

Makda Getachew, DC

5254 Dawes Avenue Alexandria, VA 22311

703-933-3838 Phone

703-933-3837 Fax

front@makdachiropractic.com

SELECTED OCCUPATIONAL HISTORY

Clinic Director and Chief Administrator, Makda Chiropractic Health Center, PC Alexandria, VA
2000-present

Chiropractor and Clinic Director, Alexandria, VA 2000-present

EDUCATION and LICENSURE

Doctor of Chiropractic, Licensed in the State of Virginia, License # 0104555769, 2000-present

Internship, Capital Sports Injury Center with Dr. Horwitz who was the sole chiropractor on the sports medicine staff of the **1996 United States Olympic Team**

Logan Chiropractic College, Doctor of Chiropractic, St. Louis, Missouri 1999

Logan Chiropractic College, Bachelor of Science, St. Louis, Missouri 1996

University of Maryland, prerequisite courses, College Park, MD 1994

Associates Degree in Banking and Finance 1989

SELECTED POST-GRADUATE EDUCATION, CERTIFICATIONS and DIPLOMATES

Whiplash Advanced Topics – The fundamentals

Requisite and comprehensive biomechanics knowledge for forensic experts

Whiplash and brain injuries: the real reasons they are on the rise, the minimal property damage = minimal injury risk myth exposed, In-depth analysis of brain,

neck, and cervical spine trauma mechanisms, soft tissue injuries: a comprehensive and cutting edge analysis, all clinical syndromes and conditions resulting from

Whiplash (WAD/CAD), forensic experts need to know about the various pain syndromes risk assessment: the fundamental key to modern forensic practice.

Spine research institute of San Diego – 2009

Management Principles in Personal Injury and Forensic Documentation

In-depth training on all aspects of management of trauma, from beginning to end; a comprehensive primer on crash reconstruction. Auto crash reconstruction in low speed crashes: critical knowledge for today's forensic practitioners, historical documentation in personal injury and forensic medicine applications, comprehensive physical examination of whiplash and traumatic brain injury, special laboratory methods, such as the S-100 protein, the latest techniques, special diagnostic imaging modalities (SPECT, PET, MRI, MRA, VF, etc.); how and when to use, electro diagnostics (EMG, SEMG, SSEP, VEP, ETC...); how to use, rendering a diagnosis/impression in the personal injury or forensic setting; pearls and pitfalls, soft tissue healing times and implications for successful case management. The state of the injury and implications for case management: designing a treatment plan and living with guidelines, important applications of activities of daily living; optimizing outcomes, chiropractic manipulation, deep tissue massage, and PT Modalities for best outcomes.

Spine research institute of San Diego – 2009

Principles of Impairment Rating and Forensic Reporting

*Critical documentation from day 1; What every personal injury and forensic expert needs to know, the fundamental of expository, scientific writing you were never taught; common dos and don'ts, the essential craft of narrative report preparation from A-Z; style, strategy, methods, organization, and common pitfalls, incorporating outcomes assessment and disability instruments into your reports (SCL-90-R, Oswestry, Roland-Morris, Rivermead PCS, and more), the application of AMA guidelines in personal injury and forensic practice, modern guidelines and best practices (Presley Reed, Mercy, QTF, ACOEM, Croft); how they are commonly abused and how and when to use them correctly, critical rebuttal methods and strategies in today's modern forensic practice, special software applications: managing data, information, graphics; saving time. **Spine research institute of San Diego – 2009***

MRI Anatomy & History, *Normal anatomy of axial and sagittal views utilizing T1, T2, 3D Gradient and STIR sequences of imaging. Standardized and desired protocols in views and sequencing of MRI examination to create an accurate diagnosis in MRI.*

CMCS Post Doctoral Division, New York Chiropractic Council, New York State Department of Education, Board for Chiropractic, (presenter) AACME Joint Sponsorship with the State University of New York at Buffalo, School of Medicine and Biomedical Sciences and CMCS Post Doctoral Division, Buffalo, NY 2009

MRI Physics and History, *Magnetic fields, T1 and T2 relaxations, nuclear spins, phase encoding, spin echo, T1 and T2 contrast, magnetic properties of metals and the historical perspective of the creation of NMR and MRI.*

CMCS Post Doctoral Division, New York Chiropractic Council, New York State Department of Education, Board for Chiropractic, (presenter) AACME Joint Sponsorship with the State University of New York at Buffalo, School of Medicine and Biomedical Sciences and CMCS Post Doctoral Division, Buffalo, NY 2009

MRI Interpretation of Spinal Cord, Spinal Disc and Spinal Canal Disorders, *MRI interpretation of herniated, protruded, extruded, bulged and sequestered discs & spinal stenosis as sequelae of ligamentous hypertrophy, congenital malformation, spinal cord pathology. Clinical necessity and contraindications.*

CMCS Post Doctoral Division, New York Chiropractic Council, New York State Department of Education, (presenter) AACME Joint Sponsorship with the State University of New York at Buffalo, School of Medicine and Biomedical Sciences and CMCS Post Doctoral Division, Buffalo, NY 2009

MRI Interpretation Herniated Disc and Spinal Cord and Root Encroachment, *MRI interpretation of herniated, protruded, extruded, bulged and sequestered discs and their relationship to spinal adjustments, manual spinal therapy and joint mobilization.*

CMCS Post Doctoral Division, New York Chiropractic Council, New York State Department of Education, Long Island, New York, 2009-present

MRI Clinical Application, *The clinical application of the results of space occupying lesions. Disc and tumor pathology's and the clinical indications of manual and adjustive therapies in the patient with spinal nerve root and spinal cord insult as sequelae.*

CMCS Post Doctoral Division, New York Chiropractic Council, New York State Department of Education, Board for Chiropractic, (presenter) AACME Joint Sponsorship with the State University of New York at Buffalo, School of Medicine and Biomedical Sciences and CMCS Post Doctoral Division, Buffalo, NY 2009

MRI Normal Anatomy & Protocols, *Spinal anatomy of all MRI views utilizing T1, T2, 3D Gradient, stacking and STIR sequences of imaging. Advanced protocols of MRI examination with multiple sequences to create concurrent diagnostic findings.*

CMCS Post Doctoral Division, New York Chiropractic Council, New York State Department of Education, Board for Chiropractic, Ronkonkoma, NY, 2009

MRI Disc & Spinal Cord and Spinal Canal Pathology, *MRI interpretation of spinal disc pathologies as a result of trauma and degenerative factors and resultant neurological compromise. Spinal Cord and Spinal canal pathologies and space occupying lesion interpretation.*

CMCS Post Doctoral Division, New York Chiropractic Council, New York State Department of Education, Board for Chiropractic, Ronkonkoma, NY, 2009

Crash Dynamics and its Relationship to Causality, *Critical factors in the physics involved in the transference of energy from the bullet car to the target car including G's of force, Newton's, gravity, skid marks, crumple zones, spring factors, event data recorders and the graphing of movement of the vehicle before, during and after the crash. Determining the clinical correlation of forces and bodily injury.*

CMCS Post Doctoral Division, New York Chiropractic Council, New York State Department of Education, New York, 2008-present

Diagnostics, Risk Factors, Clinical Presentation and Triaging of the Trauma Patient, *Clinically coordinating the history and physical findings and when to integrate neurodiagnostics, the utilization of emergency room records in creating an accurate diagnostic impression and the incorporation of risk factors in spinal injury.*
CMCS Management Post Doctoral Division, New York Chiropractic Council, New York State Department of Education, New York, 2008-present

Documenting Clinically Correlated Bodily Injury to Causality, *Understanding the necessity for accurate documentation, diagnosis and clinical correlation to the injury when reporting injuries in the medical-legal community. Documenting kinesiotherapy, myopathology, neuropathology and pathophysiology in both a functional and structural paradigm.*
CMCS Post Doctoral Division, New York Chiropractic Council, New York State Department of Education, New York, 2008-present

Documenting and Reporting for the Trauma Victim, *Understanding the necessity for accurate documentation and diagnosis utilizing the ICD-9 and CTP to accurately describe the injury through diagnosis. Understanding and utilizing state regulations on reimbursement issues pertaining to healthcare.*
CMCS Post Doctoral Division, New York Chiropractic Council, New York State Department of Education, New York, 2008-present

MRI, Bone Scan, X-Ray Trauma Protocols, Physiology and Indications for the Trauma Patient, *Spinal MRI interpretation, physiology, history and clinical indications, Bone Scan interpretation, physiology and clinical indications, x-ray clinical indications for the trauma patient.*
CMCS Post Doctoral Division, New York Chiropractic Council, New York State Department of Education, New York, 2008-present

Neurodiagnostics, Imaging Protocols and Pathology of Trauma Patient, *Critical protocols in triaging and reporting the clinical findings of the trauma patient. Maintaining ethical relationships with the Medical-Legal community.*
CMCS Post Doctoral Division, New York Chiropractic Council, New York State Department of Education, New York, 2008-present

Neurodiagnostics Testing Protocols, Physiology and Indications for the Trauma Patient, *Electromyography (EMG,) Nerve Conduction Velocity (NCV,) Somato Sensory Evoked Potential (SSEP,) Visual Evoked Potential (VEP,) Visual-Electroencephalography (V-ENG) interpretation, protocols and clinical indications for the trauma patient.*
CMCS Post Doctoral Division, New York Chiropractic Council, New York State Department of Education, New York, 2008-present

Chiropractic in the World of sports Injuries

Athletic Patient vs. Non Athletic Patient, the Chiropractic Sports Practice: low profile sports, the sports medicine team, the Chiropractor's role. Macro vs. Microtrauma: overuse/repetitive motions, viscoelastic properties of tissues, tissue healing phases, Statistical information of injuries. Evaluation of musculoskeletal Injuries: muscle fiber types, grading of sprains/strains, postural evaluation. Common sports related injuries: evaluation and diagnosis on field and office, treatment acute and chronic protocols and supportive taping and bracing. Rehabilitation: cross-over effect, overflow and facilitation. Palmer College of Chiropractic, Davenport, IA 2008

Diagnostic Testing and Imaging - Protocols and Interpretation, *MRI protocols and interpretation, CAT Scan protocols and interpretation, x-ray trauma series protocols, bone scan protocols and interpretation, EMG/NCV protocols and interpretation and utilization of International Classification of Disease coding in Trauma.*

CMCS Post Doctoral Division, New York Chiropractic Council, New York State Department of Education, New York, 2007-present

The Nutritional Adjustment

Preventive, alternative and holistic therapy protocols that have proven to be effective in reducing disease, managing injury and shortening recovery periods. Alternative to medication and surgery (natural alternatives to medications and surgery. Natural protocols for prevention of cardiovascular disease, arthritis, osteoporosis, cancer, as well as for managing acute pain associated with injury, headaches and back pain. Natural adjustment provides foundational information needed to confidently apply nutritional protocols for reducing inflammation, nociception and joint dysfunction/subluxation while addressing commonly encountered complaints such as acute pain, headaches, fatigue, weight problems, gastrointestinal problems, etc. Scientific explanation and validation of supplement products such as: Multi Vitamins and B-Vitamins, Proteolytic Enzymes, Glucosamine and Chondroitin, Essential Fatty Acids (Omega 3, 6 and 9 oils), CoenzymeQ10 Magnesium, alpha Lipoic Acid, Botanicals Ginger, Turmeric, Boswellia and more. Logan College of Chiropractic, Chesterfield, MO 2005

Permanent Soft Tissue Injuries

Identifying an injury: mechanism of injury, pain pattern, objective findings. Injury care, improvement, PRN care, supportive care. Improvement: until the patient condition resolves or plateaus. Five objective findings and how they relate to the injury. Care Plan, re-examination, daily SOAP. Appropriate referrals. Flexion-extension x-rays, MRI. Gauging improvement, or lack of improvement. Intensity of pain, frequency of pain, duration of pain. Improvement in work, recreation, and household chores. Re-examination. Objective findings, improvement. Soft tissue injuries; muscle damage, ligament damage, disc damage. Pain-free disc herniations. Difficulty swallowing, scoliosis pain, chronic pain, post trauma degeneration, and various topics. Chronic pain, post trauma degeneration, and various topics. X-ray evidence of spinal injury. Chronic pain. Post trauma degeneration. X-ray/CT/MRI evidence of injury versus coincidental findings of pain free, non-involved radiographic findings. Texas Chiropractic College, Pasadena, TX 2004

Injuries from Low Impact Collisions/ Records Documentation

Low impact accidents causing injury, research documenting this. Differential diagnosis of conditions from low impact accidents. Low impact accidents causing injury, research documenting this. Differential diagnosis of conditions from low impact accidents. S shaped curve versus flexion extension injury. Low impact accidents causing injury, research documenting this. S shaped curve versus flexion extension injury. Dummies versus live people. Research comparing the two. Seat belt-shoulder strap induced injuries. Shearing forces causing injuries. Disc related injuries. Delayed onset of symptoms. Degeneration of the spine and low impact accidents. Recognizing that symptoms may not occur when the patient leaves the car. Low impact accidents and neurological injuries. Records Documentation in Spinal Pain Patients: Initial Visit, Subsequent Visits. History. Examination. Referrals. Care Plan development. Record keeping of mechanism of injury as part of the examination procedure to formulate a better diagnosis. Records Documentation in spinal Pain Patients: Initial Visit, Subsequent Visits. History. Examination Referrals. Care Plan development. Record keeping of mechanism of injury as part of the examination procedure to formulate a better diagnosis. Five objective findings and the importance of them in establishing a diagnosis and monitoring improvement. Clinical Rationale. Highlights and problems with record keeping as part of the examination procedure to formulate a better diagnosis. Texas Chiropractic College, Pasadena, TX 2004

Injuries from Low Impact Collisions

Records Documentation in Spinal Pain Patients: Initial Visit, Subsequent Visits. History. Examination. Referrals. Record keeping of mechanism of injury as part of the examination procedure to formulate a better diagnosis. Records Documentation in Neck Pain Patients: Initial Visit, Subsequent Visits. History. Examination Referrals. Record keeping of mechanism of injury as part of the examination procedure to formulate a better diagnosis. Five objective findings and the importance of them in establishing a diagnosis and monitoring improvement. Highlights and problems with record keeping. Low impact accidents causing injury, research documenting this. Differential diagnosis of conditions from low impact accidents. Low impact accidents causing injury, research documenting this. S shaped curve versus flexion extension injury. Low impact accidents causing injury, research documenting this. S shaped curve versus flexion extension injury. Dummies versus live people. Research comparing the two. Seat belt-shoulder strap induced injuries. Shearing forces causing injuries. Disc related injuries. Delayed
Texas Chiropractic College, Pasadena, TX 2004

The New Era in Whiplash and Spinal Trauma, Part 2

The literature as to the tissue source of chronic back and neck pain, and how they relate to motor vehicle collisions, the body response to tissue trauma, tissue differentiation, types and quality of tissue healing; principles of healing by regeneration, repair and fibrosis. The role of chiropractic adjustments in accelerating tissue healing, restoration of motion, improved joint mechanics and higher quality scar tissue. The referred pain

syndrome of spinal pain and its clinical presentation, the principles of the double crush syndrome as it relates to spinal trauma.

Life Chiropractic College West, Hayward, CA 2003

The New Era in Whiplash and Spinal Trauma, Part 3

The concept of motion and specifically chiropractic manipulative motion as it relates to the clinical management of the soft tissue trauma patient. This hour emphasizes the neurological component and covers the effect of the adjustment on the spinal cord, brain, muscular and vascular systems. **Life Chiropractic College West, Hayward, CA 2003**

The New Era in Whiplash and Spinal Trauma

The Literature with respect to duration of pain, natural history of tissue healing, functional recovery rate and probability of chronic pain syndrome from motor vehicle soft tissue trauma. The literature and principles of hyperextension soft tissue trauma with respect to myofascial pain syndromes, articular dysfunctions, and myofascial pain syndromes, the treatment of chronic and/or disabling spine pain with spinal manipulative therapy. **Life Chiropractic College West, Hayward, CA 2000**

The New Era in Whiplash and Spinal Trauma, Part 1

The principles of inertia, acceleration, velocity, mass and friction as they relate to spinal trauma and motor vehicle collisions. Specific aspects of hyperextension injury and the tissue injuries sustained, aspects of rebound flexion injury and the tissue injuries sustained. The neuroanatomy of the intervertebral disc and facet articulations, the effects of osseous adjusting on the pain afferents and mechanoreceptors of the intervertebral disc and facet articulations.

Life Chiropractic College West, Hayward, CA 2000

SELECTED MEMBERSHIPS

Virginia Chiropractic Association, 2005-present

Northern Virginia Chiropractic Association, 2004