

# Standard of Practice:

# Manipulation



## Introduction

The intent of this standard is to advise Members of the requirements to perform manipulation safely, effectively, and competently.

Performing manipulation is a controlled act: "Moving the joints of the spine beyond the individual's usual physiological range of motion using a fast, low amplitude thrust". (Regulated Health Professions Act, 1991, S.O. 1991, CHAPTER 18, s. 27).

Members are authorized to perform manipulation under the *Naturopathy Act*, 2007, S.O. 2007, CHAPTER 10, Sched. P, s. 4.1.

### **Definitions**

Manipulation: moving a joint beyond a person's usual physiological range of motion using a high velocity, low amplitude thrust.

Absolute contraindication: a condition or situation which makes manipulation completely inappropriate because it places the patient at undue risk.

Relative contraindication: a condition or situation which may make manipulation inadvisable unless the intervention is modified.

### 1. Competency

The Member has the knowledge, skill and judgment necessary to perform manipulation safely, ethically, and competently.

### 2. Assessment and Treatment

The Member conducts an assessment and formulates a diagnosis based on subjective and objective findings prior to performing manipulation.

The Member ensures timely reassessment of the patient's progress and response to treatment.

#### **Performance Indicators**

In addition to meeting the Standard of Practice for Performing Authorized Acts, the Member:

- assesses the patient for contraindications prior to performing manipulation;
- performs manipulation for therapeutic purposes when it is clinically relevant.

The Member uses only one or more of the following low amplitude thrust procedures when manipulating the cervical joints of the patient's spine:

- supine lateral flexion;
- supine rotary;
- C2-C7 seated rotary.

### 3. Contraindications to Manipulation

The Member is knowledgeable about absolute and relative contraindications to manipulation and is aware that special care is warranted when considering manipulation of the cervical spine.

#### **Performance Indicators**

The Member:

- exercises due diligence and errs on the side of patient safety when a patient presents with a condition where caution is warranted before performing manipulation; (see CONO's Manipulation Contraindications Guideline)
- screens patients for Contraindications to Cervical Manipulation; (see CONO's Manipulation Contraindications Guideline)

When a patient presents with a relative contraindication, the Member uses professional judgment to determine whether manipulation is appropriate and modifies the procedure as necessary.

The Member does not perform manipulation if:

- the patient has or may have one or more of the contraindications listed in the General Regulation; (see CONO's Manipulation Contraindications Guideline)
- the Member is in doubt about the accuracy of the patient's health status or health history with respect to any
  of the contraindications listed in the General Regulation; or (see CONO's Manipulation Contraindications
  Guideline)
- any of the provisions regarding mandatory referral of the patient, listed in the General Regulation, apply.

### 4. Record Keeping

The Member maintains records specific to the manipulation.

#### **Performance Indicators**

In addition to the College's Standard of Practice for Record Keeping, the Member will document in the patient chart:

- all levels of the spine adjusted using high velocity, low amplitude thrust including laterality and any or all other joints adjusted or mobilized;
- treatment that was commenced but not completed, including the reasons for non-completion;
- specifics of all adjunctive therapy used with manipulation (e.g., ultrasound, interferential current).

### **Related Standards & Guidelines**

Communicating a Diagnosis Consent Delegation Emergency Preparedness Performing Authorized Acts
Record Keeping
Therapeutic Relationships and Professional Boundaries
Contraindications for Manipulation Guideline

# **Legislative Framework**

General Regulation
Naturopathy Act, 2007
Professional Misconduct Regulation
Regulated Health Professions Act, 1991

#### Disclaimer

In the event of any inconsistency between this standard and any legislation that governs the practice of Naturopathic Doctors, the legislation shall govern.