

YOUR NEXT STEP IN RECOVERY

THE BRIDGE **PROGRAM**

- Unsure of which exercises to perform at the health club, fitness center, or at home?
- Ready to re-join your team for practice after you've completed your rehab program, but not ready to return to competition?
- Want to get into shape for the Spring and Summer, but not at the expense of aggravating an old injury or previous surgery?

Patients have asked us for help to guide them back to full activity following the completion of their rehab programs, so we've developed a customized program to allow them to bridge the gap and attain their goals.

It's called the Bridge Program — an exercise and fitness program designed specifically for return to recreational or competitive sports, as well as daily exercise. It involves higher intensity, sport specific drills to help you maximize your balance, agility and coordination, while developing power and strength following surgery or injury.

The Bridge Program is designed for all of our patients, from high school or collegiate athletes to seasoned citizens. Our Physical Therapists use their expertise and knowledge to get you back doing the activities and playing the sports you love.

Call our office and ask for more information regarding this unique program.



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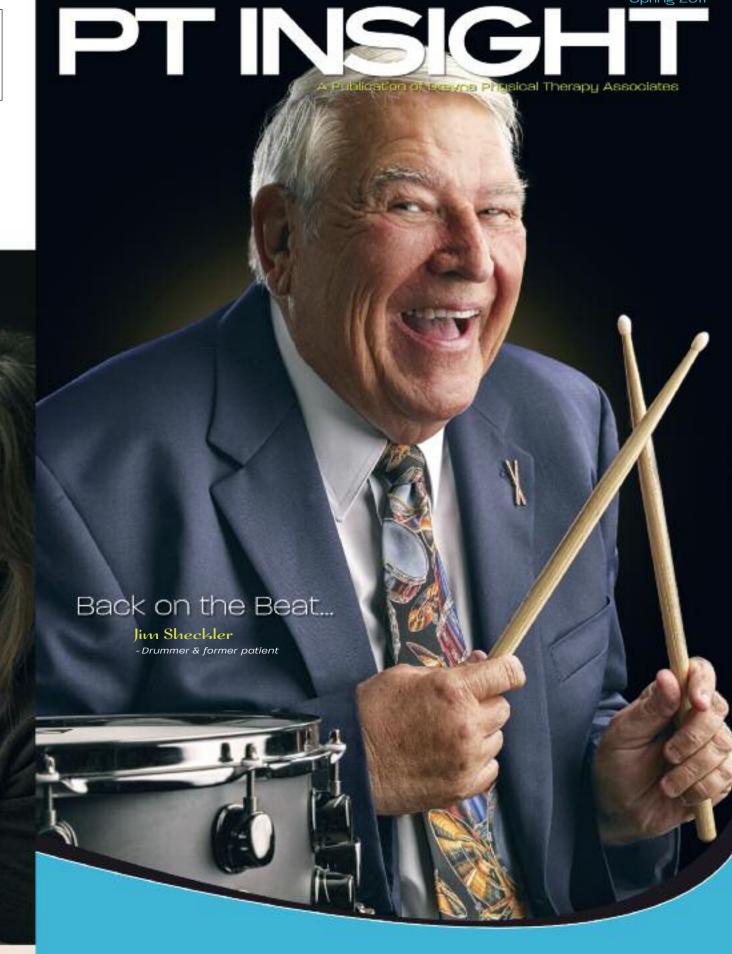
DPTA WELCOMES ANITA ALONTE ROMA

excited to welcome Anita Alonte Roma to the staff of Drevna Physical Therapy Associates. Anita provides clinical expertise in Neurological Physical Therapy, Including Rehabilitation for Stroke, Parkinsons, MS, and Balance and Vestibular problems.

Anita received her Bachelor of Science Degree in Physical Therapy in 1987 from Ithaca College. She attained her board certification as a Neurological Physical Therapist in 1995, and completed her master's degree in Physical Therapy in 2000 at the University of the Sciences in Philadelphia. She earned her Clinical Doctorate in Physical Therapy from Widener University in 2005.

Anita has lectured regionally and nationally at professional conferences on topics related to balance, dizziness, and falls prevention. She has published articles in professional journals regarding outcome measures for balance assessment, as well as ambulatory function and falls prevention.

If you have questions regarding problems with dizziness and balance, contact our office at 717.569.4184 to schedule an appointment with Dr. Roma.

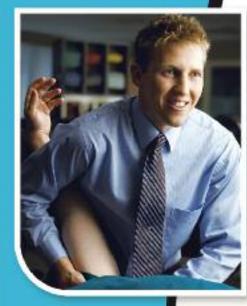




PTINSIGHT Spring 2011

DIRECT ACCESS

Did you know you have Direct Access to your Physical Therapist? In Pennsylvania, a Physical Therapist with a direct access license can evaluate and treat you for up to 30 days without a referral! Call our office to see if your insurance will cover direct access services and to schedule an appointment.



Professional Staff:

Timothy Drevna, DPT, OCS, ATC, CSCS

Christy Knox, OTRL/L. CHT

Michael Beiler, MPT, DPT, CSCS

Christopher Hudson, MSPT, DPT, CSCS

Anita Alonte Roma,

Lisa Goussetis, PT
Sherri Gagne, PTA
Amu Finnegan PTA

Amy Finnegan, PTA
Trudi Snively, COTA

MEET MICHAEL BEILER

r. Michael Beiler, MPT, DPT, CSCS was born and raised in the heart of Lancaster County in New Holland. His interest in physical therapy began after being injured while participating in sports at Garden Spot High School. His athletic interests varied as he competed in gymnastics, wrestling, pole-vaulting, swimming, and rugby. Mike earned a Bachelor's degree in biology from the University of Pittsburgh at Johnstown in 1998, a Master's degree in physical therapy from MCP Hahnemann University in 2001, and a Clinical Doctorate in physical therapy from Temple University in 2008. Mike earned his credential as a Certified Strength and Conditioning Specialist in 2010.

Mike has been practicing in Lancaster for 10 years with a strong focus on outpatient orthopedics. His current professional expertise includes shoulder rehabilitation, ACL injury prevention and rehabilitation, treatment of cervical spine disorders, and manual therapy. He believes strongly in educating his patients on the anatomy and mechanics of their injury as well as how to prevent future occurrences. He is a member of the American Physical Therapy Association, the Pennsylvania Physical Therapy Association, and the National Strength and Conditioning Association.

Mike, along with his beautiful and intelligent wife, stays fit with "P90X" and "Insanity" workouts, bike riding on rail trails, and chasing their twin sons around their home in Mount Gretna. His recreational interests include video games, outdoor adventures with the family, and anything related to Penn State football. WE ARE...!

"Consistency and proficiency.

Mike is the best in Lancaster!"

-T. McEvoy Patient

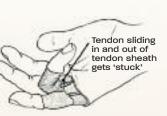
TRIGGER FINGER: RECOGNITION & TREATMENT

rigger finger, or stenosing tenosynovitis, is a condition characterized by a locking sensation in one or more fingers when making a fist. Attempts to straighten the fingers results in a sudden release and painful "pop" in the affected digit(s). The thumb, middle, and ring fingers are most commonly affected. The condition occurs more frequently in women. Diabetes, rheumatoid arthritis, and gout seem to predispose people to developing triggers. However, they are also seen in younger individuals who use their hands repetitively, or aggressively for grasping activities.

We are able to bend and straighten our fingers when the long tendons that connect muscles in the forearm to the bones in our fingers pull and glide through the wrist and hand. In the fingers, these tendons slide through a tunnel of tissue that lubricates and glides them for smooth bending and straightening of the digits during daily activity. Triggering occurs when the tendon becomes inflamed and thickened at the base of the finger preventing a smooth glide through the sheath or tunnel. This problem is painful, and interferes with many daily activities.







NON-SURGICAL TREATMENT

- When symptoms are mild, triggering often respond to rest. It is helpful to avoid repeated gripping tasks throughout the day. Limiting pressure against the palm, and decreasing vibration from tools or machinery is advised.
- A small finger based splint can protect the tendon area of the finger. The splint also limits movement of the irritated tendon to decrease pain during activities, and promote healing.
- Ice packs applied to the palm of the hand can help decrease swelling in the tendon.

As the tendon heals, specific exercises
will assist in restoring normal glide of the
tendon without aggravating the condition
further. For more stubborn cases, your
physician may recommend an injection or
corticosteroid, a potent anti-inflammatory
medication.

SURGICAL TREATMENT

If symptoms do not resolve, you may chose to have an outpatient surgical release. In this procedure a small incision is made to widen the opening of the tendon sheath to allow the irritated tendon freedom to slide more easily as the finger is bent and straightened.

Our hand therapists, Christy Knox and Trudi Snively, can provide appropriate splinting and advice in dealing with this uncomfortable and frustrating condition. Contact our office to discuss whether a hand rehabilitation program is right for you.



Mark Your Calendar

Patients, friends and family are invited to attend free seminars presented by the Drevna Physical Therapy Associates professional staff.

TOPICS:

Conservative Care of Knee Osteoarthritis: Delaying Total Knee Replacement

Timothy Drevna, DPT, OCS, CSCS, ATC

Tuesday, April 26, 2011 7:00 pm at the DPTA office

Prevention and Care of Rotator Cuff Injuries

Michael Beiler, MPT, DPT, CSCS

Tuesday, May 17, 2011 7:00 pm at the DPTA office

Prevention and Treatment of Balance Disorders

Anita Alonte Roma, PT, DPT, NCS

Tuesday, June 7, 2011 7:00 pm at the DPTA office

Avoiding Repetitive Injury in the Workplace

Christy Knox, OTRL/L, CHT Trudi Snively, COTA, and Lisa Goussetis, PT

Fall 2011, date to be announced

Pre-registration is required and seating is limited. Please contact our office for more information and to register at 717.569.4184.