

## Lecture Boards

- |                                              |                                                    |                                                 |
|----------------------------------------------|----------------------------------------------------|-------------------------------------------------|
| <input type="checkbox"/> #1190 ADHD          | <input type="checkbox"/> #1195 General             | <input type="checkbox"/> #1196 PMS/Hormone      |
| <input type="checkbox"/> #1202 Arthritis     | <input type="checkbox"/> #1198 Headaches           | <input type="checkbox"/> #1194 Stress           |
| <input type="checkbox"/> #1197 Carpal Tunnel | <input type="checkbox"/> #1231 Low Back Injuries   | <input type="checkbox"/> #1217 Stretch Your Way |
| <input type="checkbox"/> #1192 Children      | <input type="checkbox"/> #1203 On-the-job injuries | <input type="checkbox"/> #1229 Weight Loss      |
| <input type="checkbox"/> #1199 Fibromyalgia  | <input type="checkbox"/> #1193 Peak Performance    | <input type="checkbox"/> #1244 Wellness         |

### Topics to be included on custom 8 x 11 Lecture Board Sign

- |                                                                 |                                                   |                                                             |
|-----------------------------------------------------------------|---------------------------------------------------|-------------------------------------------------------------|
| <input type="checkbox"/> Chiropractic                           | <input type="checkbox"/> Naprapathy               | <input type="checkbox"/> Homeopathy                         |
| <input type="checkbox"/> Headaches                              | <input type="checkbox"/> Low Back Pain            | <input type="checkbox"/> Neck Pain                          |
| <input type="checkbox"/> Energy Enhancement                     | <input type="checkbox"/> Hormonal Imbalances      | <input type="checkbox"/> Auto Accident Injuries             |
| <input type="checkbox"/> Work Related Injuries                  | <input type="checkbox"/> Arm/Leg Pain             | <input type="checkbox"/> Acupuncture                        |
| <input type="checkbox"/> Pain Management                        | <input type="checkbox"/> Personal Injury          | <input type="checkbox"/> Care for All Ages                  |
| <input type="checkbox"/> Gentle Techniques                      | <input type="checkbox"/> Nutrition                | <input type="checkbox"/> Sports Injuries                    |
| <input type="checkbox"/> Stress Relief                          | <input type="checkbox"/> Massage Therapy          | <input type="checkbox"/> Women's Health Issues              |
| <input type="checkbox"/> Auto/Work Injuries                     | <input type="checkbox"/> Children's Health Issues | <input type="checkbox"/> Diagnostic Services                |
| <input type="checkbox"/> Rehabilitation and<br>Exercise Therapy | <input type="checkbox"/> Automobile Accidents     | <input type="checkbox"/> Low Back Problems                  |
| <input type="checkbox"/> Leg/Foot/Knee Pain                     | <input type="checkbox"/> Neck & Shoulder Problems | <input type="checkbox"/> Headaches/Migraines                |
| <input type="checkbox"/> Pediatric Care                         | <input type="checkbox"/> Sports Related Injuries  | <input type="checkbox"/> Alternative/Natural<br>Health Care |
| <input type="checkbox"/> Arm/Hand Pain/Numbness                 | <input type="checkbox"/> Fibromyalgia             | <input type="checkbox"/> Exercise Therapy                   |
| <input type="checkbox"/> Applied Kinesiology                    | <input type="checkbox"/> Hormonal Imbalances      | <input type="checkbox"/> Osteoporosis                       |
| <input type="checkbox"/> Depression                             | <input type="checkbox"/> Hot Flashes              | <input type="checkbox"/> Irritability                       |
| <input type="checkbox"/> Decreased Sex Drive                    | <input type="checkbox"/> Fatigue                  | <input type="checkbox"/> Stress Management                  |
| <input type="checkbox"/> Neck & Shoulder Pain                   | <input type="checkbox"/> Water Retention          | <input type="checkbox"/> Rehabilitation                     |
| <input type="checkbox"/> Headaches/Stress                       | <input type="checkbox"/> Physical Therapy         | <input type="checkbox"/> Body Fat Testing                   |
| <input type="checkbox"/> Acupuncture                            | <input type="checkbox"/> Natural Hormone Therapy  | <input type="checkbox"/> Shoulder/Wrist/Hand Pain           |
| <input type="checkbox"/> Children Seen                          | <input type="checkbox"/> Back Pain/Sciatica       | <input type="checkbox"/> Spinal Hygiene                     |
| <input type="checkbox"/> Anti-Aging Workshop                    | <input type="checkbox"/> Peak Performance         | <input type="checkbox"/> Postural Correction                |
| <input type="checkbox"/> Trigger Point Therapy                  | <input type="checkbox"/> Stress Relief Therapy    | <input type="checkbox"/> Weight Loss                        |
| <input type="checkbox"/> Low Back Pain Relief                   | <input type="checkbox"/> Sports Rehabilitation    | <input type="checkbox"/> Medical Services                   |
| <input type="checkbox"/> Physical Therapy                       | <input type="checkbox"/> Neck Pain Relief         | <input type="checkbox"/> _____                              |
| <input type="checkbox"/> _____                                  | <input type="checkbox"/> Doctors of Chiropractic  | <input type="checkbox"/> _____                              |
| <input type="checkbox"/> _____                                  | <input type="checkbox"/> _____                    | <input type="checkbox"/> _____                              |
| <input type="checkbox"/> _____                                  | <input type="checkbox"/> _____                    | <input type="checkbox"/> _____                              |
| <input type="checkbox"/> _____                                  | <input type="checkbox"/> _____                    | <input type="checkbox"/> _____                              |

**Special instructions:**