Jon Kec: [00:00:00] You're sitting down with me today, Dr. Jon. And I say, Kari, I'm looking at bringing AI into my practice. What do I need to know?

Kari Hershey: The big one, uh, Dr. Jon, you're ultimately responsible. So, you need to have eyes on everything that this generates and make sure it's accurate.

I'm Jon Kec and welcome to Chiropractical.

(Chiropractical Theme)

Jon Kec: welcome back to Chiropractical, the podcast that helps you be better at what you do with new ideas and new tools. I'm your host, Jon Kec. And although it may sound like it, sometimes I am not AI generated. Here at Chiropractical, we aim to educate, inspire, and inform chiropractors by sharing expert insights, personal stories, and the latest research in the field of chiropractic.

We've heard stories from DCs about how they're utilizing AI at their practice, from analyzing patient data in a matter of seconds to identifying patterns and developing personalized treatment plans. If it's so easy and effective, why haven't you started using it in practice yet? [00:01:00] Today, we'll be speaking with Dr.

Ray Foxworth, president and founder of ChiroHealth USA, who's also helped create a Chiro-specific AI tool. After that, we'll also hear from an attorney, Kari Hershey, on what to be aware of legally if you're bringing AI into the office. Joining us first on Chiropractical today, Dr. Ray Foxworth. Doc, thanks for joining us.

Dr. Ray Foxworth: Absolutely. I appreciate the opportunity to speak with the audience.

Jon Kec: I think there's a lot of talk in the news. We, we know AI is out there. We know it can be used in a bunch of situations, but how should chiropractors use AI in their practice?

Dr. Ray Foxworth: Um, I would say cautiously.

Jon Kec: Okay.

Dr. Ray Foxworth: the reason for that is, um, you know, AI is not new. It's been around for a long time. It's just finally gotten to the point where it's

available to the to the average person. And , certainly available in chiropractic. And, , I think the, I would recommend that people take baby steps with it, meaning don't try to use Cairo AI or, or any AI, , platform [00:02:00] for, you know, completely trying to handle all, all of your notes and your documentation and things of that nature. take baby steps with it, uh, use it for, uh, You know, creating social media, post, , blogs, any, anything that you want to communicate, , to patients about, you know, there's nothing more intimidating than a blank piece of paper when you're trying to communicate with patients, whether it be through emails or whatever media you use.

And so literally with a few prompts, a few questions. I can have AI write me 10 social media posts about back pain or the benefits of chiropractic for kids or for back pain. lot of administrative tasks, a lot of, creative tasks can certainly be addressed by, by AI.

Jon Kec: Sure. So you can almost build out an entire marketing campaign with, you said just a few simple props. Okay.

Dr. Ray Foxworth: In our company, we have some training videos. And so I took those training videos one day when I was just playing around with it ourself, and we [00:03:00] were looking at launching a Cairo AI platform. And I asked him to take one of those videos and convert it to a voice that would appeal to women.

And then I asked it to convert it to a voice that would appeal to men, and then to women with children, and then women who are concerned about health care costs. And it literally was able to take that video or that content that I had put in, and it completely rewrote it.

And then I think that the thing about the marketing piece is, you know, I can tell people that I treat back pain, but the way that I describe that really needs to be different, more targeted. If I am talking to the health care decision maker, which is typically the wife, the mother in the family, or if I am, , if I know that historically the men are more concerned about the money and the cost, I can have it right the, the same type of content, but to be able to address [00:04:00] that so you really can, can target your marketing depending on the audience, which That it's going to, which is, which is phenomenal.

You're, you're not starting from scratch every time you try to generate, um, you know, some communication

Jon Kec: So we're talking small tweaks at that point, right? Changing that, changing a couple of words here, changing delivery styles, but not having to actually go in and do that yourself. Relying on that AI perspective, so to say.

Dr. Ray Foxworth: Yeah. And one of the things that's neat about it, I was just, uh, Playing, playing with it just a few minutes ago. And, um, I asked it to write me, uh, five social media posts about the benefits of chiropractic, uh, and cost effectiveness. Well, I didn't like the way a few of them sounded. So, you just tell it, rewrite this, rewrite this, and it literally keeps rewriting it with minor changes, nuances to where you get it to the point that you like it.

Jon Kec: And that's one of the big things I've heard is that I think people that have [00:05:00] dabbled with AI and not been happy, right, they, they haven't really taken the time to kind of coach it or to teach it to, to talk like them, to come from their perspective or to refine the perspectives like you've kind of explained.

So would you say that's a relatively, I don't want to say easy, but quick process to kind of make those changes? Does it typically take a lot of tinkering? What's that usually look like?

Dr. Ray Foxworth: think the thing to keep in mind is to understand that it is a process and not an event, because the more you use it,

Accustomed to what you're interested in, how you want to communicate, um, so the more you feed it, the more accurate it's going to get.

And there's a ton of information out there. , But the problem was it was so very broad. So, one of the things that we did to educate the system and any chiropractor can do this in their practice is we literally are, we're able to upload what we consider trusted resources. So, it might've been articles from [00:06:00] NCMIC.

It might've been articles from some of our other trusted partners, from some of our billing and coding experts that we use literally Tapping into CMS, which is Medicare, their rules and regulations. So, you know, we thought what we need is, , AI, but with a minor in chiropractic and there just really wasn't anything out there like that.

Jon Kec: What about where, where things really come together with a patient? How accurate or how useful is it in something like diagnosis or care planning?

Dr. Ray Foxworth: You know, I think there is enough information out there on the internet regarding clinical guidelines, what's called best practice guidelines. And so if a doctor, you know, has a patient who's got a patient with a L four or five radiculopathy and you're wondering, you know, what, what is really the, the best, most effective protocol for someone that's suffering from that, um, you can absolutely give me the [00:07:00] best practices or treatment protocols for sciatica.

In a male who is 60 to 65 years old, who's an amputee. I mean, you, you can, you can color that picture. I think that's what people need to understand. You really got to, you know, when watch a football game, you got the guy who's calling, uh, the, the guy who's just talking about the plays and then you got the color analyst.

I think it's really important that you provide it the color, if you will, to get more specific, um, uh, or. to get the most accurate response that you're looking for. It will never take the place of a clinician, but I think it will absolutely, uh, help you stay abreast of the latest in research, the latest in protocols, the latest in evidence based care and value based care.

So, from that perspective, I think it can, um, Can absolutely help. You know, it can also look at, um, what are the best treatment protocols, length of time, duration, you know, duration, depth of care, um, [00:08:00] you know, when is it most appropriate to start exercises, , just basic things, um, so there, there, there are a ton of ways of doing that, and, and I'm, I'm really pleased to see this, there are several software companies out there that are having AI built into their EHR, their electronic health record, so, um, As you're inputting the patient demographics and you're inputting their diagnosis, it literally can tell you what the best treatment protocols are based on the input that you've had.

And then some of the softwares out there literally are able to aggregate data from all the people that are using that particular software. And so if you find, if I found out that, wow, it's taken me six weeks to treat this given condition, but Jon's getting them better. In three weeks, I want to know what you're doing that's different.

It actually can help you become a better chiropractor by not just relying on your own [00:09:00] clinical experience, but imagine being able to tap into the brain trust, if you will, for the outcomes.

Of a thousand different practices. You can learn a lot from that.

Jon Kec: . So it's almost, you're teaching AI to, to improve it now with the, at least the, the side hope that it's, it's going to help teach you in the future as well. Right? You, you, you refine its process. It refines yours.

Dr. Ray Foxworth: It will give you, it will give you good, good guidance.

It just elevates your practice.

Jon Kec: Cautions, limitations of AI. What should people be aware of on the lookout for as they consider limitation?

Dr. Ray Foxworth: You know, a lot of people don't realize it, but healthcare is the second most regulated entity. only behind the environment. And so we've got HIPAA, we've got privacy laws, we've got every, every kind of rule and regulation under the sun. And the biggest one we have to be concerned about with Cairo AI is inputting specific patient information, what's called PHI, you know, their, their, their private health information.

So as long as you're using it just [00:10:00] for, um, taking data that's not patient specific, I think you're fine. I think probably one of the biggest downfalls. And this isn't my opinion, this is what's, what the research is showing out there. There are some of the top transcription or AI documentation, uh, platforms out there.

One of the most common one is, or most well known is called Whisper. Well, Whisper is created by a huge company and the intent was have it playing in or in the background, listening to the doctor's conversation and then creating a clinical note so we're not having to write everything. The problem is Whisper, which is built, you know, millions and billions of dollars behind that platform, it has hallucinations.

It just makes stuff up and sometimes it makes up inappropriate stuff, things that I'm serious. I mean, you read the articles out there about whisper, which is supposedly one of the top of the line programs used by hospitals, and it literally will insert [00:11:00] sentences that were never said.

Jon Kec: Huh.

Dr. Ray Foxworth: It will, uh, use phrases that, like I said, sometimes are clinically inappropriate.

Um, they actually took that platform outside of healthcare and had it, uh, available for eight public hearings. And eight out of the ten public hearings had significant errors in it. So, AI is, I don't think AI is there yet. Um, but it, I think it will be in time, but nothing is going to take the place of these two eyeballs in this brain.

Uh, when you're looking over that, so look at it as a time saver, not a replacement of a doctor or of a scribe, as we call them, who we have in our office helping keep our notes. That's the main thing is don't use it for your clinical documentation until it has gotten to that point and then make no going to ensure that you're not.

Uploading, inputting patient specific information, anything that is identifiable to a specific patient.

Jon Kec: Well, [00:12:00] when we revisit this conversation in two years, five years, 10 years, what are we going to be talking about? That's different. Where do you see this whole AI trend going?

Dr. Ray Foxworth: I think it will help, um, all the doctors become much, much more efficient. I think it will eliminate a lot of repetitive tasks. Um, I think it will, um, If you're a new practitioner coming into practice, it's like, where do I even begin? I did this just a few minutes before we jumped on. I said, write me a training outline for a chiropractic assistant who works in therapy. Write me a training outline for someone who works at the front desk and do it on a calendar basis of what, what, What week we need to cover this.

And so, you know, just things like that, even for a new doctor or quite frankly, for anybody in practice, if you want to document your processes, which is really critical in being able to scale any practice. [00:13:00] You got to have proven processes and procedures. Well, nothing worse than like I said, the blank piece of paper.

Oh, I got to write a manual. No, you don't. You ask AI to give you an outline of the manual and then you go in and you customize it to fit your practice.

Jon Kec: I'm excited to see kind of where it goes. I think like you mentioned, it's a great resource. You just need to understand where it's at now. How does it fit your practice? What can you implement? But also have an eye toward the future and helping kind of like we said, grow it for everybody.

Dr. Ray Foxworth: Yep, no doubt.

Jon Kec: Fantastic. Well, Dr. Foxworth, I very, very much appreciate the time, the education today. Wonderful talking with you, and I'm sure, like I mentioned, we'll be doing this again in the future, probably sooner than later.

Dr. Ray Foxworth: Sounds great. Thanks for the opportunity.

(Chiropractical Theme).

Jon Kec: Joining us next, Kari Hershey. She's a healthcare lawyer who represents professionals and entities in complex litigations and appeals, including professional liability defense, regulatory defense, and other business matters. She [00:14:00] practices at Hershey, Decker, and Drake, and has regularly represented chiropractors for over two decades.

Association of Chiropractic Attorneys, and provides counsel to the Colorado Chiropractic Association, as well as its members.

Just had a bit of a chat with Dr Ray Foxworth about AI and chiropractic. He gave us a bunch of information about utilization in marketing, in practice building, in process procedures, some conversation on how to use it as a clinician. But now let's talk about things maybe clinicians don't always consider.

How do we use it safely, effectively? And make sure we're not kind of overstepping the bounds of what it really should be doing in our practice.

Kari Hershey: AI in my mind has evolved much like electronic health records have evolved. So doctors used to all be on paper charts with travel cards. And the advent of electronic health records was exceptional for doctors because it was time saving. [00:15:00] They have built in algorithms that can flag problems. Um, but as all doctors who've worked with electronic health records can, uh, probably attest, the records have built in problems in that they sometimes pull information forward.

That might not be currently accurate. Um, there's some repetitive notes, things like that. And AI has those same types of potential pitfalls.

Jon Kec: . So it kind of has a mind of its own in some situations, we'll say.

Kari Hershey: yeah, even more so than the electronic health record, because that is programmed more specifically, AI is programmed to learn. And so it learns as it goes. If it learns wrong, um, that problem becomes perpetuated.

I'm concerned about several things, probably the first of which is transparency.

We recommend that doctors who are using AI in [00:16:00] their practice incorporate that into a consent form, um, their general consent, particularly if you're using what we call ambient AI, which is AI that listens in the room. and then helps generate the note.

Jon Kec: Okay.

Kari Hershey: great part about that is doctors can be focused on their patient and their dialogue with their patient, and they don't have to be worried about being in front of an electronic health record and taking notes as they're interacting with the patient. But if you are using ambient AI to record the visit, just like other types of recordings, you want to have your patient's consent,

so you want to put that in your consent form

Jon Kec: . So ambient AI, that's a new one for me. I've never heard of it at least phrased that way before. Is that different than just traditional recording? Is the, is the AI generating other parts of the note or is it [00:17:00] just kind of a scribe at that point?

Kari Hershey: Dr. Foxworth, uh, referred to the Whisper program, um, and there's, there's several other programs out there, Dragon, um, people have. I've used Dragon software in medical, uh, for a long time, but now it's evolved where the, it's essentially a recording device in the room that records the entire session and generates a draft clinical note.

Now, ultimately the doctor is responsible for what ends up in the note. So that, in my mind, is, uh, one of the biggest areas of, of liability.

Jon Kec: Understanding that although AI is a tool, it's not kind of like Dr. Fox with reference. It's not there to replace you. And it, in both a good way, I don't want to say a bad way, but definitely in a good way, right? It's not here to make chiropractors obsolete, but you do have to be cognizant and aware [00:18:00] that you are still the provider, right?

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Kari Hershey: Absolutely. And as you Uh, interact with the technology. You have an obligation to correct it when it's wrong, right? So if the technology picks up on something and doesn't appreciate the nuance in chiropractic

education, You as the provider using that technology needs to make sure it essentially learns the correct information so it doesn't repeat the mistake.

The other thing I think that Dr. Foxworth touched on in his discussion is protected health information and when you're dealing with protected health information. And in that regard, I think it's important that providers who do use AI to record patient visits or to generate patient, uh, notes, uh, it can be highly efficient, but you also have to make sure that you're [00:19:00] addressing privacy concerns.

So if you have an AI vendor who has an ambient, uh, product that is collecting, , patient information to generate in the note, you should have a business associate agreement consistent with HIPAA, uh, with, with that vendor. Yeah, you want to make sure that they have responsibilities to keep patient information safe.

Jon Kec: . And outside of the business associate agreement, maybe as people are looking at options, considering AI or EHRs in a very broad sense. How, as a medical provider, do you Ask questions to make sure that you understand where is information being stored? Who can access it? How is it accessed? To ensure you are complying with HIPAA regulations.

Okay.

Kari Hershey: one is you want to look for a vendor that works in the health care space because those vendors will know and understand that they [00:20:00] have to have, , protections in place. So just like there are, , electronic record systems, some of those are specifically designed for healthcare providers and are certified as HIPAA compliant.

So that's one of the first questions that a doctor wants to ask. if they're looking at AI that will be interacting with patient data. you want to ask, is it a HIPAA compliant product? I have had some, communications, , with the office of civil rights, which is the entity that oversees HIPAA in Colorado where I'm located and I have confirmed that OCR, , does consider AI, , an AI technology subject to business associate arrangements.

And so that agreement would have to be in place. Um, most doctors have a template agreement that they use so that their agreement [00:21:00] is consistent with all of their vendors.

I liken it to some lessons learned from the transition to electronic health records. In the transition to electronic health records, not a lot of attention was paid up front to who owns this data.

What happens if I decide to switch Electronic health record services. Can I get my data back in the, in the scenario?

Um, what we have generally advised is that your note, the final note that the doctor has reviewed and then signed off on and approved. That is the patient record and then the ultimate data that's, uh, the recording, um, there can be certain legal uses for that, but there also needs to be restrictions on that.

So in other words, if it's being [00:22:00] used so that the tool can learn and become better, that's great. Uh, but you don't want recordings of your patient visits out there in perpetuity.

Jon Kec: Now, with that, as you know, you do input data in Dr. Foxworth kind of referenced using, uh, broad terminology, right? A 55 year old male with lower back pain presents and keeping it like that. Is there any risk in that being tracked back to a specific patient somehow? Like, could somebody potentially say, you fed my data into AI?

Kari Hershey: So if you have the AI technology that is helping you serving in the role of a scribe, or to record the visit and generate a draft note that the doctor, uh, uses. I think the note becomes the record. The final note becomes the record. And ideally, you have an arrangement with the A.

I. Company that yes, you can use that for a certain period of time [00:23:00] to learn, but it's not a regular destruction cycle. So. That happens with a lot of, uh, recordings, uh, in doctor's offices, so some doctors have, you know, security feeds that show their lobby or, you know, the in and out, uh, the outside of their clinic, things like that, and those are on a, a cycle where they are destroyed after a certain period of time, and, and that helps minimize the risk.

Jon Kec: Have you, in your experience, seen any kind of, um, malpractice type accusations, complaints to the board around utilization of AI, improper care planning, things like that?

Kari Hershey: You know, we haven't seen any cases quite yet. I think we're still on the horizon of providers using the A. I. But I expect them to come. And the reason I expect them to come is there are several people researching right now how to use a I to scan [00:24:00] voluminous medical records. Um, and

identify problems to alert a patient that they may have had a problem in their medical care, um, which then would alert the patient to go see a lawyer, uh, and then would, uh, potentially lead, uh, to legal issues.

And so, Uh, you know, my initial reaction to that was, uh, lawyers should take a break from trying to solicit work. Um, but, but my second reaction to it was, you know, doctors can use it for quality assurance in much the same way. Doctors could take their records of patients and use the AI to say, feed the information into the AI and ask the AI to identify potential areas.

Where there should be follow up. So I, there's, you know, there's pros and cons on both sides of the [00:25:00] issue but, uh, make no mistake. I do think that, um, the Plaintiff's attorneys are looking at it as a way to review voluminous records and try to identify problems.

Jon Kec: Is there anything kind of guideline or consideration wise that you'd recommend around nonpatient interaction type stuff that may still be patient facing?

Kari Hershey: So I think that anytime you have materials in your office that are available to patients that patients may rely on, that is something that could always turn up later if there's a claim or something. doesn't work out the way that we want it to. And so the same principles apply in terms of accountability.

There has to be the human interaction and check on the AI. It can be a tremendously helpful starting point to synthesize a lot of information on a topic. Um, but as, as Dr. Foxworth [00:26:00] was talking about, he had to review it and refine it and ask it to do parts again. Um, It ultimately may save a lot of time, but there's only one person in that scenario that's a doctor, and that doctor is the person who needs to make sure that their, um, that their materials are accurate.

Jon Kec: Really quick. One, two, three points. You're sitting down with me today, Dr. Jon. And I say, Kari, I'm looking at bringing AI into my practice. What do I need to know?

Kari Hershey: Uh, transparency with patients and consent, I think is number one. Uh, number two is, uh, business associate agreement with the AI provider so that you can protect patient information. And the big one, uh, Dr. Jon, you're

ultimately responsible. So, you need to have eyes on everything that this generates and make sure it's accurate.

Jon Kec: Got it. My butt's on the line. Understood. Well, [00:27:00] I very, again, very much appreciate the conversation today. Thank you for giving us kind of all the perspectives or, or helping us get all the perspectives on AI. Um, just like I said to Dr. Foxworth, I have a feeling we'll probably be having this conversation again sooner rather than later.

So look forward to talking with you again.

Kari Hershey: Thank you very much. Have a great day.

Jon Kec: Again, thank you to both of our guests, Dr. Ray Foxworth and Kari Hershey for joining us here today. As you've heard, AI and chat GPT, as you've heard, AI and chat GPT type programs can be very beneficial in your practice, but with AI constantly evolving, it wouldn't shock me that we have this conversation again in the not so distant future.

On the next episode of Chiropractical, we're going to dive into the five most important things to create patience for life. What you do at the beginning actually does matter. So make sure you subscribe so you'll hear that episode as soon as it drops.

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If you want to reach us here at Chiropractical, you can always email [00:28:00] us at AskNCMIC@NCMIC.com. And again thanks for joining us and letting me be a part of your day. We appreciate you listening. I'm Jon Kec, and this has been Chiropractical.

(Chiropractical Theme).