

Therapeutic **Outlook**

Your Guide to Wellness Through Movement

Fall 2009



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Karen Walz, PT, MA, OCS, COMT, FAAOMPT, Director of TAI Redmond Physical Therapy, discussing current PT issues with U.S. Congressman Greg Walden of Oregon.

Healthcare Reform: How Will It Affect Physical Therapy

*By Jennifer Lesko, PT, MS
Director, TAI Queen Anne Physical Therapy*

The topic of healthcare reform is everywhere. With so many stakeholders and complicated issues, how will physical therapy be affected in healthcare reform?

The American Physical Therapy Association (APTA) is the professional association for physical therapists and physical therapist assistants in the United States. They work with the Administration and Congress on behalf of over 72,000 members and their patients to assure that physical therapy is present at the table during the healthcare debates. The APTA applauds recent efforts by



*Jennifer Lesko,
PT, MS*

President Obama and key leaders in the U.S. Congress to reform our healthcare system.

The APTA supports a healthcare system that will provide improved coverage, access, and patient care while reducing unnecessary costs. This system should include comprehensive, cost-effective, and appropriate physical therapy services provided by a licensed physical therapist or by a qualified physical therapist assistant under the direction and supervision of a physical therapist.

In primary care, physical therapists should be recognized as healthcare professionals who can, and should, play a major role in achieving clinically effective outcomes while reducing costs that are

essential to a comprehensive health care environment. In an effort to enhance patient care, access, and value, the APTA believes any healthcare reform should include direct access, preventative medicine, and evidence-based medicine.

Access to care has been a primary issue to the APTA and its members in the healthcare reform debate. Direct access allows physical therapists to evaluate and treat patients without a referral. This ensures improved access to timely, cost-effective physical therapy services. Most states, including Washington, Oregon, and Idaho, have direct access, and the APTA has been working on legislation to include this as a benefit for Medicare patients as well.

Allowing direct access increases efficiency and care options, such as prevention and chronic care management. The APTA has also been working on legislation to repeal the limits on Medicare outpatient physical therapy services. These “therapy caps” impact patients who need the most care. Reform must address these restrictions to achieve lawmakers’ goals.

Other reforms in access to physical therapy services include eliminating the two-year wait period for Medicare for individuals with disabilities, mandating physical therapy as a benefit under Medicaid (not an option as it is currently), and including physical therapists in programs that encourage providers to practice in rural and underserved communities. Addressing access to care issues for all citizens leads to improvement in quality of care and cost savings.

Physical therapists are leaders in rehabilitation who allow individuals with chronic conditions to return to productive lives. Physical therapists also address prevention, such as reducing falls, improving physical activity to diminish chronic disease and secondary health conditions, and creating wellness programs for populations that have chronic conditions and/or disabilities.

Research shows that physical therapists can provide a cost-effective alternative for many patients who undergo surgery, take costly prescription drugs, or use a variety of medical devices to treat neuromusculoskeletal (including the spine, peripheral nerves, muscles, and joints) and cardiopulmonary problems. Physical therapists are also trained to provide education and interventions in physical activity to reduce excess body mass, improve health, and reduce chronic disease risk. The APTA believes enhancement of rehabilitation services is a necessary focus in healthcare reform.

The APTA believes physical therapists and physical therapist assistants are a part of the solution to healthcare reform through their ability to enhance research to address cost-effective interventions, implement information technology, and develop and

maintain adequate workforce in rehabilitation. The APTA believes investing in current and future rehabilitation research at federal agencies, such as National Institutes of Health, will identify the most efficient and effective delivery of services and payment methodologies.

The demand of high quality rehabilitation services by physical therapists is growing. Establishing initiatives for students and expanding faculty and education program funding will be critical to address this growing demand for physical therapists.

With all the questions and debate on healthcare reform, physical therapy will be at the table to address the issues and be part of the solution. The APTA will continue to collaborate with the Administration and Congress to enhance patient care, access, and value in the healthcare reform debate.

Jennifer Lesko, PT, MS is the Vice President for the Physical Therapy Association of Washington (PTWA) and is a former Federal Affairs Liaison between PTWA and the APTA.



Conditions We Treat...

KNEE – COMMON DIAGNOSES

- Sprains
- Ligament tears
- Degenerative joint changes
- Arthritis
- Meniscus damage
- Fractures
- Knee replacements
- Arthoscopies
- Patella dysfunction
- Chondromalacia
- Tendonitis

ANKLE/FOOT – COMMON DIAGNOSES

- Sprains
- Fractures
- Heel Pain
- Heel Spurs
- Plantar fasciitis
- Achilles tendonitis
- Balance disorders
- Arthritis
- Structural dysfunction
- Orthotics fitting
- Running injuries
- Neuromas
- Metatarsalgia



National Physical Therapy Month Helps You “Move Forward”



By Scott Wick
Director of Marketing

October is National Physical Therapy Month and this year's theme is “Move Forward.”

This theme reflects the American Physical Therapy Association's (APTA) new identity for our profession, and www.moveforwardpt.com is an excellent new resource for education about how physical therapy can help you.

The message of Move Forward encompasses many meanings for healthcare consumers. Please allow us the opportunity to outline a few that may be relevant to you personally. It is our goal to help continue promotion of healthcare awareness and education and to serve our communities and our customers with the highest quality care.



Scott Wick

It is our goal to:

Move “Our Understanding of the Healthcare System” Forward

Healthcare Reform is one of the most talked about issues in the media today. The healthcare system in the United States has become very complex and, at times, difficult to comprehend. A solid understanding of our healthcare system will lead to better personal management of healthcare services when you need it most.

Move “Physical Therapy Direct” Forward

Through Direct Access, we are seeing an increase in patients with musculoskeletal issues seeking our care. More healthcare consumers are making the choice to bypass their primary care physician for issues affecting their musculoskeletal system. This trend will assist in controlling medical costs and increasing rehab efficiency and effectiveness, especially with a nationwide shortage of primary care physicians.

Move “Awareness of Physical Therapy” Forward

Through the combined efforts of National and State PT Associations, special interest groups, consumer advocates, and companies like Therapeutic Associates (TAI), overall awareness of our profession and patient benefits is at an all-time high. There are many excellent resources available to health-conscious consumers, including www.moveforwardpt.com, www.itsyourmove.com, and www.therapeuticassociates.com/outlook.

Move “Focus on Prevention and Wellness” Forward

Baby Boomers represent 76 million healthcare con-

sumers, and starting in 2010, the first wave will be Medicare-age eligible. We have been treating Baby Boomers for decades, and it is evident that this group is fighting to stay active and healthy as they age. PTs are experts in supporting that goal.

Wellness has become a popular “buzz word” in the media, but the concept is sound. The increase in Childhood Obesity, Diabetes, and other lifestyle diseases in this country has created a need for a focus on overall wellness.

Recent media coverage of Healthcare Reform has shed light on our “Health Report Card” as compared to developed countries around the world, and we fair lower than expected. The main focus of Physical Therapy is on empowering you to be healthy. While we certainly treat patients who are unhealthy, in pain, or post-injury, we're also here to work with you on how to prevent those things from happening. Statistics show that at some point, 80 percent of American's will experience low back pain, a preventable condition. This is one of the most common diagnoses we treat as a profession and one with very successful outcomes.

Washington is part of the “Healthiest State in the Nation Campaign.” Oregon has the Community Health Partnership. The Centers for Disease Control developed new Physical Activity Guidelines, and the “Exercise is Medicine” campaign is asking all primary care providers to focus on physical exercise during routine examinations. Our approach to Physical Therapy embodies three principles that encourage good health: prevention, rehabilitation, and management.

Move “Physical Health” Forward

Our lifestyles have become more sedentary than ever, making it even more important for us to focus on physical health. As complicated as the human body is, it is amazing that most of us know more about the cars we drive than the bodies we live in. Movement is something we all take for granted, until it's too late.

Forward thinking Physical Therapy companies like TAI are developing new examinations such as the “Annual Physical Therapy Exam” to identify, monitor, and benchmark physical health.

Move Forward represents optimism for our future health, our future healthcare system, and our future role in providing quality health care for the musculoskeletal system. Please be an educated healthcare consumer.



Healthcare Reform: Direct Access for the Public

By Stephen E. Anderson, PT, CEO, Therapeutic Associates

As I write this, healthcare reform is a big unknown. There is a lot of speculation, but at this point fighting along party lines seems to be the stage of the reform process we are in. When this is published we could know a lot more or we could be dead in the water with no plan. We are all anxiously awaiting the outcome. Since so much is up in the air I'd like to offer how those with vision could look to the physical therapy world as a way to improve the system of access to appropriate healthcare.



Stephen E. Anderson, PT, CEO

Currently we have a shortage of Family Practice Physicians throughout the nation. Scheduling an appointment with a family practitioner often requires weeks to get in, and in rural areas it is much worse. A recent survey showed that in all the medical schools across the nation, only 2 percent of medical students were choosing Family Practice as a specialty. Thirty years ago this number was more in the 60-65 percent range. Why? Money!

Family Practitioners make far less than physician specialists. The way our current systems pay for physician services, specialists and their procedures get reimbursed at a much higher rate than care by a family practitioner. If healthcare reform accomplishes the Obama administration's goal of insuring 47 million people who are currently uninsured, who will be their access point into the healthcare system?

The overburdened Family Practice physicians won't be able to absorb the increase, and going directly to a specialist physician defeats the purpose of finding ways to decrease the cost of healthcare.

The public is never given enough credit by politicians and insurance carriers for making positive healthcare choices for themselves and their families. People usually know where they should go for their medical care and don't always need a "gate keeper" (MD) to tell them where that is. Most states, including Washington, Oregon, and Idaho, have laws that provide direct access

"To achieve real healthcare reform you have to be willing to try something different."

to the public for physical therapy. That means that any person can go directly to a physical therapist for treatment without a physician's referral.

The hitch in the system is that many insurance companies, including Medicare, require a physician's referral before they will pay for treatment. If Medicare would lift this restriction, and most insurance companies would follow their lead, then people with musculoskeletal injuries or pain in their joints or muscles could access the healthcare system directly through their physical therapist. This would take a tremendous amount of pressure off the over-stressed family practitioners

and save the system money.

Multiple studies have shown that when patients go directly to a physical therapist, their episode of care is shorter and they return to work faster. That saves the system money by eliminating an unnecessary physician visit, patients' conditions are addressed sooner, and they heal faster.

Other studies have shown that malpractice claims do not increase with these patients because physical therapists refer patients to an MD when their condition is not appropriate for physical therapy.

Physical Therapists today are graduating with a Doctorate of Physical Therapy (DPT) degree. They are trained to handle these medical conditions and have proven that they are the lower cost health care provider for patients who have musculoskeletal pain or dysfunction. This is a win/win for all. Patients have a choice, the system saves money, and patients get better faster so more complicated conditions don't progress.

Turf battles for patient access are one of the disturbing aspects of who controls healthcare. Common sense should be embraced in this area, and logic should prevail by allowing the public full direct access to their physical therapist. To achieve real healthcare reform you have to be willing to try something different.

There is no down side to this shift, and it accomplishes the goal of positive change in the system. It saves money and still meets the needs of the public. Be part of the solution. The next time you need to access your physical therapist, go to them direct.



The musculoskeletal system is made up of muscles, tendons, ligaments, bones, and joints that move the body and help keep its form. When they work together in precise harmony, the body can accomplish amazing things.

The Biomechanics Behind Pain

*By Jeffrey R. Blanchard, PT, MS, OCS
Director, TAI Valley Physical Therapy South*

Ask any physical therapist and they will tell you that one of the most challenging and enjoyable aspects of their work lies in deciphering WHY pain may start without trauma. The word “idiopathic” is a term used in medicine to describe a condition which has an “unknown origin.” It is very common to find that the reasons behind idiopathic pain lie in understanding the biomechanics of the musculoskeletal system.



**Jeffrey Blanchard,
PT, MS, OCS**

The musculoskeletal system is the system of muscles, tendons, ligaments, bones, and joints that move the body



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Musculoskeletal System

and help maintain its form. This system is built to work together in a precise way and can accomplish amazing things when everything works in harmony. Even when things don't work in harmony we can perform many tasks, but the body will wear down more rapidly. Biomechanics is the

study of how forces act within the body as the body moves through space. As you study the human body, you learn that our bodies are motion machines. The bone-levers and muscle-pulleys, which account for 60 percent of the body's weight, make that perfectly clear.



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Nervous System

Our nervous system is directly linked to our musculoskeletal system and usually has ultimate control over intentional movements performed by this system. Just as a light switch sends a signal down a wire to light a light bulb, so too does the brain send a signal down the nervous structures to move the musculoskeletal system.

Both the musculoskeletal and nervous systems are essential for life as we know it, and survival depends upon the coordination of these two systems. When they do not work in proper coordination, the biomechanics that result can be damaging over time. The result is usually PAIN, which will often bring you in to see your physical therapist.

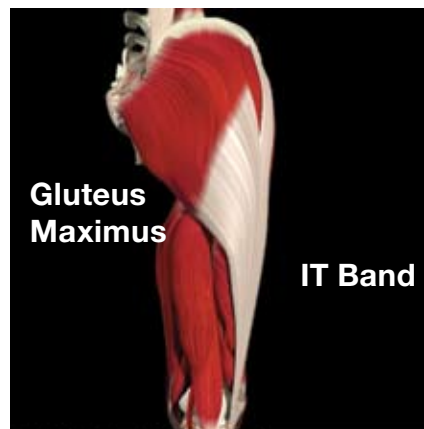
Let's take running for example. The brain sends multiple signals down the spinal cord to the peripheral nerves. These nerves interface with the muscles that move our legs

and arms, which then propel us forward as we run down the street. Our muscles contract, pulling on bones which are allowed to bend at joints, which are supported by ligaments.

As the foot hits the ground, joints and muscles absorb shock and become spring loaded. A signal from the joint is sent back to the brain, which interprets where the foot is, and then the process starts all over again. If your biomechanics are not what they should be, then running will eventually cause pain.

There are many different examples of how running biomechanics gone wrong can eventually result in pain. For example, let's say that your gluteus maximus (or buttocks) is weaker on your right side due to daily activities which demand strength from your left side and not your right.

Your gluteus maximus is responsible for making sure your femur (thigh bone) moves in the right way when you land on your foot. If this muscle is weak, your femur will move more to the inside than



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it should as you roll over your foot. This abnormal movement may result in one or more of the following painful scenarios:

1. You may overstretch your IT band and eventually cause pain in your knee or hip as this band moves over the bursa in your hip.



If our biomechanics aren't what they should be, we can still perform many tasks, but the results can be damaging and can lead to pain over time.

2. Excessive forces going to the inside of the knee may overstrain the tendons and ligaments on this side.

3. Your knee cap may not stay in the right place as you move and will therefore cause excessive knee cap pain.

4. Your foot may roll over excessively in the wrong direction, which can lead to arch pain, heel pain, or even bunion formation.

5. Excessive dropping of the pelvis on one side can irritate the joints in your back and eventually result in back pain.

And that is just the tip of the iceberg!

Physical therapists are biomechanical experts. We have an understanding of the interrelationship between your musculoskeletal system and nervous system, and are able to discern the biomechanical factors which lead to idiopathic pain. If you are having pain during movement and don't know the reasons why, contact your physical therapist today for a thorough biomechanical exam.

Your musculoskeletal system will thank you.





Walking is an excellent form of exercise that produces less shock to the joints than running, so it is recommended for people who are new to exercising.

Walking and Running Injury-Free

*By Bart Hawkinson, PT, DPT, OCS
Staff Physical Therapist TAI North Lake Physical Therapy*

Walking and running are excellent ways to build fitness and promote good health. Walking, in particular, is recommended for people who are new to exercising, as it produces less shock to the joints. Despite the relative safety of walking for exercise, injuries do occur from causes such as trauma, lack of ankle strength or flexibility, training errors, and improper shoes. Fortunately, most of these are easily preventable.



*Bart Hawkinson, PT,
DPT, OCS*

Causes of Injury from Trauma

Many people have experienced the pain of a sprained ankle. Ankle sprains are more likely to occur when walking

over uneven ground. Wearing proper shoes can reduce this risk, but the best form of prevention is to stay away from trouble in the first place.

If your balance is less than perfect, avoid walking in unfamiliar areas when the light is poor. Shopping malls are an excellent place for someone just starting a walking fitness program. I recommend going in the morning as there are usually fewer people there.

Causes of Injury from Lack of Foot and Ankle Strength or Flexibility

The foot and ankle have a difficult job to do. They must absorb shock from walking, balance the weight of your body, and propel you forward. All this happens very quickly, thousands of times a day.

Strong hips, healthy feet: The muscles of the foot and ankle are strong, but they cannot do everything alone. Successful running and walking requires good strength and endurance of the muscles around the hip. Known as the gluteal muscles (or buttocks), these are the largest muscles in the body. When you stand on one leg, it is largely the gluteal muscles that keep you from falling over. An excellent exercise to strengthen these muscles is a lunge.



In wide stride, legs shoulder width apart, head up, back straight, bend both legs simultaneously until forward thigh is parallel to floor. Focus on keeping hips level. Keep the front knee lined up over the big toe of the front foot during the movement. Do all repetitions to one side. Repeat on other side.

Perform this exercise 3–4x per week. Start with 10 repetitions on each side, and build up to 30.

Flexible calf muscles: When you walk and run, the calf muscles must perform the action of absorbing shock and pushing your body forward. Without proper stretching, these muscles will become inflexible, which will cause the heel cord to become tight. This can lead to painful inflammatory conditions such as plantar fasciitis and tendonitis.

Stretching the calf should be done following running or walking, and should be done at least once a day. Stretches should be held to the point where mild discomfort is felt, but no pain. Hold each stretch for 30 seconds and repeat twice on each foot.



Stand with right foot back, leg straight, forward leg bent. Keeping heel on floor, turned slightly out, lean into wall until stretch is felt in calf. Repeat with the other side.



Stand with right foot back, both knees bent. Keeping heel on floor, turned slightly out, lean into wall until stretch is felt in lower calf. Repeat with the other side.

Causes of Injury from Training Errors

When it comes to exercise, there is a lot to be said for taking baby steps. Most training errors come from doing too much too fast. If you are just starting a walking exercise program, it is best to start slow. Pick a distance you have walked in the past (for example, a few blocks around your house). Keep walking this distance for a week. You may get some muscle soreness in your legs the first couple of days, but this is normal and should go away in a day or so. After the first week, add another block. Keep adding one block per week until you reach your desired distance.

Starting a running program can be a challenge if you have never run before. I recommend starting with a walk-to-run progression. Select a distance you wish to be able to run — two miles, for example. Start off using a 4:1 ratio. Walk for 4 minutes, and run 1 minute. Do this program three days a week for one week. At week two, increase the time running by one minute. The progression should look like this:

Week One: 4 minutes walking, 1 minute running.

Week Two: 3 minutes walking, 2 minutes running.

Week Three: 2 minutes walking, 3 minutes running.

Week Four: 1 minute walking, 4 minutes running.

Week Five: Continuous running.

At this time you can gradually increase your mileage.

Causes of Injury from Improper Shoes

Not every foot is the same, so not every sports shoe is right for everyone. Wearing the right shoe for your foot, and replacing your shoes at the proper intervals are some of the best and easiest ways of keeping your feet injury free. See the article on page 23 for shoe suggestions.

Reference: "An Owner's Manual For The Recreational Runner," Chuck Hanson PT, OCS, NW Runner, September 2009





Tim Brinker, PT, OCS, FAAOMPT, Director of TAI Hillsboro Physical Therapy, working with a participant from the Portland Cup Soccer Tournament. Photo by JB Photography / joshbensonphotography.com

Foot and Ankle Rehabilitation after an Injury

By Robert Barnes, PT, DPT
 Director, TAI Boise Physical Therapy State Street

There are two stages that occur after an injury: Acute and Sub-Acute.

Acute Stage

The first 24-48 hours after an injury is called the Acute stage. If you take the following steps immediately after your injury you can speed recovery and prevent chronic complications.



Robert Barnes, PT, DPT

1. Do you need an x-ray? If you have severe pain with palpation to the foot or ankle bones or severe pain with weight bearing, you should have an x-ray taken of the injured area. A set of rules have been formulated that are

very effective in ruling in/out a fracture. An internet search for the “Ottawa Ankle Rules” will provide a good source of information on this subject. If you are unsure of the findings, visit your physical therapist or MD.

2. R.I.C.E: Rest, Ice, Elevate, and Compression. The acronym RICE can help you remember the procedures to take immediately following a foot or ankle injury. These steps are designed to reduce swelling and protect the injured tissue. As swelling decreases, range of motion will increase, and weight bearing should be less painful.

- **Rest:** Crutches may be required to decrease stresses to the injured area. Limit your weight-bearing activity.

- **Ice:** Ice 15–20 minutes 3x/day for 48 hours after an injury to decrease swelling. Place a towel between the ice and body part to avoid frostbite.

- **Elevate:** Position your leg above your heart for up to an hour at least 3 x/day. Lying on your back with your leg supported with ice and compression is typically the best position.

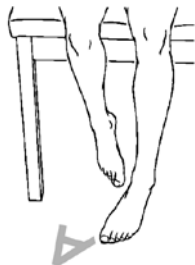
- **Compression:** Compressing the joint speeds the reduction of swelling. A compression sock, panty hose, or an ACE bandage with moderate pressure are all effective.

3. Start pain-free movement!

Begin with something light, such as gentle spinning on an exercise bike. However, if the movement hurts, stop immediately. The exercises below should help get you moving.

- **Alphabet Exercise**

Using left ankle and foot only, trace the letters of the alphabet. Perform A to Z. Repeat using right foot.

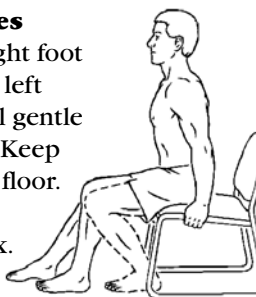


- **Ankle Pump**

In a seated position with your feet on the floor, pump your heels up and down while maintaining ground contact with the balls of your feet. Try 20 repetitions 2–3 times per day.

- **Heel Slides**

Feet flat, right foot forward, slide left foot back until gentle stretch is felt. Keep entire foot on floor. Hold five seconds. Relax. Switch legs and repeat.



Sub-acute Stage

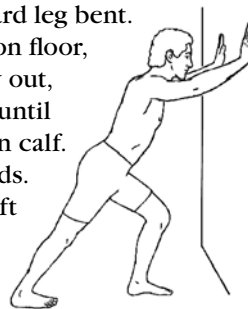
Most injuries require 4–6 weeks to heal. This is considered the Sub-Acute stage. However, it may take longer to return to full activity. Follow the steps below to optimize your recovery.

1. Regain your range of motion:

Normal joint movement is vital for your recovery. Try the 2-way calf stretch (pictured below) to improve your ankle range of motion. If stretching hurts, hold off for 2–3 days and try the stretch again.

- **Calf Stretch**

Stand with right foot back, leg straight, forward leg bent. Keeping heel on floor, turned slightly out, lean into wall until stretch is felt in calf. Hold 30 seconds. Repeat with left foot back. Do one set per session.



- **Great Toe Stretch**

Stand with right foot back, both knees bent. Keeping heel on floor, turned slightly out, lean into wall until stretch is felt in lower calf. Hold 30 seconds. Repeat one time per side. Do one set per session.



2. Start strengthening:

Your muscles weaken after an injury. If these exercises hurt, you may require another week of rest prior to starting them.

- **Calf Raises**

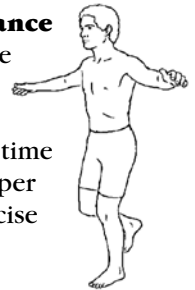
In a standing position, slowly rise onto the balls of your feet, hold for 1–2 seconds and lower down. Try this one for 20 reps, one time per day.

3. Get stable:

Research strongly supports that balance training speeds recovery and reduces your chance of further injury.

- **Single Leg Balance**

Attempt to balance on left leg, eyes open. Hold 30 seconds. Repeat one time per set. Do two sets per session. Repeat exercise with eyes closed.



4. Quit limping:

Limping can become habit and can lead to further irritation of your injury or potentially aggravate another part of your lower extremity. To improve your walking technique, start with a heel to mid-foot rocking movement and slowly progress your weight onto the ball of your foot until you can tolerate your full body weight rocking from heel to toe.

5. Protect your feet:

Wear supportive shoes. Going barefoot or wearing unsupportive flip flops can increase stresses to a healing ankle or foot injury. Proper shoes typically have a reinforced arch and moderate cushion. Running shoes are ideal foot wear during the sub acute stage because of their arch support, cushion, and flexibility. If your foot is too swollen to fit in a proper shoe, find sandals that can provide improved stability and cushion compared to flat-soled sandals.

Physical therapists are trained in the proper use of modalities (ice, compression, and support), range of motion, and strengthening and balance exercises that correspond with your stages of healing. A visit to your physical therapist can optimize your recovery.

Please go to therapeuticassociates.com/outlook for a more comprehensive exercise routine.



People often confuse being pain free with full recovery and stop their rehab programs too early. Our bodies continue to require input to heal properly and allow for full return to our favorite activities.

Taking Your Recovery to the Next Level

*By Corinne Schaefer, PT, DPT, ATC
Director, TAI Physical Therapy Port Angeles*

You have completed everything your physical therapist recommended. You have recovered from your injury and are feeling better; you are all done now, right? The fun is actually just beginning! People often confuse being pain free with full recovery and stop their rehab programs too early, but there is much more to the process. Our bodies continue to require input to heal properly and allow for a full return to our favorite activities.



*Corinne Schaefer, PT,
DPT, ATC*

Your foot/ankle injury is not isolated to just the foot/ankle. Rather, the

whole kinetic chain up through the knees, hips, pelvis, and spine gets involved with varying compensation patterns which need to be addressed during and following the recovery process. A dynamic flexibility program will assist in pulling everything together, including core stabilization, lower extremity strengthening, stretching, and balance.

This program should take no longer than 15 minutes and acts as a great warm up for any sport or recreational activity. By properly warming up and exercising our bodies, we can increase blood flow to our muscles, improve range of motion through our spine and extremities, and prepare our bodies to participate in our desired activity with greater ease.

Your dynamic flexibility program should include the exercises detailed below and will require 20-30 feet of space. You will complete these at least twice (down and back) for each exercise, with the exception of stretches performed lying on the floor at 3-5 repetitions for each side and 2-3 second holds.

Hip Crossovers:

Lying on your back with your arms stretched out to the side, knees bent and together, rotate your knees over to the side while keeping your feet together and your shoulders flat on the ground. Pause briefly and repeat to the other side.



Leg Overs:

Lying on your back with arms out to the side, put one leg straight up in the air and the other flat on the ground. Cross the leg in the air over your body toward the floor while keeping your shoulders flat on the ground. Contract through your core, and pull the leg back to the starting position. Switch legs to repeat to the other side.



Scorpion:

Begin on your stomach with arms stretched out to the side and your legs straight. Turn your head to the left and lift up your left leg with knee bent. Reach behind and across your body with the left foot toward the right shoulder. Do not let the knee drop toward the floor, and keep the shoulders flat on the ground. Bring the left leg back to the starting position and switch sides, including turning your head.



Tall March with Knee to Chest:

Begin by rising up on your toes on the right foot while lifting your left knee toward your chest. Keep your upright posture and balance. Switch sides as you move forward.



Walking Lunges:

Lunge forward with back knee straight or bent toward the floor while maintaining a neutral pelvis and balance. Repeat, alternating legs as you move forward.



Walking Lunge with Rotation:

Lunge forward with rotation through the torso and upper body in both directions. Repeat to the other side.



Walking Lunge with Forward Reach:

Lunge forward and reach toward the floor with both hands while extending the supporting leg. Extend back leg at the same time to maintain a neutral spine.



Side Lunges:

Step out to the right side, shift weight onto the right leg with bent knee and left knee extended. Maintain neutral spine and repeat to the other side.



Soldier March/Skip:

Rise up on your right toes as you extend your left leg and right arm out in front of you. Maintain neutral spine and repeat to the other side.



Remember that your body takes time to make a full recovery, and taking your program to the next level will assist in your return to your favorite activities. Stay consistent with your program and consult your physical therapist to critique your technique and modify any activities as they relate to your specific injury.

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All Areas:

October 30–November 1:

APTA National Student Conclave, Miami FL

Seattle Metro

August 29: Seattle Oyster Urban Adventure Race

September 19: WAPA

September 20: Cycle the Wave

September 25–27: Golf Fest Northwest

October 11–12: MGMA

Port Angeles Area

September 19: Olympic Peninsula Health Fair

Spokane

September 10–11: SpokeFest

September 19: Cat Scramble Golf Tournament

October 1–3: WSMA

Tri Cities

October 24th: Annual Kid's Marathon

Portland Metro

August 28–29: Hood To Coast

September 19: Portland Oyster Urban Adventure Race

September 19: Nike Pre-Nationals (Hillsboro)

September 19: Scappoose Sauerkraut Festival

September 26: New Balance Festival of Champions
(Monmouth, OR)

October 3–4: Portland Marathon Expo

October 4: Crusade Series Race 1 (Portland)

October 8–10: WAPA

October 11: Crusade Series Race 2 (Rainier)

October 18: Crusade Series Race 3 (Sherwood)

October 25: Crusade Series Race 4 (Hillsboro)

October 31: Crusade Series Race 5 (Astoria)

November 1: Crusade Series Race 6 (Astoria)

November 8: Crusade Series Race 7 (Portland)

November 15: Crusade Series Race 8 (Barton)

December 10–13: US National CX Championships (Bend)

Central Oregon

October 24: Center Foundation Annual Fundraiser (Bend)

December 5: Jingle Bell Run (Bend)

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Committed to Leadership

Therapeutic Associates is proud of the leadership our therapists show as part of their Physical Therapy Community.



2009 OPTA Mercedes Weiss Award Winner (Oregon Physical Therapy Association)
William Temes, PT, MS, OCS, COMT, FAAOMPT
TAI OMG at Eugene



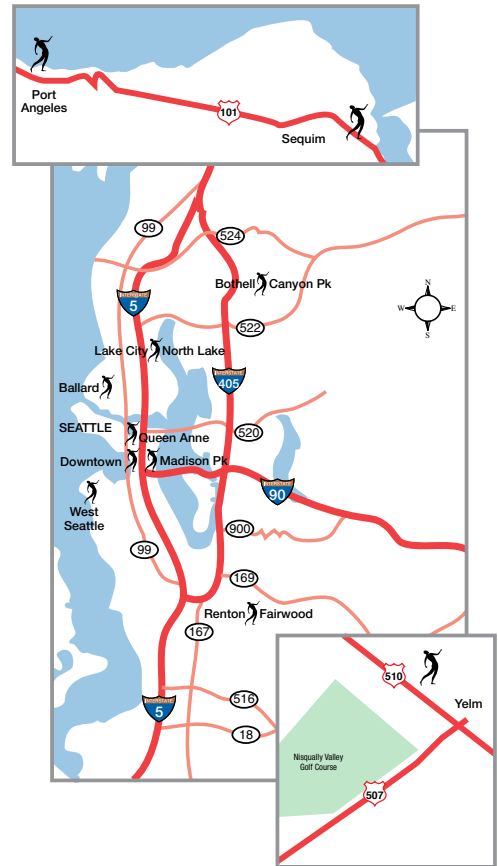
2009 PTWA Physical Therapist of the Year (Physical Therapy Association of Washington)
Steve Allen, PT, OCS, COMT, FAAOMPT
Director, TAI Liberty Lake Physical Therapy



2008 IPTA Physical Therapist of the Year (Idaho Physical Therapy Association)
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Scott Wick, TAI Director of Marketing, and Dr. Rob Epstein, Family Medicine of Port Angeles, nearing the finish line at the North Olympic Discovery Marathon in Port Angeles.



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Roger S Wegley PT, Director
206-789-7975



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Cora Bundy PT, MPT, OCS, CMPT,
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206-324-5389



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Megan Houser PT, DPT, OCS,
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206-623-4570
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425-489-3420



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Director
425-272-0252
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Director
360-452-6216



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Enid Halewyn PT, Director
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YELM PT
Paul Groschel PT, MSPT, Director
360-458-2444



Participants at Spokane's Hoopfest. Photo by JB Photography / joshbensonphotography.com

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LIBERTY LAKE PT
Steve Allen PT, OCS, FAAOMPT, Director
509-891-2258



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509-466-4379



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Gale Anderson PT, MSPT, OCS, FAAOMPT, Director
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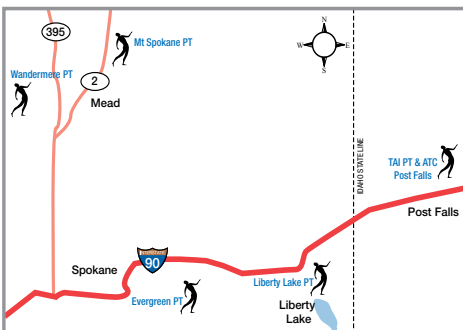


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Jeff Bresnahan PT, DPT, Director
509-926-5367

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POST FALLS
Physical Therapy & Athletic Training Center
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208-777-8273



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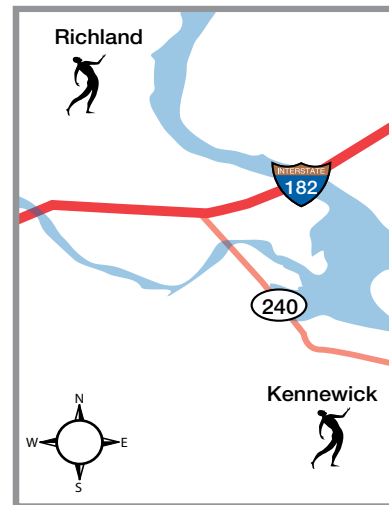
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509-946-8497



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509-783-1962
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Peter Gutwald of Therapeutic Associates Cycling ready for the start of the Portland Twilight Criterium.
Photo by JB Photography / joshbensonphotography.com

Portland Metro Area

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BEAVERTON PT
Zachary R Jones PT,
DPT, Director
503-644-3311



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503-450-0591



NW PORTLAND PT
Todd J Cruz PT, MPT,
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503-227-3479
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Darin Borter PT, DPT,
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BETHANY PT
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PT, MPT, OCS, CMPT,
Director
503-466-2254
TPI Certification



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Scott Hein PT, DPT,
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503-357-9810



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PT, Director
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503-543-0254



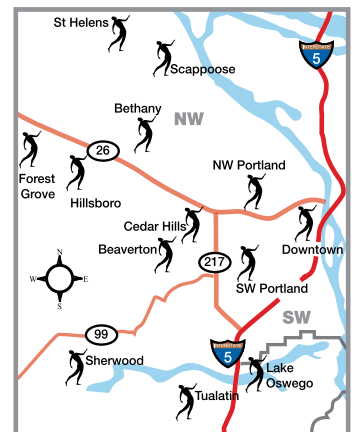
CEDAR HILLS PT
Aimee Jackson PT,
MSPT, Director
503-292-3583



LAKE OSWEGO PT
Shawn Dailey PT, Director
503-635-0844
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DPT, OCS, COMT,
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CLACKAMAS PT
 Mark McCurdy PT, MPT, COMT,
 Director
503-659-9155



EAST PORTLAND PT
 Jennifer Hammond PT, DPT,
 Director
503-253-0924



GRESHAM PT
 John Parr PT, Director
503-666-7644
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N PORTLAND PT
 David V McHenry PT, DPT,
 Director
503-283-8133



NE PORTLAND PT
 Aubree Swart PT, DPT, Director
503-493-4463
TPI Certification

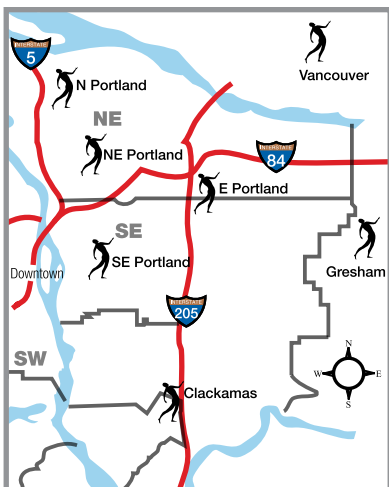


SE PORTLAND PT
 Daniel Renelt PT, DPT,
 Director
503-774-3585

SW WASHINGTON



VANCOUVER PT
 Andrew Sahnov PT, DPT,
 Director
360-514-9383



Salem

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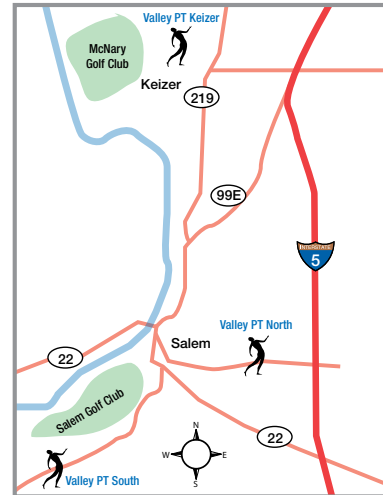
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 Valley Physical Therapy
 Evan Jones PT, OCS, Director
503-378-7434



SALEM SOUTH
 Valley Physical Therapy
 Jeffrey R Blanchard PT, MS,
 OCS, Director
503-585-4824



KEIZER
 Valley Physical Therapy
 Marcey Keefer Hutchison PT,
 MSPT, ATC, CMP, Director
503-463-4221



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ALBANY
 Mid Valley Physical Therapy
 Richard Costain PT, Director
541-967-1224



CORVALLIS
 Angela Lewis PT, DPT,
 Director
541-757-0878





Eugene Marathon participants start the race. Photo by JB Photography / joshbenensonphotography.com

Eugene

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WEST EUGENE PT
Bradley Schwin PT, MS, OCS, Executive Director
541-484-9632



OMG ORTHO AND SPORTS MEDICINE
David Dowd PT, MS, Director
541-242-4870



SPRINGFIELD
Gateway Physical Therapy
Adam Gibbons PT, CFMT, Director
541- 242-4172



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Hannah Shallice PT, MSPT, Director
541-242-4470



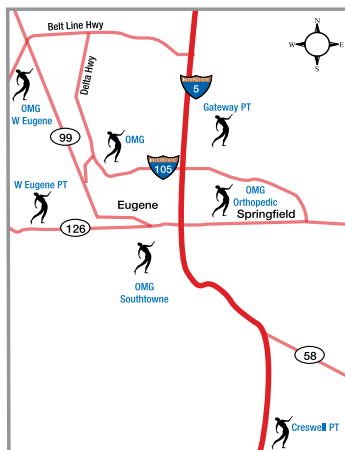
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David Dowd PT, MS, Director
541- 242-4172



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Ed Meelhuysen PT, Director
541-895-5913



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Hannah Shallice PT, MSPT, Director
541-463-2191



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Central Physical Therapy
Jeffrey S Jones PT, Director
541-673-1808



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Jay A Ruettggers PT, DPT, ATC, CSCS, Director
541-779-1041



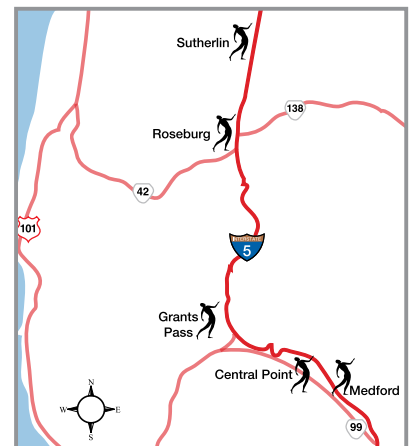
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541-479-0765



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Dan Hirtle PT, Director
541-459-8459



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David B Standifer PT, Director
541-664-2800





Therapeutic Associates Team Dobbiaco Cycling and Multisport Team

Central Oregon

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BEND
 Chuck Brockman PT, MPT,
 OCS, CSCS, Director
 541-388-7738



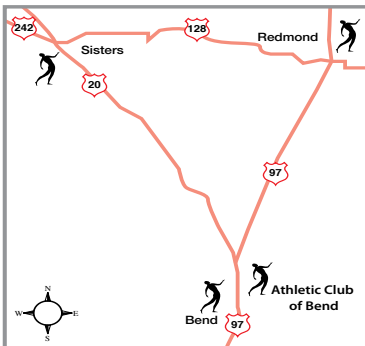
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 Karen Walz PT, MA,
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 Director
 541-923-7494



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 CSCS, Director
 541-382-7890
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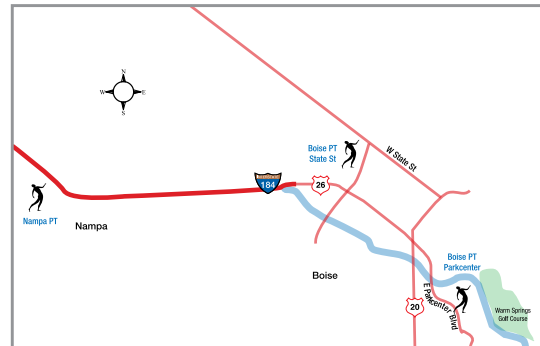
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GET *MOVING* PROFILE

By Lanny Gower, Patient of TAI Cedar Hills Physical Therapy

GETTING BACK *IN THE RACE*

I am an ultra marathon runner who fell on the trail during a training run and hurt my hip. I had the biggest race of the year coming up and taking time off from running was not a good option for me. So I did my usual and tried to work through it by icing and running less than normal. It just kept getting worse.

Finally, a friend of mine recommended I see Kelly Reed, PT, COMT, OCS at west Portland's Cedar Hills office. Kelly got me right in and even worked with me on the billing since my insurance didn't cover PT visits. After three visits with Kelly working on my hip and back and providing me with stretching exercises, I was running pain-free again and got in a great 25-mile run as a tune-up for the Pacific Crest Trail 50.

Unfortunately, two days before a big 50-mile race I fell and hurt my hip again. I cancelled my race plans and went back in to see Kelly, feeling depressed that I was going to miss a race I had trained so hard for.

Kelly made a special appointment to get me in on short notice. She spent some extra time on my hip/back and loosened my quads/hip flexors to get the problem resolved. She was not 100 percent convinced that I wouldn't be able to race. I left

her office feeling better, but with the race the next day, I was resigned that I would not be able to compete.

I went out that afternoon for an easy jog and noticed I was feeling much better than I expected. So, I decided to do the race. Not only was I able to finish a tough 50-mile race, but I had the best race of my life and won. In the first two miles I felt so good I took the lead and never looked back. My hip never gave me a problem throughout the race.

At 48 years old I don't have many opportunities to win races, and I had trained hard for six months for this one. I can't begin to describe how much I appreciate Kelly's time, effort, and expertise that enabled me to compete.

Kelly understood that racing is important to me and she was dedicated to getting me healthy. I'll be a lifetime customer at TAI, and I'd recommend Kelly to anyone who is involved in sports or outdoor activities. I felt that Kelly and the Cedar Hills staff are among those rare health care professionals who actually get why this stuff is important to high-level athletes.



Choose Your Shoes Wisely!

By Chuck Hanson, PT, OCS, TAI North Lake Physical Therapy

Activity

Shoes are designed to meet the demands of certain functions. Standing and walking are the two most common functions, but others may include running, dancing, hiking (including through water), and even lounging! So as a result, the shoe needs a construction that serves that activity.

Support in a shoe is for joint and tissue protection. Proper support also promotes balance and stability. As shoes have evolved, designers have paid close attention to the three parts of the shoe that relate to three stages of support occurring in walking and running. These are early, mid, and late stance.

1) **Rearfoot:** The heel and rounded back, called the counter.

2) **Forefoot:** The rock-er shaped front, which is the last part of the shoe to be on the ground when you leave the foot.

3) **Midfoot:** The arch region between the heel and forefoot.



For proper support in walking or running shoes, you need a balance between firmness and cushioning. The rearfoot needs a firm heel counter to hold the heel straight as you impact the floor. The midfoot needs to guide and control your body's weight as you transfer toward the front of the shoe. Therefore, the midfoot ought to resist twisting.

To test this, hold the sole of the shoe at the rearfoot and forefoot and try to twist the midfoot section.

The forefoot of a shoe is key to proper fit and propulsion. Toes need a length and depth that are just right, and a shape, thickness, and flex of the sole that provides a good sense of balance, guidance, and protection from undue pressure.

Most importantly, the shoe should be tested by simulating the activity you plan to wear it for.

Shoe Stability Categories

As the construction of shoes for walking and running has become more sophisticated, designers have targeted specific foot types and motion patterns to be matched with one of three shoe types.

A motion control shoe is very firm and helps add support to overly flexible or poorly aligned legs and feet.

A cushioning shoe substitutes softness for support and cradles your weight and foot structure. This can be very helpful for arthritis, a rigid foot structure, or someone with areas of sensitivity to high pressure.

A neutral shoe combines elements of both of the other two shoe types with a firm heel counter and good stability in the midfoot (without too much stiffness) and a nice quantity of cushion at the heel and forefoot where high pressure can be a problem.

Volume

No two feet are exactly alike. Like shoulders, noses, and ears, some are large, medium, and small. Good shoe fitters take not only your foot shape (high, medium, and low arched) into account, but also your volume, and leave it to you to tell them if the fit feels just right.

You likely have a pair of shoes in your closet now that are the right length and generally correct in width, but they may feel tight or sloppy and loose. This is a volume issue. Loose shoes contribute to blisters, sprains, and arch collapse while excessively tight shoes can contribute to corns, calluses, toe deformities, and abnormal patterns of walking.

Your Shoe's "Last"

By looking at the sole of any shoe, running or otherwise, you can get an idea of the shape of the mold, called the "last," it was built around. Three versions exist: straight, semi-curved, and curved. They mimic foot types, as not all feet are designed with the same shape.

One type best suits your feet and your feet's needs if correction is in order. Working with a shoe supplier with a strong community reputation that expertly trains its staff is critical and will make your feet and body happy. The time and money are well worth the investment!

Shoes are probably one of the most important investments you can make in your health. By knowing better what to look for, you'll be sure to have happy feet! Therapeutic Associates Physical Therapists will be happy to look at your shoe choices and discuss proper shoe options with you. Just ask!

Contact us at: **Therapeutic Associates, Inc.**

7100 Fort Dent Way, Suite 220, Seattle, WA 98188

206-241-8488 phone • 206-241-0028 fax

Dorothy Klemetson x2200 | dorothyk@taiweb.com

Scott Wick x2214 | swick@taiweb.com

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“My therapist not only treated me, but he taught me how to heal and strengthen the weakness in my body on my own.”

– Kat Bell
Patient, Mom, Teacher
Hillsboro, OR

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