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Why Family Practitioners and Nurse Practitioners Are Referring to Chiropractic Doctors: Benefits and Practice Trends

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1. Introduction

The modern healthcare landscape is characterized by an increasing emphasis on interprofessional collaboration, patient-centered care, and the search for effective, evidence-based treatment solutions. Within this evolving paradigm, referral patterns between primary care providers—specifically family practitioners (FPs) and nurse practitioners (NPs)—and chiropractic doctors (DCs) are undergoing a significant transformation. Historically separated by philosophical and professional divides, these fields are now finding common ground, driven by clinical necessity, patient demand, and a shared goal of optimizing health outcomes. This report examines the multifaceted reasons behind the growing trend of FPs and NPs referring patients to chiropractors, analyzing the clinical, practical, and systemic benefits that underpin this collaborative shift.

The primary drivers for these referrals are rooted in the distinct yet complementary skill sets of each profession. FPs and NPs, as the cornerstones of primary care, manage a vast spectrum of health issues but face significant time constraints and a growing caseload of patients with complex chronic diseases. Concurrently, musculoskeletal (MSK) conditions, particularly low back and neck pain, represent one of the most common reasons for patient visits, creating a substantial burden on primary care resources. Chiropractors, with their specialized training in the biomechanics, diagnosis, and non-surgical management of neuromusculoskeletal disorders, offer a focused expertise that can alleviate this burden.

Furthermore, this trend is heavily influenced by a major public health crisis: the opioid epidemic. The urgent need to reduce reliance on addictive pain medications has compelled healthcare providers to seek and embrace non-pharmacological pain management strategies [1]. Chiropractic care, with its emphasis on manual therapies, exercise, and lifestyle modifications, provides a powerful, evidence-based alternative for pain relief, aligning with national guidelines and promoting safer long-term outcomes for patients [2].

Beyond chronic and acute MSK conditions, a notable and growing area of referral involves patients with personal injury (PI) claims, particularly those resulting from motor vehicle accidents. Managing these cases extends beyond clinical treatment to include complex

medico-legal documentation, impairment ratings, and the potential for expert testimony—tasks for which most FPs and NPs are not trained and lack the necessary time. Specialized chiropractors who focus on personal injury are equipped to handle these intricate requirements, offering a vital service that supports both the patient's physical recovery and their legal case. This report will explore these key areas in depth, providing a comprehensive analysis of why referrals to chiropractic doctors have become an increasingly strategic and beneficial practice for today's family and nurse practitioners.

2. Chiropractic Expertise in Musculoskeletal Conditions

A primary catalyst for the increasing referral rates from FPs and NPs to DCs is the latter's specialized expertise in the diagnosis and management of musculoskeletal conditions. Primary care providers are generalists by definition, tasked with addressing a wide array of health concerns. While they are proficient in identifying and managing common MSK complaints, the depth of their training in biomechanics, spinal anatomy, and manual therapeutic techniques is naturally limited. Chiropractors, conversely, focus their entire educational and clinical practice on the intricate workings of the neuromusculoskeletal system, making them valuable specialists in this domain.

2.1. Focused Diagnostic and Treatment Approach

Chiropractic education involves rigorous training in spinal and extremity anatomy, neurology, biomechanics, and diagnostic imaging. This specialized knowledge base allows DCs to perform comprehensive physical examinations that can identify subtle biomechanical faults, joint restrictions, and soft tissue abnormalities that may be the root cause of a patient's pain. They are trained to differentiate between various types of MSK pain—whether it originates from the joint, muscle, nerve, or disc—and to develop a targeted treatment plan accordingly.

This focused approach is particularly beneficial for conditions like chronic low back pain, neck pain, headaches, and sciatica, which are prevalent in primary care settings. Rather than relying solely on pharmacological interventions, chiropractors employ a multimodal strategy that often includes spinal manipulative therapy (SMT), soft tissue mobilization, therapeutic exercises, and patient education on ergonomics and posture. This hands-on, patient-active approach addresses the underlying mechanical issues, aiming not just to alleviate symptoms but to restore function and prevent recurrence. For FPs and NPs, referring a patient with a complex or non-responsive MSK condition to a DC is analogous to referring a cardiac patient to a cardiologist; it ensures the patient receives care from a provider with the deepest level of expertise in that specific area.

2.2. Alignment with Evidence-Based Practice

In recent decades, the chiropractic profession has placed a significant emphasis on evidence-based practice (EBP), which has been instrumental in bridging the gap with mainstream medicine. EBP involves integrating the best available research evidence with clinical expertise and patient values to make informed healthcare decisions [3].

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Numerous high-quality clinical trials and systematic reviews have demonstrated the effectiveness of chiropractic interventions, particularly SMT, for acute and chronic low back pain, neck pain, and certain types of headaches.

Prominent clinical practice guidelines from organizations such as the American College of Physicians (ACP) now recommend non-pharmacological therapies as the first line of treatment for acute and chronic low back pain. These guidelines explicitly include treatments commonly provided by chiropractors, such as spinal manipulation. The growing body of evidence supporting these conservative approaches provides FPs and NPs with the confidence to refer patients, knowing the care is backed by scientific validation [4]. Referring to an evidence-based chiropractic practice ensures that patients receive treatments that are not only effective but also align with the highest standards of modern healthcare, fostering a relationship of trust and mutual respect between the referring provider and the chiropractor [5].

2.3. Alleviating the Primary Care Burden

Musculoskeletal complaints account for a significant percentage of all primary care visits. These conditions, while often not life-threatening, can be time-consuming to manage effectively. A thorough MSK assessment, the development of a rehabilitation plan, and patient education all require dedicated time that is often scarce in a busy primary care clinic. By establishing a reliable referral pathway to a trusted chiropractor, FPs and NPs can strategically offload a portion of their MSK caseload.

This delegation of care allows primary care providers to dedicate more time and resources to managing complex medical issues such as diabetes, hypertension, and cardiovascular disease, as well as focusing on preventative care and health screenings. It is a practical application of practicing at the top of one's license, where each professional contributes their specific expertise for the patient's benefit. The chiropractor manages the neuromusculoskeletal components of care, while the FP or NP continues to oversee the patient's overall health, creating an efficient and collaborative model of care that enhances the capacity of the entire healthcare team. This symbiotic relationship ultimately leads to more comprehensive patient management and improved operational efficiency within the primary care practice.

3. Non-Pharmacological Solutions and the Opioid Crisis

One of the most compelling reasons for the surge in referrals to chiropractic doctors is the profession's central role in providing non-pharmacological pain management. This has become particularly critical in the context of the devastating opioid epidemic, which has underscored the profound risks associated with the long-term use of narcotic medications for chronic pain. Healthcare systems, policymakers, and providers are now united in the goal of reducing opioid prescribing, creating a powerful incentive to adopt safer, non-addictive alternatives [6].

3.1. Chiropractic Care as a First-Line Alternative to Opioids

For decades, opioids were frequently prescribed for moderate to severe pain, including common musculoskeletal conditions like back pain. However, extensive research has since revealed the high potential for addiction, overdose, and a cascade of negative health consequences associated with their use, often with limited evidence of long-term efficacy for chronic non-cancer pain [1]. In response, leading medical organizations have fundamentally shifted their clinical guidelines. The American College of Physicians, for example, now strongly recommends non-pharmacological treatments as the initial approach for low back pain, placing chiropractic care and other conservative therapies at the forefront of pain management.

Chiropractic treatment directly addresses this need by offering a drug-free approach centered on restoring function and alleviating pain through manual therapies. By focusing on the biomechanical and neurological sources of pain, chiropractors can often provide significant relief without the risks associated with pharmaceuticals. When an FP or NP refers a patient with musculoskeletal pain to a chiropractor, they are not merely outsourcing a problem; they are actively engaging in a best-practice strategy to prevent the initiation or continuation of opioid therapy [7]. This proactive approach is a cornerstone of responsible modern medicine and aligns with public health imperatives to combat the opioid crisis.

3.2. Patient Preference and Demand for Natural Healthcare

The movement towards non-pharmacological care is not only driven by providers but also by patients themselves. There is a growing public awareness of the dangers of opioids and a corresponding increase in patient demand for natural, holistic, and less invasive healthcare options. Many patients are now proactive in seeking alternatives to medication, preferring treatments that empower them to participate in their own recovery through exercise, lifestyle changes, and manual therapies [3].

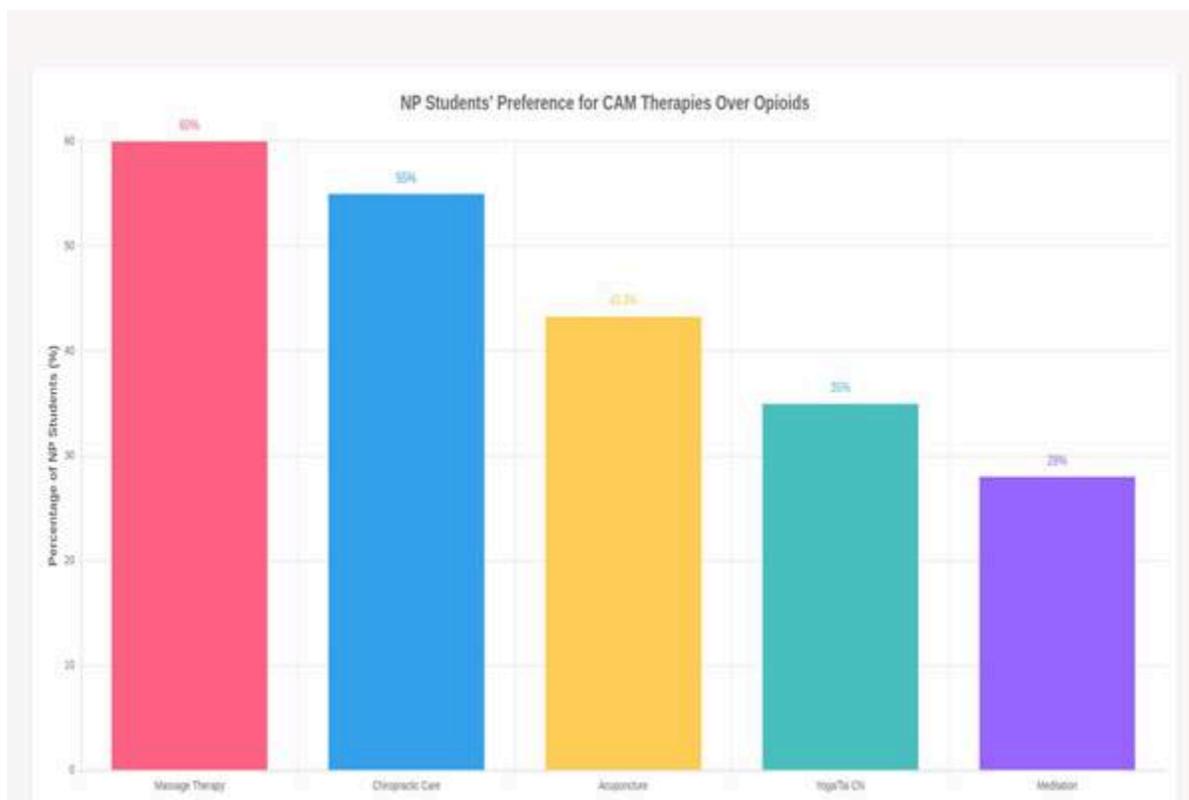
Family practitioners and nurse practitioners are highly attuned to these patient preferences. When a patient expresses a desire to avoid pain medication, referring them to a chiropractor is an excellent way to honor their values while providing an effective, evidence-based solution. This patient-centered approach can enhance the provider-patient relationship, improve treatment adherence, and lead to greater overall satisfaction with care. The availability of credible, non-pharmacological options like chiropractic care allows primary care providers to offer a broader and more personalized menu of treatment choices, meeting the evolving expectations of today's healthcare consumers [8].

3.3. Integration into Collaborative Care Models

The recognition of chiropractic's role in non-pharmacological pain management has led to its increasing integration into formal healthcare settings. Institutions like the Veterans Health Administration have incorporated chiropractic services as part of their comprehensive pain management strategies, recognizing their value in treating veterans with chronic pain and

reducing reliance on opioids. Similarly, some community health centers and hospitals are integrating chiropractors into their teams to provide on-site conservative care [3].

This trend towards integration facilitates smoother collaboration between medical providers and chiropractors. FPs and NPs working within or alongside these integrated systems can more easily refer patients, share electronic health records, and co-manage complex cases. The presence of chiropractors within these systems helps normalize their role as essential members of the pain management team. Research and pilot programs continue to explore how this integration can lead to measurable reductions in opioid prescriptions, lower healthcare costs, and improved patient outcomes, further solidifying the rationale for these interprofessional referrals [5].



4. Expertise in Personal Injury Case Management

A distinct and increasingly important driver of referrals from primary care to chiropractic is the specialized management of personal injury (PI) cases, particularly those arising from motor vehicle accidents. These cases present a unique set of challenges that extend far beyond the scope of typical clinical practice, involving detailed medico-legal documentation, communication

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with attorneys, and the potential for court testimony. Most FPs and NPs are neither trained nor equipped to handle these complexities, making referral to a chiropractor with specialized PI training a highly practical and beneficial solution.

4.1. The Burden of Medico-Legal Documentation

Effective management of a personal injury case hinges on meticulous and legally sound documentation. Unlike a standard clinical note, PI documentation must establish a clear and defensible link between the traumatic event (e.g., a car crash) and the patient's injuries—a concept known as causation. It requires a detailed narrative that chronicles the mechanism of injury, the patient's immediate and evolving symptoms, objective examination findings, and a coherent treatment plan with clearly defined goals. This documentation serves as the primary evidence in legal claims and must be structured to withstand scrutiny from insurance adjusters and opposing counsel [9].

Family practitioners and nurse practitioners, whose documentation is optimized for clinical care and billing, often lack the specific training to create records that meet these rigorous legal standards. Their notes may be too brief or may not adequately address the key medico-legal elements required to support a PI claim. A failure to provide robust documentation can severely undermine a patient's ability to receive fair compensation for their injuries [10]. Chiropractors who specialize in personal injury undergo advanced training in this area, learning how to write detailed reports that clearly articulate diagnosis, prognosis, and the medical necessity of care in a format that is readily usable in a legal context [11].

4.2. Specialized Training and Expertise in Trauma-Related Injuries

Whiplash-associated disorders and other soft tissue injuries common in car accidents can be complex to diagnose and manage. While they may not show up on standard imaging like X-rays, they can cause significant pain and long-term disability. Chiropractors with PI specialization often pursue certifications, such as the Certificate in Chiropractic Personal Injury Specialty (CPIS), which provide advanced education in the biomechanics of traumatic injury, interpreting specialized imaging like MRIs for ligamentous damage, and understanding the nuances of occupant injury kinematics [12].

This advanced knowledge allows them to identify and treat injuries that might otherwise be overlooked in a general primary care setting. For example, a 2017 study highlighted a significant rate of misinterpretation of trauma-related MRIs by general radiologists, underscoring the value of a practitioner trained to look for specific post-traumatic pathologies [12]. By referring a PI patient to a specialized DC, an FP or NP ensures the patient receives care from a provider who not only understands how to treat their injuries but also comprehends the underlying mechanisms, which is crucial for both clinical recovery and legal proceedings.

4.3. Serving as an Expert Witness

In some PI cases, a healthcare provider may be required to provide a deposition or testify in court as an expert witness. This role involves explaining the nature of the patient's injuries, the treatment provided, and offering a professional opinion on matters such as causation and long-term prognosis. This can be an intimidating and time-consuming process for which most FPs and NPs have no training or desire to participate. Their busy schedules and focus on clinical practice make it impractical to dedicate the hours needed to prepare for and provide legal testimony.

Chiropractors who focus on personal injury often receive training in providing expert testimony and are familiar with the legal environment. They understand how to present complex medical information clearly and objectively in a courtroom setting [13]. Their ability to serve in this capacity is invaluable to the patient's attorney and provides a critical service that primary care is generally unable to offer. A Michigan Court of Appeals ruling affirmed the ability of chiropractors to provide such expert testimony on injury causation, solidifying their recognized role in the legal arena [14]. By referring PI patients, FPs and NPs can avoid the potential legal entanglements and time commitments associated with these cases, allowing them to focus on their primary clinical responsibilities while ensuring the patient's legal needs are supported by a qualified professional. This makes the referral a strategic decision that benefits the patient, the primary care provider, and the legal team handling the claim [15].

5. Benefits for the Referring Practitioner

The decision to refer patients to a chiropractic doctor is not solely based on the benefits to the patient; it also offers significant advantages to the referring family practitioner or nurse practitioner. These benefits span clinical, operational, and professional domains, making interprofessional collaboration a strategic imperative for the modern primary care practice. By leveraging the specialized skills of chiropractors, FPs and NPs can enhance their practice's efficiency, improve patient satisfaction, and focus on the areas of medicine where their expertise is most needed.

5.1. Enhanced Practice Efficiency and Focus

As previously noted, musculoskeletal conditions are a leading cause of visits to primary care. While many cases are straightforward, a subset of patients presents with chronic, recurrent, or complex issues that can consume a disproportionate amount of clinical time and resources. These cases often require multiple follow-up appointments, trials of different medications, and extensive patient education, all of which detract from the provider's ability to manage other pressing health concerns.

By establishing a streamlined referral process with a trusted chiropractic colleague, FPs and NPs can effectively delegate the management of these time-intensive MSK cases.

This offloads a significant portion of their workload, freeing up valuable appointment slots and mental energy. This newfound capacity allows them to focus on managing complex chronic diseases like diabetes and hypertension, performing preventative screenings, and addressing acute medical problems—the core functions of primary care. This division of labor ensures that all patients receive the most appropriate care from the most qualified provider, optimizing the efficiency of the entire healthcare ecosystem.

5.2. Improved Patient Outcomes and Satisfaction

Ultimately, the goal of any referral is to improve the patient's health and well-being. When a patient with persistent back pain or neck stiffness experiences significant relief and functional improvement after being referred to a chiropractor, their satisfaction with their primary care provider also increases. Patients appreciate when their provider listens to their concerns, recognizes the limits of their own expertise, and facilitates access to specialized care that effectively resolves their problem.

Collaborating with chiropractors who utilize evidence-based and patient-centered approaches can lead to better clinical outcomes. Patients may experience faster pain relief, improved mobility, and a reduced need for medication, which contributes to a higher quality of life. Positive outcomes reinforce the primary care provider's decision to refer and build patient trust and loyalty. A satisfied patient is more likely to remain with the practice and recommend it to others, making collaborative care a powerful tool for practice growth and reputation management. The development of collaborative referral networks is a key recommendation in modern clinical practice guidelines, recognizing its importance in delivering comprehensive, high-quality care [5].

5.3. Mitigating Practice Risk and Complexity

Managing certain patient populations comes with inherent risks and complexities that can be challenging for a generalist. The two key areas where chiropractic referrals help mitigate this risk are in non-pharmacological pain management and personal injury cases. By referring patients for chiropractic care as a first-line approach to pain, FPs and NPs actively reduce the risk of contributing to opioid dependence and its associated liabilities. This aligns with a safer, more defensive model of medicine in an era of heightened scrutiny over prescription practices.

Furthermore, by referring patients injured in accidents to a DC specializing in personal injury, primary care providers insulate themselves from the medico-legal complexities of these cases. They avoid the burden of creating specialized legal reports, the time commitment of corresponding with attorneys, and the pressure of potential court appearances. This transfer of responsibility to a specialist who is equipped to handle it allows the FP or NP to avoid a significant source of administrative hassle and potential professional risk, ensuring that the patient's legal and medical needs are met without compromising the focus and stability of the primary care practice.

6. Conclusion

The growing trend of referrals from family practitioners and nurse practitioners to chiropractic doctors reflects a pragmatic and patient-centered evolution in healthcare. This interprofessional collaboration is not an arbitrary shift but a calculated response to the pressing demands of the modern medical landscape. By recognizing chiropractors as specialists in neuromusculoskeletal health, primary care providers can more effectively and efficiently manage one of the most common categories of patient complaints, freeing them to concentrate on the complex medical and preventative care that defines their practice.

The benefits of this collaborative model are clear and compelling. For patients, it provides access to specialized, evidence-based care for musculoskeletal conditions and offers a powerful non-pharmacological alternative to opioids, directly addressing a major public health crisis.

For primary care providers, it alleviates caseload pressures, enhances patient satisfaction through improved outcomes, and mitigates the medico-legal complexities associated with personal injury cases. For the healthcare system as a whole, it promotes a more integrated and cost-effective model of care, ensuring that patients receive treatment from the most appropriate provider at the right time. As the principles of evidence-based practice and interprofessional respect continue to dismantle historical barriers, the synergy between primary care and chiropractic care is poised to become a standard of practice, fostering a healthier future for patients and a more sustainable model for providers.

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Respectfully,

A handwritten signature in black ink that reads "Robert B. Sheely, DC, FICC, FIACA". The signature is written in a cursive style with some capital letters.

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