

## Answers to the Top Questions asked by Physicians about the SacroCoccygeal (S/C) Syndrome

**Physician:** Why haven't I heard more about the S/C syndrome?

**Dr. Kemper:** The coccyx has largely been dismissed as vestigial by most teaching institutions. However, the S/C syndrome has been observed by Wooley-Kemper and others such as Maigne et al. since 1985. During that time, research and clinical observations have yielded definitive information, new techniques and overwhelmingly favorable results. Now the S/C syndrome's clear clinical profile and responsiveness to non-surgical is finally being claimed. KTIF.org in cooperation with CamResearch.com, both non-profit research foundations, are offering web-based data retrieval for participating physicians to upload ongoing intake and exit data to collectively contribute to the body of evidence for the study of the S/C syndrome nationwide.

**Physician:** I already have treatment protocols for coccydynia. Why would I need to screen for or treat the so called S/C syndrome with the Kemper-Wooley Procedure?

**Dr. Kemper:** There is nothing wrong with treating coccyx pain. We encourage you to offer patients such care. The SacroCoccygeal syndrome, on the other hand, has a much more serious and disabling sequel than just the nuisance of coccygeal pain.

The S/C syndrome generates referred pain into the back, hip and legs. It also causes serious loss of spinal motion and profound weakness of the thigh rotators. As a result of this triad of symptoms, characteristic of the syndrome, absenteeism, disability, and several neuromechanical complications occur as a result of profession wide oversight of coccyx function. Regardless of coccyx pain a greater pathogen is believed to have been discovered in the S/C syndrome.

[http://www.ktif.org/sacrococcygeal\\_syndrome.asp](http://www.ktif.org/sacrococcygeal_syndrome.asp)

[http://www.ktif.org/sacrococcygeal\\_reflex.asp](http://www.ktif.org/sacrococcygeal_reflex.asp)

**Physician:**

Assuming the Kemper-Wooley Procedure restores function to the coccyx as claimed, what is the benefit for the patient?

**Dr. Kemper:** Benefits include routine reduction in several lumbopelvic pain presentations, obvious improvement in lumbopelvic flexion of 20-60 degrees, dramatic increase in leg strength of 40-60% and long lasting results

[http://www.ktif.org/documents/articles\\_S-C\\_Neurology\\_excerpt%206-21-10.pdf](http://www.ktif.org/documents/articles_S-C_Neurology_excerpt%206-21-10.pdf)

**Physician:** How is diagnosis made?

**Dr. Kemper:** This is the beauty of managing the syndrome. The examination protocol involves a 1-minute exam with 3 components: 1) a 15-second intra-rectal palpation of the coccyx testing for inflamed and hypo-mobile segments; 2) a 15-second trunk flexion test to measure lumbopelvic flexion in degrees; 3) 30-seconds of motor strength tests of the thigh rotators. Patients testing positive are obvious.

**Physician:** What assurance can you offer that the S/C syndrome is common, easy to treat and insurance reimbursable?

**Dr. Kemper:** Simply take the 1-minute per patient to test for the condition in those with recalcitrant lumbopelvic and a history of coccyx fracture or dislocation. It won't take long to appreciate the prevalence of the syndrome and the need for spine physicians to start addressing it. KTIF guarantees the exam takes 1-minute, the procedure takes less than 5 minutes and results can last a lifetime. Ample proof of payment from major carriers is available.

**Physician:** What revenues can the S/C syndrome bring?

**Dr. Kemper:** Not including examination or therapy fees (just procedure fees), conservatively, assuming 2 cases per hour, just one morning per week, will bring \$48,000 per month. This is due to the steady stream of patients with the condition and the \$1,500, 5-minute procedure fee.

**Physician:** How can the Protocol be taught and learned in one day?

**Dr. Kemper:** A comprehensive academic and clinical program is now available. With our experience, we provide hands on training and unlimited phone support. See Program details available through your representative.

**Physician:** How do I get started?

**Dr. Kemper:** Call your authorized KTIF Representative who will answer questions and schedule a phone conference with Dr. Kemper if needed.

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