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METHODS

A literature search was performed and a survey instrument designed and submitted to the University's Institutional Review Board (IRB). Approval was granted by the IRB. The survey was administered to clinic faculty and administrators, clinic staff, entering DC students, and graduating DC students.

RESULTS

Results of the 19-item survey exist in table and graph format listing mean, median, mode, and standard deviation. For this paper, four categories of data are presented. Although results do not show strong variance among groups, each category has interesting comparisons of self-reported proficiency

and relevance of technology and its ethical breaches, personal integrity, and role modeling. Examining limitations of the study raises questions about the accuracy of responses and response rates, when the survey is one that addresses sensitive issues.

CONCLUSION

In this chiropractic college clinic setting, there is much to explore about the ethical environment and the roles, responsibilities, and self-perception of its constituents. Professional development programs, already begun, and the ongoing crafting of a University honor code can provide needed clarity of individual definitions and meaning of ethics and integrity.

Interrater and Intrarater Reliability of Static Paraspinal Surface Electromyography

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OBJECTIVE

The objective of this study was to evaluate the interrater and intrarater reliability of static paraspinal surface electromyography.

METHODS

The static paraspinal surface electromyography functions of an Insight Subluxation Station were evaluated for clinical reliability. Following approval of the project and the consent process by the Institutional Review Board of Life University, 91 university students were recruited by announcements and personal contacts. Two practicing chiropractors trained in the use of paraspinal surface electromyography conducted the scanning. The two examiners, blinded from data collection, scanned subjects according to the protocols established by Kent and Gentempo. The protocol involves static paraspinal sEMG scanning using hand-held electrodes in the seated position at 15 paired sites (4 cervical, 7 thoracic, 3 lumbar, and 1 sacral). Each subject was scanned twice by each examiner at one sitting.

RESULTS

Principal component analysis (SPSS) was conducted on left/right averaged data and points. Statistical comparisons were made across the two observers, two repeated measures for each observer, and 15 sEMG points from C1 to S1. The averaged left/right values were subjected to multiple regression-principal component analyses and revealed intraclass correlation coefficients for intraexaminer and interexaminer to be 0.9527 and 0.9535, respectively. The Cronbach alpha for intraexaminer and interexaminer was found to be 0.9526 and 0.9558, respectively. The latter indicates a high degree of internal consistency reliability across the 15 data points per patient and two separate measures. A 95% confidence interval for intrarater revealed lower and upper limits of 0.9377 and 0.9656, respectively, and for interrater showed 0.9388 and 0.9662, respectively.

CONCLUSION

There have been some studies done to address the reliability of sEMG techniques; however, larger studies were needed. This study revealed excellent interexaminer and intraexaminer reliability of static paraspinal surface electromyography in a large number of subjects.