



Dr. Jeffrey McKinley

Arkansas Chiropractic Society Presents:

Keeping Life in Balance/Improving Posture, Patterns and Performance

August 22 & 23, 2020

Fayetteville, Arkansas



About The Instructor and Course

INSTRUCTOR: Dr. Jeffrey A. McKinley, C.C.S.P., F.I.C.C. graduated from Logan College of Chiropractic in St. Louis, Missouri. He currently practices in McMinnville, Tennessee in a multidisplinary clinic. He is a certified Kinesio taping instructor and is a published author of several books and journals. He currently teaches continuing education seminars as a part of the FootLevelers speakers bureau.

This Course: will cover efficient biomechanical/ortho and neuro. findings and their significance to plan of care. He will discuss chronic pain which is widespread in our population today, evidenced by the opiod epidemic. Specific protocols and techniques for common conditions such as neck, shoulder and low back pain will be taught. We will discuss positional exam flow and the purpose of specific views in the x-ray exam. The foot scan examination, identifying patterns and biomechanical interpretation and its significance to plan of care will be reviewed.

Seminar Details

- **DATE:** August 22 & 23, 2020
- **ASBCE Approval #AR 7905**
Should you need approval for another state please call the ACS office.
- **FEES:** \$175 for twenty four hours (any or all hours/one flat registration fee) If you intend to register at the door, you should make prior confirmation by calling 1-479-806-1138.
- **LOCATION:** Hilton Garden Inn 1325 No. Palak Drive, Fayetteville, AR 72704. (855)680-3243 Call early for best room rate.
- **Lunch will be provided on Saturday.**

REGISTRATION FORM (August 22 & 23, 2020)

- ▶ **CLASS:** "Keeping Life in Balance"
- ▶ Check or money order enclosed in the amount of \$ _____
Make checks payable to: ACS & mail to P.O. Box 10213, Fort Smith, AR 72917
- ▶ For credit cards list # and sign. VISA, MASTER
_____ Signature: _____
DEBIT # _____
Expiration Date: _____

Name _____ Signed _____

Address _____ City _____ State _____ Zip _____

Home Phone _____ Office Phone _____ Your fax# _____ Doctors

License # _____

E-Mail acsexecsec@cox.net or 24 Hour Fax: 1-479-434-4403 Cell: (479) 806-1138