explains Sciatic, causing them intense pain, numbness or weakness and they just have to live with it. But these people are really suffering and most of the time, physical therapy can and will help them. Their biggest problem is that they don't know physical therapy will help them!"

The Panetta PT team offers ongoing workshops for pain and invite the public in for free education and demonstrations. When people suffering from back, neck, knee, shoulder and heel pain show up for these rousing workshops, the atmosphere quickly becomes a vibrant and upbeat community

event. In addition to these workshops, which focus on one pain issue per event, the Panetta team also visits schools, libraries, senior centers, gyms, and offices.

"We see a large funnel of people at our events that have no hope at all," said Panetta. "They raise their hands saying "I want help". Since we have implemented Breakthrough PT Marketing Workshop Systems and also incorporated our HODS MSK Ultrasound and EMG, these people have discovered hope again. We offer them direct access to getting knowledge and assistance – and Diagnostics is the perfect marriage in these workshops, since many patients need more than traditional PT."

At a recent Physical Education conference for all teachers

PANETTA PHYSICAL THERAPY



The Panetta team is ready to tame your pain.

in Suffolk County, MSK Ultrasound HODS certified Dr. Therese Panetta-Young and Karen Eckardt, ABPTS Board Certified in Clinical Electrophysiology, were on hand to demonstrate the power of Diagnostics to the public. During the event, it was non-stop for the team, as people lined up to see what their muscles and/or nerves looked like during a Diagnostic exam.

Eckardt said that it's common for pain to exist separate and apart from the area a patient feels pain, and that this is shocking to the people at these events.

"Symptoms can be confusing," noted Eckardt. "Situations where we pick up something unexpected, such as a problem from a person's neck when it's their wrist has an issue, is typical of what we do. EMG shows nerves in motion – unlike an MRI which is just a static image."

"When we treat where the pain is we see the nerve activity, so we actually see what part of the nerve is healthy or unhealthy."

Some examples of misdiagnoses from physicians resulted in unnecessary surgeries, as one patient demonstrated.

"I will never forget this young woman, in her forties," she noted. "She had a total hip replacement and three surgeries. After her last hip surgery, she still had pain and did not understand how it was possible. I did an EMG and discovered the entire time her pain occurred it was referred to her hip from her lower back."

The result?

"She did not need surgery," said Eckardt. "And, because of this discovery she needed emergency disc surgery."

Eckardt said the people often come in to the practice with films from an MRI, which can be misleading.

"An MRI doesn't tell the whole picture," she explained. "80% of people who exhibit no symptoms would have a disc injury. When I do an EMG on someone, I can see the nerves' issues and help them. With EMG I see how well the nerve is conducting impulses and at the same time, we can also take pictures of nerves with MSK Ultrasound. This means we have two ways to evaluate. It's the X-Ray vision I wish I always had!"

Panetta agreed.

"EMG and MSK Ultrasound blend together," she said. "It's such a beautiful thing to help so many people in pain."

To learn more, visit https://emgtestnearme.com/panettaphysical-therapy-and-diagnostics/

"We see a large funnel of people at our events that have no hope at all. They raise their hands saying "I want help". Since we have implemented Chad Madden's Breakthrough PT Marketing workshop systems and also incorporated our HODS MSK Ultrasound and EMG, these people have discovered hope again. We offer them direct access to getting knowledge and assistance - and Diagnostics is the perfect marriage in these workshops, since many patients need more than traditional PT."



TOP LEFT: Alongside the MSK Ultrasound unit, Dr. Therese Panetta-Young discusses Impingement with patients.

TOP RIGHT: Both Dr. Therese Panetta-Young and her mom, Panetta PT owner Christina Panetta, bring a spirited energy to their patients, along with Diagnostics.

BELOW: Dr. Therese Panetta-Young uses MSK Ultrasound on patients at a recent event in L.I.



FEATURE | COVER STORY

The complexities of diminishing reimbursements, the threatened autonomy of private practices and retaining top talent in Physical Therapy are just some of the serious issues threatening the PT community. We all know it's time for change, and with the newest assault on PT reimbursements spearheaded by Medicare, incremental changes within the PT community just won't cut it. It's time for action now. Luckily, a welcome disruption in the old PT model is already upon us, from two very different approaches that meet, surprisingly, in a new marriage of PT ingenuity, resulting in a daring and proven blueprint for success.

Transformative Chad Madden &

PT Visionaries Share 4 Key Lessons for Success

By Diane Lilli



Dr. Dimitrios Kostopoulos with Chad Madden at the recent PPS event.

Two leaders at the forefront of the bright new model for PT sat down recently to discuss their views on how private practice owners can turn the entire industry on its head and create momentum that leads to profits, autonomy and dramatic benefits for patients. Chad Madden of Breakthrough Marketing and Dr. Dimitrios Kostopoulos of Hands-On Diagnostics tackled the challenges assaulting PT private practice owners in an interview that flowed from factual to humorous to bittersweet.

Leadership in PT Dr. Dimitrios Kostopoulos

As all great success stories often begin, this one starts with failure.

LESSON 1: FAIL UP

"In my first ten years of business, I lost my top referral source four times," noted Madden. "The first time this happened was 6 months after I opened, and the referral I lost represented 25 percent of my business."

Faced with a situation that was dire, Madden said he quickly realized he had to change how he looked at Che the very foundation of how he ran his PT private practice.

"I knew then I had to diversify my resources," he added. "The last time this happened, it was when a referring neurosurgeon relocated, but he represented only 0.5 percent of our business."

Chad said the worst failure he experienced was the result of a major expansion in 2009.

"We bought a building and went from 4,000 to 8,000 square feet and simultaneously opened a second office," added Madden. "But we did not scale up our systems, and thought it would pan out. But – it did not. In the 4th quarter we lost \$98,000, which was devastating. But we had to figure this out – and that is when I realized that we should market directly to the consumer.

Through it all, however, we learned that if there is no challenge or obstacle there can be no change."

In New York, Dr. Kostopoulos and partner Kostas Rizopoulos were sitting pretty, with a large PT organization including 13 locations in the state. Their dream of helping patients had come true, and their combined practices served 3,000 patients a week, until one day, everything suddenly changed.



Chad Madden at work.

"We were very successful until 2002 - 2004," said Dr. Kostopoulos. "Then we received a letter."

The letter – followed by more letters – relayed distressing news: in New York state reimbursement of insurance rates were being decimated by 50 - 70 percent.

"These were very big cuts, such as from being paid \$140 down to \$55," added Dr. Kostopoulos.

"Some cuts were from \$112 down to \$66, and so on. We tried to hold on and did not make changes quickly. But at the end of the day our profit margins were only -5 to about or -7 percent. It did not work. We sold offices and consolidated offices and frankly, it was a nightmare."

Ever the optimists, the partners did not yield to the pressures of the drastic cuts to their business.

"Something good came out of it: this increased the level of our necessity," explained Dr. Kostopoulos. "This drastic change gave birth to the expansion of Diagnostics in our practice, and it forced us to create those systems and requirements and strategies needed to take our Diagnostics business and expand it into something very big."



LESSON #2: PREDICT THE TRENDS & PLAN ACCORDINGLY

Both Madden and Dr. Kostopoulos studied the facts and deciphered the future trends for physical therapy and took radical, specific actions to recreate the future of PT.

"If we look at data from the P2P group of the private practice section of APTA, the APTA reported the profit margin for PT is around 10 - 12 percent nationwide," explained Dr. Kostopoulos. "The lower to average reimbursement rates are now bringing in about \$97 an hour for PT."

Madden said he looked at the State of PT and saw startling trends as well.

"When you look at the money and the financial future, we have to ask what can we do about declining reimbursements," he said. "There has been a 29% decrease across the board. The national inflation is at 55 percent, so we are behind inflation and doing more and more work for less money for core PT services."

ABOVE: In their practice Hands-On PT located in Astoria, NY, HODS partners Drs. Kostas Rizopoulos and Dimitrios Kostopoulos keep their hands on the pulse of PT patients and their business, with Diagnostics a key ingredient of success.

BELOW: Dr. Kostopoulos addressing the crowd at 2019 Hands-On Diagnostics Symposium.



Madden and Dr. Kostopoulos agreed that the unique challenges facing PT Private Practice owners include the necessity for reframing the problems of declining physician referrals. For any PT private practice to survive and thrive, the reality is clear: they must diversify their sources of income – or fade away.

Besides the financial decline of the PT industry, both Madden and Dr. Kostopoulos agreed that other urgent issues include hiring and retaining top talent and the cost of education.

"Today, rising DPTs are facing school loans of between \$160,000 - \$240,000," said Madden. "These new DPTs are often offered work at a hospital or other systems, and can earn \$90,000 - \$100,000 a year. So, the new DPT needs to make money for a 30-year mortgage and there is a lot of pressure for them to pay off these loans."

Dr. Kostopolous agreed.

"What Chad states is totally relevant to the future of PT," he added. "It becomes more difficult to find good staff, since we are competing with hospitals and large organizations who tend to pay a lot more than a typical PT private practice can pay. For a PT private practice, this money has to come out of the profit margin – which is being already suppressed."

LESSON # 3: RE-FRAMING PT ISSUES DISRUPTION WINS EVERY TIME

Breaking down the systemic problems facing physical therapy private practices, Madden and Dr. Kostopoulos each independently created a proprietary plan. These two visionary PT programs complement one another and combat the serious challenges facing PT today.

For Madden, his visionary new idea became Chad Madden Breakthrough and Product X, geared towards private practices' marketing and incorporating workshops tailored for direct access to consumers. Dr. Kostopoulos, along with partners Kostas Rizopoulos and CEO Craig Ferreira, launched Hands-On Diagnostics, the unique new PT model with Diagnostics at its core, which is now in private practices across 26 states.

Madden and Dr. Kostopoulos agreed that the unique challenges facing PT Private Practice owners include the necessity for reframing the problems of declining physician referrals. For any PT private practice to survive and thrive, the reality is clear: they must diversify their sources of income – or fade away.

Madden said that at his Breakthrough sessions, "We help owners go directly to consumers. From 2003 – 2014, there was a 54.5 percent decline in physician referrals (specifically for low back referrals). That was our lifeline in those days. Physicians were also going through cuts and looking for auxiliary services for income streams. There was no mechanism for PT to have direct access and market to the consumer. I had to do it personally for survival, and other owners had to do it directly as well or their business would be decimated. That is the biggest challenge I see."

The birth of Hands-On Diagnostics (HODS) was in part a direct result of the grim trend for private practice owners everywhere: deep reimbursement cuts and the 10 - 12 percent average profit margins as reported by the APTA and P2P group. Taking into consideration the ongoing reimbursement cuts (as further seen in the new Medi-

care cuts and inflation) it wouldn't take much to devastate any private practice already struggling to keep afloat during these difficult times.

"People always thought of PT as an adjunct medicine and depending on those medical referrals my business partner Kostas and I saw the need early, which was to go directly to consumers," said Dr. Kostopoulos. "With implementation of the Breakthrough programs and Product X, along with amazing consulting with Craig Ferreira and Survival Strategies, we saw about 70 percent of our practice come from direct access."

On the clinical side, something big was happening as well – and continues to occur today as Diagnostic tools are utilized by board certified PTs in HODS approved centers.

"When patients come to us to do their initial evaluation and we do diagnostic testing such as EMG and MSK Ultrasound, many times we find things we could not have seen as physical therapists," he noted. "Just the fact that when you have droves of patients coming to you without them having been examined before by a physician who many times before they make a decision, may send patients for X-ray or for an EMG or



ABOVE: Dr. Dimitrios Kostopoulos addressing PT private practice owners at the recent HODS Symposium.

BELOW: Chad Madden addressing crowds at one of his Breakthrough events.





MSK Ultrasound or blood work. When a patient comes to you directly in your practice you should examine them with the best tools you have available. For sure the clinical exam you conduct is very useful, but sometimes performing a Spurling's Test for Cervical radiculopathy, with only 30% sensitivity or a Phalen's test for carpal tunnel syndrome with only 23 - 51 percent sensitivity is not really the best you can do in terms of finding the real problems of patients."

The examples of Diagnostics compared to other traditional PT testing for patients shows dramatic results in identifying these issues in patients.

"EMG in a case of carpal tunnel has an 88% sensitivity and 98% specificity and for cervical radiculopathy a sensitivity approaching 80%," added Kostopoulos. "MSK ultrasound for a rotator cuff tear has equal sensitivity with an MRI, 92%, but with the only difference being MRI just shows you a picture with MSK you can do a dynamic maneuver and you can see the tear in front of your eyes. In a multi-center study with 465 patients, about to be published in the Journal of Bodywork and Movement Therapies, in 62% of the patients who received either EMG or Ultrasound, we had to change the treatment plan and patient management as a direct result of the data we received from the diagnostic tests. We received some type of information from the various Diagnostic testing that made it meaningful for us to change course- and create different treatment plans for these patients."

LESSON # 4: REIMBURSEMENT SUCCESS & INNOVATION: REDESIGNING THE PT PRACTICE MODEL

Both HODS' and Breakthrough Marketing's programs tackle the issue of disappearing reimbursements, offering specific, proven systems that safeguard the very survival of PT clinics. Both visionary programs work independently but complement one another, by offering solutions to lower reimbursements and practical, immediate steps to create new revenue streams.

Using HODS, private practice owners are reimbursed 5 – 10X more due to the usage of Diagnostics such as EMG and MSK Ultrasound. The reimbursements for Diagnostics are much higher than those for traditional PT. Also, HODS Approved Diagnostic Centers work with local physicians and other staff by bringing the Diagnostic tools directly to those outside offices, which creates a new revenue stream.

"Using Diagnostics, physical therapists can get many more patients in the practice but also are able to create additional and new revenue streams for their practices," said Dr. Kostopoulos. "As I noted, reimbursements are 5 -10 x more than what reimbursement for a single visit is for PT. The national numbers average \$97 reimbursement for a PT visit, but for EMG combined with neuro-ultrasound the session is \$700 per visit."



Hands-On Diagnostics board members from L-R: Dr. Dimitrios Kostopoulos, Dr. Kostas Rizopoulos and CEO Craig Ferreira

Breakthrough Marketing educates practice owners on how to market directly to patients, which includes offering workshops for specific pain problems such as back, knee and neck. This model focuses on positioning clinic owners as the experts in their community on their specific specialization, and educates people in pain on the option to go directly to a Physical Therapist as a means to treat their pain naturally.

Direct access means, however, the front desk can be more complex to handle. However, the results for patients are dramatically greater with tailored systems in place.

"It's valuable to look at patients going through PT, from the very beginning when someone comes into the office," noted Madden. "There has to be a system at your front desk. Now it's more complex, with patients finding us on Google or calling for workshops. We have an open dialogue with each person who is having pain, who raises their hand says "Yes, I need help."

Going direct to consumer, people enter into your system are significantly more likely to meet their goals and "graduate" PT. They will become a raving fan; consume other services we offer and offer word of mouth referrals."

If you would like to learn more about Hands-On Diagnostics, book a Discovery Call by visiting: https://www.diagnosticsforpt.com/schedule

If you would like to learn more about Breakthrough Marketing, visit: https://breakthroughptmarketing.com/predict

To view the webinar for this interview, visit: https://www.diagnosticsforpt.com/PTLEADERS



Chad Madden is the Founder of Madden Physical Therapy and #1 Most Watched Back Pain and Sciatica Specialist in the World.

Breakthrough Marketing educates practice owners on how to market directly to patients, which includes offering workshops for specific pain problems such as back, knee and neck. This model focuses on positioning clinic owners as the experts in their community on their specific specialization, and educates people in pain on the option to go directly to a **Physical Therapist** as a means to treat their pain naturally.

Facing

reimbursement and Medicare cuts may be daunting for most Physical **Therapy Private** Practice owners, but in Kentucky two partners have created a solid growth curve that overcomes these challenges. By incorporating **Diagnostics** for PT and reaping the benefits of much higher reimbursements, plus greater understanding by patients of their 62% better patient management, owners Kay Connor-Israel and Dana Connor-Israel just threw a party to celebrate something amazing: doubling their space.

Springfield Physical Diagnostic Center Local PT Practice Doubles Space



At Springfield Physical Therapy in Kentucky, patients LEFT TO RIGHT: Kelli Moore, Julie Bishop, Kay Connor-Israel, Dana Connor-Israel, Whitney Turner (all staff).

have been relying upon the local PT practice owned by these two women for years, and have now wholeheartedly embraced the addition of MSK Ultrasound to the clinic, as the new Diagnostics Center opened its doors to the public.

Springfield Physical Therapy had become increasingly busy, with long-time and new patients booking up almost every spot available. The board-certified Diagnostic trained PTs on staff were already helping patients with both traditional PT as well as MSK Ultrasound tools, and were seeing more and more people book appointments and actually stick to their treatment plans.

"Patients are impressed by MSK Ultrasound, where they can see inside their bodies," noted Kay.

Since the practice was often packed, when the sudden availability of vacant space on the other side of their building became vacant, Kay and Dana were inspired to make a major move. And though the move may have been literally next door, it was monumental.

"We had increased our practice size in 2016, and moved into a new space," noted Kay Connor-Israel. "Now, we broke down the walls in the building since the other side became vacant and we not only grew; we also doubled the size! This expansion is of the clinic but is also the grand opening of Diagnostic Solutions."

Therapy of Kentucky opens



Much to their delight, about 75 people including residents, local business owners, patients, and referring providers were on hand to cheer as the bright red ribbon was cut. Visitors were treated to a tour – and an education –as the board-certified PTs offered people MSK Ultrasound demonstrations.

"People were so impressed by the Diagnostic Ultrasound, and at first did not know what the capability of this was for them," said Kay. "They really loved that unlike the still image of an MRI, the MSK Ultrasound allows you to move so we can really see the issues."

The convenience of having a state-of-the-art HODS Approved Diagnostic Center right in town was also celebrated.

"Now, people don't have to travel 30 or more miles for Diagnostics," added Kay. "Big providers such as medical organizations and hospitals tend to make people feel like they have no choice as to where they go for their providers – which is not true. We believe patients deserve a choice in their providers – and we are thrilled to offer our services right here in town!"

Based on the turnout at the festive ribbon cutting and party, the community agrees.

To learn more about this Hands-On Diagnostics Approved Center, contact Springfield Physical Therapy and Diagnostics Solutions, located at 1113 Lincoln Park Rd, Springfield, KY 40069 or visit **https://emgtestnearme.com/springfield-physicaltherapy-and-diagnostics/**



TOP: Susan Spalding, Len Spalding, Kay Connor-Israel, Julie Bishop ABOVE: Kay Connor-Israel, Marsha Wilson

HODS PRESCRIPTION TO



Hands-On Diagnostics (HODS) has a prescription to advance your PT private practice & directly benefit your patients!



They get directed to www.EMGtestNearMe.com to choose a HODS Approved Diagnostic Physical Therapy Center



Diagnostics include EMG and/or Ultrasound Imaging testing



Massive numbers of people receive information about their back, shoulder, knee or other problems via HODS social media campaigns.



Patients arrive and receive a proper evaluation that may include the use of Diagnostics.



The Physical Therapist creates an accurate treatment plan using both data from clinical examinations and diagnostics.



PT BUSINESS SUCCESS



This plan addresses the patient's real cause of problem with 62% better accuracy.



Patients get better faster, and they are able to regain back their function.



Then they recommend the services to their Friends, Doctors, and Family.



This is how we create a huge positive impact to society!



A Rehabilitation Benefit of Electrodiagnostics in Treating Back Pain and Sciatica By Roy Adams, Adams Physical Therapy

In dealing with lower back pain and L sciatica, we see many approaches that are used to treat the condition. There are many sources to treating the condition with the cause being focused most commonly on muscular, disc or dysfunctional issues whether lumbar or sacral in nature. Very commonly disc herniation is suspected, and an MRI is often ordered to determine a possible connection to symptoms. With this, there are often views that suggest, disc herniation, foraminal and/or spinal stenosis as a primary cause of symptoms. Often surgical decisions are made based on these findings along without use of electrodiagnostic testing.

With this, results are inconsistent. Electrodiagnostic testing is both highly sensitive and specific. It is effective in ruling in and ruling out lumbar radiculopathy as well as neuropathic and myopathic conditions. It is underutilized in the medical community.

At Adams Physical Therapy, we have had a significant number of patients with lower back pain and sciatica and they regularly come in with MRI's that show disc herniation, disc degeneration, foraminal and spinal stenosis and regularly we see success using a manual hands-on approach with use of strong core stability principles and body awareness.

Our founding principles are based on owner belief through 38 + years of training that we have a spinal system that is dynamic and that there is more room to handle much of the narrowing that occurs with degenerative changes. An individual only needs micrometers to a few millimeters of space to change a compressed nerve root to a decompressed nerve root. There are rotational changes that can affect this including pelvic and lumbar dysfunction and strain patterns on the system. With this approach, we have seen significant success.

At the 2019 HODS Summit, Dr. Mohamed A. Sabbahi presented on using H waves in rehabilitation of back pain and sciatica. It brought me back to the clinic with questions as I looked at our group of low back patients. We have a very good success rate as some patients are as simple as a 5-minute miracle to others that take significant work and resolve. However, we also have some patients that we were helping, but moving slower to their desired goals or they improved and then seemed to plateau short of their goals. What were we missing? How would they respond to Dr. Sabbahi's H-wave program?

In Dr. Sabbahi's work, he looked at H-wave in unloaded (prone) position and he looked at loaded (standing) position including standing, forward bent, backward bent, left side bending, right side bending and left side bending with right rotation and right side bending with left rotation. H-wave normally is a study that looks at latency, but in his studies, he looked at amplitude by position. This raised my interest as with normal prone H-wave it gives you some information, but now in loading positional he was addressing function. Whatever position that produced the greatest H-wave amplitude while loaded is the position of least compression and the direction to focus treatment. Whatever position produced the greatest compression is a position to avoid.

Reviewing some of the more difficult



Roy Adams using Diagnostic testing with a patient.

patients on the schedule, I attempted to replicate Dr. Sabbahi's work. In his nonsurgical patient's, he noted a success rate of >90%. 8 patients of the more difficult patients were recruited and 4 others that went through full electrodiagnostic testing were added with use of a simplified version of Dr. Sabbahi's program. Results of the study have shown immediate positive results in 11 of 12 and the 12th one is showing positive changes after an early setback.

H-wave testing is showing a significant impact with our back patients and deserves further analysis as a part of the rehabilitation process in treating back pain.

This shows the potential to reduce the number of patients that must undergo surgery for disc herniation. As suspected, it consistently showed increased compression with lumbar flexion. For those of us that have studied McKenzie's approach, it was only the least compressive in 2 of the 12 studies. Use of H-wave certainly can provide greater input into exercises and positions of choice as well as positions to avoid with rest and function and as shown by our more challenging 8 patients can show faster results.

HODS PARTNER DIRECTORY



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