

Chiropractic Masters



CHIROPRACTIC MASTERS
INTERNATIONAL

***THE
ULTIMATE ORTHOTIC
WORKSHOP***

Chiropractic Masters

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INTRODUCTION

For over 10 years, countless seminars and endless consultations, I have been training doctors how to build successful practices, both in patient volume and income. In an era, where the wellness revolution is sweeping upon us, I was forever searching for additional sources of income for my practitioners, while providing the best care for my patients.

In order to maximize the efficiency of my clinical orthotic sales I created a procedural marketing system both internally and externally that would not only allow all of my existing patients to be scanned either at the new patient exam or comparative exam, but also created a new patient machine whereby new patients were introduced to my practice from external sources. These procedures are described in this “Ultimate Orthotic Workshop”. Included in this superb product, I have included 10 tools to get your started: video training, presentation, scripts, handouts, flyers, sign-up sheet to maximize your return on investment.

The results from our marketing efforts, workshop, close and scanning, was simply nothing short of phenomenal. In our first 2 days of advertising we had over 40 patients and non-patients sign up, scanned 28 orthotics (at \$400.00 each) and have since performed monthly orthotic workshops attracting tons of patients who are buying and benefiting from this simple, easy and fast workshop that can be performed by any health care practitioner.

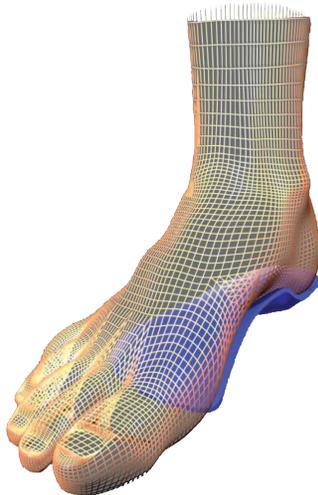
This workshop program is a collaboration of materials from myself, and the promotional department of The Orthotics Group. We know you’ll enjoy this program for yourselves, your patients and your practice. For more information, please refer to the resource section of this program.

Sincerely,

A handwritten signature in black ink that reads "Dr. Mike Reid". The signature is written in a cursive, flowing style.

Dr. Mike Reid
Peak Performance Coach and CEO of Chiropractic Masters International

ABOUT The Orthotics Group



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Our story is about feet and innovation. The Orthotic Group began in 1985 as a professional services company dedicated to the needs of healthcare professionals and their patients. We built relationships based on [quality custom orthotics](#), responsive service and a truly innovative approach to the orthotic business. We provide practitioners all the services and tools necessary to make expert orthotic and footwear decisions.

We provide orthotic solutions on an international scale. With a [committed staff](#) of over 160 people, The Orthotic Group is Canada's largest orthotic laboratory servicing not only Canadian Healthcare professionals, but professionals around the globe including The United States, [England](#), [Ireland](#), [Northern Ireland](#), [Scotland](#), [Sweden](#), Finland, [Denmark](#), South Korea, [Japan](#), China, [India](#), Singapore and [Australia](#) with new international inquiries everyday.

Our gait analysis technology ([GaitScan™](#)) is well recognized as a valuable diagnostic tool. Our orthotics are produced with unwavering attention to detail and our [brand name footwear](#) have proven to be in a class apart in terms of comfort, and design. Our dedication to feet has earned us the trust and support of Healthcare professionals and their patients.

Contact The Orthotics Group:

Head Office & Lab

Toll Free Phone: 1 800 551 3008

Local GTA: 416 479 8609

Main Fax: 1 877 551 3001

Local Fax: 647 930 8077

Additional Orders Fax: 1 877 551 3010

Hours: Monday – Friday 8:30am - 5:30pm ET

Practitioners Calling From (Toll Free):

 Australia: 1 800 731 862

 China: 86 203 647 0813

 Denmark: 458 090 1920

 Ireland: 1 800 819 060 (Mobile: 1901 0164)

 Sweden: 200 439 986

 United Kingdom: 0800 098 8570

FOOT FACTS

The Foot is the Body's interface with the most powerful force that affects our body – GRAVITY!

The average person takes 10,000 – 15, 000 steps / day – 115, 000 miles in a lifetime – enough to circle the planet four times.

The foot has 26 bones, 33 joints and 31 ligaments.

3.5 X our body weight passes through our feet each day. The feet of an individual 130 pounds absorb 500 pounds of pressure with every step. The impact reaches about five million pounds of pressure each day.

The foot is the body's *shock absorber*, along with the knees, hips and discs in the low back. The arch of the foot functions to absorb 30% shock when the foot hits the ground.

95% of people have flat feet, which are poor shock absorbers!

60% of our body weight is designed to go through our big toe while walking.

The foot is designed to adapt to the uneven terrain it was designed for - planet earth - BUT we have covered the world in CONCRETE!

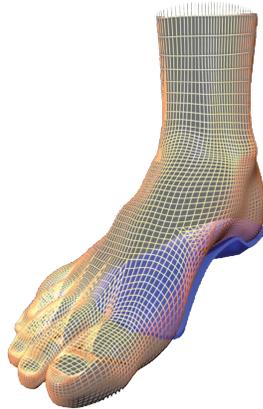
Years of standing and walking on concrete cause the changes in the foot that leads to the vast majority of the foot, ankle, knee, hip and back problems we encounter.

Your feet are your body's foundation – have them evaluated today. Find out how they are affecting your knees, hips and low back! PREVENTION!

SOME OF THE COMMON DIAGNOSES DISCUSSED:

Hallux Abducto Valgus (Bunion)
Dorsal Bunion
Plantar Fasciitis
Morton's Neuroma
Interphalangeal Sesamoids
Stress Fractures
Pinch Callus
Tibialis Anterior & Posterior Tendonitis (Shin Splints)
Metatarsal-Cuneiform Exostosis (Saddle Bone Deformity)
Tailor's Bunion
Metatarsalgia
Retro-Calcaneal Bursitis & Achilles Tendonitis
Lumbar Radiculopathy or Dorsal Nerve Root Compression
Greater Trochanteric Bursitis
Chondromalacia Patella (Patello-femoral Syndrome)
Accessory Navicular
Muscular Cramps: Foot & Leg
Sub-Calcaneal Bursitis
Lumbar Disc Compression & Herniation
Peroneal Tendonitis
Low Back Pain
Lateral Ankle Pain
Heel Spur
Sacroiliac Pain
Sub-Metatarsal Bursitis (Metatarsalgia)
Sciatica

MARKETING YOUR ULTIMATE ORTHOTIC WORKSHOP



Marketing and Sales Review

Dr. Mike Reid, D.C.

Utilizing TOG in Your Practice

Whether you have just begun using TOG or have been a provider for awhile, this review is intended to spark the marketing wizard inside of you. To get you excited about helping your patients and boosting your practice success. Selling does not come as natural to everyone but we all have a selling strength to build on. Some of you will be better at selling inside the office and some outside the office.

Wear your TOG Stabilizers at all times

This cannot be emphasized enough. You truly must believe in what you sell. Once you do, all attempts on your part will be perceived with the honesty and integrity that is behind them. We are in a service industry and along with a service comes a sale. Show your patients that you live in your Pelvic Stabilizers. Get your staff in them. Wear good shoes, lead by example. Build a relationship with a shoe store near by, get the manager in and then offer a discount to the employees.

Have a display in your office (foot model and orthotic display, brochures, poster, etc.)

Posters, models – as many visual aids as possible. The foot is a fascinating thing for patients to look at. They understand concepts about feet – it is your responsibility to make those concepts clear.

I.E. 26 bones and 55 joints, shock absorber, interface with concrete, 3 times your body weight, 10-1500 steps/day.

www.anatomical.com – foot bone set, posters

The people on your table are your number one marketing tool

Ask for their help! Where do they work? Who is in charge of their health and safety workshops, health fairs? Who is their manager? Safety and ergonomics engineer? What groups, social clubs and societies do they participate in – running clubs, weight watchers, etc? A presentation on foot orthotics/pelvic stabilizers might not go over well as a presentation on injury prevention, health and wellness. Pelvic Stabilizers are one piece of what you do and marketed carefully will boost sales in all avenues of your practice.

Take off every patient's shoes and socks

You will be absolutely fascinated by how many people already have signs and symptoms of excessive pronation. Fascinated! You will start to become shocked by normal feet and congratulate patients for it. Take your patient's shoes and socks off. Talk to them about signs vs. symptoms. You have the opportunity with all *new patients* to let them know from day one that an important part of your care is the support of their foundation. Whether Pelvic Stabilizers are something you prescribe initially or later on in treatment – it is important to establish the grounds for why they might be a part of that patient's care. Patients will begin to know that at your office, they take off their shoes and socks (Get a sign!). Touch their feet; mobilize them – ESTABLISH HOW IMPORTANT THEY ARE EVERY TIME THEY ARE THERE. Scan everyone on your Platinum Associate foot scanner.

See inserts within this workshop binder

Have a "Healthy Feet" week in your office

Create traffic in your office to get comfortable with foot evaluations. Offer complimentary foot scans. This is a great way to get parents to bring in kids, family and friends. Host an evening lecture at your office (*see attached workshop flyers and CD*). Make footsteps out of paper leading the way to your office (get carried away!). Market in community newsletters (they are cheap). Your lecture can cover proper care for your feet for healthy knees and hips, proper shoe selection etc. Hang up patient's foot prints – "What do your footprints say about you?"

Become creative....

Play your slide show on your Chiro TV system

Videotape them statically, from the front, side and back. This you could play at your Ultimate Orthotics Workshop so they can see how they look structurally. Then dynamically – they can watch themselves walk – emphasize symmetry

What do I do about all the patients I have put in foot orthotics/pelvic stabilizers in the past?

This is the opportunity to show your patients you have not stopped learning about the advances in your profession. DO A RECALL. Call up all the patients you have put in Pelvic Stabilizers and tell them what you have learned.

Dr: “Hi Joan, this is Dr. Alyson. How are your orthotics/pelvic stabilizers treating you? Over the past little while I have been studying the latest advances in foot mechanics. I have been certified with the latest technology in foot orthotics/pelvic stabilizers and would like to replace the orthotics/pelvic stabilizers I have given you at a reduced cost. As with any form of medicine, times have changed and these new orthotics/pelvic stabilizers will help you tremendously. When could you come in to replace them?”

Patient: “How much will they cost?”

Dr: “Joan, I will be selling these orthotics/pelvic stabilizers to new patients for \$439. I am recalling all my patients I have put in orthotics/pelvic stabilizers and offering them 10% off. Your investment is \$399 – these orthotics/pelvic stabilizers will change the way you walk and feel. I am also going to monitor you as you wear them.”

How do I host a successful foot screening?

There is an opportunity to participate in health fairs etc. and provide complementary screenings for people. Some tools that would be useful would be the pedograph, dots, mirror etc. This is an opportunity to go to local runs, walks, and malls to recruit new patients for your clinic. The great thing about most foot pathologies is that they are in many cases – OBVIOUS. Make up a basic screening sheet, with some questions about their aches and pains – offer a discount for foot orthotics/pelvic stabilizers at the screening.

How to host a runner's clinic?

A running clinic can be as big or as small as you like it to be. Places to contact include local running groups, running shoe stores and gyms. All of these organizations benefit from you hosting a clinic at their facility. Contact a running coach to help out with running stride, local running store to go over shoe wear and YOU be the biomechanics expert.

Cycling clinic, Ski Clinic, Soccer Clinic, Basketball Clinic, etc.

There is a ton of opportunity to talk to athletes of all levels and hold informational seminars for them. You can work with a bike shop, soccer team, etc. Do a little research about the sport. Find out their most common injuries and be ready to let them know why they happened and how you can help.

Protect Your back, industrial ergonomics lecture?

Start with your patients on this one. Find out where they work. When are their health fairs or health weeks? Call their safety and ergonomics personnel. Get them to write a letter for you. Most large companies have personnel set in place to address the worker's needs. This is an easy lecture for people who stand all day. Talk about their aches and pains and how they form over time. Work out an employee discount if they are not covered by their insurance. One of my clients scanned and sold 60 orthotics/pelvic stabilizers in one day at an industrial company.

Patient Testimonial Book

Send patients an orthotic satisfaction survey along with a self addressed stamped envelope and testimonial sheet. Put them in a binder in your front office. Better than People Magazine.

Documentation/Insurance coverage/Warranty

Exercise caution here. All patients need to sign a disclosure. What ever is covered will be reimbursed to them. What patients have had good coverage – go and talk at their work. TOG warrants the orthotics/pelvic stabilizers for 2 years. I am comfortable now saying “These orthotics/pelvic stabilizers should be with you a long time, if we monitor them correctly in the first 6 months.” There is no money back guarantee – these are custom made orthotics/pelvic stabilizers. However TOG will ensure the product comfortably works or they will return your money.

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ORTHOTIC SATISFACTION SURVEY

IN ORDER TO PROVIDE BETTER CARE AND FURTHER DEVELOP OUR PRODUCT, WE HAVE A FEW QUESTIONS THAT WILL TAKE *LESS THAN 2 MINUTES* TO COMPLETE. PLEASE MARK THE CIRCLE THAT BEST CORRESPONDS TO YOUR FEELINGS.

WE CERTAINLY APPRECIATE YOUR FEEDBACK AND THANK YOU...

STRONGLY DISAGREE
 —————▶
 STRONGLY AGREE

1. I WAS EXAMINED AND TOLD ABOUT SPECIFIC FOOT/KNEE/HIP/BACK PROBLEMS/CONCERNS THAT MAY BE THE RESULT OF PROBLEMS WITH MY FEET

1	2	3	4	5	6
<input type="radio"/>					

2. IT WAS EXPLAINED, TO MY SATISFACTION, HOW AN ORTHOTIC MAY HELP MY PARTICULAR PROBLEM/CONCERN

1	2	3	4	5	6
<input type="radio"/>					

3. I FEEL THAT THE ORTHOTIC SIGNIFICANTLY IMPROVED MY CONDITION (PLEASE EXPLAIN BELOW)

1	2	3	4	5	6
<input type="radio"/>					

4. OTHER PEOPLE NOTICED THAT THE ORTHOTIC IMPROVED MY CONDITION

1	2	3	4	5	6
<input type="radio"/>					

5. I USE MY ORTHOTICS IN DIFFERENT FOOTWEAR

1	2	3	4	5	6
<input type="radio"/>					

6. I HAD PAIN WHEN WEARING MY ORTHOTICS

1	2	3	4	5	6
<input type="radio"/>					

7. I HAD VOLUME PROBLEMS FITTING MY ORTHOTICS IN MY FOOTWEAR

1	2	3	4	5	6
<input type="radio"/>					

8. I WOULD RECOMMEND THESE ORTHOTICS TO OTHER PEOPLE, EVEN IF THEY DIDN'T HAVE A PARTICULAR PROBLEM

1	2	3	4	5	6
<input type="radio"/>					

9. I WOULD RECOMMEND THESE ORTHOTICS TO OTHER PEOPLE FOR FOOT/KNEE/HIP/BACK PROBLEMS

1	2	3	4	5	6
<input type="radio"/>					

WHAT DID YOU THINK OF THE DURABILITY OF THE ORTHOTIC?	FLIMSY	JUST RIGHT	BURLEY
WHAT DID YOU THINK OF THE DENSITY OF THE TOP SHEET MATERIAL?	TOO THIN	JUST RIGHT	TOO THICK
WHAT DID YOU THINK OF THE TEXTURE OF THE TOP SHEET MATERIAL?	TOO STICKY	JUST RIGHT	TOO SMOOTH

"ADDITIONAL COMMENTS, SUGGESTIONS, CRITISISMS..."

PLEASE TAKE A FEW MINUTES TO FILL OUT TESTAMONIAL ON BACK!!

THE CENTER FOR PHYSICAL HEALTH

Name: _____

Disclosure for custom foot orthotics/pelvic stabilizers:

I understand that I am being scanned for TOG orthotic/Pelvic Stabilizers by *(The Center for Physical Health)*. The cost of these orthotic devices will be \$ _____.00, which may or may not be covered by my insurance. This clinic will file my insurance for me with a letter of medical necessity, but this does not guarantee that my insurance will cover the orthotics/pelvic stabilizers.

Orthotics/pelvic stabilizers are not covered by Medicare or Medicaid. This clinic will make every effort to make these orthotics/pelvic stabilizers work for me – but **they are not returnable for a refund or credit.**

Today I am putting down a \$____ deposit and agree to pay the remainder of \$_____ at the time of orthotic dispensing.

§ I have chosen to have the custom foot orthotics/pelvic stabilizers rush ordered for an additional fee of \$35.

§TOTAL DEPOSIT AT TIME OF SCANNING___.00.

Signed

Date

Witness

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Codes For Orthotic Insurance Reimbursement (United States Only)

Note: The following codes were deemed appropriate at the time of publishing; however, codes and their descriptions may vary from state to state. Check with your state/provincial association for specific details. Each description should be appropriately modified to include specific conditions for which the patient is being cared for. Refer to the practice for up to date codes.

(The following codes are just suggestions to help you better to bill insurance companies.)

When you decide that your patient needs orthotics/pelvic stabilizers:

CPT CODE #99213 – Initial office visit: history and examination of patient; 15 minutes.

CPT CODE #99071 – Educational Supplies: video, pamphlets, books, etc., provided by physician for patient education at cost to physician.

HCPCS CODE L3030 – Foot, insert, removable, movable, formed to patient foot, each or

HCPCS CODE L3000 - Foot, insert, removable, molded to patient model, “UCB” type, Berkeley shell, each

CPT CODE #99002 - Handling, Conveyance fees in connection with casting the patient, filling out the paperwork, packing, and mailing back to .

When the orthotics/pelvic stabilizers come back to you from .

CPT CODE #97504 – Orthotics/pelvic stabilizers scanning and training, upper and /or lower extremities, each 15 minutes.

CPT CODE #97702 – Checkout; time spent with follow-up post break-in period, 15 minutes

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PLEASE CHECK YOUR OFFICE ICD MANUALS FOR PROPER CODES.

ALSO PLEASE CHECK YOUR OFFICE CPT MANUAL AND HCPCS MANUAL FOR ADDITIONAL CODE OPTIONS.

If you have additional questions, you can look on line at www.codingline.com

Diagnosis codes are an important part of insurance re-imburement. Try to get a code to relate to the foot

i.e. **739.6** Lower Extremity Kinematic Chain Dysfunction

or use the obvious i.e. Hallux Valgus, Limitus, Dorsal Bunion, Plantar Fascitis, Heel Spur etc.

Would it surprise you to know...

that a good part of your back trouble or hip pain or neck stiffness or knee clicking may be associated with or may be directly a result of **poor foot function**? Probably it would. Yet, you are undoubtedly aware of the annoying rocking of a three-legged stool or a four-legged table when one leg is shorter than the rest. And what do you think would happen to your spine or hip or pelvis if you were to wear only one shoe with a one or two inch platform added to it? And how many times have you seen the cracked walls in a new house whose foundation is “settling” unevenly?

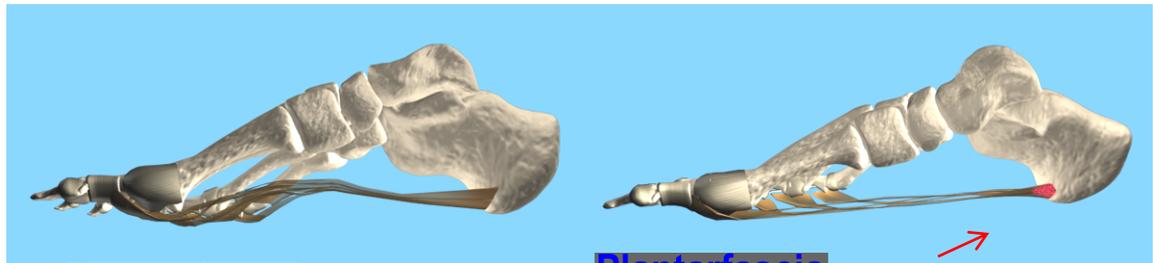
Well, the identical things happen with the human body. While it is true that most people do not have one leg which is actually structurally shorter than another (that is the bones are shorter), it is equally as true that vast numbers have what is known as a functional shortening of one leg. By this we mean that the foot, which is composed, of 26 main bones does have the ability to “flatten” itself thereby dropping the ankle closer to the ground. In effect, the distance as measured from a point on the upper leg to the ground has shortened because of this flattening motion, and that is why it is called a functional shortening as opposed to a structural shortage. To compensate for this action, the pelvis may tilt, the spine may bend, the opposite knee might bend, you might move the longer leg out to the side putting stress on the hip or knee for you might go through a combination of these compensating positions. Obviously, over a long period of time, things are going to change. Muscles may fatigue and spasm, bones may change their shapes and joints may be thrown out of kilter resulting in “wear and tear” arthritis. **Orthotic therapy is everyday therapy for the health of your feet, knees, hips and spine.**

**Letter of Medical Necessity
For Treatment of Plantar fasciitis**

re: *Patient's Name*

_____, is a ____ year old well nourished _____ M/F who presents to our office complaining of pain in the medial plantar heel area of the ____ foot. The pain is most acute with the first steps after getting up in the morning and has been showing a pattern of gradual increase over time.

Examination revealed significant tenderness to palpation along the inferomedial border of the calcaneus, coincident with the common insertion point of the plantar fascia. Upon standing, the patient demonstrates [moderate, severe loss or accentuation of the arch of the foot]. The patient states that the pain gradually subsides with daily activity then returns full force the following morning. X-ray is [negative, positive] for calcaneal (heel) spur.



**Plantar fascia
- Normal
Arch**

**Plantar fascia
- Flattened
Arch**

**Inflamed
Insertion**

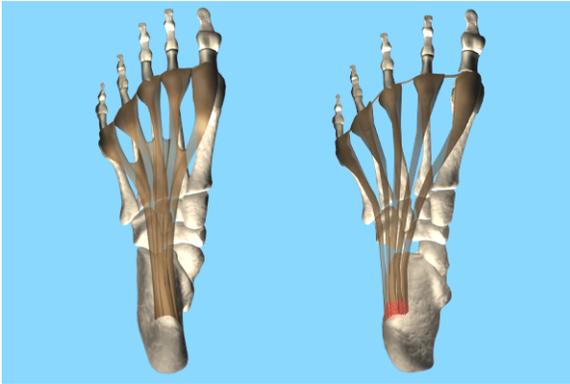
Treatment consists of anti-inflammatory medication, corticosteroid injection (optional) and a Foot Leveler custom foot orthotic device. Plantar fasciitis is caused by a progressive biomechanical imbalance due to excessive flattening of the arch during walking and other weight-bearing activities. In normal walking, the arch drops and then recovers. We do this for several reasons. When the arch drops, the foot “unlocks” or becomes more flexible. This allows us to use our feet as shock absorbers and at the same time, allows us to adjust to the varied shape of the terrain. Then as body weight passes over the foot the arch increases its height to “lock” the foot so that it can be used as a rigid lever for propulsion.

Pronators: Some patients, such as this one, over-pronate. They drop their arches too early, too quickly, and too deeply. They attempt to recover but just don't make it. When the body weight passes over the foot, it is still unlocked. As

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the body weight passes over an unlocked foot, the increased foot flexibility allows the foot to widen and elongate, pulling repetitively on the plantar fascia like a bowstring.

Supinators: Some patients, such as this one, have an unusually high arch and more rigid foot structure. They begin life with a shorter, tighter plantar fascia. As they age, the arch drops somewhat and, as it does, the tension across the palantarfascia increases.



**Arch Normal Vs. Arch
flattened (Widening of
Fascia)**

The force of such pulling is concentrated at the point where the entire plantar fascia gathers to insert on the calcaneus. Since that force is excessive and cumulative, the insertion point becomes inflamed behind the periosteum (outer bone membrane) and may gradually fill in with bone causing the

(non-painful) heel spur. During the night, the inflammation swells; with the mornings first steps the patient feels pain from walking on the swollen area. During the day, normal weight-bearing activity “milks” the swelling out while continuing the microtrauma to the plantar fascia as outlined above.

The most direct way to treat the cause of the problem is to control the excessive flattening of the arch, thereby reducing the repetitive pull on the plantar fascia and allowing traumatized tissue to heal. is a uniquely custom designed foot orthotic device that, unlike any other, is custom molded to apply a full contact force into the arch. It is flexible enough to allow adequate arch flattening for function and comfort but rigid enough to maintain proper control

All body cells and tissues undergo a process of constant self-replacement. As normal biomechanical alignment and forces are restored, pathological changes and deformities disappear as the area is replaced with normal tissue.

Without a custom orthotic device, the patient gets only temporary relief from anti-inflammatories or pain medication. Timely use of the orthotic will give good symptom control, avoid a worsening of the problem and allow healing to occur.

Thank you for your consideraton in this matter.

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Sincerely,

Treating Clinician

Letter of Medical Necessity for Lateral Ankle Instability

Re: Denise Johnson

Denise presented to the clinic complaining of chronic ankle instability while performing sports activities. Denise gets her ankles taped repeatedly to avoid recurring sprain/strains.

Examination revealed weakness of the everter's bilaterally 4/5 with tenderness over the anterior talofibular ligament. Motion palpation revealed intersegmental dysfunction of the talocalcaneonavicular joint and the cuboid bilaterally.

Without ankle braces the patient receives only limited support with athletic taping. Timely use of ankle braces will provide adequate ankle support during activities to prevent recurring ankle sprain/strain injuries.

Thank you for your consideration in this matter.

Sincerely,

Dr. Michael Reid

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Print this in color on your letterhead

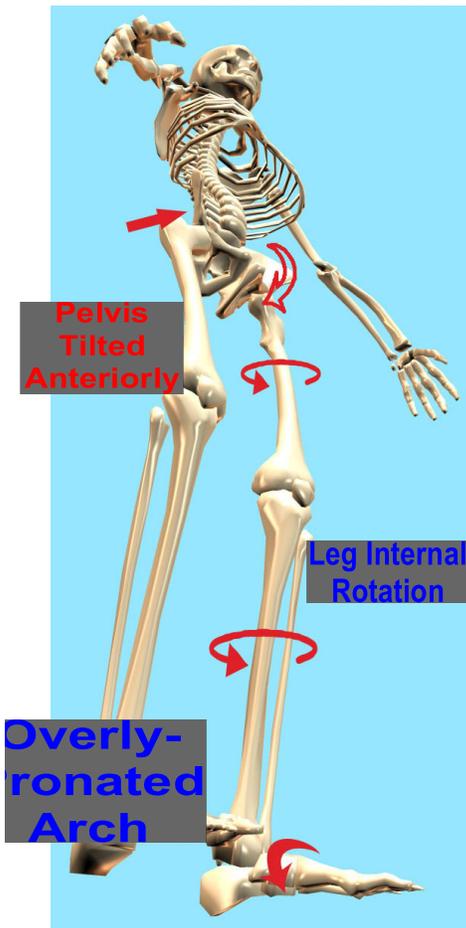
re: *Patient's Name*

Letter of Medical Necessity For Treatment of Low Back Pain

_____, is a ____ year old well nourished _____ M/F who presents to our office complaining of pain in the {R/L lower lumbar spine, R/L sacroiliac joint, R/L posterior thigh, etc.}. The pain is most acute with {behavior reproducing pain} and has been showing a pattern of gradual increase over time.

Examination revealed significant over-pronation of both feet in standing and walking. This is observed to cause excessive internal rotation of the lower leg, thigh, and hip joint with compensatory anterior tilt of the pelvis and hyperextension of the lumbar spine. In addition the patient presents with tight, irritable lumbar extensors, abdominal weakness, iliopsoas and hamstring tightness, all of which follows the above postural abnormalities.

Treatment will consist of _____ and a custom foot orthotic device. These orthotics/pelvic stabilizers restore normal arch function and therefore help control the above postural abnormalities. Since the foot is the base of the lower kinetic chain, abnormalities here will translate up the leg, which will affect the pelvis. The pelvis is the base of the spine and enormously influences it's function. With over-pronation of the foot, an abnormal torque at the ankle causes excessive internal rotation of the lower leg. This ultimately results in an excessive lordosis of the lumbar spine with pathological consequences.

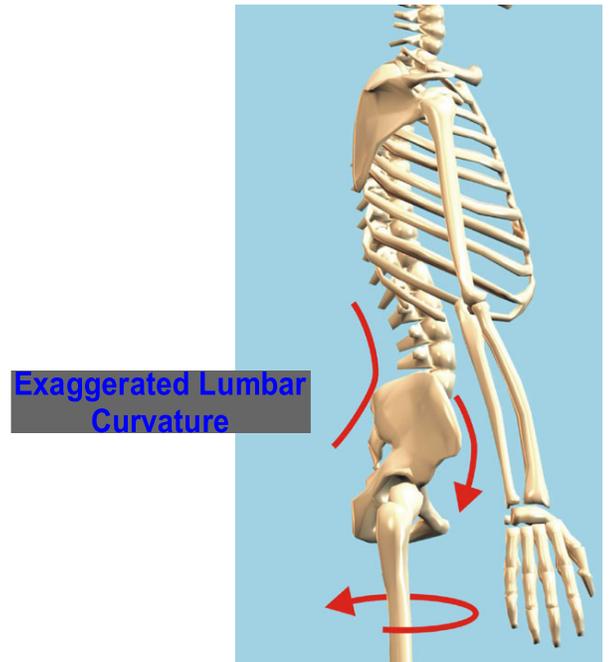
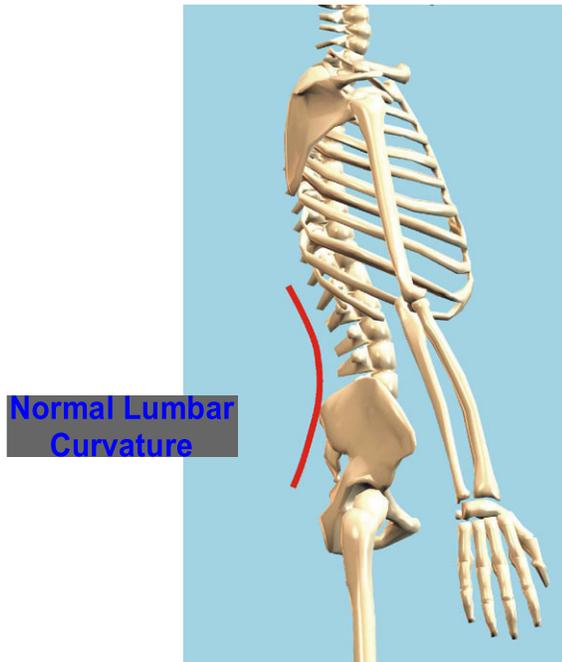


These include:

- Degenerative Disc Disease from an imbalance of compressive forces between the vertebrae due to increased spinal curvature

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- Facet joint osteoarthritis from sustained excessive compression at joint surfaces
- Myalgias of the lumbar extensor muscles due to prolonged tightness, muscle guarding and abdominal weakness
- Herniated Disc with radiculopathy as a consequence of prolonged degenerative disc disease



Without a custom orthotic/pelvic stabilizers, the patient may receive only temporary relief from anti-inflammatory, pain medication and _____ without correcting the underlying structural abnormalities. Timely use of the orthotic/pelvic stabilizers will provide the correct therapeutic foundation that will avoid long-term problem reoccurrence.

Thank you for your consideration in this matter.

Sincerely,

Treating Clinician

Print this in color on your letterhead

re: *Patient's Name*

Letter of Medical Necessity

For Use of Biomechanical Custom Foot Orthotics for the Pes Cavus Foot

_____, is a ____ year old well nourished _____ M/F who presents to our office complaining of [pain in the lateral forefoot, under the fifth metatarsal, first metatarsal, etc.].

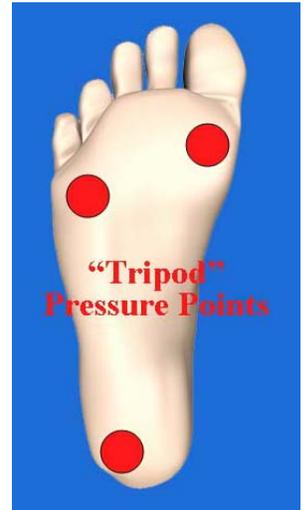
Examination revealed significantly high arch structure with minimal pronation during the gait cycle. The patient heel strikes with reduced shock absorption through the lower kinetic chain. The foot is unusually inverted during forefoot loading.

Treatment will consist of a custom foot orthotic/pelvic stabilizer.



Classic Pes Cavus Foot

Some patients, such as this one, have an unusually high arch and more rigid foot structure. Since they lack the normal unlocking or unwinding of the foot bones during weight-bearing as in normal pronation, all the weight-bearing force is concentrated on three small points of contact (the heel, first and fifth metatarsal heads) rather than distributed



more evenly across the entire plantar surface. Force concentration in these small areas creates abnormal wear and painful callus formation as the skin attempts to protect itself from breakdown. Moreover, there is a net reduction in shock absorption with each step without the natural “give” that pronation provides. This has a negative effect on stand and walk tolerance that worsens with prolonged activity. Poor shock absorption can also promote or aggravate Low Back Pain.

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The best way to redistribute plantar foot pressures is to provide the patient with full-contact, full length custom orthotics/pelvic stabilizers by . These are different from standard foot orthotics/pelvic stabilizers in that they follow the complete, actual contour of the patient's arch. That means true full contact and therefore the ability to spread the load over the entire foot surface evenly. Because they are custom molded to make full and completely smooth contact with the entire plantar surface of the foot, there are no surface irregularities that might cause other sources of shear stresses and consequent skin breakdown. Evenly distributed plantar pressures will greatly alleviate focal pressure points responsible for patient intolerance of weight-bearing activities.

Without a custom orthotic/pelvic stabilizer, this patient will likely develop progressively more pain, fatigue, soft tissue breakdown and inflammation with the concurrent potential for adaptive foot deformities. These, as chronic conditions, can be increasingly unresponsive to conservative care and may eventually require surgical correction. Loss of productivity will likely follow the increase in fatigue and pain as well.

Thank you for your consideration in this matter.

Sincerely,

Treating Clinician

Print this in color on your letterhead

re: *Patient's Name*

Letter of Medical Necessity For Use of Biomechanical Custom Foot Orthotics

_____, is a ____ year old well nourished _____ M/F who presents to our office complaining of [pain in the . . .; flat feet].

Examination revealed significant collapse of the [R, L, both] medial longitudinal arches in the standing position. Excessive and prolonged foot pronation is observed with gait. Neither foot completely re-supinates normally prior to push-off. [Any additional gait observations relevant to excessive shearing (pronation) or pinpoint loading (supination). The patient complains of [increasing pain with increasing time and exertion during weight-bearing activities; poor foot endurance/tolerance during sports or weight-bearing activities of daily living].

Treatment will consist of a custom foot orthotic/pelvic stabilizer. Normal arch function is critical to avoid excessive muscle fatigue and pain with weight-bearing activities and to maintain proper joint mechanics for orthopedic preventive health. In normal walking, the arch drops and then recovers. We do this for several reasons. When the arch drops, the foot “unlocks” or becomes more flexible. This allows us to use our feet as shock absorbers and at the same time, allows us to adjust to the varied shape of the terrain. Then as body weight passes over the foot the arch increases its height to “lock” the foot so that it can be used as a rigid lever for propulsion.

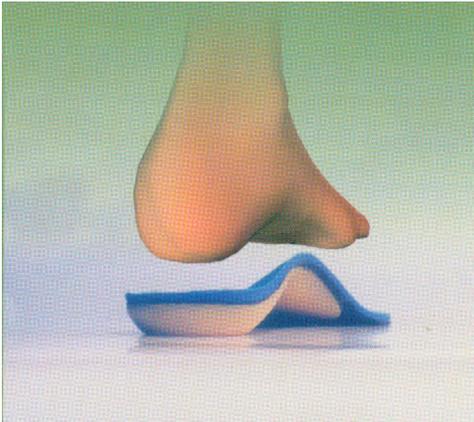
Pronators: Some patients, such as this one, over-pronate. They drop their arches too early, too quickly, and too deeply. They attempt to recover but just don't make it due to the inherent laxity of the tarsal joints due to over-stretched ligaments [congenital joint laxity, forefoot varus, ankle equines, and obesity]. When the body weight passes over the foot, it is still unlocked. Muscles that support and raise the arch must work much harder. Since they work at a considerable disadvantage against gravity and the patient's weight, they eventually exhaust themselves with the effort. [Since the muscle must work abnormally hard, the overuse leads to inflammation and pain]

Supinators: Some patients, such as this one, have an unusually high arch and more rigid foot structure. Since they lack the normal unlocking or unwinding of the foot bones during weight-bearing as in normal pronation, all the weight-bearing force is concentrated on three small points of contact (the heel, first and fifth metatarsal heads). Force concentration in these small areas creates abnormal wear and callus formation as the skin attempts to protect itself from breakdown. This has a negative effect on stand and walk tolerance that worsens with prolonged activity.

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Pronators: The most direct way to treat the cause of the problem is to control the excessive flattening of the arch, thereby restoring normal bone and joint function in the foot. This normalizes the load on supportive muscle and therefore helps prevent early or excessive fatigue.

Supinators: The best way to redistribute plantar foot pressures is to provide the patient with full-contact, full length custom orthotics/pelvic stabilizers by . These are different from standard foot orthotics/pelvic stabilizers in that they follow the complete, actual contour of the patient's arch. That means true full contact and therefore the ability to spread the load over the entire foot surface evenly. Evenly distributed plantar pressures will greatly alleviate focal pressure points responsible for patient intolerance of weight-bearing activities.



is a uniquely custom designed foot orthotic/pelvic stabilizer that is custom molded to apply a full contact force into the arch. It is flexible enough to allow adequate arch flattening for function and comfort but rigid enough to maintain proper control. Because they are custom molded to make full and completely smooth contact with the entire plantar surface of the foot, there are no surface irregularities that might cause other sources of shear stresses and consequent skin breakdown.

Without a custom orthotic/pelvic stabilizer, this patient will likely develop progressively more pain, fatigue, soft tissue breakdown and inflammation with the concurrent potential for adaptive foot deformities. These, as chronic conditions, can be increasingly unresponsive to conservative care and may eventually require surgical correction. Loss of productivity will likely follow the increase in fatigue as well.

Thank you for your consideration in this matter.

Sincerely,

Treating Clinician

Would I Benefit from wearing custom foot orthotics/pelvic stabilizers?

If any of these sentences apply to you – get us to look at your feet today!

- ❑ I have had or currently have increased low back/buttock pain with prolonged standing or walking.
- ❑ I have problems with callusing/corns on one or both of my feet.
- ❑ I have bunions or have had bunions on my feet in the past.
- ❑ I have foot pain/heel pain with prolonged standing or walking.
- ❑ I walk or run recreationally/competitively.
- ❑ I have knee pain walking, going up stairs or with prolonged standing.
- ❑ I have hip pain with walking or prolonged standing.
- ❑ My feet have increased in size over the years.
- ❑ I have shin pain with increased walking or running.
- ❑ I am diabetic.
- ❑ I have or think I may have arthritis in my knees or hips.
- ❑ My parents have had or have any of the above symptoms and have not found relief or comfort from them.

“HEALTHY FOUNDATION WEEK” AT _____ (name of clinic)

Would I benefit from wearing custom foot orthotics/pelvic stabilizers?

If any of these sentences apply to you – get us to look at your feet today!

- I have had or currently have increased low back/buttock pain with prolonged standing or walking.
- I have problems with callusing/corns on one or both of my feet.
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- I am diabetic.
- I have or think I may have arthritis in my knees or hips.
- My parents have had or have any of the above symptoms and have not found relief or comfort from the.

**(clinic name)
(address)
(address)
(phone number)**

How To Maximally Market Your Ultimate Orthotic Workshop

By Dr. Michael Reid, D.C.

For over 10 years, I have been teaching doctors how to market their practice. By purchasing and following the simple step by step instructions, you can instantly add \$5,000.00 to \$10,000.00 per month at the front-end of a 30 minute orthotic workshop.

Whether you are a Chiropractor, Physician, Podiatrist, Physiotherapy or any other health care professional, follow my simple cookie-cutter recipe to increase revenue and new patients to your practice.

This system has been tried, tested and true over the last 12 months. It takes 30 to 45 minutes to perform the power point presentation outlined in the next section and provided to you on the Disc in this package.

Here's an outline of marketing terminology that should be included in ALL of your handouts, flyers, and advertisements. I have also provided you with sample ads and PDF files on Disc in this package.

Marketing Terminology

1. U.S.P. – Unique Selling Proposition

Usually asks a question, includes words such as you or your and is emotionally driven. I.E. “How Are Your Arches?”

2. Benefits

Listed as benefits for potential new patients

“Orthotics/pelvic stabilizers can help treat and prevent many common foot, knee and hip conditions”

“Eliminate foot pain and fatigue”

“Improve Balance and Co-ordination”

3. Testimonials

Add credibility and legitimacy to your product

Removes any hesitation that potential patients may have about utilizing your service

Makes you sound like the expert

4. Complimentary

A “complimentary workshop” removes financial barriers to attending your workshop

5. Urgency, Scarcity, Intensity

Call now, Call Today, Call for Reservation

Limited to First 30 registrants, Limited seating

Back By Popular Demand

6. Call To Action

By offering a \$40.00 savings to your flyer when people attend your workshop, this creates a powerful reason for them to attend as everyone nowadays is looking for a discount or savings.

By attaching this to your in-office and/or external flyers, you will discover a 300% to 400% increase in your attendance. I should know. I’ve been experimenting for years.

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A Step By Step Protocol For Maximizing Attendance By Dr. Michael Reid, D.C.

Simply follow the outline below. Following are sample ads, which are on Disc #1 as a PDF.

1. Determine the date of your “Ultimate Orthotic Workshop”. I recommend a Monday or a Wednesday evening, preferably at 6:00 p.m. or 7:00 p.m. at the latest.
2. Call [1 800-551-3008](tel:18005513008) or visit at <http://www.theorthoticgroup.com/> Order your Foot Scanner and laptop. Inquire about their “Red Carpet” training for Doctors and team to become certified for scanning feet.
1. Create flyers for in-office handouts and posters and post 2 weeks minimum in advance around your office.
2. Contact your local newspaper for ad deadlines. Ensure newspaper ad comes out to community 7 to 14 days prior to workshop date.
3. Set a goal with your office team on the number of patients, guests and external non-patients you would like to attract.
4. Use a sign-up sheet (sample on pg) for patients, guests and phone-ins. Include their phone number for a reminder call the night before.
5. Promote daily to patients, 2 weeks prior to workshop event. Invite them to bring a guest or two. Instruct that they must reserve a seat and that they will receive \$40.00 off (or any discount you desire) the night of the workshop only.

Have a dedicated assistant perform reminder calls the night before.

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Note: When giving a reminder call, have your assistant segway your prospect with the following script:

“Mrs. Jones, hello, this is Heidi calling from Dr. Mike’s office to remind you of the Orthotic Workshop tomorrow night. He’s also asking all of his guests and patients to ascertain their insurance coverage for orthotics/pelvic stabilizers. We look forward to seeing you tomorrow night at 7:00 p.m.”

8. Perform a foot scan on every person as they enter your workshop and printout their copy (Alternative to use a computerized gait analysis)
9. All non-patients (guests, walk-ins, family, friends) fill out a “Got Subluxation” form (sample on pg) or “Health History” form prior to event. This is utilized at your close to turn an orthotic patient into an active patient in your practice.
10. Perform your “Ultimate Orthotic Workshop” as outlined in the power point presentation.

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Checklist For Ultimate Orthotic Workshop

- Date, Time, Location set
- Scanner from ordered
- Flyers created – Internal and External
- Local newspaper contacted for advertising
- Attendee goals set with team
- Handouts, flyers, ads set up 2 weeks in advance
- Sign-up sheet
- Promote 2 weeks out
- Reminder call – 24 hours prior, ask about insurance coverage
- Prep and test power point and LCD projector (slides or acetates)
- Pedographs
- Got Subluxation Forms (guests, non-patients)
- Close – check guests
- Close – special gift for orthotics/pelvic stabilizers (discount – i.e. \$40 off tonight only)

(ROUGH EXAMPLE) As A Posted Flyer In-Office and/or Handout At The Front Desk

HOW ARE YOUR ARCHES?

Too High?



Too Low?

Not Sure?

Find out how orthotics (arch supports) can help you!

During the Month of March Lifetime health and Wellness will be offering Free orthotic, foot and gait analysis with **Pedograph** test to identify pressure points on your foot.

Orthotics can help to treat and prevent many common foot, knee and hip conditions including:

- Flat Feet
- Heel Spurs
- Mortons Neuroma
- Plantar Fasciitis
- Low Back pain
- Bunions
- Knee Pain
- Shin Splints

Eliminate foot pain and fatigue

Improve balance and coordination



And for the month of March with our special offer your orthotics are **\$299** for the first pair and **\$150** for the second (regularly \$350 per pair).

Take a step in the right direction with custom foot orthotics
From Lifetime Health and Wellness

Ask out front desk for available times.

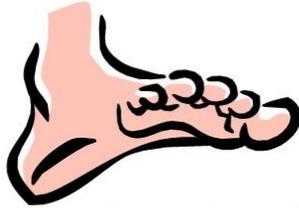


(ROUGH EXAMPLE) As A Handout For The Front Desk

BACK BY POPULAR DEMAND: ORTHOTIC WORKSHOP

HOW ARE YOUR ARCHES?

Too High?



Too Low?
Too Low?

Not Sure?

Find out how orthotics (arch supports) can help you!

Are you tired of Foot, Knee and Lower Back Pain? Come out to this informative workshop on Orthotics. We will be offering Free orthotic, foot and gait analysis with Pedograph test to identify pressure points on your feet.

Orthotics can help to treat and prevent many common foot, knee and hip conditions including:

- Flat Feet
- Heel Spurs
- Mortons Neuroma
- Plantar Fasciitis
- Low Back pain
- Bunions
- High Arches
- Shin Splints

Orthotics Can:

- Eliminate foot pain and fatigue
- Improve balance and co-ordination
- Help hold your adjustments better
- Improve your sports performance
- Prevent Knee, Hip and Low Back Pain

Here's what people are saying!!!

- I tried everything for my low back pain. Since owning my orthotics and having regular chiropractic adjustments, my low back pain has disappeared!
Helen B.
- Being a mail carrier, I went home every night with unbearable foot pain. Thanks to my orthotics I am able to walk my dog when I get home.
Richard C.
- I love my orthotics! They fit in all my shoes and without them my knee pain would still be keeping me away from my running regimen.
Don J.

Join Dr. Mike Reid, Dr. Amy Vermilyea and Dr. Jim Wood

DATE: Thursday, June 30th, 2005

LOCATION: Hampton Family Chiropractic 1419 Carling Ave., Suite 209

TIME: 7:00PM-8:00PM

✂
\$40

SAVE \$40.00 ON YOUR ORTHOTIC PURCHASE \$40
WHEN YOU ATTEND THIS FREE WORKSHOP

Limited Seating to the First 30 Registrants

\$40

CALL 761-1600 OR SEE THE FRONT DESK FOR REGISTRATION
DISCOVER SOLUTIONS TO YOUR FOOT PAIN TODAY!

\$40

GOT SUBLUXATION SURVEY

(YOUR CLINIC NAME HERE)

Dr. _____ DC

(Insert clinic address, phone number and web site here)

Name: _____ Age: _____

Phone (Home): _____ Phone (Work): _____

Address: _____ City: _____ Province: _____

Postal Code: _____ e-mail address: _____

Occupation: _____ #Hours/Week Currently Working: _____

Spouse's Occupation: _____ Date: _____

1. CHECK ANY OF THE FOLLOWING BODY SIGNALS YOU HAVE EXPERIENCED IN THE PAST 6 MONTHS.

- | | | | |
|---|--|--|--|
| <input type="checkbox"/> Low Back Pain | <input type="checkbox"/> Elbow Pain | <input type="checkbox"/> Tension Across Top of Shoulders | <input type="checkbox"/> Allergies/Asthma |
| <input type="checkbox"/> Pain Between Shoulder Blades | <input type="checkbox"/> Shoulder Pain | <input type="checkbox"/> Numbing/Tingling in Arms or Hands | <input type="checkbox"/> Digestive Problems |
| <input type="checkbox"/> Neck Pain | <input type="checkbox"/> Hip Pain | <input type="checkbox"/> Numbing/Tingling in Legs or Feet | <input type="checkbox"/> Arthritis |
| <input type="checkbox"/> Tension/Headaches | <input type="checkbox"/> Knee pain | <input type="checkbox"/> Dizziness | <input type="checkbox"/> Tired/Fatigued |
| <input type="checkbox"/> Ankle/Foot Pain | <input type="checkbox"/> Nervous | <input type="checkbox"/> Wrist/Hand Pain | <input type="checkbox"/> Difficulty Sleeping |

Which of the above is worse? _____

How long have you had it? _____

When it is at its worst, how does it feel? _____

2. Does this cause you to be:

- Moody
- Irritable
- Interrupt Sleep
- Restricted on Daily Activities

3. Does this affect your work:

- Decision Making
- Poor Attitude
- Decreased Productivity
- Exhausted at End of Day
- Unable to Work Long Hours

4. Does this affect your life:

- Lose Patience with Spouse or Children
- Restricted Household Duties
- Hinders Ability to Exercise or Participate in Sports
- Interferes with Ability to Participate in Hobbies or other Desired Activities.

If you checked any of the above items, then you could be suffering from:

- Excessive Stress
- Structural Misalignment
- Subluxation

CHIROPRACTIC CAN HELP YOU because Chiropractic Doctors gently adjust the body, naturally, without drugs to remove the stress on the nervous system that CAUSE health problems.

WOULD YOU LIKE TO GET RID OF THE PROBLEM? YES NO

If your answer is **YES**, there are several alternatives available to you. Please check the item most appropriate to you.

- I would like to come to the Doctor's office for a complete evaluation. This will allow me to find out if I can be helped by Chiropractic without further obligation.
- I would like a free health report on: __ Asthma, Allergies, Hayfever; __ Car Accidents; __ Carpal Tunnel Syndrome; __ Headaches, Migraines; __ Low Back Pain, Mid Back Pain, Neck Pain
- I would like the Doctor to call me to discuss my health problems before making an appointment.

As An Advertisement In The Local Or City Newspaper (ROUGH EXAMPLE)



COMPLIMENTARY WORKSHOP

Healthy Feet And Orthotics

*Eliminate Foot, Knee, and Hip
Pain Forever.*

**Thursday June 30th
7:00 pm-8:00pm**

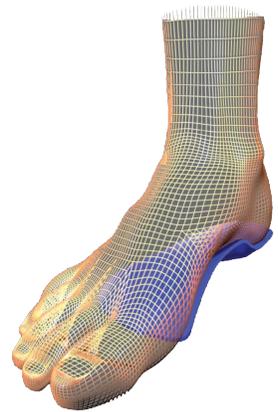
Discover Safe and Effective Solutions.

Presented by Dr. Amy Vermilyea
Hampton Park Plaza- 1419 Carling Ave. Suite 209.

**Limited Seating
Call for Reservations**

(613) 761-1600

THE ART OF OPENING & CLOSING YOUR WORKSHOP



The Art of Opening and Closing Your Workshop

By: Dr. Mike Reid, D.C.

What you say and how you present to your audience can make or break all the hard work and preparation that you have put into your presentation.

I'd like to give all of you a simple opening, and a simple close that I know will make the difference between success and failure in this workshop. I've even CHUNKED it for you. Put these words on a 3 x 5 card so that you may remember the key elements in your opening that are vital to an exceptionally high return on investment in this presentation.

Best of Luck,

Dr. Mike

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The Opening

Welcome: “Welcome everyone to our award winning “Ultimate Orthotic Workshop”

Lifestyle: “By being here tonight, you have committed toward a healthier lifestyle of wellness and prevention, enjoyed only by 1% of today’s healthiest people”

Discover: “Tonight, you will discover little known secrets of creating a healthy foundation that will add years to your life and life to your years!”

Healthiest People: “As we finish tonight’s presentation, you’ll understand why some of the world’s healthiest people, with strong and solid foundations wear pelvic stabilizers.

Gift: “We will also close with a special gift tonight of \$40.00 for all of you who are committed to purchasing a pair of orthotics/pelvic stabilizers tonight only.”

The Body

Review the power point presentation on Disc #1. Review this first, prior to giving your presentation.

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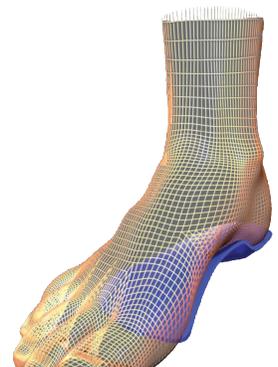
The Close

Thank You: “In closing, I want to thank all of you for being here tonight. Tonight, you discovered how important it is to be biomechanically sound in your posture. Out of curiosity, by a raise of hands, how many of you are patients of our clinic? **(patients raise their hands)** Thank you! For those of you who are not patients, please raise your hand **(non-patients raise their hands).**”

Guests Checkup: “If you are a guest here tonight, I want you to take your “Got Subluxation” form to the back of the room. Our examination specialist, Dr. Jim **(or tech assistant, exam doctor, etc.)** will perform a brief posture and palpatory check of your spine to determine if you are biomechanically sound. He/she will then book you in for a thorough, comprehensive, complete and professional spinal and neurological examination, valued at **(\$ amount)**, for FREE, when you book tonight only. The exam also includes your report of findings. There is no obligation to be under care. This is an examination only.

Gift: “For all of you who have attended tonight, we have a special gift for you. When you get casted in your pelvic stabilizers, we will extend to you a \$40.00 voucher for a 10% savings tonight only. Please step to the back to see one of the doctors or tech assistants to get your customized casting. It only takes a few minutes to cast.

***CHARGING FOR YOUR
ORTHOTICS
PELVIC STABILIZERS***



What Should I Charge?

\$350-500

Cost one pair - \$399 (\$400, with a \$40 voucher)

Second pair - \$299

Third pair - \$199

Family member discount \$50 off.

Lecture attendee discount \$40 off.

Orthotic therapy is only as effective as the amount of time in the foot orthotics/pelvic stabilizers! Many patients will need two pairs immediately. I tell them they want to be in the when they are working and playing. Live in them. 85% of their day. For many people that requires two pairs or a change in shoe selection.

Pretend like they are free.

What about patients who already have orthotics/pelvic stabilizers?

Simple. Be confident that the orthotic technology you are using is the **best**. Ask the patients to bring in their orthotics/pelvic stabilizers (half the time they say “oh yes I have orthotics/pelvic stabilizers.” – but they are never in their shoes!) Talk to them about how the foot functions during walking. **“The latest technology has a completely different philosophy than older technology foot orthotics/pelvic stabilizers. These orthotics/pelvic stabilizers are designed to support your foot through all motions it undergoes.”** Show them the Fowler test. **“This is a full contact orthotic – now let’s see your old ones...”** The comparison is so evident; it speaks just as loud as the words preceding it.

Collect old orthotics. Use them as examples. Call to get free samples.

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Hire an Expert from Afar

Golfers – Improve Golfing biomechanics. You will retire early if you push this category to succeed. Golfers will money to get better.

Orthopedic Surgeons – Post Surgical orthotics can be emphasized. Send some literature. Take them out to lunch.

Diabetics – Send PCP's information. Cast your PCP for them.

Athletic Teams – Injury Prevention and Performance Enhancement. We have discussed this one a lot already.

*Teachers – One of the most noble, underpaid positions. Parents – talk to you children's teachers. Put them in foot orthotics/pelvic stabilizers (Get good grades ☺)

*Firefighters, Police, etc. – Support their feet!

*Give a discount ☺

Patient Education

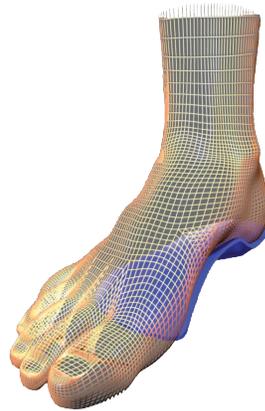
This is very important. EXPLAIN to your patients why they have the aches and pains, the bunions – on a very basic level so they can REMEMBER and pass it along. If a patient knows how a bunion forms they will be more apt to explain it to those they love.

Many patients will fall into different categories for why they would benefit from orthotics/pelvic stabilizers. The majority of your patients will benefit tremendously from . Be honest as to why. Some will be Medical Necessity cases, others will not.

- Bunion
- Plantar Fasciitis
- Heel Spur
- Hammertoes
- Calluses
- Bump on Foot
- Knee Pain
- Hip Pain
- Flat foot vs. Arched foot – Performance enhancement

are only as effective as the health care practitioner that is utilizing them. You are an expert with a new tool – practice makes perfect.

FOLLOW-UP LETTERS



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I send these out to any patient that has bought orthotics/pelvic stabilizers from me. The first letter goes out at the 2-week mark, the second letter at the 6-week mark and the third letter at the 3-month mark. Have your office staff keep a patient tracker.

Target the obvious first

WHO STANDS? (Hairdressers, casino workers, etc)

WHO WALKS? (Postal workers, Fed Ex, etc.)

WHO TALKS? People will spread a good word – target those who will explode your practice and jump at the chance to take their foot orthotics/pelvic stabilizers out. EDUCATE YOUR PATIENTS.

Nurses – Get into a hospital, talk to them on their lunch hour. This is a hurting group of individuals. 12 hours shifts on concrete.

Pregnant Women – Oh how they love . They will have an easy break in and love you forever.

Geriatrics – Help them prevent falls, decrease knee and hip wear and tear, give them some extra cushion on their feet.

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LETTER 1

Date: _____

Dear _____,

Here at _____ (**name of clinic**) we strive to do things differently. By educating you and explaining our care, we work together to achieve your health care goals. You have recently been casted for custom foot orthotics/pelvic stabilizers. Remember to stretch your calf muscles and hamstring muscles regularly over the next two weeks to help the break in process!

Once you receive your orthotics/pelvic stabilizers, should ever have any questions or concerns regarding them please do not hesitate to call the office at _____ or schedule a follow-up consultation.

Our door is always open to new patients, and I welcome any friends or family you send in. I have enclosed a few business cards, and I encourage you to pass them around. You will receive a call from our office once your new foot orthotics/pelvic stabilizers have arrived.

Health and Happiness,

Dr. _____
(name of clinic)

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LETTER 2

Date: _____

Dear _____,

Hello from _____ **(name of clinic)**. I am dropping you a little note to check how you are enjoying your orthotics/pelvic stabilizers. I wanted to remind you that your orthotics/pelvic stabilizers are most effective when monitored during your first three months of wear time. We recommend you coming in for a two-week check up, four week check up and at the 3-month mark. All of these visits are included with the cost of the orthotics/pelvic stabilizers and are useful for us to determine how the orthotics/pelvic stabilizers are working for you. At these check ups we can discuss any concerns you may have along with recommendations for stretching and shoe selection. Common signs that an adjustment may need to be made to your orthotics/pelvic stabilizers are persistent arch pain, blisters or prolonged discomfort with increasing wear time.

Remember, you have 6 months from the time you got your first pair to decide if you would like a second pair at a reduced cost. Also, I am putting together patient testimonials and would love your contribution. If you have had a great success story with these orthotics/pelvic stabilizers or just love them and have a second to put it down on paper I would really appreciate it. And of course, if you have any recommendations on how we could make this technology better, I would love to hear them.

Here at _____ **(name of clinic)**, we strive to do things differently. By educating you and explaining our care, we work together to achieve your health care goals.

If you should have any questions, please give me a call at _____.

Health and Happiness, Dr. _____

Chiropractic Masters

Doctor of Chiropractic

LETTER 3

Date: _____

Hi there!

How are you managing with your new ? My patients are always asking me how they could have prevented their bunions, knee pain, foot pain, back surgeries etc. I would like to take this opportunity to talk to you a little bit more about **prevention**.

You have already taken many of the necessary steps to promote healthy foot function; correct biomechanics in your knees, hips and back; and also to prevent degeneration in your joints. What about helping those in your family with the same problem? Look ahead into your family tree – we cannot dispute the power of one's genetics. Many of the structural imperfections we see in ourselves are easily seen in our mothers, fathers, siblings and children. Lower limb structure largely determines how our hips, knees, and ankles function during activity and also how our pelvis and spine react to that function. Custom Orthotics/pelvic stabilizers are a simple solution to years of aches and pains. My ultimate goal for you and your family is to prevent those aches and pains, surgeries, and injuries. It is also to promote athletic excellence and achievement through proper foot mechanics. I am extending a **complimentary evaluation** to your family members, both young and old.

Children are easily screened for possible future complications with their lower limb structure. Children do not grow out of flat feet – you are living proof of that – they grow right into them! It is simple – kids are flexible, they adapt well to biomechanical correction and develop into stronger healthier adolescents and adults. Although easier to break-in in children there is no age to old for orthotics/pelvic stabilizers. Our orthotics/pelvic stabilizers can help your parents with balance to prevent falls and improve posture, help prevent further osteoarthritis of the knees, hips and back and of course diminish aches and pains.

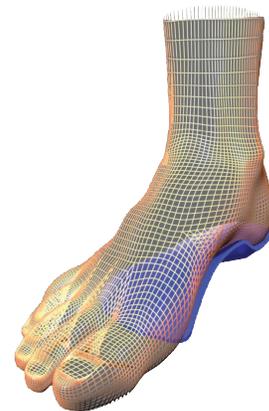
We offer **discounts for family members**, but first take me up on the complimentary evaluation to find out if any of your family members would benefit from wearing custom foot orthotics/pelvic stabilizers.

It is of utmost importance to me that you are not only satisfied with your foot orthotics/pelvic stabilizers but also ecstatic with them! If you have any questions at all, please give me a call.

Health and Happiness,

Dr. _____
_____ (name of clinic)

***ORTHOTICS/PELVIC
STABILIZERS
IN
INDUSTRY***



Industrial Ergonomics Material

The Biomechanics of Gait

The greatest force affecting the human body is gravity. The average person takes 10,000 steps a day. Each step produces a force of over 3 times the body weight. The foot is designed for the surface of the planet Earth. Years of standing and walking on concrete cause changes in the foot that leads to almost all of the foot, ankle, knee, hip and lower back problems we encounter. These biomechanical imbalances often cause pain and disability that can lead to expensive surgical treatments; keeping employees out of work for extended periods. In advanced cases, surgery is necessary but conservative therapy is preferable because it is less expensive, less invasive, and has fewer complications. Surgery addresses a single symptom whereas orthotics/pelvic stabilizers treat the disease.

Industrial Ergonomics

Ergonomically, the industrial environment is hard on the body. The concrete floors found in most factories, warehouse and construction areas coupled with the amount of standing that is required on their jobs, often lead to mechanical failure of the musculo-skeletal system. Joint pain, inflammatory conditions and progressive deformity are the consequences of repetitive motion without proper balance and support. All of the following common medical conditions are caused by pronation (collapse of the arch) and can be either corrected, prevented or treated with :

- | | |
|--|---|
| Heel Spurs | Chondromalacia Patella/Medial Knee Pain |
| Sub-Calcaneal Bursitis | Sciatica |
| Plantar Fasciitis | Lateral Ankle Pain |
| Retro-calcaneal Bursitis | Low Back Pain |
| Interphalangeal Sesamoids | Hip arthritis and Bursitis |
| Pinch Callus | Metatarsal Cuneiform Exostosis |
| First Metatarsal-phalangeal Joint Arthritis: | Hallux Limitus/Rigidus |
| Sesamoiditis | Metatarsalgia, sub metatarsal bursitis |
| Stress Fractures | Morton's Neuroma |
| Tailor's Bunions | Hallux Abducto Valgus: Bunions |
| Shin Splints | Intractable Plantar Keratoma: Corns |
| Hammer toes, Malet toes and Claw toes | |
| Tendonitis: Peroneal and Achilles | |

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Manufacturing industries have found that prevention is less expensive than treatment. Wellness programs and ergonomic committees have been born because of this realization. If the workplace can be made more suitable to the human form, employees become healthier and more productive. Less sick time is used. Production is smoother, more efficient and less costly. Both medical benefits and workman's compensation would experience reduced losses. Savings would be substantial.

Orthotics/pelvic stabilizers in Industry

Diagnoses with mechanical etiologies respond best to mechanical treatments. Orthotics/pelvic stabilizers are the most effective means of rebalancing the foot and neutralizing the damaging effects of gravity and concrete. They are also the least expensive.

Cost Savings

Compared with the surgical alternative treatments, are easily cost effective. Surgeries keep employees out on disability for extended periods. They often require postoperative rehabilitation and may result in more severe and permanent disability than the original deformity. Risk is high and satisfaction is low. More importantly, surgery treats the symptom and leave the disease. Symptoms then recur and more surgery is required.

Orthotic therapy in most doctors' offices range from \$275.00 to \$500.00. This is coupled with several ancillary charges. An example would be a typical heel spur treatment as follows:

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Office Visit \$75.00
X-Rays \$150.00
Injections (x 3) \$150.00
Oral Medications \$80.00
Strapping \$ 35.00
Physical Therapy
Modalities \$224.00
Orthotics \$375.00

Total for Conservative Treatment **\$1090.00**

Unfortunately, these treatments often do not give satisfactory results. The patient may go on to surgical intervention. These costs may be as follows:

Surgery \$3000.00
Hospital \$3000.00
Disability \$7000.00
Rehabilitation \$2000.00
Labor \$?

Total Surgical Expense **\$15000.00**

Total Expense Conservative and Surgical **\$16090.00**

In comparison, this same patient can be fitted with, in-house, for \$399.00. Further, there is little or no lost time from work, visits to the doctor, paperwork, etc. For the cost of treating **one** heel spur surgically approximately **120** employees can enjoy the ergonomic benefit of TOG orthotics. These employees preventing all of the other aforementioned conditions.

Advantages of

offers a pelvic stabilizers device that solves all of the problems of previous attempts at biomechanical correction:

An innovative scanning method that is reproducible, fast, clean, inexpensive and mechanically correct.

Orthotics that fit in the shoe without changing shoe size.

Custom designed for each patients.

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Flexible to allow for shock absorption

2 year guarantee (check with TOG for updated info)

Conform to patient's actual arch,

Full training through "Red Carpet training".

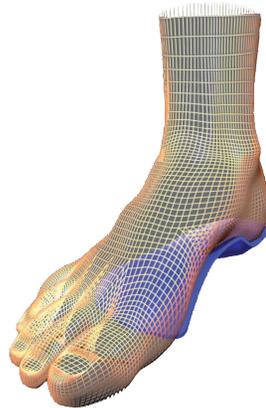
Hand craftsmanship by highly trained and skilled technicians.

Fast Service: five days or less in lab. Special orders are no problem.

Cost savings of over 92% as compared to conventional conservative therapy.

The idea of corporate wellness programs is on the rise. Many large companies have begun to include comprehensive wellness programs for their employees. Orthotic therapy is a vital component of any wellness program. Well employees are happy and productive. They make businesses thrive.

THE POWER POINT PRESENTATION



Did you know?



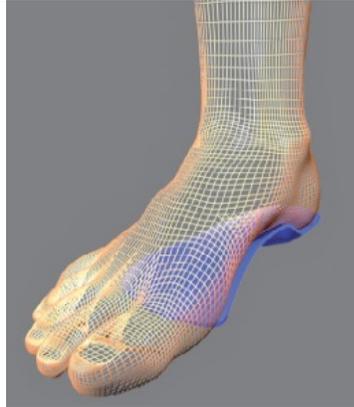
That your feet could affect your knees? Your hips? Your back? Your neck?

- Your feet are the foundation of your body, supporting your spine and pelvic structure.
- As we age, the arches of the feet may settle like a foundation, which can cause misalignment and pain.

Did you know?

- Your body's foundation must be balanced to support the weight above it.
- If the arches in one or both of your feet collapse, your body doesn't get the correct postural support, causing an imbalance in your skeletal frame.





Good Posture and Joint Health Begin Where the Foot Meets the Ground



The Human Foot

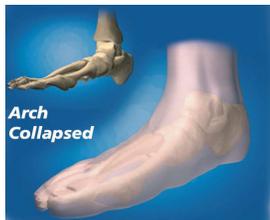
- The foot is a biomechanical marvel made up of:
- 26 bones
- 58 joints
- 107 ligaments
- 19 intrinsic muscles
- 13 extrinsic muscles all working together in concert to provide balance, stability, and locomotion.

AMAZING FOOT FACTS



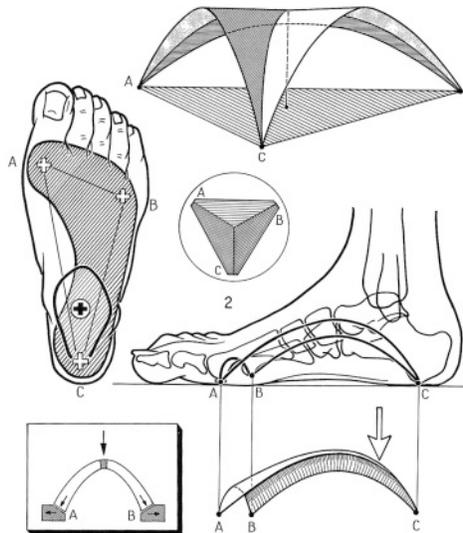
- The foot is the body's interface with the most powerful force that affects our body – GRAVITY!
- The average person takes 15,000 steps / day – 115,000 miles in a lifetime – enough to circle the planet 4X.
- 3.5 X our body weight passes through our feet each step. 130 pounds person absorbs 500 pounds of pressure with every step. Equaling about 5 million pounds of pressure each day.

How are your arches?



- The arch of the foot is the body's shock absorber, functioning to absorb 30% shock when the foot hits the ground.
- If our feet fail to do the job our knees, hips and back will take the extra load and begin the process of early degeneration.
- 95% of people over-pronate, which are poor shock absorbers!

Arches of the Foot



Indicators of Excessive Pronation

- Foot Flare / Toe Out
- Posterior Heel Wear
- Patellar Approximation
- Achilles Tendon Bowing
- Dropped Navicular / Flat Arch
- Calluses on 2,3,4 Metatarsal Heads
- Weak Gluteus Medius, Psoas and Quadriceps



What are Faulty Foot Mechanics?

- The foot is designed to unlock, or **PRONATE**, when it hits the ground for shock absorption and to conform to the terrain.
- Then it must re-stiffen (lock), or **SUPINATE**, for efficient leverage as we propel ourselves forward onto the next step.
- When either of these phases are excessive or out of sync the foot has faulty mechanical function

Faulty Foot Mechanics

- A foot that has to fall to hit the ground is a much less effective foot. **Energy and force is lost** through excessive pronation, the foot is floppy and mushy and **unable to create power**.
- About 4% of people are **OVER-SUPINATORS** with high, rigid arch structure. Then the problem is poor shock absorption and weight bearing pressure concentrated in a few spots.

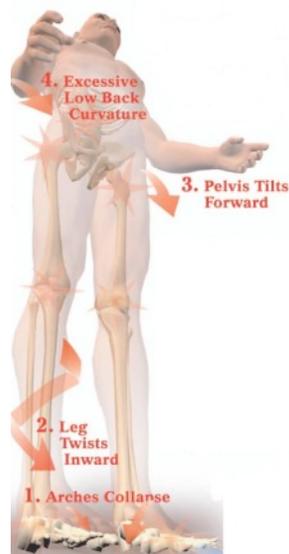
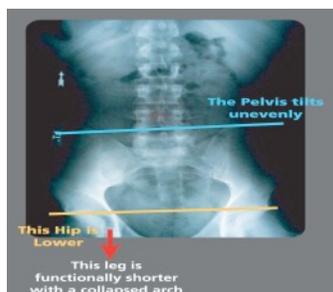
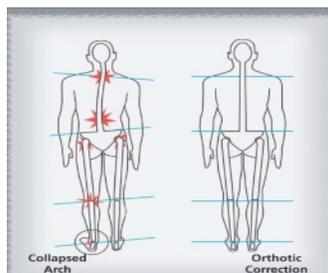


60% of our body weight is designed to go through our big toe while walking.

What Kinds of Problems Result From Faulty Foot Function

- Flat feet transfer many biomechanical disadvantages up the kinetic chain and a majority arise in the feet such as bunions, calluses, plantar fasciitis, neuromas and corns.
- Pronation causes early wear and tear in the knee joints. Most commonly the medial joint space wears out and early signs of degenerative arthritis is very common.
- If the lower leg rotates inward, the hip follows it. In excess, this can cause hip and low back problems.

Problems From Faulty Foot Mechanics



Plantar Fasciitis

- Plantar fasciitis is caused by a progressive biomechanical imbalance due to excessive flattening of the arch during walking and other weight-bearing activities.
- As the body weight passes over an unlocked foot, the increased foot flexibility allows the foot to widen and elongate, pulling repetitively on the plantar fascia like a bowstring.
- **Plastic Deformation** – Low intensity forces for prolonged periods of time create PERMANENT plastic changes



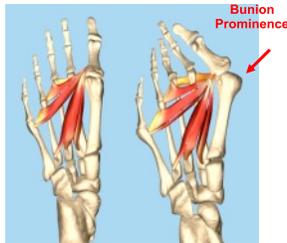
Morton's Neuroma



Neuromal Mass

- Enlargement of the sheath of one of the four plantar inter-digital nerves. The sheath, called a schwann cell, is an onion skin covering around a nerve cell to protect it from trauma.
- Patient experiences a nerve compression pain or burning sensation. Then the signal is interrupted causing tingling and later numbness.
- The space between the bases of these bones is tight and as we walk in shoes it squeezes the already enlarged and inflamed nerve. Then the sharp pains begin.

Bunions / Hallux Valgus



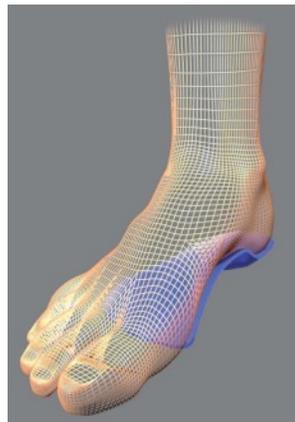
- As the body weight passes over an unlocked foot, the first metatarsal is free to be pushed up and out to the side on its axis. As this motion occurs, the muscular attachments to the base of the great toe pull in an opposite direction, pulling the toe inwards.
- These combined motions eventually produce the obvious bulge deformity characteristic of the condition. The outward bulge is then subject to repetitive trauma against the side of the shoe from increasing pressure and chafing.

Knee, Hip and Lower Back Pain and Dysfunction

- Since the foot is the base of the lower kinetic chain, abnormalities here will translate up the leg, which will affect the pelvis. The pelvis is the base of the spine and enormously influences its function. With over-pronation of the foot, an abnormal torque at the ankle causes excessive **internal rotation of the lower leg**. This ultimately results in an **excessive lordosis** of the lumbar spine with pathological consequences – **early degenerative changes**.

What is an Orthotic?

- An orthotic is a supportive device which is placed inside footwear, to change the mechanical function of the foot.
- It works dynamically during weight-bearing activities like walking, running and standing.



Balance and Support

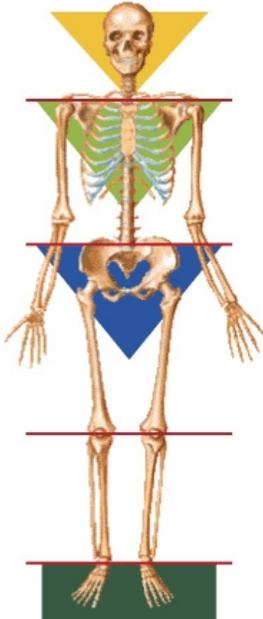
Custom-made Spinal Pelvic Stabilizers slide into your shoes to help improve your balance, posture and overall alignment.



The Associate™ Platinum is a tool that will allow a digital scan of the feet.

- The Associate™ Platinum helps the doctor to screen for imbalances that contribute to problems in any number of places, like your knees, hips, and low back to obtain positive results in nearly everyone from children to seniors.

Research



- ' custom-made, flexible orthotics/pelvic stabilizers improved symmetrical balance ability and enhanced proprioception.

Stude DE, Brink DK. - Effects of nine holes of simulated golf and orthotic intervention in experienced golfers.
J Manip Physiol Ther 1997; 20(9):590-601.

Research



- Q-angle asymmetries, secondary to excessive pronation affecting knee alignment, can be effectively controlled or corrected by utilizing ' custom-made, flexible orthotics/pelvic stabilizers.

Kuhn DR, Yochum TR, Cherry AR, Rodgers SS.
- Immediate changes in the quadriceps femoris angle after insertion of an orthotic device.
J Manip Physiol Ther 2002; 25(7):465-470.

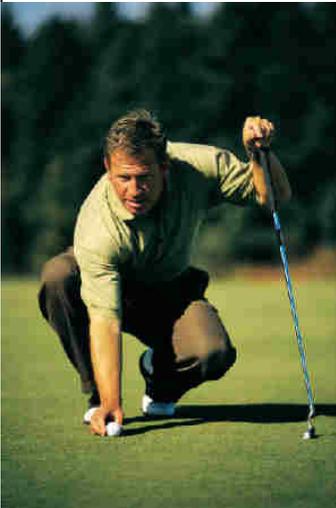
Research



- The use of flexible, custom-made Spinal Pelvic stabilizers correct pedal biomechanics and restores proper joint function.

Yochum TR, Barry MS. – Bone marrow edema caused by altered pedal biomechanics.
J Manip Physiol Ther 1997; 20(1):56-59

Research



- ' stabilizers improve gait, and demonstrates 29-36% increase in pelvic rotation reducing fatigue after six-weeks of use.

Stude DE, Gullickson J. - The effects of orthotic intervention and 9 holes of simulated golf on gait in experienced golfers.
J .Manip Physiol Ther 2001;24(4):279-287

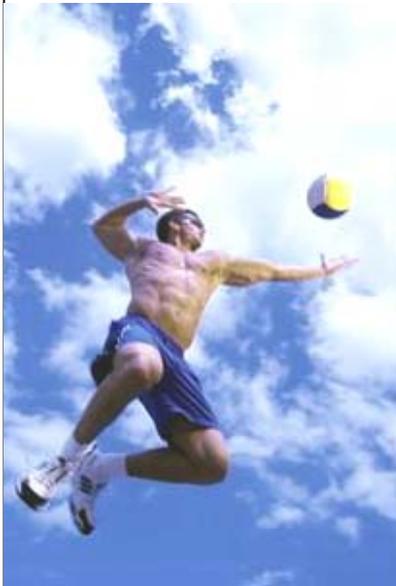
Research



- ' stabilizers offer comfort to workers whose main job responsibilities are accomplished while standing on hard surfaces.

Olsen JD, Rowan SA, Austin WM. - The effectiveness of custom-made orthotics/pelvic stabilizers in a standing work environment. Paper presented at World Federation of Chiropractic 2005 convention.

Research



- ' Stabilizers Improve Vertical Leap
- The use of custom-made orthotics/pelvic stabilizers can positively affect the vertical leap of a jump sport team.

Austin WM, Nosco D, Olsen JD. – The effect of custom orthotics/pelvic stabilizers on the vertical leap of a jump in a sport demanding jumping. J Chiro Ed 2004; 18(1):36-37.

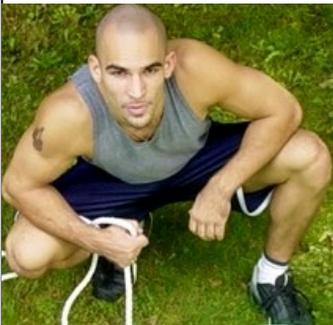
Research



- Custom-made, flexible orthotics/pelvic stabilizers provided increased heel-strike shock absorption and enhanced afferent-motor responses improving low leg pain.

Austin WM. Shin Splints with underlying posterior tibial tendinitis: a case report. J Sports Chiro Rehab 1996; 10(4):163-168.

Research



- Correcting or supporting the faulty biomechanics often makes the difference in providing long-term relief of symptoms and return to activities of daily living, including intense athletic training programs.

Austin WM. – Spin splints with underlying posterior tibial tendinitis:
J Sports Chiro Rehab 1996; 10(4):163-168

Research



- Chiropractic care with stabilizer orthotics/pelvic stabilizers makes a difference in function in sports, recreational activities and helps with prolonged standing problems.

Zhang J, Zhou j. – Chiropractic adjustments and orthotics on reducing discomfort from prolonged standing.

Improves Balance, Coordination and Performance



- **Professional athletes** - Denver Broncos, NY Yankees, Andy Roddick and Tiger Woods.

- **Diabetic Foot** – reduces shear forces and pressure points that prevent callusing and ulceration.



Who is
?

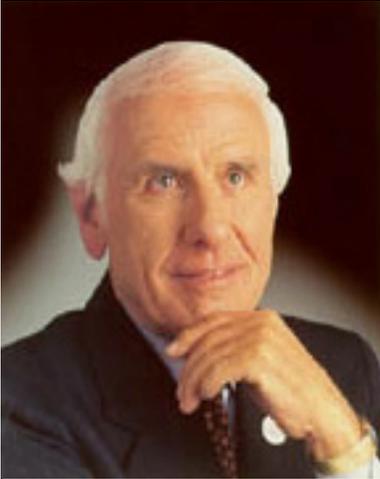
The world's exclusive provider
of custom-made Spinal
Pelvic Stabilizers



After 55 years, remains the brand you can trust.

Can Orthotics/pelvic stabilizers Prevent or Correct my Problems?

- **Yes!** If the problem is caught early enough, pain and deformity can often be prevented. Regular use of these unique orthotics/pelvic stabilizers can often reverse deformity development and prevent surgery.
- **How?** Because when you restore normal foot function you give your body what it needs to heal itself. It will also help hold your adjustments longer thereby, making them more effective.



“Take good care of your body. It’s the only place you have to live.”

Jim Rohn

HEALTH CARE QUIZ

True or False



- 1. It is possible that a person could have heart disease, cancer, high blood pressure and yet not feel a symptom?**

TRUE or FALSE

HEALTH CARE QUIZ

True or False

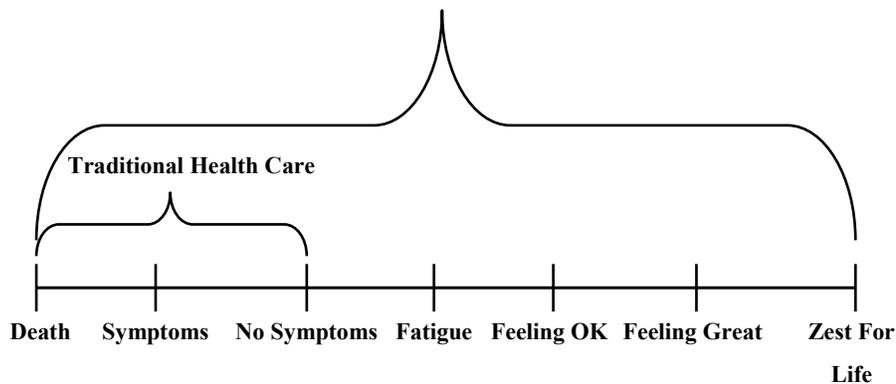


2. When a person has no symptoms he is on the road to good health?

TRUE or FALSE

HEALTH LINE

Chiropractic Health Care



Health Definitions

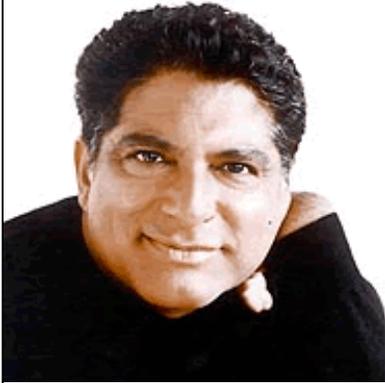
- **World Health Organization:**
 - Health is a state of complete physical, mental, or social well-being and not merely the absence of disease or infirmity.
- **Nutrition and Diet Therapy**
 - Optimal human fulfillment and productivity – quality of life
- **Encyclopedia of Natural Medicine:**
 - Health is the result of...individual responsibility – choosing healthy alternatives over non-healthy.

Causes of Preventable Death in North America



- Cigarette Smoking
- Alcohol
- Medical Malpractice (784,000 deaths/year; 1 every 2 minutes)
- Traffic Fatalities
- Firearm Death

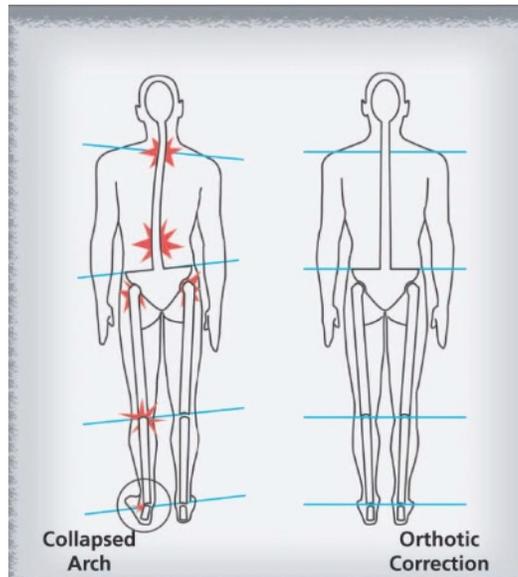
Public Citizen-May/June 1994



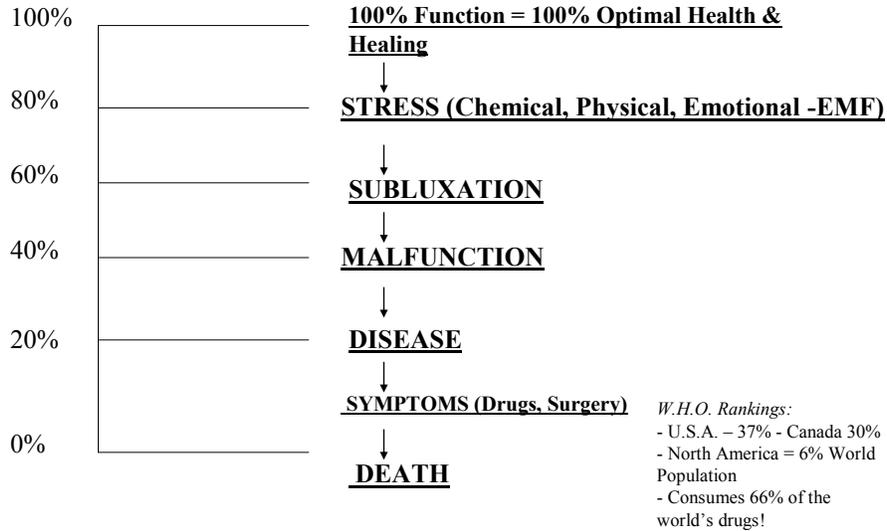
“Our own inner intelligence is far superior to any substituted from the outside.”

Deepak Chopra, M.D.

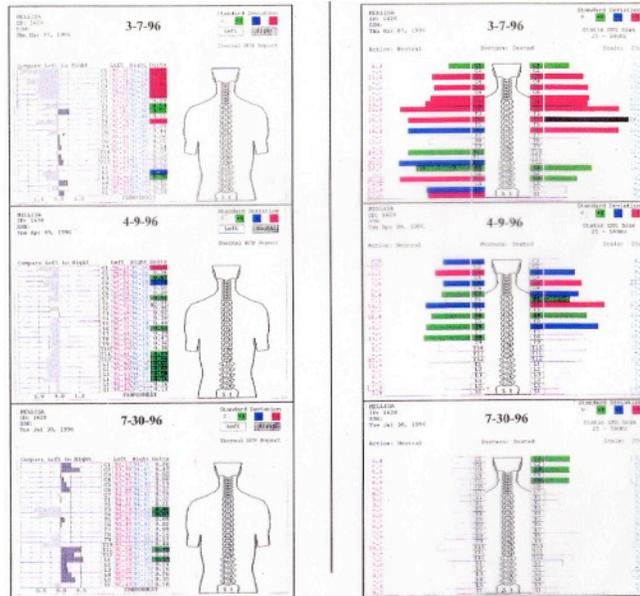
Posture –The Window To Good Health



Wellness Vs. Disease



Healthy Nervous System?

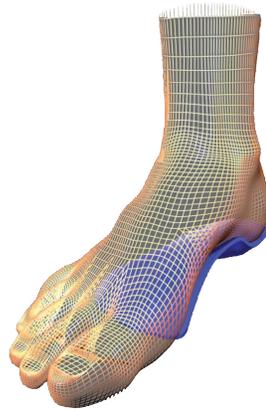




***“The doctor of the future
will give no medicine,
but will interest his
patients in the care of
the human frame, in
diet, and in the cause
and prevention of
disease.”***

Attributed to Thomas Edison

RESOURCES



Chiropractic Masters

CMI

Dr Mike Reid

drmike@chiropractic-masters.com

P: 1.800.781.8127

TOG

[1 800-551-3008](tel:18005513008)

Ad

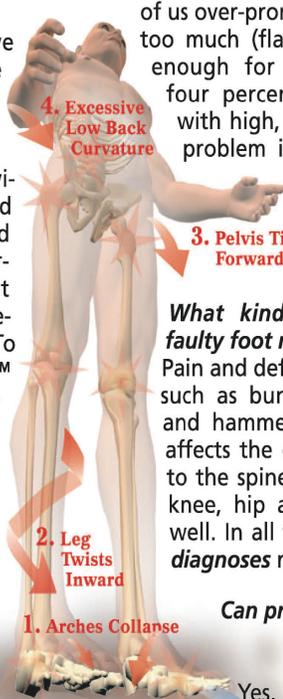
Sole Support Brochure (Inside)

What is an orthotic?

An orthotic is a supportive device which is placed inside footwear, to change the mechanical function of the foot. It works dynamically during weight-bearing activities like walking, running and standing. Ideally, it should provide full, custom and corrected arch contact so that the foot works in a biomechanically correct way. To date, only **Sole Supports™** manufactures full arch contact orthotics. The reason is simple: they are more difficult to make because they must actually change the way your foot works and be comfortable at the same time. Other orthotics are either just cushions or give a more generic, insufficient arch support not customized to your foot. They may feel fine but, by failing to actually correct faulty foot mechanics, will not prevent the usual painful deformities or syndromes.

What are faulty foot mechanics?

The foot is designed to un-lock, or pronate, when it hits the ground for shock absorption and to conform to variable terrain. Then it must re-stiffen (lock), or supinate, for efficient leverage as we propel ourselves forward onto the next step. When either of these phases are excessive or out-of-synch the foot has faulty mechanical function. Ninety percent or more



of us over-pronate, that is, our arches flatten too much (flat feet) and do not re-stiffen enough for efficient propulsion. About four percent of us are over-supinators with high, rigid arch structure. Then the problem is poor shock absorption and weight-bearing pressure concentrated in a few spots.

What kinds of problems result from faulty foot mechanics?

Pain and deformity can arise in the feet such as bunions, plantar fasciitis, corns, and hammertoes. Because foot function affects the entire chain of bones leading to the spine, pain and dysfunction in the knee, hip and low back often result as well. In all there are over **thirty common diagnoses** related to poor foot function.

Can problems be prevented or corrected with the use of Sole Supports?

Yes. If the problem is caught early enough, pain and deformity can often be



prevented. Regular use of these unique orthotics can often reverse deformity development or, at least, prevent surgery. How? Because when you restore normal function you give your body what it needs to heal itself. Your other necessary treatments or therapies are more effective and last longer, too.

How long will it take for my symptoms to go away?

That will depend on how advanced the condition is, flexibility of the deformity if one is present, age and general health. For most people, significant relief is experienced within weeks of regular use; at most, it may take a few months.



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A good shoe is half the battle. This list is aimed to offer you a choice of shoes with great stability, durability and comfort. There are shoes that promote the health of your feet, knees, hips and back and work well with custom foot orthotics/pelvic stabilizers. The stores listed are local stores with well-trained sales people to help you with your decision in foot wear. Always look for shoes that have removable insoles, when using custom foot orthotics/pelvic stabilizers. You will need to remove the insole before inserting the orthotics/pelvic stabilizers. A high quality shoe has a firm heel, torsional stability (does not twist easily), flexes at your big toe and a removable insole.

Serious Motion Control Shoes: Shoes with substantial medial support and fairly straight lasts.

Saucony Grid Stabil Classic*	Asics Gel Foundation*	Asics Foundation II
Asics MC Plus*	Brooks Beast	Brooks Ariel
Nike Durham	Nike Kantara	

Stability Shoes: Durable, stable shoes, fairly straight lasted.

Brooks Addiction 5	Saucony Hurricane 5	Reebok Ventilator DMX
Asics Kayano	Mizuno Wave Alchemy*	Nike Structure Triax
Adidas Supernova Control, Response, Saister		New Balance 900 Series

Moderate Overpronation Shoes: Shoes that provide some medial support semi-curved lasts.

Asics GT-2070	Brooks Adrenaline GTS	Saucony Stabil
New Balance 854#*, 991, 764	Nike Moto	Adidas Supernova*

Neutral Cushioned Shoes: Curve and semi-curved lasted shoes with cushion

Mizuno Wave Rider 200	Nike Skylon	Asics Nimbus
Brooks Glycerine, Dyad	Adidas A3 Cube	Saucony Trigon

Motion Control Trail Shoes: Shoes with motion control and trail features.

North Face Ultra 100, 102	Asics Trabuco	LaSportiva Colorado Trail
Salomon Flagstaff, XA Pro, XA Series		Saucony Grid Aura TR5
Montrail Hard Rock, Leona Divide, Hurricane Ridge GTZ (Stiffer)		
Brooks Addiction 5 Trail Teva Elden Ridge, Quest, North Rim		

Neutral Trail Shoes: Neutral trail shoes that provide decent stability

Nike Storm Pegasus	Saucony X-Terra	Scarpa-Venta (very soft)
--------------------	-----------------	--------------------------

Walking Shoes: Shoes that provide proper support for walking

Saucony Grid Stabil LE	Brooks Addiction WT, Revo
Asics Gel Tech Walker	Rockport World Tour, Pro Walker DMX
Sas Time Out (W), Free Time (M)	Montrail TRS Comp
New Balance 810 Series	

Cross Training/Aerobic Shoes

Your shoes are the one piece of equipment you can't run without. Shoe fit is more important than any brand. Bring the socks you wear with the shoes. Be able to give the sales person info on your runner/walker type – high mileage, trails, track, etc. if you have low arches – you are more likely to need motion control shoes. If you have a high arch consider a cushioned shoe. Make sure you have a proper evaluation before investing in your next set of runners.

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Asics: Newporter, Mercury (volleyball, crosstraining)
Nike: Air Griffey Max*, Air Edge V, Implosion/Agassi
New Balance: 661, 1003, 800 (Tennis)
Adidas: response TRC



* Indicates a shoe that runs wider than average
Indicates a shoe that runs narrow

Light Hiking Boots

Scarpa – Nitro
Montrail TRS Comp (all round day hiker), Ultra II
Garmont – Vegan

Sandals

Ariat Naot Finn Comfort Chaco Sebago Ecco Mephisto
Dansko – Golden Gate Fine Collection
Theresia Birkenstock – Kansa, Nebraska, Sabina, Navarro, Sheridan, Madera

Sport Sandals

Bite Sandals

Chaco Teva – Wraaptor, Terra fi, Peasant La Sportiva – scrambler

Dress/Casual Shoes

Rockport	Hush Puppies	Paul Thomas	Salamander
Ecco	Munro	HS Trask	Theresia
Ariat (GTS or Cobalt Technology)	Zeeta	Dansko	
Blend	Selby	Sudini	Finn Comfort
Think	Beautifeel	Rieker	Naot
Redwing	Nickels	Bjorn	Clarks
Josef Seibel			

Clogs

Stegmann	Geisswan	Daniel Green	Naot Iceland or Glacier
Heflinger	Soloman Snow Clog	Sven (nice flex point)	Finn Comfort Orb

Information from Orthotics/pelvic stabilizers, ProLab Orthotics/USA, Boulder Running Co., Runner’s World, Running Network, Trail Running Magazine, Montrail USA, La Sportiva USA

LOCAL STORES TO CHECK OUT:

(INSERT)

If you have any questions or want to sign up for our next healthy feet and orthotics/pelvic stabilizers workshop please give us a call at _____

Proper shoe size is very important. Have your feet measured while standing and after a day of work or after a run. This is when your feet are at their largest! Ask your local running/outdoors store for different ideas on lacing to help your shoes feel most comfortable.

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