

Expanding the Scope of Acupuncture Care

The Rusk Institute of Rehabilitation Medicine Collaborates with Tri-State College of Acupuncture

Jane Hart, MD

Creative collaborations between medical institutions and integrative therapy centers can lead to a win-win situation for both patients and clinicians. One such collaboration, between The Rusk Institute of Rehabilitation Medicine (part of New York University's Langone Medical Center), in New York City, and the Tri-State College of Acupuncture, also in New York City, is bringing low-cost acupuncture to people who might not otherwise receive such treatments. Now, the collaboration is broadening both medical and licensed acupuncturists' understanding of the field.

Beginning the Collaborative Process

Alex Moroz, MD, FACP, director of the Integrative Musculoskeletal Medicine Program at the Rusk Institute and director of residency training and medical education in the department of rehabilitation medicine at New York University's School of Medicine, in New York City, started the Integrative Musculoskeletal Medicine Program at Rusk. He describes how the collaboration started: "Essentially, Tri-State College had a new director of clinical training, Peter Dubitsky [MS, LAc], and he reached out to me and was interested in having our Integrative Program at Rusk as one of the College of Acupuncture's student externship sites."

Moroz says the timing for such an idea was perfect, as he was just starting the new Integrative Program at Rusk. "I am very convinced that, when you combine all of the treatment modalities that are available for patients, regardless of what paradigm they are based on, the result is better—whether you use injections, bracing, exercise, physical therapy, acupuncture, *t'ai chi*, or other therapies," Moroz explains.

For the past 5 years, Moroz—who completed the physician acupuncture course at the University of California–Los Angeles' Helms Medical Institute—has utilized both conventional treatments and acupuncture in his own clinical practice and says that being able to offer patients a variety of modalities is "a very liberating experience." Collaborating with Tri-State College presented another obvious way to expand services for patients.

Moroz approached his administrative superiors and chairperson about the possibility of collaborating and said to them: "This collaboration would fit perfectly with our new integrative endeavors because it will enable us to extend acupuncture to people who don't currently have access to such treatments, and, at the same time, bolster the programming of the department."

With a green light from his colleagues, Moroz recalls that collaborating was actually a painless process from an administrative standpoint. "Probably the most difficult piece of this collaboration was hospital credentialing of the acupuncturists who are not physicians," he says and adds: "We had to develop a whole delineation of privileges, and I had to go to the credentialing committee and present our program. This was a several-month process, but we did get the privileges approved. And we started with our first credentialed externs in July of 2010."

How the Collaboration Works

Rusk hosts 2 externs from Tri-State College for 6 months at a time for one-half day a week. "The externs see outpatients in the office with me and they see inpatients—primarily post-operative orthopedic pain patients," Moroz says and adds: "We graduated our first 2 externs at the end of December 2010, and, now, we have a new pair of externs. It has been a very interesting and beneficial experience."

Dubitsky, who is also the owner of Acupuncture Healthcare Associates, oversees the College's externship program. "The College's externship program was started as a service for our graduates to provide them with further clinical experience after graduating," Dubitsky explains. He comments that, while many students have great clinical training in acupuncture school—particularly from the first through third year of the 4-year program—when they graduate, they have mainly seen patients only through the College's community clinics.

To broaden their experience, Dubitsky and his colleagues developed this externship program to send graduates out into the community to underserved areas, where they would reach a

patient population they may not have otherwise seen and encounter conditions they may not have encountered in a typical clinic. From Dubitsky's perspective, collaborating with some of New York's top medical institutions was the next obvious step.

"Dr. Moroz got back to me right away, because there was a certain confluence of needs," Dubitsky recalls, adding that:

I was looking for sites, and he wanted to provide acupuncture services for more patients. In our clinic at Tri-State, our interns provide acupuncture as primary or complementary care but do not have the experience of an integrative care setting. The externship gets the acupuncturists into the doors of institutions where they can have the experience of working in an integrated medical setting and work alongside a physician, which can be very beneficial for both parties.

Reimbursement is one challenge the two organizations came up against, because acupuncture is not a reimbursable service in many cases. "The externs are provided at no cost, so it provides Rusk with the acupuncturists and Rusk provides the acupuncturists with the experience," Dubitsky says and adds: "It provides the patients with access to acupuncture care,

Acupuncture is provided free to inpatients and at a low cost to outpatients.

which they might not normally receive, so everybody wins in this situation." Dubitsky also explains that the acupuncturists have their own malpractice insurance and the hospital credentials them.

Moroz says that referrals to the acupuncturists at Rusk generally come from his medical practice, and, interestingly, many hospital staff members took advantage of the new arrangement. "The acupuncture treatments for inpatients are free, if an extern does acupuncture, and, for office patients, we charge a reduced fee of about \$30 per session," Moroz adds.

The Benefits of Collaboration

Graduates from Tri-State College who participate in the externship at Rusk benefit from this collaboration in many ways including increased understanding of how to care for their patients and knowledge about how to interact with physicians to coordinate patients' care better. In addition, such collaborations may potentially lead to employment opportunities for graduates.

What Patients and Doctors Gain

Dubitsky knows first-hand the benefits that both patients and clinicians enjoy when acupuncturists and medical doctors work side by side. He comments:

I provided acupuncture in a family medicine practice setting for 17 years, and, in this setting, patients would come in with a certain set of symptoms. While I knew how I was going to proceed with these patients in terms of acupuncture treatments, I also knew that some should see their doctors and perhaps get an MRI [magnetic resonance imaging] of the neck, for instance, to rule out something that I could not treat. By working right alongside a physician, he or she can say, "yeah, good call. Let us get an MRI of the neck," and, then, the next time the patient comes, we can provide acupuncture knowing specifically what is going on with this patient.

This type of collaboration may lead to the best, coordinated, integrative care for the patient says Dubitsky, instead of uncoordinated, integrative care, where services are fragmented and clinicians aren't communicating with each other. Dubitsky hopes to continue to foster this type of practice approach in Tri-State College's graduates.

LAcS and MDs Working Together

Corinne Kohrherr, LAc, owner of and sole acupuncturist at Akoya Acupuncture in New York City, was one of the first 2 acupuncture graduates from Tri-State College to complete a 6-month externship at Rusk. Kohrherr, who was previously trained in massage therapy and is currently finishing the Program in Oriental Medicine at Tri-State College, spent 4–6 hours, 1 day a week for 6-months at the externship, and, in addition, worked at her regular acupuncture practice.

"Rusk was a great place to work on Western medicine patients in a hospital setting, and Dr. Moroz was so easy to work with," Kohrherr recalls and explains: "He is the driving force behind the program. The externs are in close contact with him, and we develop treatment protocols together and follow through with treatment on musculoskeletal rehabilitation patients." Kohrherr saw patients at Rusk with a wide variety of disorders including neck and back pain, poststroke patients, and patients with multiple sclerosis and arthritis.

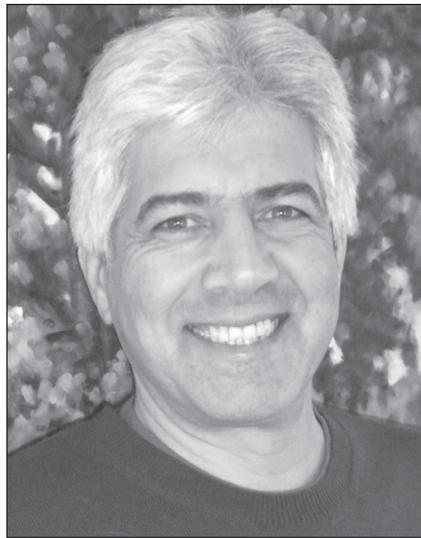
Kohrherr comments on the benefits of medical acupuncturists and licensed acupuncturists working together: "It is nice to work with a professional who knows the groundwork of what you are doing. I learned more about scalp acupuncture and how to use that in different clinical settings, and I increased my experience for my own practice." Kohrherr also says she also gained an understanding of how the hospital system works and was able to see the benefits of what both Western and Eastern medicine can contribute to patient care.

"Dr. Moroz was interested in our approaches. . . . He says he learned from us as well," Kohrherr notes. This is not surprising given that licensed acupuncturists complete about 2500 hours of acupuncture training.

In terms of other thoughts about licensed acupuncturists and medical acupuncturists collaborating together, Kohrherr states: "The hierarchy can be a challenge. So if we meet on common ground and learn from each other, it is better for the



Alex Moroz, MD, FACP, Integrative Musculoskeletal Medicine Program, The Rusk Institute of Rehabilitation Medicine.



Peter Dubitsky, MS, LAc, Tri-State College of Medical Acupuncture.



Corinne Kohrherr, LAc, Akoya Acupuncture, one of the Rusk Institute's externs.

patient if we bring the best intentions of both to the forefront of care.”

Concerning his role with the externs, Moroz comments, “I don’t call it supervision, but I call it collaboration.” He points out that he conducts a medical evaluation for both inpatients and outpatients before they receive acupuncture, and the patients are initially screened by him for appropriateness and safety of acupuncture. He and the externs talk about their acupuncture treatment plans before the first treatments, and then the externs provide the acupuncture treatments.

“It has been a nice experience in the sense that we have worked as a team,” Moroz says and adds: “I have picked up a lot of techniques and tips from [the externs], and also the style and level of aggressiveness are a little different, so it has been very interesting for me to see how other acupuncturists do things, and they have learned from me.” As an example, he suggests, “I think maybe 1 of the 4 externs that we have had so far does scalp acupuncture, and I do that type of neurological treatment, so I have taught them more about that.” Interestingly, the collaboration efforts have developed further, as Dr. Moroz is now teaching a class on acupuncture physical/structural evaluation at Tri-State College.

For patient assessment, Moroz uses a one-page validated medical assessment, which is patient-driven, and patients select what their problems are and rate their pain from 1 to 6 “We do this every visit for each patient,” Moroz explains. “In the next 6 months, we are going to enter the results into an electronic database and track the effectiveness of acupuncture for various conditions. Once we have a database we can develop research projects,” he notes and provides an example: “For instance, we can focus on all of the people we have seen with myofascial pain or knee arthritis and review how many visits they had, how effective their treatment was, and what other modalities they used in the same time, et cetera.”

Moroz says he has seen acupuncture work “spectacularly” for a number of conditions especially for muscle pain and

spasm, knee arthritis, and acute radiculopathy. “Sometimes there are results that are comparable to a steroid taper,” Moroz notes.

The Future of Collaboration

Constant marketing is critical to the collaboration process to get clinician buy-in and increase referrals. “This is tremendously important,” Moroz emphasizes. He explains: “We originally planned about a 50/50 time allocation between inpatient and outpatient acupuncture services delivered by the externs, but what we found is that the inpatient part is not very busy, and the outpatient part is much busier than we expected. So we had to adapt and shift the time of the externs.” He then considers what happened: “But I think the reason for that is that we probably have not done enough education for the inpatient doctors. I expected more referrals early on, because it is free for inpatients.”

Yet, Moroz says that the momentum for utilization of such services is growing, and a significant part of the initial clientele has been hospital staff members. He recalls: “The staff was one of our initial marketing targets—thinking that, if we win over the staff, then we would get more referrals. We did a lot of talks and demonstrations internally, and we are beginning to see success with this approach, and now have a steady trickle of referrals from all sorts of people from within the hospital.”

In terms of the future of offering integrative services, Moroz says: “My ideal vision would be to offer integrative services throughout the hospital in greater volume and scope of diagnoses treated; increase the types and numbers of providers that refer patients; and move ahead with scholarly research.” The Integrative Musculoskeletal Medicine Program at Rusk also offers a *t’ai chi* group for patients taught by physical therapists and a mind-body class that is run by nursing staff members and includes relaxation training, meditation, and stress reduction.

The Two Collaborators

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Dubitsky hopes that the externship program and collaboration with Rusk continues to grow. He comments that the acupuncture profession is moving toward a clinical doctorate, which would include an additional year of study beyond the Master of Science. Thus, students of this discipline would graduate with a degree that, in New York State, would be called a Doctor of Acupuncture.

“One of the specializations that we have talked about offering at Tri-State is in orthopedics and sports medicine,” Dubitsky says. “If the program at Rusk grows, perhaps we could have that program as a foundation of this specialization during the doctoral year. That would be great, and it is certainly one of my hopes.”

Dubitsky also hopes that more conventional doctors will take advantage of the opportunity to learn about acupuncture and that more acupuncture schools will open programs to educate physicians about acupuncture. He wrote an article on that important topic in the past.¹ Today, he says: “By educating doc-

tors and other health care professionals about acupuncture we will open up the door for more opportunities for acupuncturists. . . .Physicians should be sufficiently knowledgeable about acupuncture, so that they can better coordinate and integrate the care of their patients better and with increased knowledge about the field they will also be more open to the possibility of hiring acupuncturists to work in their offices.”

Conclusion

Certainly, collaborations, such as the one described in this article, are important first steps in terms of increasing opportunities for acupuncturists, educating medical staff about the benefits of acupuncture and the importance of an integrative approach, and, most importantly, expanding patients' access to integrative services. ■

Reference

1. Dubitsky P. Acupuncture and Biomedicine. *Acupuncture Today*, 2008;9(12). Online document at: www.acupuncturetoday.com/mpacms/at/article.php?id=31852 Accessed March 18, 2011.

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