



**THE B.A.C.K. CENTER**  
BACK AUTHORITY for CONTEMPORARY KNOWLEDGE™

**OSLER**  
 MEDICAL

**The B.A.C.K. Center**  
**www.thebackcenter.net**

You may visit any of the following web-sites to learn more about the following

[www.back.com](http://www.back.com)  
[www.spine.org](http://www.spine.org)  
[www.neckreference.com](http://www.neckreference.com)

[www.medtronic.com](http://www.medtronic.com)  
[www.iscoliosis.com](http://www.iscoliosis.com)

[www.srs.org](http://www.srs.org)  
[www.charitedisc.com](http://www.charitedisc.com)  
[www.artificialdisc.com](http://www.artificialdisc.com)

Conditions	Conservative Treatments	Surgery
<input type="checkbox"/> Coccydynia	<input type="checkbox"/> Epidural Steroid Injection	<input type="checkbox"/> Anterior Cervical Corpectomy
<input type="checkbox"/> Degenerative Disk	<input type="checkbox"/> Facet Joint Injection	<input type="checkbox"/> Anterior Cervical Discectomy & Fusion
<input type="checkbox"/> Herniated Disk	<input type="checkbox"/> Sacroiliac Joint Injection	
<input type="checkbox"/> Muscle Strain	<input type="checkbox"/> Selective Nerve Root Block	<input type="checkbox"/> Posterior Cervical Discectomy
<input type="checkbox"/> Myelopathy	<input type="checkbox"/> Antidepressant Meds	<input type="checkbox"/> Anterior Lumbar Fusion
<input type="checkbox"/> Neuropathic Pain	<input type="checkbox"/> Narcotic Medication	<input type="checkbox"/> Anterior/Posterior Lumbar Fusion (ALIF)
<input type="checkbox"/> Osteoarthritis	<input type="checkbox"/> Anti-inflammatory Meds (NSAIDs)	
<input type="checkbox"/> Osteoporosis	<input type="checkbox"/> Steroid Medication	<input type="checkbox"/> PLIF - (lumbar fusion)
<input type="checkbox"/> Piriformis Syndrome	<input type="checkbox"/> Bracing	<input type="checkbox"/> Anterior Lumbar Interbody Cages
<input type="checkbox"/> Sacroiliac Joint Dysfunction	<input type="checkbox"/> Electrotherapy	
<input type="checkbox"/> Scoliosis/Kyphosis	<input type="checkbox"/> Heat/Ice	<input type="checkbox"/> Posterolateral Lumbar Fusion
<input type="checkbox"/> Spondylolisthesis	<input type="checkbox"/> Lumbar Stabilization	<input type="checkbox"/> Pedicle Screw Instrumentation
<input type="checkbox"/> Spinal Stenosis	<input type="checkbox"/> Musculoskeletal Manipulation	<input type="checkbox"/> Decompression/Laminectomy
<input type="checkbox"/> Whiplash	<input type="checkbox"/> Physical Therapy	<input type="checkbox"/> Microdiscectomy
<input type="checkbox"/> Fracture	<input type="checkbox"/> Chiropractic Care	<input type="checkbox"/> Pain Pump/ Spinal Stimulator

Diagnostic Testing	
<input type="checkbox"/>	X-rays
<input type="checkbox"/>	MRI
<input type="checkbox"/>	CT
<input type="checkbox"/>	CT Myelogram
<input type="checkbox"/>	CT Discogram
<input type="checkbox"/>	Bone Scan
<input type="checkbox"/>	NCV/EMG
<input type="checkbox"/>	DEXA Scan

Provider's Comments: