



HIGH FIVE



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HEALTHY TIPS FOR PITCHERS FOR THE UPCOMING BASEBALL SEASON

By, Angela Owens, PT—Physical Therapy

Certain athletes (swimmers, pitchers and tennis players) are at especially high risk for shoulder problems, though they can occur in anyone. In most cases, a physical therapist plays an important role in the rehabilitation process. The pitcher especially, runs the greatest risk of injuries resulting from overuse or improper mechanics. Shoulders are in danger during a pitch. Because the shoulder is the most mobile joint in the body, it is also the most unstable. The four muscles surrounding the shoulder, called the rotator cuff, are stretched during the acceleration and deceleration of the pitching motion. Bones can shift, leading to

damaged ligaments or pinched structures within the shoulder joint.

Remember these tips before you even pick up a baseball:

1. Be mindful of how your body feels. Pain is the first sign of a problem, and athletes of all ages need to pay close attention to any type of muscle twinge, tightening, or burning sensation.
2. Make sure you understand the proper way to throw. Many pitchers mistakenly focus on making their pitching arm do all of the work instead of making proper use of their trunk and legs. It's the trunk and legs that are the

developers of the force behind the pitch.

3. Concentrate on being in the best condition possible (which includes keeping the muscles of the trunk and shoulder strong, stable, and flexible). Conditioning and strengthening exercises are most effective after mechanics are learned and put into action. If possible, begin a conditioning program at least a month before the season begins. You should also start with short tosses and gradually work up to throwing the ball a greater distance. Increasing the velocity should be your final step.

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10 QUESTIONS TO ASK YOUR DOCTOR BEFORE SURGERY

By, Amy Barber, OTR, CHT - Hand Therapy

Surgery can be an overwhelming and anxious situation. At your final doctor's appointment, before surgery, you can forget important questions to ask your doctor. These are some helpful questions you may want to ask your doctor so that you will feel prepared for your surgery and recovery.

- 1) How much swelling will I have and how long will it last?
- 2) What can I do for the swelling?
- 3) How much pain can I expect with this surgery?
- 4) What can I do for the pain?
- 5) What exercises should I do right after surgery so I will have the best recovery?
- 6) How should I care for my stitches and/or wound?
- 7) When can I use my hand/arm for (fill in activity) or when can I walk on my foot/leg/knee?
- 8) When should I call you?
- 9) What results can I expect to see after the surgery? And What is the final goal for this surgery?
- 10) When can I go back to work?



It is a good idea that you put all your questions in writing for your final doctor's appointment before surgery. Bring a pen and your questions to this meeting so you will be able to write down the important information. Surgery presents challenges for everyone. If you are well informed regarding your surgery and recovery,

the healing is less complicated and stressful for you and your family. Do not be afraid or hesitate to ask your doctor and/or caregivers any questions about your surgery or follow up care. They are there to help you return to good health. Good Luck!

ERGONOMICS AND GARDENING

By, Monique Scott, COTA - Industrial Rehab

<u>PROBLEM AREAS</u>	<u>SOLUTIONS</u>	
<ul style="list-style-type: none"> Prolonged squatting, kneeling or prolonged low level postures. 	<ul style="list-style-type: none"> Low level stool, cushion for kneeling. 	
<ul style="list-style-type: none"> Prolonged forward bending at the waist, difficulty recovering from low level postures, limited reach. 	<ul style="list-style-type: none"> Long handle tools/attachments, expandable telescoping handles. 	
<ul style="list-style-type: none"> Difficulty full fisting or decreased grip, decreased wrist and digit range of motion. 	<ul style="list-style-type: none"> Built-up handle tools, swivel handle tools, ergo handle tools to allow for neutral wrist posture. 	
<ul style="list-style-type: none"> Decreased endurance (shortness of breath). 	<ul style="list-style-type: none"> Energy conservation techniques—(proper breathing techniques, pacing, and proper body mechanics), and mobile scooter. 	

LAWN MOWER SAFETY

By, Bryony Zeese, OTR - Hand Therapy

With Spring just around the corner (hopefully warmer weather too!), many homeowners will be anxious to begin cleaning up their yards from what the winter has left behind. This includes getting out the lawnmower. According to the U.S. Consumer Product Safety Commission, approximately 400,000 people are treated in hospital emergency rooms for injuries from lawn tools and/or equipment. The most common injury treated includes finger amputations which carry a high potential for infection. Follow these guidelines when using a lawnmower to maximize your safety:

1. Review the operator's manual that comes with the mower.
2. Keep all safety shields and mower shut off mechanisms in place.
3. NEVER attempt to unclog grass clippings while the mower is running.
4. Do not pull your walk-behind mower, which may increase the likelihood that you will pull the blade onto your foot.
5. Wear eye protection to avoid eye injuries from projectiles.
6. Dress appropriately by wearing sturdy shoes.
7. Never leave a lawn mower unattended.
8. Educate your family and children regarding safe use of yard equipment.



SPORT SHORTS

By, Kay MacConnachie, OTR, CHT - Hand Therapy

Along with the increasingly warm weather of Spring comes an increase in outdoor activities, biking being one of the most common. The most common problem of the hand/wrist associated with biking is compression of the ulnar nerve at Guyon's canal. This can be caused by hyperextension of the wrist which happens because of supporting the riders weight on the handle bars. Common symptoms include complaints of decreased pinch/grip strength, pain or tenderness in palm side of the small finger and hand.

There are a variety of ways to protect oneself from these symptoms:

- Frequently change hand position on handle bars
- Gel padded gloves/padded handlebars
- Correct bike fit: the distance from the elbow to the tip of the fingers should equal the distance from the "nose" of the seat to the "stem" of the handlebar.

Intensity of symptoms determines whether or not a patient should stop biking.

With significant symptoms, hand therapy can be initiated to help decrease pain and inflammation. Wrist braces can help immobilize and rest symptomatic structures. Most acute symptoms resolve with 2-4 weeks of rest and treatment.



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WNBA DETROIT SHOCK

The 2006 Detroit Shock season is upon us and for the second year MHSRC will be providing the sports medicine care. The team of Mike Perkins, A.T.C and Laura Ramus, P.T., A.T.C. will be on the side line assuring a healthy season for the shock.

Employees of MHSRC again have the opportunity to attend games for free. Check the Detroit Shock schedule and place your ticket requests to Laura Ramus at (586)573-8890, ext. 11.



UPCOMING EVENTS

- April 18 & 19, 2006 - Michigan Safety Conference
- April 27, 2006—MHSRC Evening Lecture Series-Dr. Carlos Villafane—"Wound Classification, Management, Care and Review of Skin Grafts and Flaps"
- April 29, 2006—Kurt Krueger, OTR, CHT and Dr. Richard Singer presenting on "Orthopedic Symposium".
- May 4, 2006 - (DMEC) Disability Management Employer Coalition
- May 31, 2006— (MSIA) Michigan Self Insured Association Conference
- July 20, 2006 "How to Study for the CHT Exam" Lecture Series, MHSRC Warren Site
- September 21, 2006—Jeffrey Hall lecture on Upper Limb Nerve Compression