

TRANSCRIPT PREPARED BY THE CLERK OF THE LEGISLATURE
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FLOOR DEBATE

March 23, 2006

LB 994

HHS employee to determine whether or not a scope of practice should change or go through the 407 process. And when we look at the amount of training...

SENATOR CUDABACK: Time, Senator Smith.

SENATOR SMITH: Thank you, Mr. President.

SENATOR CUDABACK: Thank you, Senator Smith. Further discussion on AM2890 to AM2754? Senator Engel, followed by Senator Stuthman and five others.

SENATOR ENGEL: Mr. President and members of the body, I have a question on the amendment, and I think perhaps Senator Jensen or Senator Bourne could answer it. I know...the word "manipulation"...I know outside the glass they try to manipulate us there, and in other areas there's...the word itself, manipulation. Now the thing is, with...and insert the word "move." Now "move" and "manipulate," you know, I know there's a difference. But I guess where they want to insert, Manual therapy does not include manipulation involving high velocity thrust performed at the limit of the range of motion," now "high velocity thrust," is that where they actually crack your back? You know, is that what you're considering? Because, you know, when you're dealing with the spine, you know, it's...I won't even...I go to a chiropractor. But there are certain things I won't let them do, and one thing is I won't let them crack my spine, because I'm afraid of it. And they're trained; they have the training to do that, but do the therapists? Do the therapists have the training to do what I'm describing? Senator Jensen, please.

SENATOR CUDABACK: Senator Jensen, would you...

SENATOR JENSEN: Thank you. Perhaps Senator Smith should answer that. You know, manipulation is more than on the spine. The therapist that worked on my knee each time also was manipulating--pushing as far as I could tolerate it, pulling as far as I could tolerate it, and doing range of motions to make sure that your knee operates. And if you don't do that, you never recover fully, so it's very important, and that's