



- 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.

NEURO NOTES IT'S ALL IN YOUR HEAD...REALLY! PHYSICAL THERAPY AND DIZZINESS

izziness. vertigo and unsteadiness mau be caused by an inner ear or vestibular disorder. The vestibular system helps us maintain our sense of balance, along with the visual system and information from feet and ankles. It is responsible for coordinating our eye movements with our head movements and helps us stay upright in challenging situations. Vestibular disorders can be present in individuals of all ages. While Individuals may appear to be fine outwardly, they may notice internal symptoms. When the vestibular system is not working, the following symptoms may be present:

Dizziness or lightheadedness

DREVNA

 Heavy headed sensation, or fogginess or disorientation

 Vertigo-a room spinning sensation often triggered with position changes such as rolling over in bed, sitting up, reaching up or bending over

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- Loss of balance
- Fullness or pressure in ears

Treatment of symptoms for dizziness, vertigo and unsteadiness can be initiated by seeing a physical therapist for vestibular rehabilitation. Vestibular rehabilitation can help decrease dizziness by increasing coordination between eye movements and head movements. Exercises are also given to improve balance reactions and prevent falls. After a comprehensive examination, physical therapists can develop an individualized treatment program to help control these symptoms.

HAND THERAPY Q&As

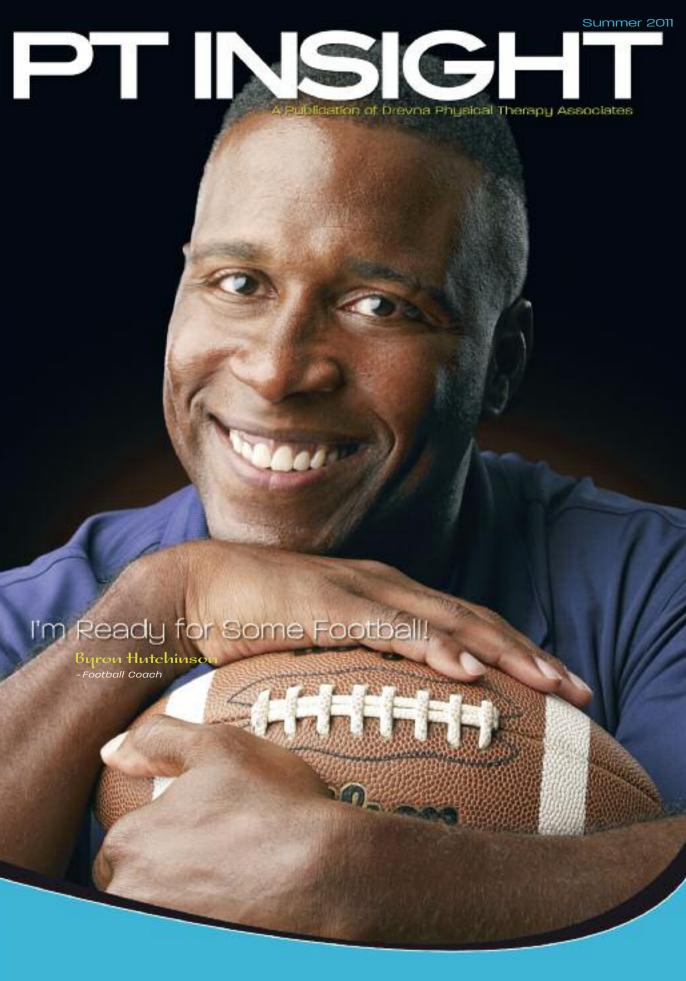
Q. When should I consider hand therapy? A. If you are experiencing any of the following, hand therapy may be helpful:

- numbness or tingling in the arms or hands
- aching or pain in the hands or arms
- difficulty sleeping due to upper extremity pain
- clumsiness during hand activities
- swelling in the hands, wrists, or forearms
- changes in touch sensation in the fingers
- weakness in grip or pinch

Q. What would hand therapy consist of? A. A good program will evaluate and treat the entire arm. from the neck to the affected hand. Initially, heat and massage may be utilized to reduce swelling and control inflammation. Often, a splint will be recommended to maintain a proper resting position. Successful therapy will offer strategies to reduce nerve compression, suggest ergonomic modifications and devices, and instruct in postural adjustments and strengthening. Home exercises will be an integral part of the solution. As symptoms decrease, strengthening will begin for the entire upper limb. Recommendations can be made for a wide variety of ergonomic tools. The overall goal is to heal the injured tissues and then take a multi-faceted approach to prevent re-injury.

My Care. My Choice.

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DIRECTACCESS

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:

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MEET CHRIS HUDSON

hristopher Hudson, MSPT, DPT, CSCS was born and raised in Williamsburg, VA. He graduated from Virginia Tech with a B.S. in Exercise Science in 1996. While at Virginia Tech, he worked as an athletic trainer with the school's Division 1 athletes. GO HOKIES!

Chris received his Masters of Science Degree in Physical Therapy (MSPT) from Thomas Jefferson University in 2001. While attending graduate school in physical therapy, he had the opportunity to work with multiple players from the Philadelphia Phillies baseball team.

He received his Doctoral Degree in Physical Therapy from Temple University in 2009.

Chris is a member of the American Physical Therapy Association and National Strength and Conditioning Association. He has been certified as a strength and conditioning specialist since 2007. His professional focus is in injury prevention, enhancement of sports performance, and working with runners and triathletes at all competitive levels. His clinical expertise lies in manual therapy techniques and orthotic fabrication for the foot and ankle. During the school year, Chris works as a consultant at Lancaster Catholic High School, assisting the athletic training staff in developing programs for injury prevention and treatment.

Athletics and family life continue to play an important role in his life. He enjoys participating in Sprint and Ironman Triathlons. Chris has a wonderful wife, Kim, and loves playing with and coaching his two boys, Connor and Braiden. He also enjoys his Golden Retriever, Beamer, the familu champion in ball retrieval.

PT INSIGHT Summer 2011

CONCUSSIONS: WHAT EVERY STUDENT ATHLETE AND PARENT NEEDS TO KNOW

 ${\mathscr H}$ direct or indirect force to the head or neck can cause a concussion. The damage caused by this injury goes beyond structural changes of the brain, affecting its function to varying degrees. Concussions, which are considered a mild traumatic brain injury, can lead to a wide range of risks to both physical well-being and academic performance of the student athletes. Children and adolescents are more vulnerable to concussions because their brains are still developing. The duration of symptoms is highly variable, and may last from several minutes to days, weeks, months, or longer. More than 40% of high school athletes return to play before they have fully recovered.

Facts regarding concussions:

- Can occur with or without loss of consciousness
- On field assessment can be difficult
- Often. CT scan and MRI is normal
- Symptoms can include: confusion or "fogginess," clumsiness, imbalance, dizziness, behavior or personality change, sleep disturbance, sensitivity to light or noise
- Onset of symptoms may be delayed up to 5 days

Returning to play before full recovery can have catastrophic consequences. Second impact syndrome can occur if the brain sustains a second concussion without time to recover from the first concussion. Often, the second blow appears to be minor. However, swelling of the brain can start within seconds to minutes after injury. This can result in brainstem failure within 2 to 5 minutes, and have devastating consequences. Mortality rates in such cases are close to 100%.

Across the country, states are taking the effects of concussions and mild brain injury

seriously. Many states are passing laws on safety awareness and prevention of traumatic head injuries among our student athletes. The Safety in Youth Sports Act would require children with signs of brain trauma to be examined by a medical professional before returning to play or practice. Violation of this provision would result in penalties. The departments of Health and Education would have to post information on head injuries and concussions on their websites, allowing students and parents to be able to review this information. The bill now goes to the House of Representatives for consideration. On the federal level, there are two separate pieces of legislation, HR 1347, the Concussion Treatment and Care Tools Act, and HR 6172, the Protecting Students from Concussions Act in the works.

Current Return to Play Guidelines recommend that all 3 of the following criteria should be met: 1. Symptom free at rest

- 2. Symptom free with physical and
- cognitive exertion
- 3. Intact cognitive function

Physical Therapists can help the student athlete safely return to play by assisting with management of symptoms related to imbalance and dizziness. We can also aid in monitoring and educating athletes with regards to increasing aerobic exercise and return to sport-specific activity.

For more information regarding new guidelines for management and prevention of mild brain injury and concussions for the student athlete, please attend one of our discussions on August 23 or September 13: New School vs. Old School: Updates on Concussion Management.



Mark Your Calendar

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

TOPICS:

New School vs. Old School: Updates on Concussion Management

> Anita Alonte Roma, PT. DPT. NCS

Tuesday, August 23, 2011 or Tuesday, September 13, 2011 7:00 pm to 8:00 pm at the DPTA office

Discussion on the new guidelines for management and prevention of mild brain injury and concussion for the student athlete.

Preventing Repetitive Strain Injuries

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

Thursday, October 20, 2011 6:00 pm to 7:00 pm at the DPTA office

Discussion on the recent increases in hand and arm injuries due to computer use. Join us and learn how to work "ergonomically correct" and prevent strain and injury to the hands.

Conservative Care of Knee Osteoarthritis: Delaying Total Knee Replacement

> Timothy Drevna, DPT, OCS, CSCS, ATC

Tuesday, November 15, 2011 7:00 pm to 8:00 pm at the DPTA office

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