



AMERICAN CHIROPRACTIC ASSOCIATION



AMERICAN CHIROPRACTIC COLLEGE OF RADIOLOGY

ACCR GUIDELINE REGARDING THE USE OF "SCREENING CT".

The ACCR guidelines address issues common to clinical practice. They are not rules, but guidelines that attempt to define the principles of practice that should generally produce high quality radiologic care. Adherence to the ACCR Guidelines will not assure a successful outcome in every clinical situation. The Guidelines are not intended to establish a legal standard of care or conduct, and deviation from one of these guidelines does not, in and of itself, indicate or imply that such practice is below acceptable level of care. The ultimate judgment regarding any specific procedure or course of conduct must be made by the chiropractic physician/doctor of chiropractic in light of all circumstances presented by the individual clinical setting. The ACCR guidelines are a consensus of procedures and conduct taught in CCE accredited chiropractic institutions and the practice of radiology by professional members of the ACCR.

Screening is a procedure done for an asymptomatic patient to detect disease. There are many commonly used laboratory screening tests in medicine, for example fecal occult blood and screening mammography.

Medical or healing arts screening is a procedure done utilizing ionizing radiation on a patient that does not require a directive from a licensed practitioner. Computed tomography (CT) for total body screening is being promoted to the general public as a medical arts screening.

Screening is useful if it detects disease when intervention is useful; does not cause more harm than good; is not too expensive a test to perform and follow-up; and, disease is important enough to screen for.

The greatest concerns surrounding this procedure are: (1) detection of minor anomalies that have no influence on patient health, but their identification will lead to added examinations with associated risks and unnecessary expenses, (2) the wide-scale use of significant radiation exposure from total body screening CT, (3) costs associated with clearing false positives, (4) the false sense of security associated with tests that may have lower sensitivity than the patients assume, and (5) confusion with scientific CT studies screening high-risk patient populations.

The ACCR therefore finds that:

The use of CT for total body screening of asymptomatic patients has not currently been found to be scientifically justifiable or clinically efficacious.

CT screening for lung cancer, cardiovascular disease and colon disease may be valuable in carefully selected patients.

Scientists in the ACCR will continuously assess the scientific literature as to the efficacy of total body CT screening and make revision to this policy statement when appropriate.

Submitted by Jan Martensen, DC, DACBR, PhD, Chair ACCR Commission on Radiological Physics and Safety.

Adopted at ACCR Workshop in Austin, TX 2004.