



NYSCA SUFFOLK COUNTY

District 7

MARCH 2021 NEWSLETTER

PRESIDENT'S MESSAGE

I would like to thank our guest speaker last month from Carisk for their excellent presentation on the NYS WCB CMS 1500 initiative. This will be mandatory as of July 2021. If you have been under a rock for the last 16 months you know nothing about this and should go onto the WC website to find out about it. The NYSCA as well as our District have talked about this continually.

This month our guest speaker will be Mr. Doug Carpenter a professional accountant. He will present on PPP-2 and ERTC. Following we will discuss the WC changes and the experience our colleagues have had with this transition so far. We will also be discussing any insurance issues you are having. United Health Care continues to promote the use of conservative treatment options. Included in these options is chiropractic, their info explaining this is in this month's newsletter. Unfortunately, our district has again decided against a live CE and Coffee seminar in June; we will try again for September. If you require CE credits; attend the April NYSCA virtual convention, 12 credit hours are available so register now.

Moving forward to April and May, on April 21 our guest speaker will be Dr. Amit Sharma. Dr. Sharma has presented to our group previously and as many of you have indicated he was outstanding. In May we will have elections for district officers. This will be my final year serving as an officer to our district, I have done this for far too long. This is evident by my 'under a rock comment' in the opening paragraph; lol. It has been my pleasure trying to help as many as possible, manning hundreds of calls over the past years. The time has for me to focus on other endeavors and in my own practice.

I hope to see many of you at our next meeting; the NYSCA will be sending Zoom invites to each of you.

Your President,
George Rulli, DC

3RD WEDNESDAY OF THE MONTH AT 8:00 PM

ZOOM MEETING

Members: Look for invite from NYSCA



March 17th - 8:00 PM

DOUG CARPENTER - PPP-2 & ERTC

April 21st - 8:00 PM

DR. AMIT SHARMA

May 19th - 8:00 PM

June 16th - 8:00 PM

NYSCA - GOLD SPONSORS

SpineCare
LONG ISLAND
A Comprehensive Spine Center

833-LI-SPINE (833-547-7463)

A MULTI-
DISCIPLINARY

A COMPREHENSIVE SPINE CENTER FOR
CARE OF ALL BACK & NECK PROBLEMS

OFFICE LOCATIONS

West Islip Smithtown Plainview

SpineCareLongIsland.com

STAND-UP[®] MRI



Deer Park
243.3222

East Setauket
444.5361

Islandia
348.0996

Melville
454.0539

MULTI-POSITION[™] MRI
The Only Weight-Bearing MRI



ORTHOPEDIC ASSOCIATES
OF LONG ISLAND

**YOUR HEALTH.
OUR PRIORITY.**

OFFICE LOCATIONS

Commack Southamptn
East Setauket Wading River
Patchogue West Babylon
Riverhead

oali.com | 631-689-6698

NYSCA D7 OFFICERS

President - Dr. George Rulli

631-471-2225 • Fax: 631-471-4814

DRGRDC@aol.com

Vice President - Dr. Robin Stein

631-224-3036 • Fax: 631-224-4764

fabelstein@hotmail.com

Treasurer - Dr. Sophia Argeropoulos

631-473-8182 • Fax: 631-473-8183

saachiro@aol.com • portjeffchiro.com

D7 BOARD OF DIRECTORS

Dr. Jack Beige, DC, JD

631-231-7725 • Fax: 631-231-7726

jackbeige@optonline.net

Dr. Ronald Bernardini

631-981-1333 • Fax: 631-981-6766

lakechiropllc@optonline.net

Dr. Philip A. Facquet III

631-724-7277 • Fax: 631-724-2666

drfacquet@optonline.net

Dr. Joanna Fasulo

631-289-3939 • Fax: 631-289-3934

Fasulochiro@gmail.com

Dr. Alan Friedman

631-544-0770 • Fax: 631-544-4157

alannsc@aol.com

Dr. John Pellegrino

631-543-6777 • Fax: 631-543-1875

johnpcommack@aol.com

Dr. Gerard H. Piering, Jr

631-728-8545 • Fax: 631-728-1242

HBChiro1@aol.com

Dr. Joseph Merckling

631-286-2300 • Fax: 631-286-4615

mercklingdc@optonline.net

Dr. Gregory R. Thomaier

631-584-8100 • Fax: 631-584-9436

urgreg@gmail.com

FROM THE EDITOR

Dr. Philip A. Facquet III

Censorship – will it visit or spare our profession?

Is it good or bad to censor the opinions of others? To late it is here. Big tech has just too much power and coupled with today's unchecked cancel culture just about anything or anyone is subject to attack if the woke arbiters take offence to what you claim as truth. How long before the mighty giant of collective progressive thought aims its censorship arrow on our profession's heart. Our profession, like our country, has different opinions on a variety of common experiences. From the concept of sublaxation, physical therapy, vaccinations, evidenced based practice, evidence informed practice, diagnosis, or even radiology we collectively express several conflicting opinions in our ranks. Is our profession "woke" enough? I am worried that our own will contribute to the attack. I hope Chiropractic remains flexible.

The first article this month is from Hillsdale College's publication Imprimis. The article has been reprinted with permission for you to consider just who is in control of censorship in our country. The author takes you through the development of the web and the power they consolidated and concluding with ideas to tame their influence over the right of free speech. Hopefully, it encourages you to work to protect our basic freedom of speech in this country.

For your consideration I have attached a trailer for the movie "Medical Racism, the New Apartheid." This movie was directed by an Academy Award nominee David Massey. Robert Kennedy Jr (Children's Health Defense) stated "Our Hope... is to learn from past misdeeds, so we can avoid their future repetition." I hope that their perspectives can inspire our doctors and our leadership to assure that the underrepresented in our great society has access to our conservative approach of health care.

Please access your NYSCA benefit of F4CP membership and view and share the positive Chiropractic commercial that will air during the Olympics. Their link is inside; if you have not registered to access the materials please do. Share this positive chiropractic information across your social network platforms to promote both your practice and our profession's value. Also, the link concerning the ChiroCongress and their "Future of Chiropractic Strategic Plan Project" is not to be missed. They have collected the data, which you can review inside, and are in phase two of the project. If you are unaware of this project, please get informed and see where your views on our profession align with the data.

Register for the upcoming Spring NYSCA 2021 convention. They have the option for a one- or a two-day pass. We need you in front of your computer firstly to help our state association financially to continue its good works and secondly for you get updated information on ethics, diagnosis, documentation, coding and practical clinical research from the past year.

Please share our newsletter with colleagues and friends. You can also find it our district web site.

HAS Your Practice been censored of fact checked? Let us know at drfacquet@optonline.net.

PATIENT EVALUATION DRIVES PROPER CASE MANAGEMENT

BY DR. COLLEEN AUCHENBACH

Proper case management has its roots in the patient’s clinical presentation and the doctor’s training and expertise. **Doctors have a fiduciary responsibility to evaluate patients to determine the entire clinical picture for all case types.** That includes active care, Wellness/Maintenance care, auto injury, personal injury, sports injury, preparation for or recovery from a life event such as travel, surgery, wedding, etc. **Every course of care requires case management that begins with a complete patient evaluation.**

THE PATIENT EVALUATION PROCESS IS QUITE LINEAR

The initial data is gathered through completed patient paperwork that details the prior medical history and the chief complaint, or through a patient interview conducted by a team member. Ideally, the doctor reviews this material before meeting with the patient. Once the history is established, the doctor will follow up with general health questions, a pertinent review of systems, and an in-depth evaluation of the chief complaint, including onset, pain/palliative, quality, region/radiation, site, modifying factors, and timing.

The history that is gathered and assessed by the doctor drives the examination choices. Based on the doctor’s findings, s/he selects orthopedic and neurological tests to prove or disprove his/her theories. Once all the facts are gathered, a decision needs to be made. Is there enough evidence for a conclusive decision about the patient’s diagnosis, or are further diagnostic tests necessary?

This process results in a well defined problem, diagnosis, and written treatment plan laying out the proposed solution to the patient’s condition. **It is especially important to define the functional deficits that will be addressed through this treatment plan and the functional goals that are targeted to achieve a specific result from this treatment.**

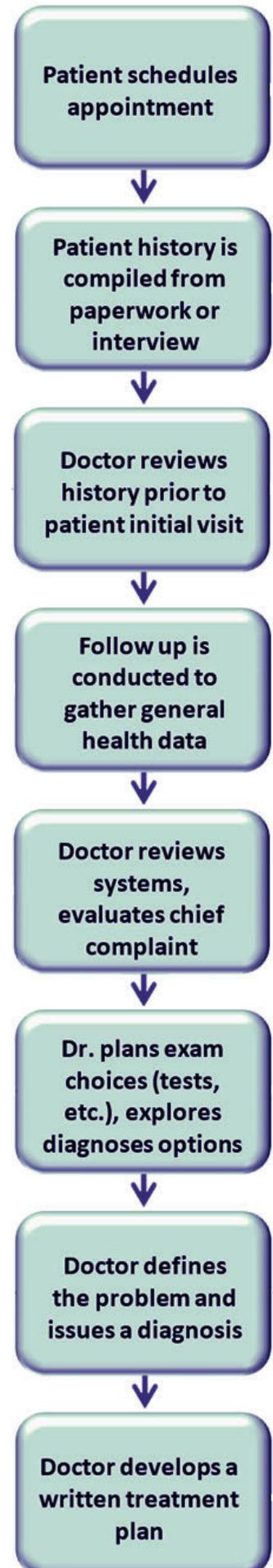
Once these initial visit procedures are complete, the patient should receive a verbal report of the findings. It will ensure that the patient is clear about the recommendations and the support that will be provided. Remember, the patient always has the right to refuse treatment. If the recommendations, alternatives, and potential outcomes for those alternatives, including taking no action at all, are clearly explained, the patient will feel confident deciding to proceed. It is then the doctor’s responsibility to help the patient complete that care by executing the treatment plan during the subsequent visits of the episode of care.

The case management portion of the equation takes place throughout the subsequent visits. The visit-to-visit evaluation, aka case management, is the process the doctor uses to evaluate whether the baseline treatment plan needs to be altered. It should never be assumed that once the treatment plan is set, treatment will automatically continue in that fashion. Ongoing case management is always recommended.

Be prepared to pivot during the active phase of treatment. The potential always exists for a need to go back to patient evaluation to reassess and modify the plan. These pivot points could include improving faster than expected, a new injury to a different area, a gap in care, a new medical diagnosis, an aggravation of the current treatment area, or the patient not improving as expected.

DOCTOR THINKING

Initial evaluation without ongoing case management is dangerous and unwise. “Doctor thinking” must take place on a visit-to-visit basis to determine the need for ongoing care. When documented in the patient’s record, this is proof that the provider is considering the actual patient’s presentation each visit to verify that the treatment plan is working (or not) and to follow through with next steps. Constant and continuing assessment is the name of the game for good case management, and proper case management is vital to manage all episodes of care.





Dr. Sathish Subbaiah

The goal of surgical intervention at OALI is to get patients back on their feet and enjoying an active lifestyle as soon as possible through the most minimally invasive surgeries and evidence-based medicine. With minimally invasive spine surgery (MISS), our surgeons use high-powered microscopes to operate through small incisions, minimizing trauma to the surrounding tissue. MISS allows for more precise intervention, reduced post-operative pain, faster recovery, and decreased scarring than traditional surgery. In fact, 4 out of 5 of our surgical patients are able to return home on the same day!



Dr. Morgan Chen



ORTHOPEDIC ASSOCIATES OF LONG ISLAND

(631) 689-6698 | www.OALI.com

Commack | East Setauket | Patchogue | Riverhead | Southampton | Wading River | West Babylon

**United Healthcare
Provide 3 visits
for lower back pain
with \$0
copay/deductible
for your patients***

Now may be a great time for patients to seek treatment without copay/deductible costs getting in the way. In addition to self-referral, primary care providers and specialists may refer directly to you.



The benefits of evidence-based back care

Reduce pain

Early treatment from a chiropractor may provide pain relief, help prevent chronic pain down the road and help avoid exposure to opioids.

Timely access

Patients who secure an appointment and receive treatment quickly report better results compared to those who experience delayed treatment.¹

Learn More

CHD's New 'Medical Racism' Film Exposes Long-Standing Experimentation on Minorities

Watch the trailer now! Medical Racism, premiering March 11, chronicles the medical cartel's history of targeting minorities for unethical experiments, the acquiescence of regulator agencies and medical ethicists, and the silence of physicians who allow these atrocities to continue today.

By Children's Health Defense Team



Children's Health Defense, in conjunction with Centner Productions and the Urban Global Health Alliance, along with co-producers Rev. Tony Muhammad and author-historian Curtis Cost, today released the trailer for their upcoming documentary, "Medical Racism: The New Apartheid."

"Medical Racism," which premieres March 11, illuminates the shocking history of government health regulators and private pharmaceutical companies conducting human experiments on Black Americans.

"Though many Americans are familiar with the history of medical atrocities committed by the Centers for Disease Control and Prevention at Tuskegee, by the father of American gynecology, Dr. J. Marion Sims, on South Carolina slave girls and the continuing medical larceny against Henrietta Lacks, most people are likely unaware of the routine medical barbarism committed against Africans that persists today," said Curtis Cost, the film's co-producer.

The documentary, directed by Academy Award nominee David Massey, chronicles the medical cartel's long history of targeting minority populations for unethical experiments, the acquiescence of regulatory agencies and medical ethicists, and the silence of physi-

Continued on page 17



STAND-UP[®] MRI

MULTI-POSITION[™] MRI

SUFFOLK COUNTY



- The Patient-Friendly[™] MRI
- The “Non-Claustrophobic” MRI
- No “Tube,” No “Tunnel”
- Most Patients Scanned Seated Watching TV
- Nothing in Front of the Patient’s Face
- Very Large Patients Accommodated

The Only Weight-Bearing MRI



[All cutaway views]

The rotating patient bed and open magnet design enable weight-bearing MRI.

Also at Islandia: Open-Bore 3T MRI

Allows you to choose the MRI that best serves your patient.

- 70 cm Open Bore
- Advanced Applications
- Thinner Slices
- Faster Scans
- Better Resolution



Islandia
631.348.0996

East Setauket
631.444.5361

Deer Park
631.243.3222

Melville
631.454.0539

www.standupmrilocations.com

Who Is in Control? The Need to Rein in Big Tech

By Allum Bokhari

The following is adapted from a speech delivered at Hillsdale College on November 8, 2020, during a Center for Constructive Alternatives conference on Big Tech.



Allum Bokhari is the senior technology correspondent at Breitbart News. He is a graduate of the University of Oxford and was a 2020 Lincoln Fellow at the Claremont Institute for the Study of Statesmanship and Political Philosophy. In 2018, he obtained and published “The Google Tape,” a recording of Google’s top executives reacting to the 2016 Trump election and declaring their intention to make the American populist movement a “blip” in history. He is the author of #Deleted: Big Tech’s Battle to Erase the Trump Movement and Steal the Election.

In January, when every major Silicon Valley tech company permanently banned the President of the United States from its platform, there was a backlash around the world. One after another, government and party leaders—many of them ideologically opposed to the policies of President Trump—raised their voices against the power and arrogance of the American tech giants. These included the President of Mexico, the Chancellor of Germany, the government of Poland, ministers in the French and Australian governments, the neoliberal center-right bloc in the European Parliament, the national populist bloc in the European Parliament, the leader of the Russian opposition (who recently survived an assassination attempt), and the Russian government (which may well have been behind that attempt).

Common threats create strange bedfellows. Socialists, conservatives, nationalists, neoliberals, autocrats, and anti-autocrats may not agree on much, but they all recognize that the tech giants have accumulated far too much power. None like the idea that a pack of American hipsters in Silicon Valley can, at any moment, cut off their digital lines of communication.

I published a book on this topic prior to the November election, and many who called me alarmist then are not so sure of that now. I built the book on interviews with Silicon Valley insiders and five years of reporting as a Breitbart News tech correspondent. Breitbart created a dedicated tech reporting team in 2015—a time when few recognized the danger that the rising tide of left-wing hostility to free speech would pose to the vision of the World Wide Web as a free and open platform for all viewpoints.

This inversion of that early libertarian ideal—the movement from the freedom of information to the control of information on the Web—has been the story of the past five years.

When the Web was created in the 1990s, the goal was that everyone who wanted a voice could have one. All a person had to do to access the global marketplace of ideas was to go online and set up a website. Once created, the website belonged to that person. Especially if the person owned his own server, no one could deplatform him. That was by design, because the Web, when it was invented, was competing with other types of online services that were not so free and open.

It is important to remember that the Web, as we know it today—a network of websites accessed through browsers—was not the first online service ever created. In the 1990s, Sir Timothy Berners-Lee invented the technology that underpins websites and web browsers, creating the Web as we know it today. But there were other online services, some of which predated Berners-Lee’s invention. Corporations like CompuServe and Prodigy ran their own online networks in the 1990s—networks that were separate from the Web and had access points that were different from web browsers. These privately-owned networks were

Continued on page 11



**Tired Of Paying Credit Card Processing Fees At Your Business?
We Can Eliminate Them For You!**

We are the preferred payment processor for the New York State Chiropractors Association including former President Dr Ronald Bernardini of Ronkonkoma, New York. We have also helped thousands of other companies across the United States eliminate their processing fees and we can do the same for you.

Merchantology works with all industry types including medical, retail, service, e-commerce, restaurant, wholesale etc so as long as you're a business who accepts credit card payments, we can eliminate your fees for you!

We also offer our clients:

**No Contracts
Free Equipment
Next Day Funding
Dedicated Sales Rep
24/7 Merchant Support
Merchant Portal Access
Easy To Read Statements**

Contact us **TODAY** and allow us to put your money back into **YOUR** pocket.

**www.merchantology.com
sales@merchantology.com
(631) 910-9967**



NYSCA Conventions

Continuing Education Opportunities of the Highest Caliber

Save the Date for the New York State Chiropractic Association

2021 Spring Symposium

April 10-11, 2021

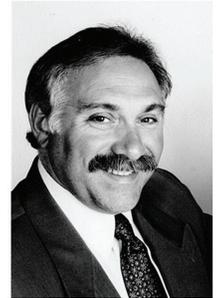
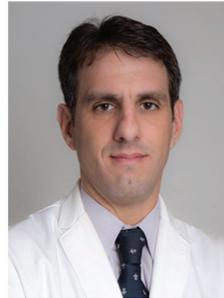
via webinar with the New York Chiropractic College Postgraduate Department

We invite you to join us at our 2021 Spring Symposium via live webinar!

It is our pleasure to announce and formally invite you to participate in the NYSCA 2021 Spring Symposium, to be held in a live webinar format. It promises to be a rich and varied educational experience for attendees.

The program will be held over 2 days (April 10-11, 2021) and will offer up to 12 continuing education credits*, including up to 8 category 1 credits. The Saturday portion will be from 1pm-7pm and will offer 6 credits (2Cat1), and the Sunday portion will be from 10am-4pm and will offer 6 credits (6Cat1). Attendees may register for Saturday only, Sunday only, or for the whole weekend.

Scheduled speakers include:



Gerald Stevens DC MS MPH; Brandon Steele DC FACO; Kristina Petrocco-Napuli DC MS FICC FACC; Anthony Palumbo DC, Vincent Justino BS DC; Robert DeSantis DC

Not pictured: Robert Martin DC; Robin Stein DC; Lev Lewin Esq

Earn up to 12 CE Credits* from the comfort of your own home!

Among the speakers and presenters at this event are Dr. Gerald Stevens, who will be opening our event on Saturday; Dr. Brandon Steele of ChiroUp, who will present to us “Game Changers: Practical Research from the Past Year for Improving Clinical Outcomes”; Dr. Kristina L. Petrocco-Napuli, sponsored by NCMIC†, will cover “Strengthening of Healthcare Ethics During the Global Pandemic”

On Sunday, we will hear from Dr. Anthony Palumbo, who will discuss No-Fault Documentation; Dr. Vincent Justino, sponsored by OUM‡, will help us “Develop Winning Habits and Procedures With Documentation, Coding, and Audits”; Finally, members of the NYSCA Insurance Committee, including Dr. Robert Martin, Dr. Robin Stein, and Dr. Robert DeSantis, will cover “Documentation and Coding Matters: Issues and Updates from the NYSCA Insurance Committee.” Get details on each of these presentations in the [Event Agenda](#).

Registration is now open at www.NYSCA.com!

Registration Fee: Standard registration valid through 04/01/2021—\$199 members; \$299 non-members.

Late Registration Fee: Additional \$50 per person applied after Thursday, 04/01/2021.

Please visit www.NYSCA.com/2021-spring-symposium for more information.

*CE Pending in select states. †Course applies towards requirements for NCMIC’s Risk Management Discount. Full-Time DCs can earn a 5% discount on 3 years of malpractice insurance by completing 8 hours of continuing education (CE) seminars. (2.5% discount for part-time DCs). ‡ Attend OUM’s seminar for a total of 2 hours on Sunday 04/11/21 to receive up to a 10% discount off your OUM policy premium.

The NYSCA makes every attempt to offer programs as publicized. We nevertheless reserve the right to alter and/or adjust program details, including but not limited to dates, locations, times, instructors, and presentation sources and sequences. The NYSCA is not responsible for expenses and/or consequential damages suffered by registrants of altered programs.

License Renewal: Continuing education credit (CE) is provided by New York Chiropractic College (NYCC). While applications relating to credit hours for license renewal in selected states have been executed for these programs, it remains attendees’ responsibility to contact the state board(s) from whom they seek continuing education credits for purposes of ensuring said board(s) approve both venue and content as they relate to any seminar/ course/ lecture/ webinar/ online presentation (event). Neither a speaker’s or exhibitor’s presence at said event, nor product mention or display, shall in any way constitute NYCC endorsement. NYCC’s role is strictly limited to processing, submitting, and archiving program documents on behalf of course sponsors. These courses are valid for CE credits in “pre-approved” states, so long as it falls within the scope of practice as outlined by the corresponding state board.

We've got you covered, from head to toe!

Spine Surgeons



Morgan Chen, MD



Sathish Subbaiah, MD

Non-operative Sports Medicine



Danielle DeGiorgio, DO



Mark J. Harary, MD

Hand & Upper Extremity Surgeons



Dimitrios Christoforou, MD



Steven M. Puopolo, MD



Hayley C. R. Queller, MD

Total Joint Replacement Surgeons



John J. Brennan, MD



Anthony Cappellino, MD

Sports Medicine Surgeons



Gregg Jarit, MD



Michael Sileo, MD



Jeffrey D. Hart, DO



Christopher Mileto, MD

Foot & Ankle Surgeons



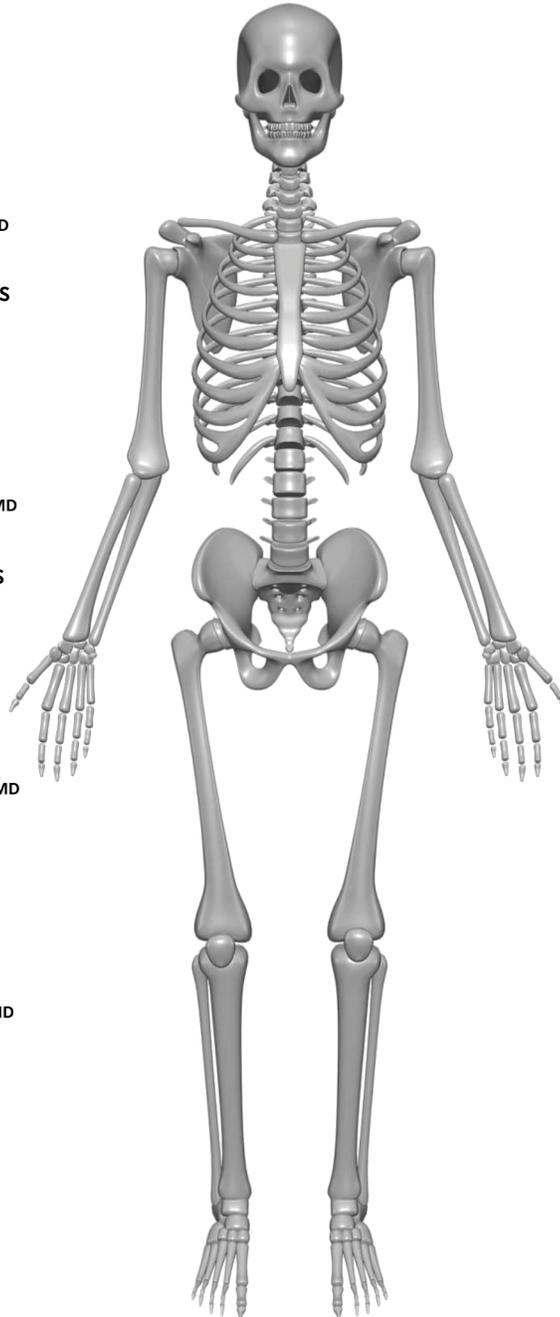
Lorenzo Gamez, MD



Mudasser Javed, DPM



Douglas Petraco, MD



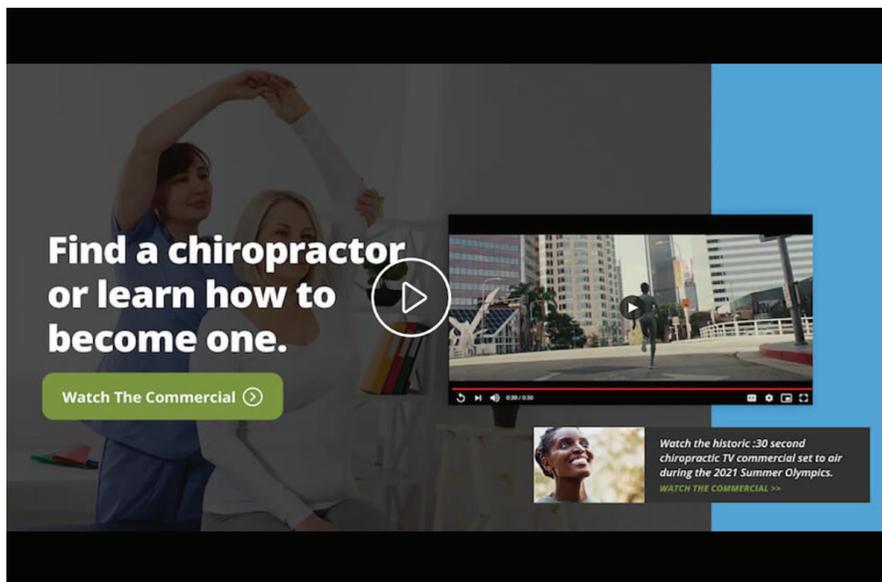
ORTHOPEDIC ASSOCIATES OF LONG ISLAND

(631) 689-6698 | www.OALI.com

Commack | East Setauket | Patchogue | Riverhead | Southampton | Wading River | West Babylon



EARLY ACCESS TO THE OLYMPIC COMMERCIAL STARTS NOW!



After nearly two years of planning, the Foundation for Chiropractic Progress is excited to share its award-winning, :30 second chiropractic TV commercial with you!

The commercial, which is set to air FIVE TIMES on NBC Networks during the 2021 Summer Olympics (thanks to NBCE for sponsoring the placements!), is expected to reach over 204M individuals.

Today, only Foundation GOLD members receive access to download the :30 second TV commercial, with lower levels receiving in the months to follow.

If you are not already a gold member and would like to upgrade to receive early access to download the :30 second Olympic commercial, visit www.f4cp.org/upgrade

WHO IS IN CONTROL? THE NEED TO REIN IN BIG TECH CONTINUED FROM PAGE 7

open to the public, but CompuServe and Prodigy owned every bit of information on them and could kick people off their networks for any reason.

In these ways the Web was different. No one owned it, owned the information on it, or could kick anyone off. That was the idea, at least, before the Web was captured by a handful of corporations.

We all know their names: Google, Facebook, Twitter, YouTube, Amazon. Like Prodigy and CompuServe back in the '90s, they own everything on their platforms, and they have the police power over what can be said and who can participate. But it matters a lot more today than it did in the '90s. Back then, very few people used online services. Today ev-

eryone uses them—it is practically impossible not to use them. Businesses depend on them. News publishers depend on them. Politicians and political activists depend on them. And crucially, citizens depend on them for information.

Today, Big Tech doesn't just mean control over online information. It means control over news. It means control over commerce. It means control over politics. And how are the corporate tech giants using their control? Judging by the three biggest moves they have made since I wrote my book—the censoring of the New York Post in October when it published its blockbuster stories on Biden family corruption, the censorship and eventual banning from the Web of President Trump, and the coordinated takedown of the upstart social media site Parler—it is obvious that Big Tech's priority today is to support the political Left and the Washington establishment.

Big Tech has become the most powerful election-influencing machine in American history. It is not an exaggeration to say that if the technologies of Silicon Valley are allowed to develop to their fullest extent, without any oversight or checks and balances, then we will never have another free and fair election. But the power of Big Tech goes beyond the manipulation of political behavior. As one of my Facebook sources told me in an interview for my book: "We have thousands of people on the platform who have gone from far right to center in the past year, so we can build a model from those people and try to make everyone else on the right follow the same path." Let that sink in. They don't just want to control information or even voting behavior—they want to manipulate people's worldview.

Is it too much to say that Big Tech has prioritized this kind of manipulation? Consider that Twitter is currently facing a lawsuit from a victim of child sexual abuse who says that the company repeatedly failed to take down a video depicting his assault, and that it eventually agreed to do so only after the intervention of an agent from the Department of Homeland Security. So Twitter will take it upon itself to ban the President of the United States, but is alleged to have taken down child pornography only after being prodded by federal law enforcement.

Continued on page 12

How does Big Tech go about manipulating our thoughts and behavior? It begins with the fact that these tech companies strive to know everything about us—our likes and dislikes, the issues we’re interested in, the websites we visit, the videos we watch, who we voted for, and our party affiliation. If you search for a Hannukah recipe, they’ll know you’re likely Jewish. If you’re running down the Yankees, they’ll figure out if you’re a Red Sox fan. Even if your smart phone is turned off, they’ll track your location. They know who you work for, who your friends are, when you’re walking your dog, whether you go to church, when you’re standing in line to vote, and on and on.

As I already mentioned, Big Tech also monitors how our beliefs and behaviors change over time. They identify the types of content that can change our beliefs and behavior, and they put that knowledge to use. They’ve done this openly for a long time to manipulate consumer behavior—to get us to click on certain ads or buy certain products. Anyone who has used these platforms for an extended period of time has

no doubt encountered the creepy phenomenon where you’re searching for information about a product or a service—say, a microwave—and then minutes later advertisements for microwaves start appearing on your screen. These same techniques can be used to manipulate political opinions.

I mentioned that Big Tech has recently demonstrated ideological bias. But it is equally true that these companies have huge economic interests at stake in politics. The party that holds power will determine whether they are going to get government contracts, whether they’re going to get tax breaks, and whether and how their industry will be regulated. Clearly, they have a commercial interest in political control—and currently no one is preventing them from exerting it.

To understand how effective Big Tech’s manipulation could become, consider the feedback loop.

As Big Tech constantly collects data about us, they run tests to see what information has an impact on us. Let’s say they put a

negative news story about someone or something in front of us, and we don’t click on it or read it. They keep at it until they find content that has the desired effect. The feedback loop constantly improves, and it does so in a way that’s undetectable.

What determines what appears at the top of a person’s Facebook feed, Twitter feed, or Google search results? Does it appear there because it’s popular or because it’s gone viral? Is it there because it’s what you’re interested in? Or is there another reason Big Tech wants it to be there? Is it there because Big Tech has gathered data that suggests it’s likely to nudge your thinking or your behavior in a certain direction? How can we know?

What we do know is that Big Tech openly manipulates the content people see. We know, for example, that Google reduced the visibility of Breitbart News links in search results by 99 percent in 2020 compared to the same period in 2016. We know that after Google introduced an update last

Continued on page 14

QUALITY & COMFORT

DIAGNOSTIC EXCELLENCE

ZWANGER-PESIRI
zprad
PERSONAL INJURY
PATIENT DIVISION
 ★ ★ ★
RADIOLOGY

CHIROPRACTIC IMAGING SERVICES
 SUPERIOR SPINE IMAGES IN AS LITTLE AS 8 MINUTES
 RADIOLOGIST AVAILABILITY BY PHONE
 33 LOCATIONS (15 IN SUFFOLK COUNTY)
 SATURDAY, SUNDAY & EVENING HOURS
 PHYSICIAN PORTAL
 WALK-IN X-RAYS
 SPECIALIZED ACCOUNT REPRESENTATIVES

PERSONAL INJURY PATIENT DIVISION
 NO FAULT & WORKER’S COMP SPECIALIZED MSK & NEUROLOGICAL RADIOLOGISTS
 WALK-IN MRI FOR NO FAULT PATIENTS WITH A SCRIPT
 TRANSPORTATION AVAILABLE TO NO FAULT AND WORKER’S COMP PATIENTS
 WORKER’S COMP AUTHORIZATIONS PROVIDED BY ONE CALL CARE MANAGEMENT
 ACCEPTING OR CREATING LIENS FOR PATIENTS
 EXCLUSIVE EDUCATIONAL NETWORKING EVENTS
 SPECIALIZED ACCOUNT COORDINATORS

DIAGNOSTIC IMAGING CENTER of EXCELLENCE

ZWANGER-PESIRI RADIOLOGY (631) 444-5544 • zprad.com



OUR LOCATIONS

Holbrook

4681 Veterans Memorial Highway

Huntington

110 East Main Street, Suite 2B

Plainview

901 Old Country Road

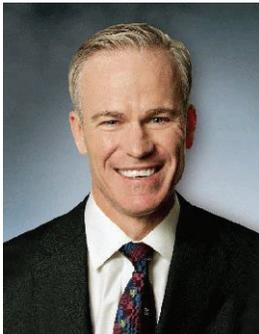
WHO WE ARE

SpineCare Long Island is a multi-disciplinary spine center that combines the expertise of board-certified neurosurgeons and interventional spine and pain management physicians. We help patients with back pain and neck pain explore non-surgical treatment options. If spine surgery is necessary, because of a herniated disc or spinal fracture, the spine surgeons emphasize minimally invasive spine techniques and instrumentation that greatly reduces the length of the incision, lessens time in the hospital and provides a faster recovery with less discomfort.



SpineCare Long Island was founded in 2017 by Dr. Kevin Mullins, Dr. Salvatore Zavarella and Dr. Amit Sharma who believed spine care could be improved with a spine center approach that combined the expertise of non-surgical MDs and spine surgeons who would collaborate for the benefit of the person with back or neck pain.

OUR TEAM



Kevin J. Mullins, MD, FAANS, FACOS
Medical Director



Salvatore M. Zavarella, DO, FACOS
Director of Spine Surgery



Amit Sharma, MD,
Director of Interventional Spine & Pain

NEUROSURGICAL TEAM:

Joshua Ryan, MD
Brian J. McHugh, MD
George Kakoulides, MD

Salvatore Insinga, DO
William E. McCormick, MD
Symeon Missios, MD

INTERVENTIONAL SPINE & PAIN TEAM:

Michael Hershey, MD
Reginald Rousseau, MD
Jaspreet Toor, DO

AT SPINECARE LONG ISLAND, WE LITERALLY GOT YOUR BACK!

FOR APPOINTMENTS, PATIENTS ARE ENCOURAGED TO CALL 833-SPINE-33 (833-774-6333) OR VISIT WWW.SPINECARELONGISLAND.COM

summer, clicks on Breitbart News stories from Google searches for “Joe Biden” went to zero and stayed at zero through the election. This didn’t happen gradually, but in one fell swoop—as if Google flipped a switch. And this was discoverable through the use of Google’s own traffic analysis tools, so it isn’t as if Google cared that we knew about it.

Speaking of flipping switches, I have noted that President Trump was collectively banned by Twitter, Facebook, Twitch, YouTube, TikTok, Snapchat, and every other social media platform you can think of. But even before that, there was manipulation going on. Twitter, for instance, reduced engagement on the President’s tweets by over eighty percent. Facebook deleted posts by the President for spreading so-called disinformation.

But even more troubling, I think, are the invisible things these companies do. Consider “quality ratings.” Every Big Tech platform has some version of this, though some of them use different names. The quality rating is what determines what appears at the top of your search results, or your Twitter or Facebook feed, etc. It’s a numerical value based on what Big Tech’s algorithms determine in terms of “quality.” In the past, this score was determined by criteria that were somewhat objective: if a website or post contained viruses, malware, spam, or copyrighted material, that would negatively impact its quality score. If a video or post was gaining in popularity, the quality score would increase. Fair enough.

Over the past several years, however—and one can trace the beginning of the change to Donald Trump’s victory in 2016—Big Tech has introduced all sorts of new criteria into the mix that determines quality scores. Today, the algorithms on Google and Facebook have been trained to detect “hate speech,” “misinformation,” and “authoritative” (as opposed to “non-authoritative”) sources. Algorithms analyze a user’s network, so that whatever users follow on social media—e.g., “non-authoritative” news outlets—affects the user’s quality score. Algorithms also detect the use of language frowned on by Big Tech—e.g., “illegal immigrant” (bad) in place of “undocumented immigrant” (good)—and ad-

just quality scores accordingly. And so on.

This is not to say that you are informed of this or that you can look up your quality score. All of this happens invisibly. It is Silicon Valley’s version of the social credit system overseen by the Chinese Communist Party. As in China, if you defy the values of the ruling elite or challenge narratives that the elite labels “authoritative,” your score will be reduced and your voice suppressed. And it will happen silently, without your knowledge.

This technology is even scarier when combined with Big Tech’s ability to detect and monitor entire networks of people. A field of computer science called “network analysis” is dedicated to identifying groups of people with shared interests, who read similar websites, who talk about similar things, who have similar habits, who follow similar people on social media, and who share similar political viewpoints. Big Tech companies are able to detect when particular information is flowing through a particular network—if there’s a news story or a post or a video, for instance, that’s going viral among conservatives or among voters as a whole. This gives them the ability to shut down a story they don’t like before it gets out of hand. And these systems are growing more sophisticated all the time.

If Big Tech’s capabilities are allowed to develop unchecked and unregulated, these companies will eventually have the power not only to suppress existing political movements, but to anticipate and prevent the emergence of new ones. This would mean the end of democracy as we know it, because it would place us forever under the thumb of an unaccountable oligarchy.

The good news is, there is a way to rein in the tyrannical tech giants. And the way is simple: take away their power to filter information and filter data on our behalf.

All of Big Tech’s power comes from their content filters—the filters on “hate speech,” the filters on “misinformation,” the filters that distinguish “authoritative” from “non-authoritative” sources, etc. Right now these filters are switched on by default. We as individuals can’t turn them

off. But it doesn’t have to be that way.

The most important demand we can make of lawmakers and regulators is that Big Tech be forbidden from activating these filters without our knowledge and consent. They should be prohibited from doing this—and even from nudging us to turn on a filter—under penalty of losing their Section 230 immunity as publishers of third party content. This policy should be strictly enforced, and it should extend even to seemingly non-political filters like relevance and popularity. Anything less opens the door to manipulation.

Our ultimate goal should be a marketplace in which third party companies would be free to design filters that could be plugged into services like Twitter, Facebook, Google, and YouTube. In other words, we would have two separate categories of companies: those that host content and those that create filters to sort through that content. In a marketplace like that, users would have the maximum level of choice in determining their online experiences. At the same time, Big Tech would lose its power to manipulate our thoughts and behavior and to ban legal content—which is just a more extreme form of filtering—from the Web.

This should be the standard we demand, and it should be industry-wide. The alternative is a kind of digital serfdom. We don’t allow old-fashioned serfdom anymore—individuals and businesses have due process and can’t be evicted because their landlord doesn’t like their politics. Why shouldn’t we also have these rights if our business or livelihood depends on a Facebook page or a Twitter or YouTube account?

This is an issue that goes beyond partisanship. What the tech giants are doing is so transparently unjust that all Americans should start caring about it—because under the current arrangement, we are all at their mercy. The World Wide Web was meant to liberate us. It is now doing the opposite. Big Tech is increasingly in control. The most pressing question today is: how are we going to take control back?

<https://imprimis.hillsdale.edu/control-need-rein-big-tech/>

ELITE MEDICAL

Your Spinal Bracing & DME Specialists

Elite Medical Supply specializes in Spine and Knee disorders. If your patients have back, neck or knee pain, or are about to or have already had surgery, we can help.

We have been in business since 1998 and are a Medicare accredited supplier of DME, with accreditation by the Board of Certification/Accreditation International. Let our staff of Chiropractors and Certified Orthotic Fitters assist your patients on their road to recovery.

To view all products, ordering process and participating insurances, please visit our website at:

www.EliteMedicalSupplyofNY.com



ELITE LSO & TLSO



VENUM LSO & TLSO



EXPANDER
MAX LSO



ELITE MULTI-MODE
STIMULATOR



PRONEX



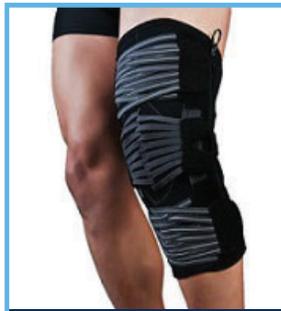
CV-1000



DDS CERVITRAC



TENS UNIT



KNEE BRACES



VISTA MULTI-POST
CERVICAL COLLAR



CERVICAL
COLLARS



BONE GROWTH
STIMULATORS



Chris Rooney D.C., Account Manager

(516) 510-0819

CRooney@EliteMedicalSupplyofNY.com

1900 Ridge Road #125
West Seneca, NY 14224
Toll Free: (866) 712-0881

NEW RULES: PPP FOR SCHEDULE C FILERS

By Douglas Carpenter, CFA, CPA

This is for those who file a schedule C for their business (i.e. self-employed/gig workers).

First the bad news. If you already filed for your PPP loan you can not go back and refile (at least as of this moment). Will the government make changes to allow you to go back? We will have to see. To me it does not seem fair to those who filed early but I do not get to make the laws. If you do file with a schedule C and have not filed for PPP round 2 and believe you qualify the following is the new, much more generous, formula:

If the Schedule C filer does not have any employees:

- Step 1: From your 2019 or 2020 IRS Form 1040, Schedule C, you may elect to use either your line 31 net profit amount or your line 7 gross income amount. (If you are using 2020 to calculate payroll costs and have not yet filed a 2020 return, fill it out and compute the value.) If this amount is over \$100,000, reduce it to \$100,000. If both your net profit and gross income are zero or less, you are not eligible for a PPP loan.
- Step 2: Calculate the average monthly net profit or gross income amount (divide the amount from Step 1 by 12).
- Step 3: Multiply the average monthly net profit or gross income amount from Step 2 by 2.5 (or 3.5 if the loan is a 2nd draw for a borrower with an NAICS code beginning with 72. This amount cannot exceed \$20,833 (or \$29,167 if the loan is a 2nd draw for a borrower with an NAICS code beginning with 72).

The loan calculation for Schedule C filers *with* employees:

- Step 1: Compute 2019 or 2020 payroll (using the same year for all items) by adding the following:
 - at your election, either
 - (1) the net profit amount from line 31 of your 2019 or 2020 IRS Form 1040, Schedule C, or
 - (2) your 2019 or 2020 gross income minus employee payroll costs, calculated as Schedule C, line 7, minus your employee payroll costs reported on lines 14, 19, and 26 of Schedule C (for either option, if you are using 2020 amounts and have not yet filed a 2020 return, fill it out and compute the value). This amount is limited to \$100,000;
 - Plus 2019 or 2020 gross wages and tips paid to your employees whose principal place of residence is in the United States, computed using 2019 or 2020 IRS Form 941 Taxable Medicare wages & tips (line 5c, Column 1) from each quarter plus any pre-tax employee contributions for health insurance or other fringe benefits excluded from Taxable Medicare wages & tips; (limited to \$100,000 per employee);
 - Plus 2019 or 2020 employer contributions to employee group health, life, disability, vision and dental insurance (portion of IRS Form 1040, Schedule C line 14 attributable to those contributions); retirement contributions (IRS Form 1040, Schedule C, line 19); and state and local unemployment taxes.
- Step 2: Calculate the average monthly amount (divide the amount from Step 1 by 12).
- Step 3: Multiply the average monthly amount from Step 2 by 2.5 (limited to \$2,000,000 for 2nd draw borrowers).

Please feel free to contact our firm if we can assist with any financial, tax, accounting, bookkeeping, and government program application needs you may have. Dcarpenter@solutionsbychs.com

FUTURE OF CHIROPRACTIC STRATEGIC VISIONING AND PLANNING PROJECT



[View Report](#)

Phase One Report

The Phase One report has now been published. This report documents the collective development of Shared Vision, Mission, Core Values and high-level Strategic Priorities. This work has been accomplished with outstanding industry input, with close to 4,000 people who have participated. This participation has been widespread, with good representation geographically and across industry experience, types of practices and different schools of thought. The Phase One of the Future of Chiropractic Strategic Visioning and Planning project has achieved some very clear direction and mandate to now move on and develop a bold strategic plan. There is strong data-driven support for the high-level vision, mission, values and strategic priorities. This has been validated with dedicated focus groups, interviews and stakeholder sessions. This outcome positions the profession well to now move to Phase 2, which is the development of an agreed strategic action plan.

cians who allow these atrocities to continue today.

According to "Medical Racism" producer Kevin Jenkins of the Urban Global Health Alliance: "These racially targeted experiments have been hiding in plain sight for decades. It's time to expose the truth and end inhumane and barbaric forms of racism by the 'respected' medical establishment."

"Medical Racism" explores the recent racially based experimentation by government health officials and pharmaceutical companies on Black children in South Central Los Angeles.

The film also exposes Big Pharma's medical experiments and "drug dumping" in modern-day Africa, and the World Health Organization's 2014 population control campaign to sterilize a million Kenyan girls with infertility chemicals hidden in tetanus vaccines.

"The high levels of medical mistrust in the Black community are a rational response to routine callousness and systemic savagery toward Blacks by medical professionals and pharmaceutical interests," said Robert F. Kennedy, Jr., chairman of Children's Health Defense. "Our hope in producing this film is to learn from past misdeeds, so we can avoid their future repetition."

For more information and to register to receive a notification on where and how the film can be seen when it's released, visit medicallracism.org.



You've prepared for a rewarding retirement.
I can help you *make the most of it.*

As an Ameriprise Private Wealth Advisor, I have the qualifications and experience to help navigate your complex financial needs. Whether it's investment management, tax strategies or legacy planning, I can work with you to grow and preserve what you've worked so hard to achieve.



Demetrios Paraskevopoulos, CFP®, ChFC®
Private Wealth Advisor

516.288.7610
300 Old Country Road, Suite 371
Mineola, NY 11501
demetrios.x.paraskevopoulos@ampf.com
demetriosparaskevopoulos.com



Certified Financial Planner Board of Standards, Inc. (CFP Board) owns the CFP® certification mark, the CERTIFIED FINANCIAL PLANNER™ certification mark, and the CFP® certification mark (with plaque design) logo in the United States, which it authorizes use of by individuals who successfully complete CFP Board's initial and ongoing certification requirements.
Ameriprise Financial Services, LLC. Member FINRA and SIPC.
© 2020 Ameriprise Financial, Inc. All rights reserved. (12/20)

We've got you covered!

- Motor Vehicle & Motorcycle Accidents
- Construction Site Accidents
- Residential & Commercial Real Estate Transactions
- Business Formation, Partnership Agreements & Employment Agreements
- Federal & NY State Tax Resolution

Law Office of
JACK STUART BEIGE & ASSOC. PC

119 West Main Street,
Smithtown, NY 11787
631-231-7725

www.BeigeLaw.com



Harlan Health Products, Inc.

All the products you need...and the personal service you deserve.

Electrotherapy • Winback TECAR Therapy • Laser Therapy • Shockwave Therapy
Magnetic Resonance Therapy • Tables • Traction • Thermo Stim
Rehab Equipment • Cardio Equipment • Over 5000 Clinical Supplies

TRADE-IN YOUR OLD EQUIPMENT, WORKING OR NOT FOR TODAY'S NEWEST TECHNOLOGY*

*Limited time offer. Call to find out if your old equipment qualifies.

800.345.1124 www.harlanhealth.com



Dynatronics • Richmar • Chattanooga • Hill • Multi Radiance
Lloyd • Scifit • ThermX • Matrix...and more

CLASSIFIEDS

FOR SALE:

RETIRING BROOKLYN CHIROPRACTOR TABLES+THERAPY FOR SALE - DESCRIPTION AVAILABLE ON REQUEST 9084477568

CHIROPRACTIC PRACTICE FOR SALE:

40 YEAR PRACTICE IN SOUTH HUNTINGTON, NY. CHIROPRACTIC TABLES, THERAPY UNITS, X-RAY VIEW BOXES, AND VARIOUS OTHER SUPPLIES. CURRENTLY IN FREE-STANDING OFFICE. CALL DAVID ROGERS (631) 553-9805.

ADVERTISING

NEWSLETTER EDITOR - Dr. Philip A. Facquet III

35 Washington Blvd., Smithtown, NY 11787-2332

(631) 724-7277 • drfacquet@optonline.net

NEWSLETTER ADVERTISING & CLASSIFIEDS

To place an ad or for information contact the Newsletter Editor.

ARTWORK REQUIREMENTS: High resolution, 4 color PDF, email ad to the Editor. (ad creation available for an additional fee)

The deadline for receipt of both artwork and payments is the last Friday of the month, prior to month of insertion.

PAYMENTS: Send checks payable to: "NYSCA District 7" c/o Dr. Argeropoulos, 9 Roosevelt Ave, Port Jefferson Station, NY 11776

To advertise State Wide contact: info@nysca.com or (518) 785-6346

Thank you for your support of the Chiropractic Profession and NYSCA. This newsletter is the official publication of the NYSCA Suffolk District. This is a medium for open and responsible dialogue on issues germane to the chiropractic profession. Individuals are encouraged to contribute items of interest. Opinions do not necessarily reflect the views of the NYSCA Suffolk District. The NYSCA Suffolk District does not endorse or approve any statement or fact or opinion, nor is it responsible for editorial or advertising presented within the Newsletter.

SAVE THE DATE
APRIL 9-11, 2021
SPRING CONVENTION

JOIN
NYSCA
MEMBERSHIP
HAS ITS BENEFITS



SAVE THE DATE

FOR UPCOMING NYSCA-SPONSORED WEBINARS

In addition to CE available at our statewide conventions, the NYSCA now offers continuing education credit via webinar through NYCC Post-Grad. NYSCA Webinars are held monthly, usually on a Wednesday at 1pm EST.

Wed, March 24, 2021 | 1pm (1CE)

Applications to Reduce Chronicity and Improve Prognosis in Workers' Compensation Patients

Presenter: David B Kartzman DC

Course outline:

- Understand higher costs for care, more utilization in work injuries.
- More likely to lose work time.
- CPT 97110 and the Medical Treatment Guidelines

REGISTER ONLINE

Wed, May 26, 2021 | 1pm (1CE)

Documenting and Coding WC Injuries: Utilizing the Guidelines and CMS-1500 form in reporting chiropractic care for an injured worker.

Presenters:

Jason Brown DC & Robert Martin DC

Course outline:

Providing timely and effective chiropractic care is essential to facilitating recovery and return to work for the injured worker. As we emphasize this early effective care to limit chronicity and addiction, effective documentation and communication also plays an integral role. This course will strive to educate attendees on utilization of new processes and the CMS-1500 form to ensure effective reporting, accurate and timely bill payment, and reduction in claims disputes.

Online registration coming soon

Tuition Discount

Members of the NYSCA are eligible to receive a discount on tuition for NYSCA-sponsored webinars via coupon code at registration check-out. Please be sure to check your email for the discount code, which is included for all NYSCA members. You must have your discount code BEFORE registering. Please note, once you register, the discount code cannot be applied retroactively. Contact the NYSCA Administrative Office at 518-785-6346 for more information.



New York State Chiropractic Association

PO Box 557, Chester NY 10918 | 518-785-6346 | 518-785-6352 FAX
info@nysca.com | www.nysca.com



APPLICATION FOR MEMBERSHIP

Contact Information

Last Name:	First Name:	MI:	<input type="checkbox"/> Male <input type="checkbox"/> Female
Business Address:		County:	
City:	State:	Zip:	
Office Phone:	Office Fax:	Email:	
Referred to NYSCA by:		All fields required unless otherwise specified.	

Education Information

Degree(s):	
Chiropractic College:	Year Graduated:
NY Chiropractic License Number:	Date of Issuance: (MM/DD/YYYY):

Personal Information

Date of Birth:	Home Phone (opt):	Mobile Phone (opt):
Home Address:		County:
City:	State:	Zip:

Membership Categories

Dues

Regular Membership	Full Year or EZPay*
<input type="checkbox"/> 1 st Year Licentiate – up to 2 years from date of licensure	\$120 or \$10/month
<input type="checkbox"/> 2 nd Year Licentiate – up to 3 years from date of licensure	\$240 or \$20/month
<input type="checkbox"/> 3 rd Year Licentiate – up to 4 years from date of licensure	\$360 or \$30/month
<input type="checkbox"/> 4 th Year Licentiate – up to 5 years from date of licensure	\$480 or \$40/month
<input type="checkbox"/> 5 th Year Licentiate – Greater than 5 years from date of licensure	\$600 or \$50/month
★ New Member Special ★	
One-time offer applicable to Regular Membership only when year is PAID IN FULL. Eligibility subject to verification. Subsequent year's dues payable at usual rate. Cannot be combined with other discounts	25% off
<input type="checkbox"/> Part-time, practicing 20 hours or fewer per week Discount applicable to Regular Membership only. A certification of working hours, signed by a NYSCA district officer, must be submitted to the administrative office; Cannot be combined with other discounts	50% off
Associate Membership – Include name of sponsoring NYSCA Member: _____	
<input type="checkbox"/> 1 st Year Licentiate – up to 2 years from date of licensure	\$60 or \$5/month
<input type="checkbox"/> 2 nd Year Licentiate – up to 3 years from date of licensure	\$120 or \$10/month
<input type="checkbox"/> 3 rd Year Licentiate – up to 4 years from date of licensure	\$180 or \$15/month
<input type="checkbox"/> 4 th Year Licentiate – up to 5 years from date of licensure	\$240 or \$20/month
<input type="checkbox"/> 5 th Year Licentiate – Greater than 5 years from date of licensure	\$300 or \$25/month
Affiliate Membership [†] – must be licensed to practice chiropractic in New York	
<input type="checkbox"/> a full-time staff member in residence at a chiropractic or other accredited university, college, school, or institution; or	\$60
<input type="checkbox"/> a full-time employee of any recognized governmental agency; or	
<input type="checkbox"/> a member of the Armed Forces of the United States on active duty; or	
<input type="checkbox"/> not in active chiropractic practice AND is employed full-time as supplier/vendor of chiropractic products and services, or other practice equipment, in service to members of the chiropractic professional field; or	
<input type="checkbox"/> practicing exclusively in a state or jurisdiction other than New York State	

[†]out-of-state affiliate members may neither vote in NYSCA elections nor hold office

*Membership Dues – EZPay (Monthly debit from credit card)

Cardholder understands and agrees that by opting into automatic billing his/her card will be charged on a monthly basis and will automatically renew on membership anniversary date. Renewal will be at current membership type associated with account. Monthly membership is not eligible for cancellation for the first 12 months.

Payment Information

Select One: Pay in full EZPay*

Payment Method

VISA MasterCard DISCOVER AMERICAN EXPRESS

Card Holder: _____
Card #: _____
Expiration Date: _____
Security Code: _____

Billing Address: _____

Check Enclosed; Please make checks payable to:
New York State Chiropractic Association
PO Box 557, Chester NY 10918

Check here if you do **NOT** want 7% of your dues monies earmarked for NYCPAC. Refusal to contribute will not affect your membership rights.

I fully understand and agree that upon acceptance of my application, I shall abide by the certificate of incorporation of the NYSCA, its Bylaws, Canon of Ethics, all rules and regulations adopted by the Board of Directors and House of Delegates, and the laws of the State of New York, the Board of Regents, and the State Education Department. I further understand that the NYSCA regularly communicates with its members by electronic means and therefore permit NYSCA to send me communications and advertisements (regarding upcoming events, etc.) via fax/email.

Signature: _____

For Office Use Only Date Received: _____
District Assigned: _____