

Books and Book Chapters
2010-2011 to 2015-2016 Academic Year

1. **Ergil K**, Micozzi M. Qi in China's Traditional Medicine: the example of tui na. In: Mayor D, Micozzi M, eds. Energy Medicine East and West: A Natural History of Qi. Philadelphia: Churchill Livingstone/Elsevier, 2011:65-72.

***Description:** This chapter explores the concept of qi in Chinese medicine. Various translations as vital substance or “finest matter influences” the concept of qi is integral to the concepts and practices of Chinese medicine. This chapter examines traditional understandings of qi.*

2. **Ergil K**. Tibetan Medicine. In: Micozzi MS. Vital Healing: Energy, Mind and Spirit in Traditional Medicines of India, Tibet and the Middle East - Middle Asia. Philadelphia: Singing Dragon, 2011:121-44.

***Description:** Tibetan medicine or Sorig is a distinctive blend of Buddhist Ayrveda, Unani, and Chinese medical precepts and practices which emerged in the 10th century as a regional medical tradition. By the 15th century this medical system had assumed the form that shapes its practice today. Based on holistic diagnosis and treatment and oriented by a commitment to compassion, this is a unique medical tradition.*

3. Micozzi MS, **Ergil K**, Gabler LS, Palanjian K. Celestial Healing: Energy, Mind and Spirit in Traditional Medicines of China, and East and Southeast Asia. Philadelphia: Singing Dragon, 2011.

***Description:** The editor and organizing author of this text uses the contributions of his coauthors to examine the medical traditions of China, the Malay Peninsula, the Indonesian Archipelago, the Philippines, IndoChina (Vietnam, Burma, Thailand), Korea, and Japan. Examinations of medical traditions reflect the transformation of ancient medicine of mainland China and the essentially Chinese expression of vital energy (qi) into cultural traditions and indigenous healing practices, and herbal and plant resources that are found in the surrounding regions of East and Southeast Asia. Within these medical traditions, the text explores the impact of Western influences, the current evidence, and the avenues by which a patient may find a practitioner.*

4. Gatterman MA, **Lauretti WCE**. The Safety and Effectiveness of Common Treatments for Whiplash. In: Gatterman M. Whiplash: a Patient Centered Approach to Management. St. Louis, Missouri: Elsevier/Mosby, 2012:138-53.

***Description:** This chapter provides a review of the evidence for the safety and effectiveness of a variety of commonly used therapies for the treatment of Whiplash Associated Disorders (WAD). It includes pharmaceutical treatments such as NSAIDs, skeletal muscle relaxants, opioids and other drugs, as well as conservative physical treatments such as manipulation/mobilization, immobilization (cervical collars) and other physical modalities. It covers the controversies regarding the alleged association between cervical manipulation and stroke in detail. It concludes with concrete recommendations on treating WAD patients in a safe and evidence-informed manner, particularly in the current environment where clear and compelling evidence of the “best” treatment does not exist.*

5. **Taromina K.** Chinese Medicine (Contributions). In: Ladas EJ, Kelly KM. Integrative Strategies for Cancer Patients: A Practical Resource for Managing the Side Effects of Cancer. Hackensack: World Scientific Publishing Company, 2012.

Description: *Integrative Strategies for Cancer Patients serves as a resource on the benefits of integrative therapies during cancer treatment. All contributing authors work as part of an integrative medical team at Columbia University's Medical Center, New York City. It is meant to be a reference handbook for adults and children with cancer, their caregivers, and health professionals in managing the most common side effects afflicting patients with cancer. Integrative Strategies for Cancer Patients provides hands-on guidance with illustrations demonstrating how to use complementary/alternative therapies during cancer treatment. Techniques covered include: yoga, acupressure, aromatherapy, nutrition, massage, reflexology and dietary supplementation.*

6. **Murphy D.R.** Clinical Reasoning in Spine Pain Volume 1: Primary Management of Low Back Disorders Using CRISP Protocols. Pawtucket, RI: CRISP Education and Research, LLC, 2013.

Description: *This is a clinically-oriented workbook on the diagnosis and management of patients with low back disorders. This book includes information on the etiology of spine related disorders based on the biopsychosocial model, a method of integrating the varied diagnostic factors known as the CRISP™ protocols and an evidence-based approach to treatment focused on the whole person – including somatic factors, neurophysiological factors and psychological factors. The book presents the concept of Primary Spine Care and serves as one of the primary textbooks for the training of Primary Spine Practitioners.*

7. **Murphy D.R.** Muscle Energy Techniques in Cases of Spinal Injury or Pathology. In: Chaitow L. Muscle Energy Techniques. Edinburgh, Scotland: Churchill Livingstone Elsevier, Ltd., 2013:221-6.

Description: *This chapter describes the use of Muscle Energy Techniques in difficult cases such as patients with acute injuries, spinal cord encroachment and disc herniations.*

8. Wakefield T, Vaughn C, Mathesie M, Ivy T, Hamm A, Griffiths J, Engle W, Conway S, McClelland S, **Maneri W.** American Chiropractic Association Clinical Documentation Manual, 3rd Edition. American Chiropractic Association, 2013.

Description: *This manual provides chiropractors with recommendations, tips, step-by-step directions, and clinical examples to improve their clinical documentation skills. Clinical documentation skills that accurately and concisely describe clinical services provided and patient outcomes will improve reimbursement rates and provide evidence on the impact of chiropractic care on patients' health.*

9. **Passmore S.R., Lisi AJ.** Integration of Chiropractic Services into the United States Veterans Health Administration. In: Aiken A, Belanger S, eds. Beyond the Line: Military and Veteran Health Research. Montreal and Kingston: McGill-Queen's University Press, 2013:231-48.

***Description:** This book chapter details the history of how chiropractic services were integrated into the United States Veterans Health Administration. It provides a template for how other countries could consider adding chiropractic care to their healthcare system.*

10. **Ergil K, Ergil M.** Classical Acupuncture. In: Micozzi MS, ed. Fundamentals of Complementary and Alternative Medicine. St. Louis, Missouri: Saunders Elsevier, 2015:508-43.

***Description:** This chapter explores the theory and practice of acupuncture from a traditional Chinese point of view. Additionally, contemporary applications, biological mechanisms and current clinical research are explored.*

11. **Ergil K.** Tibetan Medicine. In: Micozzi MS, ed. Fundamentals of Complementary and Alternative Medicine. St. Louis, Missouri: Saunders Elsevier, 2015:544.

***Description:** The history, theory and practice of Tibetan medicine is presented using an original translation of the Tibetan text by Padma Karpo which describes the tree of Tibetan medicine to organize core concepts. Events impacting Tibetan medicine since the diaspora are discussed. Recent research in Tibetan medicine is reviewed.*

12. **Ergil K.** Traditional Medicine of China and East Asia. In: Micozzi MS, ed. Fundamentals of Complementary and Alternative Medicine. St. Louis, Missouri: Saunders Elsevier, 2015:477-507.

***Description:** This chapter presents the history theory and practice of traditional Chinese medicine. A wide range of modalities including acupuncture, tui na, dietetics, qi gong, and pharmaceuticals are discussed. Additionally, contemporary applications, education standards, and clinical research are explored.*

13. **Zumpano MP.** Clinical Dissections of the Extremities, Pelvis, and Perineum. Ronkonkoma: Linus Publications, Incorporated, 2015.

***Description:** This is a clinically orientated dissection manual that details musculoskeletal anatomy of the limbs and pelvis. Most anatomical dissection manuals have 2-4 pages dedicated to the limbs. Since soft tissue relationships are paramount in treating musculoskeletal pain, the text in this manual emphasizes relationships between muscles, nerves and arteries as they are dissected. No other manual has provided this depth of dissection information for the extremities. The pelvis and perineum are treated as distinct anatomical regions and as a gateway for the nerves of the lumbar and sacral plexus as they enter the lower extremity. The depth of text is geared toward advanced graduate level dissection and musculoskeletal learning with clinical examples illustrating chiropractic and manual medicine applications.*