

October 11, 2019

State Board of Chiropractic Examiners

To Whom It May Concern:

This letter is to state that as Director of Parker Professional Programs, I have reviewed the speakers below and determined that they are post-graduate level instructors, through a curriculum vitae or resume, and they have knowledge, training and expertise in the topics to be covered for “Neurology of the Subluxation- How Symptoms Develop and How the Adjustment Works”. The documentation appears to fall within chiropractic guidelines of the various state boards.

Parker University
Continuing Education
2540 Walnut Hill Lane
Dallas, Texas 75229
www.parker.edu

David Seaman, DC

Please contact me if further information is needed, my direct phone number is 214-902-3492, or via email at pfrase@parker.edu.

Sincerely,



Phyllis Frase-Charrette
Director of Professional Programs

METHOD OF CERTIFYING IN ONLINE ACTIVITIES

1. **Name of Course:** Neurology of the Subluxation – How Symptoms Develop and How the Adjustment Works
2. **Organization Sponsoring the Course:** Parker University
3. **Course Objective:** To enhance the expertise of the Chiropractic Professional.
4. **Study Hours Required:** 1 Online
5. **Instructor(s):** David Seaman, DC
6. Educational background and experience of instructor(s) is on file in the University offices.
7. **Attendance Verification Method and Certifying Officer:** FL Licensees are required to provide a valid driver's license to be awarded CE. The Online presentation is delivered via web pages in which the participant must review anatomy images, read supporting text, listen to audio instruction, and answer test questions. The time the participant spends on each page is logged and tracked. In addition, the test questions must be passed, or the participant cannot continue on to the following pages. The computerized log files that track the participant's access time and usage will be utilized to validate the attendance and participation. The instructors will be available for questions via e-mail. Upon successful completion, Parker University Continuing Education Department will maintain and distribute attendance records.
8. **Textbooks and/or Equipment Required:** Internet
9. **Outline of Material Covered:** Attached
10. **Location(s):** Computer/Internet Based
11. **Date(s):** Based upon date of actual completion

Neurology of the Subluxation – How Symptoms Develop and How the Adjustment Works

David Seaman, DC

1 Hour

Course Description

Understanding the neurology of subluxation is based on appreciating how the spinal joint complex is innervated. Nociceptors and mechanoreceptors innervate the joint complex and their function is altered by subluxation. The outcome can be pain, visceral symptoms, cerebellar symptoms, vestibular symptoms, motor control issues, and changes in emotional status.

Course Objectives

1. To outline the innervation of the spinal joint complex
2. To describe patterns of symptom generation created by a dysfunctional joint

Course Outline

15 Mins: Nociceptor innervation of the joint complex

15 Mins: Mechanoreceptor innervation of the joint complex

15 Mins: Symptoms related to increased nociception

15 Mins: Symptoms related to reduced mechanoreception

CURRICULUM VITAE
DR. DAVID R. SEAMAN

226 N. Nova Rd, Unit #322
Ormond Beach, FL 32174
386-212-8013 docseaman@mac.com

EDUCATION

Master of Science (MS) degree - Biology / Nutrition
University of Bridgeport
Bridgeport, CT
1986-1991

Doctor of Chiropractic (DC) degree
New York Chiropractic College
Old Brookville, NY
1982-1986

Bachelor of Science (BS) degree - Biology
Rutgers University
New Brunswick, NJ
1978-1982

PROFESSIONAL POSITIONS & APPOINTMENTS

Adjunct Faculty
Logan University
Chesterfield, MO
9/2016-Present

Professor, Department of Clinical Sciences
National University of Health Sciences
St Petersburg, FL
1/2011-12/2016

Consultant, Anabolic Laboratories
Colorado Springs, CO
4/2002-4/2009 and 1/2011-present

Director of Clinical Education, Anabolic Laboratories
Colorado Springs, CO
4/2009-12/2010

Adjunct Associate Professor, Clinical Sciences
Palmer College of Chiropractic Florida
Port Orange, FL
3/2009-12/2010

Associate Professor, Clinical Sciences
Palmer College of Chiropractic Florida
Port Orange, FL
9/2002 to 3/2009

Postprofessional Faculty
National University of Health Sciences
Lombard, IL
1998 - Present

Postgraduate Faculty
New York College of Chiropractic
Seneca Falls, NY
1996 - present

Postgraduate Faculty
Northwestern Health Sciences University
Minneapolis, MN
2006 - present

Past Director, Council on Nutrition
American Chiropractic Association
1992

PROFESSIONAL LICENSURE

Chiropractic License: Florida, 1/2006 - present
New York, 1986 (inactive)

FELLOWSHIP STATUS

Fellow of the American College of Chiropractors; 1998

AWARDS

American Chiropractic Association's Academician of the Year; 2006

EXPERIENCE

Curricular Courses developed and taught at Logan University College of Chiropractic:
Nutrition II
Clinical Nutrition

Curricular Courses developed and taught at National University of Health Sciences, College of Professional Studies:

- Clinical nutrition
- Science of diet and nutrition
- Evaluation and Management of the musculoskeletal system (including rheumatology)
- Evaluation and Management of the cardiovascular and respiratory systems
- Evaluation and Management of the genitourinary and reproductive systems

Curricular Courses developed and taught at Palmer College of Chiropractic Florida:

- Spinal anatomy (including histology and embryology),
- Spinal cord and peripheral nervous system anatomy,
- Subluxation theories I and II
- Diagnosis and management of musculoskeletal conditions
- Clinical nutrition

ONLINE CE ATTENDANCE CERTIFICATE

Name: _____

Title: Online: XXXX

Address: _____

Course # XXXX

Date: XXXX

City: _____ **State:** _____ **Zip:** _____

Location: Online

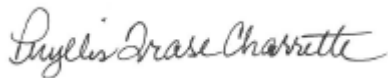
STATE [only one per voucher]: _____ **YOUR STATE LICENSE #:** _____

DO NOT WRITE BELOW THIS BOX

| Completion Date | Class Hours | Course Title | Instructor |
|-----------------|-------------|--------------|------------|
| XX/XX/XX | | | |

TOTAL HOURS ATTENDED: _____

Board Approval No. _____



Phyllis Frase Charrette
Director, Parker Professional Programs

This certificate is to acknowledge your completion of the Online Continuing Education course shown above. This copy is for your records and can be submitted to your board of licensing. Please Note: Verify the information is correct upon receipt – discrepancies will only be accepted up to 6 months after the closing date of the course. Please keep this certificate in a secure place. Any replacement, copy, or fax will incur a \$25 fee per certificate.



These Questions are delivered via the Parker Seminars mobile App.

Quality Feedback Survey

Course Name: _____

Date: _____ Location: _____

How did you hear about this Course?

Parker Brochure School E-mail Referral Parker Web Site Other _____

Please score each speaker on an “A to E” scale, with “A” Extremely Satisfied and “E” being Extremely Dissatisfied.

How would you rate this speaker

a b c d e

Rate the overall content of the session:

a b c d e

Rate the classroom & facilities:

a b c d e

Please add any additional comments:

a b c d e

Is there a certain speaker or topic you would like to see next time?:

a b c d e

12) What topics would be of interest to you for future classes?

Comments:

THANK YOU FOR YOUR FEEDBACK!

The purpose of this quality feedback survey is to provide information to the Instructors and to Parker University about extant standards of performance. **Your response will be held in confidence. You will not be identified in any way by reference to your response. For additional complaints or concerns regarding this program please contact Parker University at 800.266.4723.** Parker University will share the outcomes of this evaluation with the Instructor, and will keep a copy on file in the Continuing Education Office to demonstrate compliance with accreditation standards and requirements.