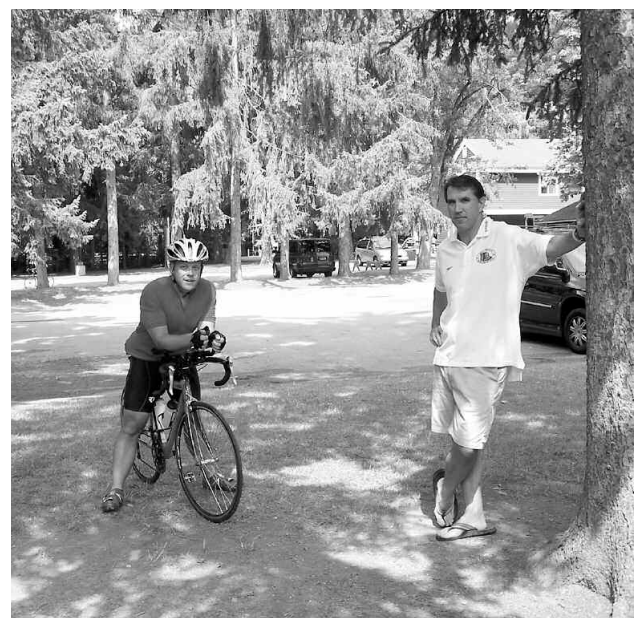


## Rehab News and Events



Two cyclists rest and relax at Onanda Park after completing the Ride for Independence.

- The 5th Annual **Ride for Independence** was held Saturday, July 28 at Onanda Park in Canandaigua. The ride drew 57 bikers and raised over \$1,000 for Thompson Health's Rehabilitation Services Aftercare Program. The Aftercare Program helps people with chronic disease maintain their level of function and independence in the community. The program's mission is to provide patients with continued services after their insurance benefits have ended or they have reached a maintenance level in their therapy.
- Thompson Health hosted a **Duffy-Rath Course** on November 3 and 4 at F.F. Thompson Hospital. The focus of this two-day course was manual therapy and problem-solving techniques for the spine. Patients with chronic spine pain and disability were featured.
- **Save the date!** The **13th Annual Sports Medicine Symposium** will be held Saturday, March 22, 2008 at the Inn on the Lake, 770 South Main St., Canandaigua. The focus will be on the foot and ankle. Speakers will include Michael LeBlanc, PT, ATC, at the Sports Medicine Center and Robert Meyer, MD, Orthopedic Surgeon from Canandaigua Orthopedics. Call (585) 396-6700 for a registration form.

## Putting Green Plus

By Jill Case, OTR/L

When you initially think about a putting green, you think fun. However, there is more to it than that. The putting green in the Phyllis Ehmann Healing Garden at the M.M. Ewing Continuing Care Center has multiple benefits for our residents and patients, involving most diagnoses of all functional levels including those wheelchair-bound. If a patient or resident is wheelchair-bound, they can reap some of the same benefits as those who can stand. Some of the benefits include increasing social interaction, improving psychosocial well-being as well as enjoying the fresh air and self-healing natural light.

With a closer look from a rehabilitation viewpoint, the putting green is also seen as a functional, age-appropriate and fun activity that can help improve balance, upper extremity range of motion, standing tolerance and endurance and hand-eye coordination. It can also help improve core strength for those who can only sit and reach forward in their wheelchairs as well as those who can stand. For more information, contact Jill Case in the Occupational Therapy department at (585) 396-6055.



Occupational Therapist Jill Case helps a rehab patient with his golf techniques as part of his therapy in the Phyllis Ehmann Healing Garden.

Athletic Training Services  
Physical Therapy  
Occupational Therapy  
Speech Pathology  
Sports Medicine  
Aquatic Therapy

# Rehab REPORT

Restoring **Function,**  
Improving **Lives**

Thompsonhealth  
Volume 1 2008

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- Dynamic Warm-Up Helps Maximize Performance
- Thompson Health Expands Occupational Health Services
- Associate News
- Rehab News and Events

### Rehab Report

is published twice annually by the Rehabilitation Services department at **Thompson Health**

(585) 396-6050

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Nancy Alexander,  
PT, CSCS  
Rehab Services

The Rehab Report is available online at [www.ThompsonHealth.com](http://www.ThompsonHealth.com)

## Stroke Education & Prevention

By Amy Chirdon, PT

The continuum of life consists of childhood, adulthood and the relaxation and enjoyment of retirement. But for many, the future may hold challenges of disability and despair. Every 45 seconds, someone in the United States has a stroke and every three minutes someone dies of a stroke.

Family history and age are factors we cannot control. However, there are steps you can take to minimize your risk factors and change your path to a healthier lifestyle. They include: monitoring your blood pressure and finding ways to maintain it at a normal range (high blood pressure is the #1 risk factor for stroke); monitoring your cholesterol closely; exercising regularly; watching your diet; and quitting smoking (smoking doubles your risk for stroke).

Knowing warning signs of a stroke may save a life and/or minimize the amount of neurological damage that may occur. These warning signs are messages that the brain is not receiving enough oxygen. Medical attention should be immediately sought if someone experiences:

- Sudden numbness or weakness of face, arm, or leg on the same side of the body
- Sudden onset of confusion, trouble speaking clearly or understanding speech
- Visual changes in one or both eyes (suddenly)
- Loss of balance or coordination, trouble walking
- Sudden onset of severe headache

Learn the stroke warning signs.  
**ACT F.A.S.T!**



**FACE**

Ask the person to smile. Does one side of the face droop?



**ARMS**

Ask the person to raise both arms. Does one arm drift downward?



**SPEECH**

Ask the person to repeat a simple sentence. Are the words slurred? Is the person confused? Can he/she repeat the sentence correctly?



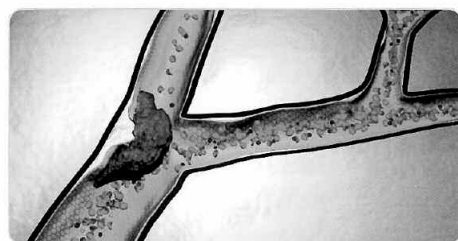
**TIME**

Time to **Call 911** if the patient suddenly shows any of these symptoms or they are accompanied by loss of vision, loss of balance with dizziness, or the worst headache of his/her life.

Continued on page 2

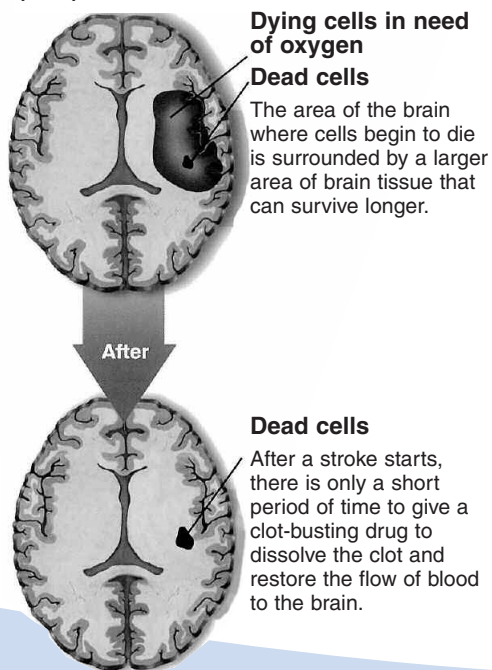
# Stroke Education & Prevention *continued*

- Stroke is the 3rd leading cause of death.
- 72% of all strokes occur in people 65 and older.
- Stroke can occur in 28% of people younger than 65.
- Risk of stroke doubles each decade after the age of 55 years old.
- An estimated 750,000 strokes occur annually.



In ischemic stroke, a blood clot within a blood vessel, blocks the normal flow of blood to the brain.

## The brain before and after Activase (t-PA)



Sometimes the warning signs may last only a few moments and then disappear. Brief episodes are sometimes considered TIA's (transient ischemic attacks). Although these may appear minor – there may be an underlying serious neurological problem.

There are two common types of strokes: Ischemic strokes and Hemorrhagic strokes. Ischemic strokes account for 80% of all strokes and is a blood clot that occludes a blood vessel in the brain. A Hemorrhagic stroke accounts for 20% of strokes and is a blood vessel that ruptures and bleeds into the brain.

The Finger Lakes region is very fortunate to have F.F. Thompson Hospital as a stroke designated hospital. F.F. Thompson Hospital has worked diligently to train and educate its Associates in how to clinically recognize signs and symptoms of a stroke and treat accordingly. The Emergency Department physicians are highly trained professionals who can administer tissue plasminogen activator (t-PA) intravenously within three hours of an onset of a stroke. t-PA has been shown to significantly reduce disability and death associated with Ischemic stroke. The longer blood flow is cut off to the brain, the greater the damage. Tissue plasminogen activator dissolves blood clots that occlude the vessel causing neurological signs and symptoms of stroke. This medication has a strict regimen for administering. Unfortunately, many people do not meet this criterion and significant neurological deterioration occurs.

Once the patient is admitted to the hospital, the physician orders the appropriate medications and assembles members of the rehab team (physical therapy, occupational therapy and speech therapy). The inpatient therapists are very knowledgeable in clinical diagnosis and treatment of neurologically impaired patients.

The patient may or may not require rehab to regain previous functional independence. Other patients may be strong enough to return home with referrals to outpatient therapy. For more information, call the Rehabilitation Services department at F.F. Thompson Hospital at (585) 396-6050.

*Note: This article is part one of a two-part series on stroke rehabilitation and prevention. Part two will appear in the next issue and will feature interventions the rehabilitation team can use to aid in recovery and restoring function.*

**Lou Chappelle, PTA,** returns to Thompson Health after nine years of working in various physical therapy settings. They included long-term care, home care, and short-term rehab. Lou will be working in the outpatient setting and therapeutic pool area.



Chappelle

**Nancy Alexander, PT, CSCS,** and her volunteer staff raised \$4,500 for the Sands Cancer Center during the 4th Annual Pink Fly Ladies Invitational Golf Tournament on July 21 at Winged Pheasant Golf Links. Over 70 golfers participated. Proceeds go to breast cancer awareness and education programs at the Center.



Alexander



Williamson

**Meredith Williamson, PT,** joins the Sports Medicine Center team. Meredith received a degree in biology with sports medicine emphasis from Cedarville University before obtaining her Master's in physical therapy from Old Dominion University in 2001. She then worked two years in an outpatient sports facility in Norfolk, VA. Meredith has worked in various

healthcare settings across the country as a traveling therapist. Her focus has been primarily outpatient rehabilitation, completing continuing education courses from McKenzie, Maitland and Shirley Sahrmann. She also had the honor of participating in a published study of ACL rehab and progression, working alongside Drs. Shelbourne and De Carlo and their rehab team in Indianapolis, IN.



Lafler

**Barb Lafler, MSPT,** has accepted the position of Coordinator of Inpatient and Continuing Care Center Rehab Services. This also encompasses the Surgical Care Center and Emergency Department. Barb is a graduate of Ithaca College.

**Tami Isherwood, PT,** and **Nancy Alexander, PT, CSCS,** recently presented training in a shoulder girdle testing algorithm. The program, developed by George Davies, PT, DPT, Med, SCS, ATC, LAT, CSCS, FAPTA, provides a comprehensive and logical approach to shoulder evaluations. As we incorporate this program into our practice, you will see various tests mentioned. These tests will suggest involvement or injury to particular structures. We would like to take the time to meet with you and your staff and provide an in-service on this evaluation. If you would like more information on the examination process, call Nancy at (585) 396-6050.

# Associate News

**Angela B. Conners, OT, CLT, LMT** attended an advanced lymphedema training course with the Academy of Lymphatic Studies in June 2007. The two-day course focused on wound care management in patients with lymphedema as well as focus on garment fitting for complex cases and advanced treatment techniques for those patients with multiple co-morbidities including congestive heart failure and venous insufficiency. Angela has been a certified lymphedema therapist for almost two years. If you have a patient in need of lymphedema treatment or would like more information, call her at (585) 396-6856.



Conners

**Courtney Middleton, OT**, attended the Philadelphia Hand Conference. The four day symposia, "Surgery and Rehabilitation of the Hand: A Comprehensive Review," was an intensive educational experience to increase knowledge and clinical skills in treating hand and upper extremity injuries and conditions. Courtney has been providing hand therapy to patients at Thompson Health since 1998. She continues to provide hand therapy services at both the hospital outpatient clinic as well as the Thompson Health outpatient rehabilitation satellite in Farmington. For hand health related questions, call Courtney at (585) 396-6055.



Middleton



Drake

**Carole Drake, PT**, recently joined the Rehabilitation Services team and is working in inpatient and outpatient departments at F.F. Thompson Hospital. Carole graduated from Nazareth College in 2001 with a Master's in physical therapy. She's spent the last six years working in various physical therapy settings including inpatient rehab, wound care, outpatient rehab and home care. Her focus the last five years has been primarily outpatient rehab and home care.



Halstead

**Dudley Halstead, PT**, finished his first Half Ironman distance triathlon on June 30 at Tupper Lake. Dudley completed a 1.2-mile swim, 56-mile bicycle course and a half-marathon of 13.1 miles in 6 hours, 20 minutes, and 32 seconds. Dudley also participated in an Olympic distance triathlon in New Found Lake, NH on June 2, completing half the above distances.



Magiera

**Gineen Magiera, M.S., CCC-SLP**, is the newest speech therapist. She has been practicing speech pathology in the western New York area since 1995, with a specialty in voice and voice disorders. She received her undergraduate education in vocal performance from SUNY Fredonia and her graduate studies from Nova Southeastern University in Ft. Lauderdale, FL.

# Dynamic Warm-Up Helps Maximize Performance

By James P. Porcella, MS, ATC, CSCS

It has long been the standard practice of most coaches to have athletes perform a light warm-up followed by static stretching. Just because this is what has been done for generations, is it the best way to maximize performance?

Static stretching has its place. If athletes have flexibility deficits, they need to stretch. Let's not confuse warming up with flexibility. The process of static stretching is to hold the stretch long enough to cause inhibition of the nerve fibers that fire that muscle and thereby allow lengthening of the muscle and tendon. Strength in a muscle immediately following static stretching can be decreased by as much as thirty percent for a time period. At the end of a stretching session, you should feel relaxed. Is this the best state to be in just before competition?

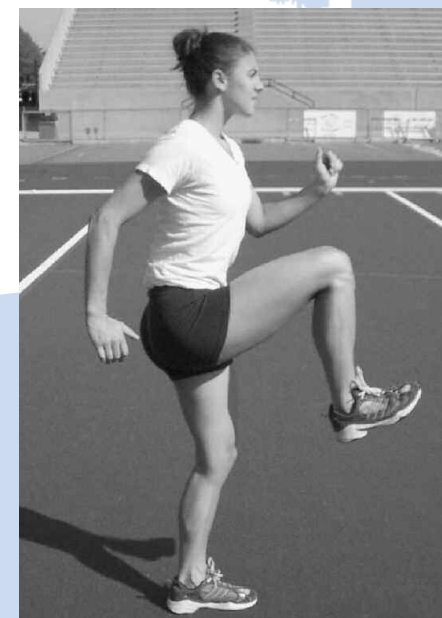
A good dynamic warm-up will prepare your body for competition in several ways:

- The continuous movement increases core temperature. This prepares the joints and increases the extensibility of tendons, muscles and ligaments.
- The movements are more sport-specific and can prepare the athlete mentally as well as physically.
- It increases neural activity that will improve strength, speed and coordination.
- It's fun. How often have you seen athletes go through the motions during a group stretching session? A good dynamic warm-up will increase any athlete's motivation.

Prior to the dynamic warm-up, a brief five to ten minute cardio warm-up should be performed. This should be followed by approximately 10 dynamic exercises lasting one minute each. Some of the dynamic exercises may include:

- **High Knees** – A running motion with bringing your knees higher. The goal is to increase the number of touches, not linear speed.
- **Heel Kicks** – A running motion with heels kicking up and knees staying down. The goal should be number of touches, not linear speed.
- **Carioca** – A lateral movement with feet crossing in front and behind. The goal is to get as much hip rotation as possible.
- **Lunge Walk** – Long stride and go low, drive up with lead leg. A slower paced movement for the hamstrings.
- **Knee Hugs** – While walking, bring alternating legs up and hug into chest. An excellent way to loosen hips and engage core while balancing unilaterally.

There are an unlimited number of exercises you can design that mimic your sport. Proper flexibility is a necessary component to the prevention of sports injuries but not at the expense of an appropriate warm-up. Use of static stretching as a cool-down could produce greater results. A dynamic warm-up can decrease injuries as well by performing the sport-specific skills with correct technique. Changing to a dynamic warm-up will properly prepare athletes and maximize performance. For more information, call Thompson Health's Sports Medicine Center at (585) 396-6700.



High Knees



Heel Kicks



Lunge Walk

# Occupational and Physical Therapy in Industrial Rehabilitation

By Courtney Middleton, OT

There is a constant struggle within the workforce today to keep up with the devastating effects of work related injuries. The physical and financial burden to both employer and employee can cause irreversible damage. Due to the growing need for and importance of injury prevention, Thompson Health will now provide occupational health services at HealthWorks with assistance from occupational and physical therapists from F.F. Thompson Hospital.

Currently, Thompson Health has an Industrial Rehabilitation (IR) program at HealthWorks in Farmington. This program provides various health services to many individuals and local businesses through contract with physical therapist, Curt DeWeese. To better serve our local working community, as well as complement and enhance the IR program, Thompson's therapists are now taking on a new role.

Through a collaborative effort with Robert Carlson, Director of HealthWorks, Thompson's occupational and physical therapists and DSI Work Injury Solutions faculty member Curt DeWeese, Thompson therapists will now approach Industrial Rehabilitation employing a newly adopted model designed by DSI Work Solutions. The focus of DSI Work Solutions is to "reduce injuries and lost time while improving workers health and productivity" (DSI). The DSI model is very comprehensive and includes services to benefit the employer, employee and job applicant.

Six Thompson therapists have undergone training, provided by Curt DeWeese, to assist in the on-going workforce challenge. The services the occupational and physical therapists are currently focusing on are the Job Function Analysis, Job Function Testing and Functional Capacity Assessments.

With a close working relationship between the therapist and Curt, these services will complement one another and be provided to the employer, employee and job applicant in a seamless manner.

These assessments and tests are a portion of our involvement with the workforce and worker. A variety of other occupational health services can be provided as well. These services include, but are not limited to, recommendations on changes that can be made to the work environment that will increase safety and reduce the risk of injury, fitness and conditioning programs that can be designed to physically prepare an individual for a job and therapeutic treatment for existing work related injuries such as repetitive stress injuries.

For further information and guidance regarding the treatment and tests available to employers, employees and job applicants, please feel free to call any of the following contact persons: Robert Carlson, Director of HealthWorks, (585) 924-4214; Curt DeWeese, PT, DSI Work Solutions Faculty, (585) 704-8981; Courtney R. Middleton, OT, Clinical Coordinator of OT, (585) 396-6055; Farley Wagner, PT, Farmington Physical Therapy, (585) 924-4449.

## Job Function Analysis

An "on the job site" service with the goal of identifying "essential job functions, functional requirements, ergonomic needs, education, training and equipment" required for a specific job. Job Function Analysis must involve a therapist, employer and employee to be successful. The jobs in need of analysis may be those that are noted for their association with lost workdays, injury frequency and cost. From this analysis, a Job Function Description (identifies the physical requirements needed to safely perform the job) is written and a Job Function Test is created. These services will continue to be provided by Curt DeWeese, PT.

## Job Function Test

This assessment is derived from the results of the Job Function Analysis. It is an objective physical test that replicates the functional and physical demands required of the job. The purpose of this test is to determine an individual's physical ability to meet the demands of the particular job. With the administration of this test, companies and industries will be informed prior to hiring, return to work, job transfers or fit for duty question, whether an applicant has the ability or potential ability to be successful and safe at the job. This knowledge will guide employers in decision-making that can ultimately reduce worker injuries and the high costs associated with these injuries. Thompson's occupational and physical therapists will provide and administer this test.

## DSI Functional Capacity Assessment

This assessment is a comprehensive and detailed evaluation of an injured worker's physical abilities. A standardized assessment that requires the participant to complete various physical activities including lifting, gripping, reaching overhead and small item assembly. These activities are administered to determine the physical ability of the participant. Objective findings are forwarded to involved parties such as insurance companies, employers and medical professionals. Thompson's occupational and physical therapists will provide and administer this test.