This patient has great faith in chiropractic treatments and is sure that with ongoing treatment, albeit in a diminishing frequency, that his best interests are being served and that eventually he will recover. It will be neigh will impossible to change his belief in this regard and to that end, I would recommend that his physiotherapy of massage and local electrical treatments and encouraged neck and body movements be continued, but the patient should be told emphatically that they will not be continued beyond the end of the year, and further that neck and back manipulations of any nature should not be permitted and will not be condoned.

A session in deep water for hydrotherapeutic relaxation would be quite appropriate. If he could attend such a locale twice a week for the rest of the year, that too would be very beneficial. Ideally, if he could have a registered physiotherapist, with hydrotherapeutic experience outline to him water exercises while lying on a plinth, emphasizing neck mobility and arm and shoulder motion, that would be beneficial, but here again 1 do not believe that this hydrotherapeutic exercise strategy should extend beyond the end of the year.

It is my feeling that by the end of the year, he should be entirely recovered.

The taking regular strength Tylenol four times a day would be in order. I see no to turther reason for him to take any non-steroidal analgesics and I believe it is no longer necessary for him to use any restricting device such as a cervical collar.

With the appropriately advised comment from the Occupational Therapist, he should reposition his monitor and raise his keyboard and keep his mouse in close to him. I see ... no reason why he cannot or should not be able to continue to work at his computer, to facilitate his language studies. I think he should return to his English studies promptly, certainly within the next week or ten days.

There is a very subtle sub-conscious anxiety held by the patient at this time. I think t is very important that his physician get to him and explain carefully, precisely and exactly what has happened, outline the pathophysiology and give him a hopeful outlook. It would also be important that X-ray visualization of his cervical, dorsal spine and thoracolumbar spine be on hand - P.A., Lateral and Obliques of the Cervical and Lumbosacral Spine; P.A. and Lateral of the Dorsal Spine. My prediction is that hey would be normal. They might show minor amounts of degenerative changes associated perhaps with the physical work he used to do on the farm in Sri Lanka, but I would be quite surprised if anything more than that was revealed.

To answer the various questions in sequence as you posed in your letter of 2 November:

 Please provide me with your opinion of the following - diagnosis, prognosis and causation.