

October was an exciting and busy month

By Jen Gantzer, DC, MS, FACN, DACBN, LAc



Golf Tournament & Chiroday at the Capitol

Thank you to all our golf tournament sponsors and team players; see pg 2, 3, 13, 14 for golf pictures and a list of everyone who contributed including awards and raffles. Chiroday in Tallahassee for

our annual lobbying event was a success as well; we met with 7 legislative offices and 3 legislators and had 3 chiropractic students join us including our board ambassador.



L - R: SACA legislative rep N.Rennie, NUHS ambassador A.Burns, SACA president S.Langheier, FCA Alternate C.Langheier, PCCS president J.Gantzer, PCCS treasurer T.Hughes, FCA Director M.Wieland.



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Join Us Tuesday October 26th for the joint meeting with HCCS & NSCS details on pg-6. Guest Speaker Jack Hebert

26th Annual Golf Tournament- by Tom Hughes, DC

The 26th Annual Golf Tournament was held on Thursday, October 7th. Once again, we played at Bardmoor Golf & Tennis Club in Largo. The weather was great and both players and sponsors had a great day. It was wonderful to see everyone again! 70 golfers competed for the coveted PCCS Championship as well as other fun and exciting contests. The official results are below:

1ST PLACE (55) 2ND PLACE HONESTY AWARD

Walter Reynoso Chris Waters Ryan Hohl
Jared Maddox Dave Clark David McKenna
John Daly Carmine Chioccariello John Blaseser
Noelia Lopez Christian Pipas Joseph Regolado

CLOSEST TO THE PIN

Men – Sponsored by Neurology & Physical Therapy Centers of Tampa Bay, won by Zac Jora Women – Sponsored by Revenue Recovery Firm, won by Nikki P.

CLOSEST TO THE SPINE – Sponsored by PCCS, won by Dave Clark

LONGEST DRIVE

Men – Florida Law Doc, won by Mike Cordero Women – Florida Chiropractic Association, won by Nikki P.

STRAIGHTEST DRIVE – Sponsored by SimonMed Imaging, Won by Ryan Hohl

\$10,000 CASH FOR A HOLE-IN-ONE ON #11 - Sponsored by PCCS, no winner!

PUTTING CONTEST – Dave Sandefur. He missed sinking it by only 1 foot 9 inches!

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Exception Skin – Sue Thompson Attorneys Karikas & Kasaris Elite home care of Florida, LLC Looks & Company "The Salon

Proceeds from this event help support the general operation of the Society as well as raise money for our PAC. The total amount raised for our PAC is still being determined but needless to say it is more than we had prior to the tournament!

The PCCS Board of Directors and members would like to thank all the players, sponsors, raffle contributors and volunteers for making the event a success.

PCCS GOLF TOURNAMENT









P











THE RADIOLOGIST'S VIEW



DO YOU PRACTICE IN "TOONTOWN"?

A fundamental principle to understand in order to interpret a diagnostic image is that the image represents a two- dimensional depiction of a three-dimensional object. Everyone knows that.....or so you would think! However, forgetting this simple concept is a leading source of error and misinterpretation, even among radiologists. Why is this such a problem!?

Unless you practice in "Toontown" (the region where the animated characters lived, in the movie "Who Framed Roger Rabbit") your patients are three-dimensional. This requires two views at right angles be performed for proper radiographic evaluation of the anatomy. In some areas where the anatomy is more complicated, such as the spine, ribs and many extremities, more than two views are needed. This is especially true in cases of suspected fracture. Unless the x-ray beam is parallel to a fracture line, it will not be seen. For example, a fracture oriented in the coronal plane will not be seen on a frontal projection.

A 5cm soft tissue mass was seen in the apical region of the left lung on a frontal radiograph. The usual thought process is to describe the lesion and come up with a differential, taking into account the clinical presentation. But not instinctively thinking about the 3D concept leads one to forget the possibility that the lesion may not be in the lung at all, leading to unnecessary testing and patient anxiety. In this case, the 5cm "lung" mass was actually a lipoma on the patient's back. In another instance, a 13 year old female was scheduled for a biopsy of a hilar mass diagnosed by a resident radiologist only to have the chief radiologist addend the findings realizing that the "mass" was,

in reality, the young ladies hair braid. On a lateral spinal radiograph a doctor suspects metastatic disease when a radiopaque lesion was thought to reside within the vertebral body. After further testing, the lesion was found to be an osteophyte projecting laterally and seen en face. Another common error is to suspect a radiolucent lesion in a bone when in fact it was merely a superimposed tuberosity. Many more examples can be described, but I think you get the point.

It is not difficult to overcome this common source of diagnostic error: First, never do a "scout" film, a single view to evaluate an area "just to be sure everything is all right". This is extremely misleading and an improper use of ionizing radiation. Secondly, if an abnormality is seen on one projection, try to find it on other views to determine the proper location. This is similar to GPS coordinates. If it cannot be seen within the body on the views that are available, remember to check the soft tissues of the patient, including the skin. Thirdly, exclude artifacts that may create the appearance of an abnormality. Always think of the three-dimensional principle when evaluating a radiograph.

CT and MRI have a similar principle called volume averaging. The viewed image represents a thickness of tissue that is usually several millimeters and may include a part of an adjacent structure. For instance, an axial image near the edge of an intervertebral disc may include a portion of the pedicle and be misinterpreted as a herniation or osteophyte. Again, it is equally important to keep the 3D principle in mind when evaluating advanced imaging.

Remember! When looking at a diagnostic image, THINK 3D.

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The Audible Release is published 10 times per year and unlimited downloads available online.

Dr. Jason Miller: Editor

The Audible Release provides news and information that is both educational and informative to the chiropractors and their associates in the Pinellas County area.

Society news, staff changes, personal announcements, photos and success stories are welcome. Articles about chiropractic procedures and issues concerning the practice of chiropractic should be submitted to the editor. Advertising inquires should be made to the publisher or visit us online at www.pccschiro.org

The deadline for ads and articles is the 7th of every month.

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Chiropractor

Calendar of Events

MARK YOUR CALENDARS

Monthly Dinner Meetings In-Person & Virtual for 2021

Join us In-Person

Last Tuesday of the Month

Join us Virtual via Zoom

www.pccschiro.org/annual-calendar

Marriott Crafted Plate 12600 Roosevelt Blvd N St. Petersburg, FL 33716 6:30-8:30 pm

Dinner/Speaker at 7 pm

Please RSVP to Evite for dinner attendance

October

7th – Golf Tournament

19th – Chiro Day; Trip to Tallahassee

26th - Joint Meeting with HCCS

Guest Speaker: Jack Hebert FCA Lobbyist

November

No Dinner Meeting; Happy Thanksgiving **December**

4th - PCCS Holiday Party Clearwater Beach Rooftop Marina Cantina 7-11PM

Oct no board meeting, 9th is Annual Retreat
Nov Board meeting 9th 12:30pm Zoom

PCCS PAID MEMBERS 2021

"Thank you to the chiropractors below that are supporting the PCCS and PAC in 2021"
See page 15 for the 2021 Membership Application if you have not already mailed it in.
Contact Jennifer Comey, Executive Director, with any questions regarding membership at ed@pccschiro.org

We appreciate your support of our society which works hard to serve & represent you.

Names listed in BOLD have donated to the PAC
In their membership dues
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PAC donations are additionally recognized on the member directory with a "PAC Star"

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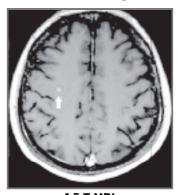
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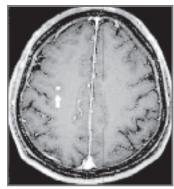
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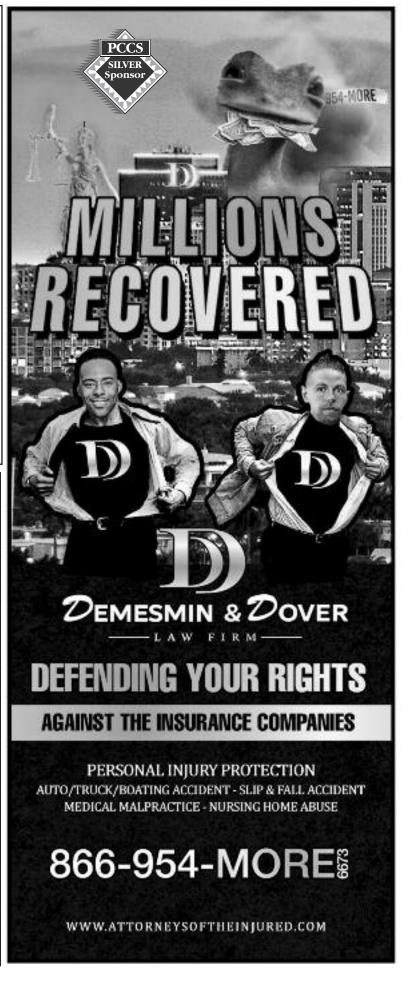
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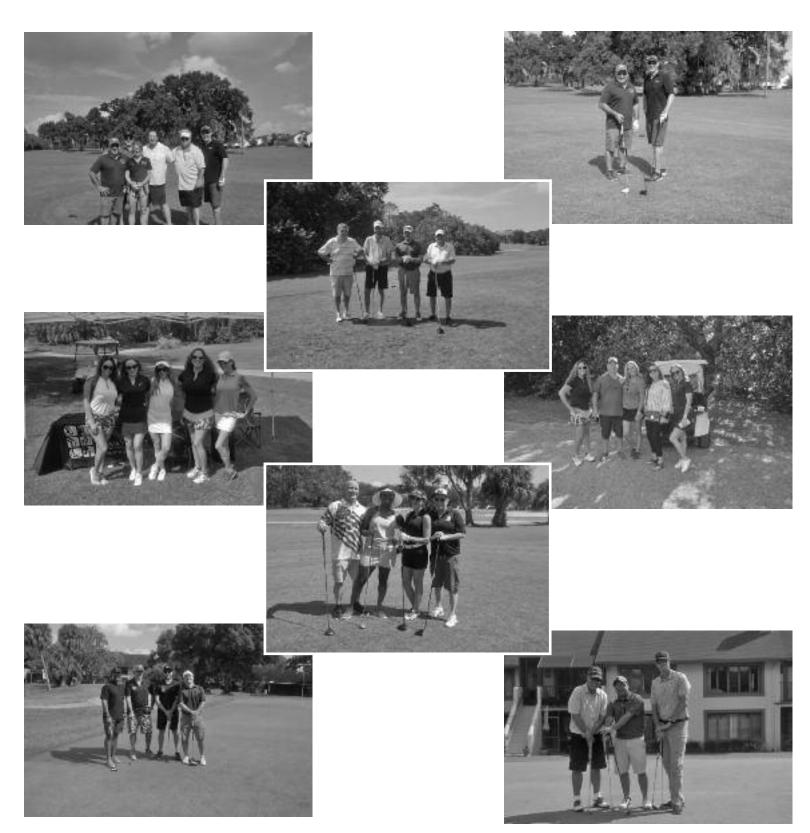








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