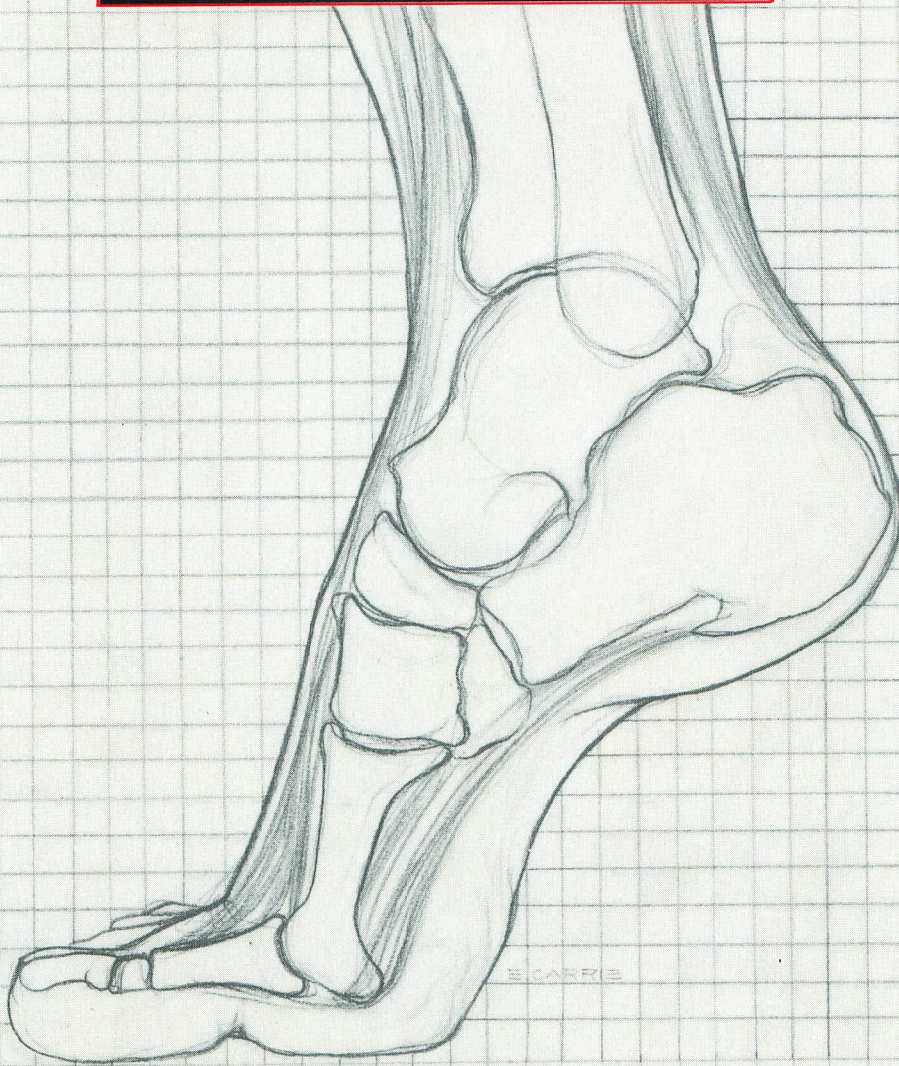


ORTHOPAEDIC

Physical Therapy

PRACTICE

Vol. 1, No. 3, 1989



AN OFFICIAL PUBLICATION OF THE
ORTHOPAEDIC SECTION



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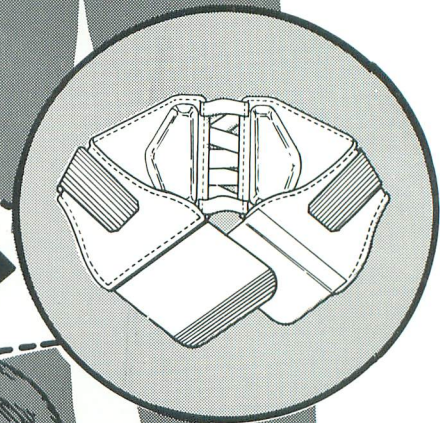
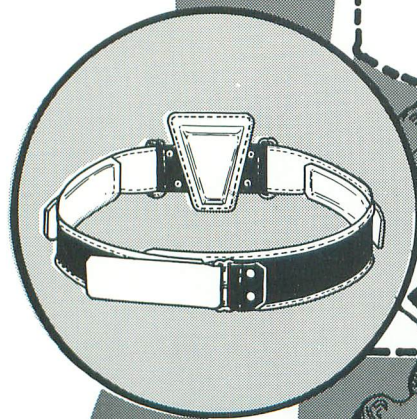
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ABOUT THE COVER

Heel spurs are common problems encountered by active people. Joseph Kahn's article presents a case report about treating such a pathology.

Drawing by Elizabeth Carrie

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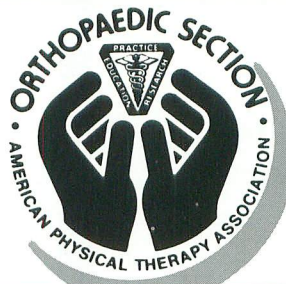
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CALL FOR NOMINATIONS
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THE BEST RESEARCH ARTICLE OF 1989
DEALING WITH
ORTHOPAEDIC PHYSICAL THERAPY

The research Committee of the Orthopaedic Section of the American Physical Therapy Association is soliciting nominations from the public in order to recognize and reward a physical therapist who has made a significant contribution to the science, theory or practice of orthopaedic physical therapy through conceiving, executing and reporting research.

I) ELIGIBILITY FOR THE AWARD

The recipient must:

- 1) be a physical therapist licensed or eligible for PT licensure in the United States of America;
- 2) be a member of the American Physical Therapy Association;
- 3) be the primary (first) author of the published manuscript.

The article must be published in a reputable, refereed scientific journal between September 1, 1988 and August 31, 1989 to be considered for the 1990 award. Should the journal containing an otherwise eligible article experience a delay in releasing its August, 1989 issue, the article must be available to the general public no later than September 15, 1989 to be considered.

II) SELECTION CRITERIA

The article must have a significant impact (immediate or potential) upon the clinical practice of orthopaedic physical therapy. The article must be a report of research but may deal with basic science, applied science or clinical research. Clinical case studies or reviews of the literature will not be considered.

III) THE AWARD

The award will consist of a plaque and \$500.00 cash to be presented at the 1990 Combined Sections Meeting.

IV) NOMINATIONS

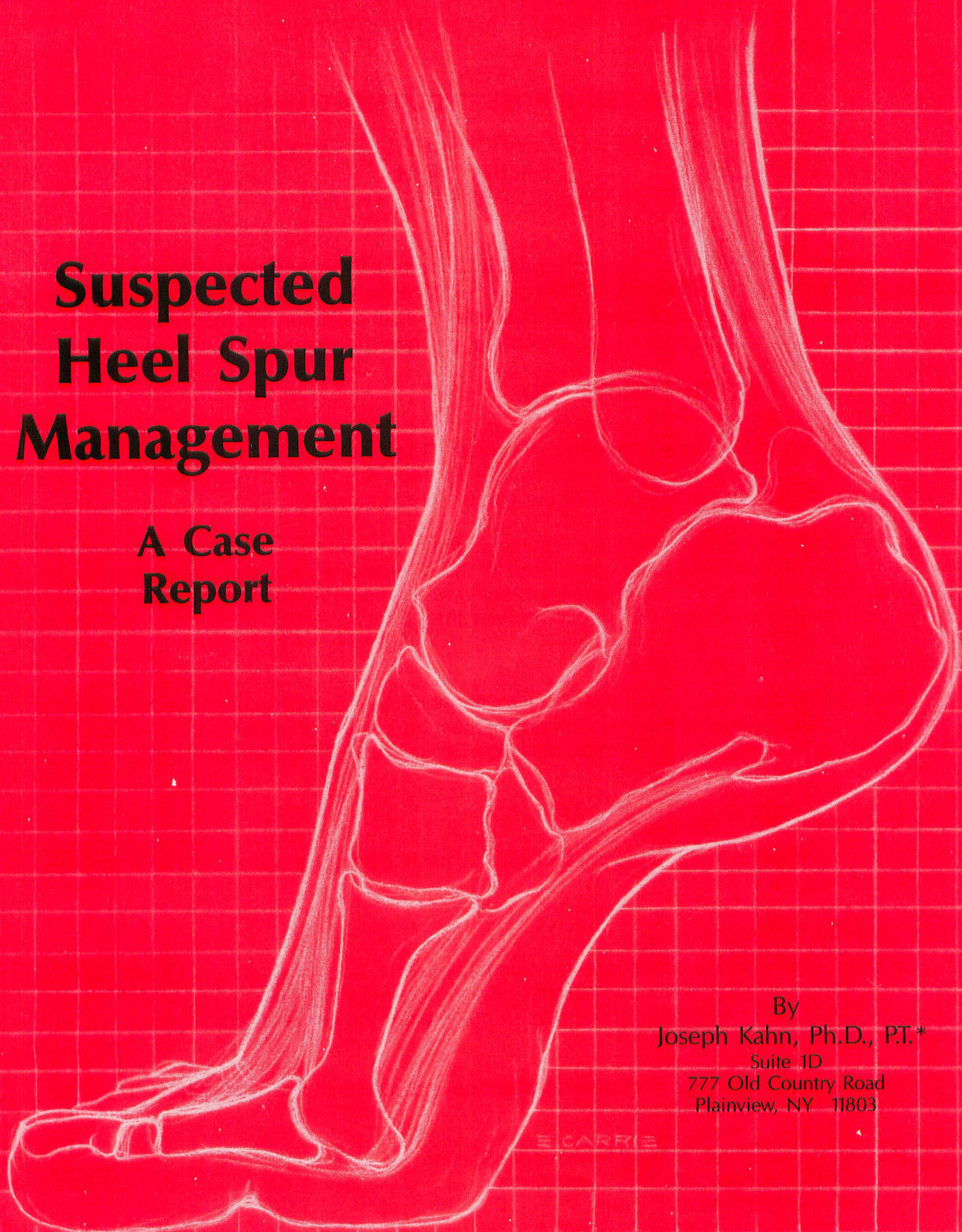
Written nominations should include the complete title, names of authors and the journal citation (title of journal, year, volume number, page numbers) of the research article. The name, address and telephone number of the person nominating the research article should also be included.

Nominations (including self-nominations) will be accepted until close of business September 4, 1989 and should be mailed to:

Research Committee of the Orthopaedic Section
A. Joseph Threlkeld, P.T., Ph.D., Chairman
c/o Division of Physical Therapy
UK Medical Center Annex 1, Room 4
Lexington, KY 40536-0079

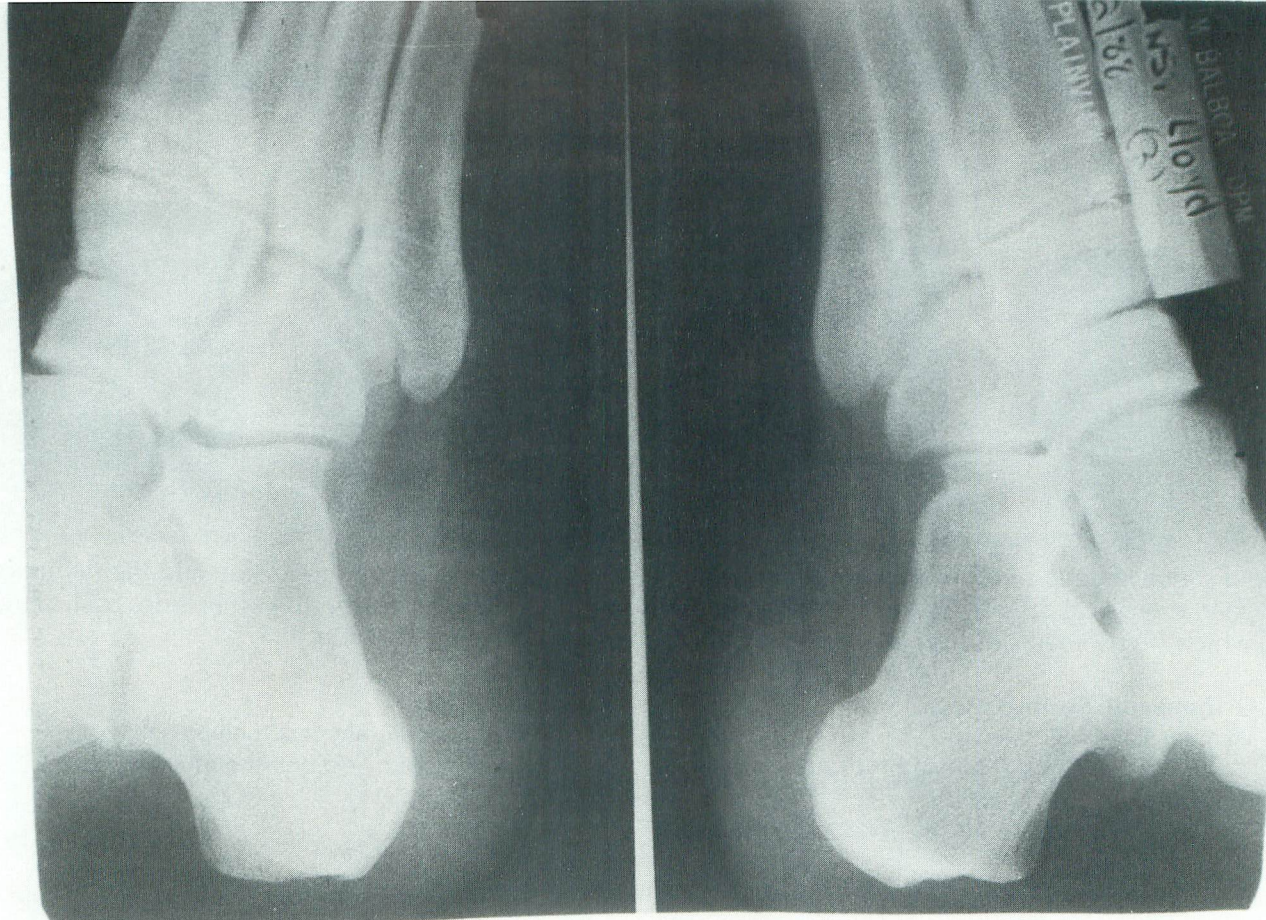
Suspected Heel Spur Management

**A Case
Report**



By
Joseph Kahn, Ph.D., P.T.*
Suite 1D
777 Old Country Road
Plainview, NY 11803

M. CARRE



X-rays reveal no osseous abnormality; minimal densities in the plantar fascia noted.

ABSTRACT:

Although symptoms indicated presence of a calcaneal spur, x-rays revealed no osseous abnormality. Treatment was designed, therefore, for an anti-inflammatory approach to the plantar tissues. The sclerolytic action of the acetate radical, however, was employed by iontophoresis to reduce any calcification in the plantar fascia. Success was reported with reduction of pain, increased range of pain-free motion and improved function. Radiographically negative calcifications may be present and respond favorably to sclerolytic management combined with anti-inflammatory and other modalities to maintain and/or restore the muscular component function.

A CASE REPORT:

L.R., a professional photographer, aged 34, in good health was referred for physical therapy for a suspected right heel spur. Pain was severe when weight-bearing and radiated into the plantar surface as well as proximally to mid-calf. Point tenderness was elicited at the distal calcaneal region. An orthosis had given no relief, nor had oral medication been of any help. X-rays, however, failed to reveal any osseous abnormality. Minimal soft-tissue densities were noted in the

plantar fascia and treatment was begun. REGIMEN CONSISTED OF: 1.) cold laser stimulation to the tender area of the heel; (6328 HeNe), plus 30 seconds to each of several known acupuncture points;² 2.) whirlpool bath at 104° for 10 minutes; 3.) Iontophoresis with 2% acetic acid solution, at the cathode, with the anode reference electrode at the distal quadriceps; 5 mA, for 15 minutes.¹ 4.) phonophoresis with 1% hydrocortisone ointment with mineral oil coupling, 5 total Watts for 3 minutes to the plantar surface of the heel.³ 5.) mild electrical stimulation across the heel (medial-lateral calcaneous; surged biphasic wave form with high rate (120 Hz, medium pulse width (150 usec) with the Neurologix (Neurologix PMS-15, Rego Park, NY), and 50 Hz with the Respond (Medtronic Respond II, Minneapolis, MN), both at tolerable amplitudes, for about 10 minutes.⁴ 6.) infrared, massage and gentle ROM at the ankle/foot.

Results were excellent and immediate. Tenderness at the heel was not elicited after the first treatment and has not returned. Weight-bearing was tolerable and function was at normal levels. Discomfort has steadily diminished with successive visits. Medication has been discontinued and a softer, donut-type sponge orthosis

has replaced the previous rigid type. The total number of visits was six, twice weekly for three weeks.

SUMMARY

A suspected heel spur was treated conservatively as a plantar fasciitis. A comprehensive electro-therapy approach, using multi-modalities was utilized successfully.

REFERENCES

1. Amrex Low Volt Unit Mod. LVG325, Hawthorne, CA
2. Birtcher Megason 150, El Monte, CA
3. Dynatronics Cold Laser, Mod. 820, Hene 632.8 NM, Salt Lake City, UT.

*Clinical Assistant Professor, Physical Therapy, State University of New York at Stony Brook; Adjunct Associate Professor, Physical Therapy Touro College, Dix Hills; NY Clinical Associate, Physical Therapy, New York University, New York, NY; Author: "PRINCIPLES & PRACTICE OF ELECTROTHERAPY", Churchill Livingstone, Inc., New York, NY 1988

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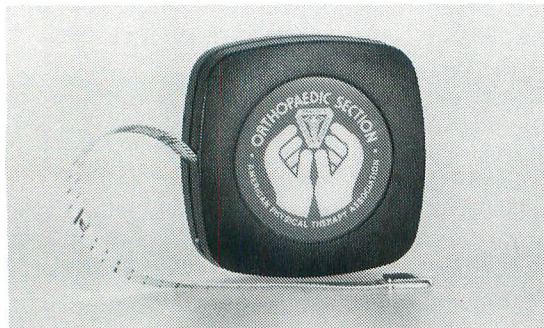
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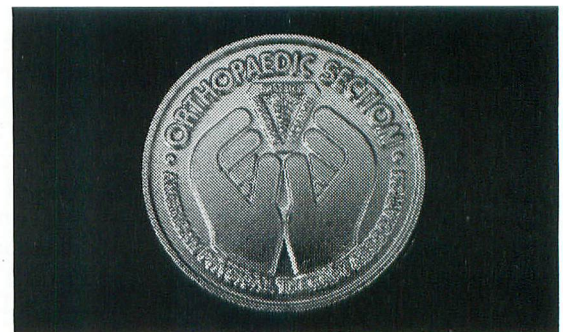
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SECTION NEWS

PUBLIC RELATIONS

RAFFLE

The first annual Section Raffle was held in Nashville during Conference. Over 400 tickets were sold, and the winning ticket was held by our own Annette Iglarsh. Congratulations Annette. The proceeds will go into the general fund. Monies collected from future raffles will be targeted for special projects.

SECTION ANNIVERSARY

This year marks the 15th anniversary of the Section. The January issue of *Orthopaedic Practice* will provide a historical perspective, including interviews with past presidents.

BACK PAIN HOTLINE

The APTA recently sponsored a back pain hotline in conjunction with an article that was featured in *McCall's Magazine*. The toll free line was staffed by Orthopaedic Section members who fielded a total of 473 calls in five days.

CSM—1990

Meet us in New Orleans February 1-4, 1990 for the Combined Sections Meeting.

Jonathan Cooperman
Chair, Public Relations Committee

PRACTICE AFFAIRS

The following issues were decided in this year's HOD:

(RC 67-89) Geriatrics was approved as a new specialty area.

(RC 70-89 and RC 71-89) A resolution was passed to limit the use of the term "Board Certified Clinical Specialist" to only those people who have been certified in specialty areas by the American Board of Physical Therapy Specialties. A similar proposal to limit the use of the general term "Specialist" or "Specializing in" was, however, defeated.

(RC 78-89) A position statement on infectious diseases was adopted: "Physical

Therapy Practitioners have an obligation to provide quality, non-judgmental care, in accordance with their knowledge and expertise, to all persons who need it, regardless of the nature of the health problem. When providing care to individuals, the Association advocates that members be guided in their actions by guide-lines developed by the Centers for Disease Control and regulations set by the Occupational Safety and Health Administration."

The statement is intended to address issues and concerns about AIDS in physical therapy without necessarily singling out this specific contagious disease over any other.

(RC 83-89) A new policy was developed on the use of medications in physical therapy: "The scope of practice of physical therapy often requires the use of medications in the course of patient treatment, such as, in the administration of phonophoresis, iontophoresis, nebulized bronchodilators, and wound management. The application and storage of medications used in physical therapy is within the scope of physical therapy practice".

The policy on medications is intended to provide a formal statement by the APTA to be used in state legislative efforts.

Your comments about these actions of the House of Delegates or related issues are welcomed.

Garvice Nicholson, P.T.
Chairman, Practice Affairs

EDUCATION PROGRAM

The course held in Phoenix, Arizona in February, 1989 was a huge success with approximately 130 attendees. The feedback was constructive and very positive.

This summer's course will be held in Evanston (Chicago), Illinois on August 7-13, 1989. Registration is going well. There have been a few changes in faculty due to personal commitments of the faculty and course modifications in response to participant feedback.

Good luck to all who chose to sit for the specialization exam.

STUDY OF MOBILIZATION IN ACADEMIC PROGRAMS

A joint committee with the Section on Education has been established to study the status of instruction of mobilization in the physical therapy curricula in the U.S. Based on this information the committee hopes to make recommendations to establish minimal standards for entry level programs.

ORTHO ROUNDTABLES

The Executive Committee will establish guide-lines at the Fall meeting to create sub-specialties within the Orthopaedic Section. The Education Program Committee plans to provide these sub-specialties with specific programming and meeting time at CSM 1990. The first two sub-specialties have been designated as Industrial Physical Therapy and Podiatric Physical Therapy. Two additional sub-specialties will be determined at the Fall Executive Committee Meeting and announced at the CSM 1990 Business Meeting.

Z. Annette Iglarsh
Chair, Education Program

NEWLY ELECTED

Jan Richardson	
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Vice President	1989-1992
Helen Price	
Nominating Committee	1989-1992
Scott Hasson	
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Nominating Committee,	
Chair	1987-1990

ORTHOPAEDIC ITEMS

Public Relations and Audiovisual Materials

The items listed below are available for sale or rent through the Orthopaedic Section office:

- _____ Orthopaedic Physical Therapy logo pins. (Section Members \$10.00, non-members \$20.00)
- _____ Coffee mugs. \$5.50 each or \$20 per set of four (mugs can be sold in two of each style). Two styles: (indicate which style, "X")
 - _____ 1) Orthopaedic Physical Therapy definition, or
 - _____ 2) . . . the touch of class.
(non-members \$8.00 each or \$30 for a set of four)
- _____ Brass paper weight of Section logo. (Section members \$25 each, non-members \$40).
- _____ Tape measure with the Section logo (six foot cloth tape), (Section members \$4, non-members \$6) (\$3.75 each in quantities of ten (10) or more, for Section members only)
- _____ Orthopaedic Physical Therapy brochures (Section members \$20 per 100 brochures, non-Section APTA members \$35 per 100 brochures)
- _____ Orthopaedic Physical Therapy Terminology booklets (Section members \$2 each, non-members \$4) (\$1.75 each for orders of 20 or more, for Section members only)
- _____ Orthopaedic Physical Therapy competencies. (\$45 Section members, \$65 Educational Institutions, \$95 non-members)
- _____ Orthopaedic Section, APTA, Inc. membership certificate. This attractive, personalized certificate is now available. The cost is \$10 for the certificate. Subsequent yearly update stickers will be available at a cost of \$2 each. (Not available to non-Section members.) Please **print** below exactly how you wish your name to appear.
- _____ Prints of *Bulletin* covers (9 $\frac{3}{4}$ " x 10") Section members \$15 each or \$100 for the set of nine. (non-Section members \$25 each or \$150 for the set of nine)
- _____ Display booths (\$50.00 per use plus return shipping). The Section has recently purchased two new, easy to use, table-top model booths.
- _____ Orthopaedic Physical Therapy Slide/Tape Program (Section members \$25.00 per use plus return shipping, purchase price \$120.00). Also available in $\frac{1}{2}$ " VHS video format. (non-Section members \$50 per use plus return shipping, not available for sale to non-members)
- _____ 10-Year Cumulative Index of *The Journal of Orthopaedic and Sports Physical Therapy*. (Section Members \$2.50, non-Section Members \$5.00)

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(6/89)

YOUR SECTION OFFICE

Andy Servais, photographer

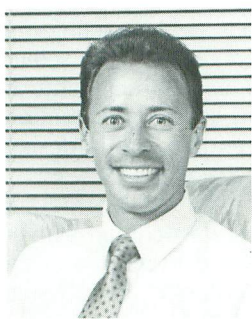
The Orthopaedic Section, your section, now is housed in 2,500 square feet of office space in La Crosse, Wisconsin. The space which was occupied one year ago allows the staff ample room for office function, publications, storage, mailing and conference space for the present time and for a few years into the future.

The modern space is in a professional building located in the downtown area of La Crosse which is located on the eastern edge of the Mississippi River with a population of 50,000.

The staff which serves the members is divided into two components. The section staff is composed of the administrative director, administrative assistant and membership secretary. The publications staff is the editor, managing editor and *Journal* secretary/advertising director. The staffs work well together to provide members with member services and administration of the section.

Each member of the staff is highlighted with a small biography and photo to let you become acquainted with the person to whom you may be speaking when you call.

David W. Thomack Administrative Director



As the Administrative Director of the Section, David is responsible for the overall operation of the Section at the direction of the Executive Committee. Specific

areas of responsibility include management of the Section office, financial administration, consulting with the Executive Committee, meeting management, legal affairs and, most importantly, membership activities.

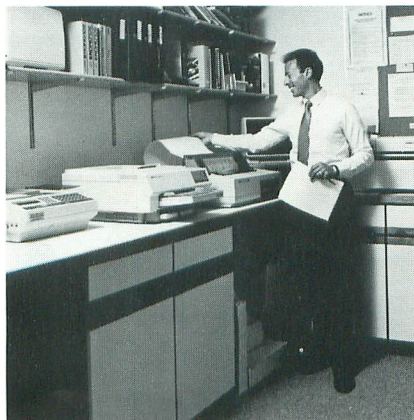
Essentially, the Administrative Director serves as the chief executive officer of the Section, who recommends and participates in the formulation of new policies and makes decisions within existing



Section Office, Suite 103, King on 5th Building.



Theresa ready to input manuscript tracking information into the computer.



Dave Thomack in Section's computer room.

policies as approved by the Executive Committee. He coordinates all activities, staff, and programs of the Section to assure that the objectives are attained, plans fulfilled and members' needs met.

David is beginning his fourth year with the Orthopaedic Section. These initial years have seen the Section experience significant growth in membership, size of budget, and overall general activity. David came to the Section with degrees in Music, German, and Library Science. His work experiences include a broad spectrum of interests. Prior to working for the section David was a staff reference librarian for three years. Additionally, he has extensive experience (fourteen years) in artist (music) management including publishing and recording projects.

David's interests include the fine arts, running & aerobics, historic preservation, culinary exploration, gardening, genealogy and travel.

Terry Pericak Administrative Assistant



As Administrative Assistant of the Orthopaedic Section, APTA, Inc., Terri is responsible for:

- Coordinating all educational courses sponsored by the Section.
 - Updating the Policy and Procedures Manual, Section Bylaws, Strategic Plan, and Leadership Training Manual as necessary.
 - Compiling and distributing information for the Section Meeting Notebooks before CSM, Annual Conference, and the Fall Executive Committee Meeting.
 - Overseeing the Membership Services Secretary position.
 - Managing all office procedures during the Administrative Director's absence.
- Terri obtained a Master's degree in Management from Cardinal Stritch Col-

lege, Milwaukee, Wisconsin, in 1986. Her undergraduate degree is in Natural Resources, with specializations in Soil Science and Agricultural Journalism, from the University of Wisconsin-Madison, in 1979.

In addition to her formal education, Terri has taken some supervisory courses through the Department of Employee Relations. Terri used this training when she took on the added responsibility of recruiting, interviewing, hiring, training, and supervising five half-time drafters in her previous position with the Department of Natural Resources.

Terri is married and lives with her husband, and their two dogs, in the country. They enjoy gardening, biking, hiking, boating, and skiing (both water and snow).

**Patti Sherry
Membership Secretary**



Patti joined the Orthopaedic Section, APTA, Inc. staff in December 1988. She worked at the Section office through Manpower Temporary Services (where she received training on the WordPerfect 5.0 Word Processing Program) last summer, inputting the Orthopaedic Physical Therapy Specialty Competency Examination questions and a book for Jim. She moved to La Crosse in May 1988, from Denver, Colorado where she worked as a Medical Secretary at The Children's Hospital (TCH). She received training on the WordPerfect 4.2 Word Processing Program and attended a Medical Terminology Course at TCH. She also attended a Business English and a Business Communications Course at the T.H. Pickens Technical Center in Aurora, Colorado. Patti is originally from Green Bay, Wisconsin where she graduated from Southwest High School and attended Northeast Wisconsin Technical Institute to become a Ward Clerk. She was employed at San Luis Manor in Green Bay for three years as a Ward Clerk/Secretary. As Membership Secretary of the Orthopaedic Section, APTA, Inc., Patti is responsible for the following:

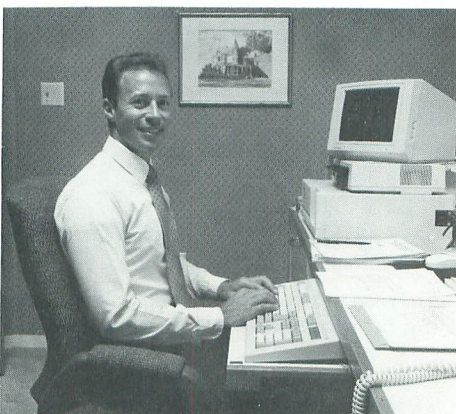
- Manning the 800 number assisting the members.
- Processing promotional item orders for the members.
- Tracking promotional item inventory in Multiplan.



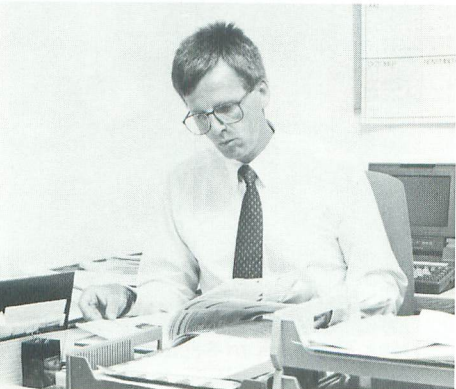
A staff meeting in the Section Conference/Work area.



Terri working on the Section's Strategic Planning.



Dave working with the Section's computer system in his office.

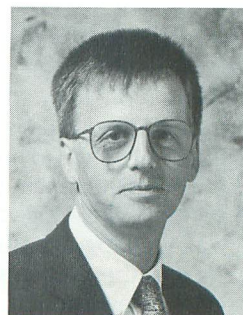


Jim proofing Orthopaedic Practice.

- Mailing new member packets, reinstate letters, and drop member letters.
- Generating mailing labels of the members of the Orthopaedic and Sports sections.
- Keeping the membership database updated.
- Bulk mailings of *Orthopaedic Physical Therapy Practice*, election ballots, and competencies brochure.

Patti and her husband along with their two cats, live in a country subdivision of La Crosse. They enjoy and are learning the ropes of vegetable gardening from the Pericaks. Other enjoyments are boating, camping, skiing, and Knot's Landing!

**Jim Gould
Director of Publications**



As head of publications for the Orthopaedic Section for the past 14 years, Jim serves as the Editor of *The Journal of Orthopaedic and Sports Physical Therapy* and Co-

Editor of *Orthopaedic Physical Therapy Practice*. Jim has also served as publisher of the Geriatric Section publication *Geritopics* instituting a major redesign of the publication during the year of the contract which was made between the Orthopaedic Section and the Geriatric Section. Jim's duties include ongoing monitoring of the publications undertaken by the sections and interacting with the publishers and printers. Jim selects the reviewers for each article and arbitrates author and reviewer interaction. Lately, Jim has been involved in designing *Orthopaedic Practice*.

Jim received two undergraduate degrees from Central Michigan University in chemistry and biology and the University of Kentucky in physical therapy. Jim practiced for three years in Michigan before returning to the University of Kentucky for his Master's degree. Jim is presently an associate professor of physical therapy at the University of Wisconsin-La Crosse and served as acting chairman this past semester.

Jim, his wife Deborah and daughter Kimberly live in La Crosse. In his leisure time Jim enjoys running (5 marathons so far), landscape gardening and baking.

Chris Saudek
Managing Editor



Chris Saudek is the Managing Editor of *The Journal of Orthopaedic and Sports Physical Therapy* as well as the Associate Editor of *Orthopaedics*. In addition, she is co-editor of *Orthopaedic Physical Therapy Practice*. Chris has been working with the *Journal* for over 5 years now. As Managing Editor she initially screens all the manuscripts for the proper format and general content and is responsible for "guiding" the manuscripts through their course as they go from initial screening to publication or rejection. She corresponds with the reviewers on the editorial board regarding articles, and with the authors regarding any revisions requested. Chris is also in frequent contact with the publishers of the *Journal* since each month she prepares articles to be sent out for publication and edits all the galleys and page proofs. As Associate Editor for *Orthopaedics* Chris has the added responsibility of reviewing all articles pertaining to Orthopaedics in detail and compiling the editorial board members' reviews on these articles.

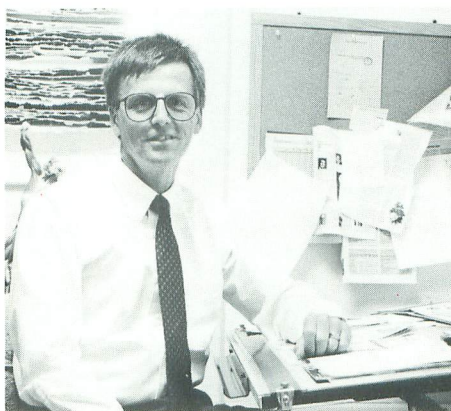
Chris obtained a master's degree in applied math and taught math at the University of Wisconsin-Parkside and La Crosse before returning to UW La Crosse to obtain a second degree in Physical Therapy. Her clinical experiences are primarily orthopaedics and geriatrics. She has also periodically lectured at the University in La Crosse in Biomechanics and Orthopaedics.

Chris has enjoyed a wide range of travels with four trips to India, two to Japan, two years in the Peace Corps in Zaire, and a summer in Togo with Crossroads Africa. Now with two daughters, one 4 years and one 4 months and a husband who is building an airplane, she plans to be close to home for awhile.

Among Chris' outside interests are yoga and therapeutic exercise, biking, and walking. She teaches three yoga classes each week at a studio she shares with another yoga teacher.



Patti responding to a member's request.



Jim at design area for *Orthopaedic Practice*.



Jim and Chris going over the layout for *Orthopaedic Physical Therapy Practice*.



Chris checking a manuscript for the *Journal of Orthopaedic and Sports Physical Therapy*.

Theresa Cieminski
JOSPT/Orthopaedic Section
Secretary Director of Advertising



As the *Journal* Secretary Theresa is responsible for: Management of the *Journal* Editor's Management System (JEMS) for tracking reviews of manuscripts and books to ensure

accuracy of information.

Processing of all manuscripts and books to be reviewed.

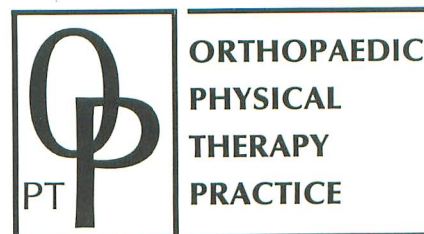
Assisting in coordination of publications (*Orthopaedic Practice*, *JOSPT*) data entry of materials, telecommunications, work with editors and printer to layout space and graphics of OP and Geritopics.

Advertising accounts for publications—deadlines, requirements, making up copy, billing, and inventory.

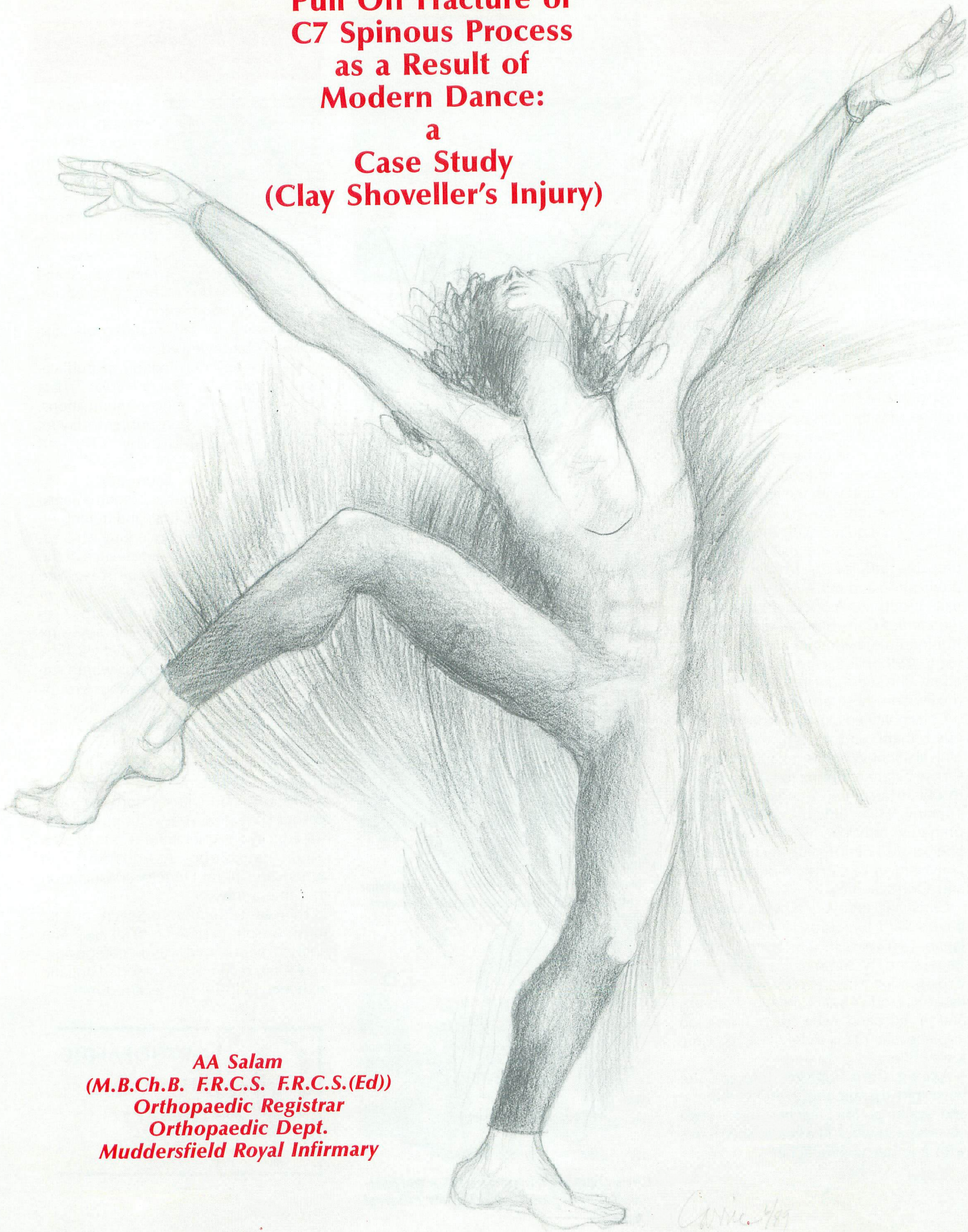
Theresa is currently working on a second degree in computer science at the University of Wisconsin-La Crosse. She received her undergraduate degree in vocal music education from Viterbo College in La Crosse in 1985. Theresa came to the Orthopaedic Section after teaching in the public school systems where she was a choral director of various groups and productions. While a teacher, Theresa familiarized her students with various computer programs.

In addition to her formal education, Theresa has attended a number of workshops and classes through Minnesota Education Association, Wisconsin Education Association Council, National Education Association and American Choral Directors Association to name a few.

Theresa continues to teach private music lessons to students of all ages. She enjoys performing, and composing. Traveling, reading, and assorted aquatic activities help fill her leisure time.



**Pull Off Fracture of
C7 Spinous Process
as a Result of
Modern Dance:
a
Case Study
(Clay Shoveller's Injury)**



**AA Salam
(M.B.Ch.B. F.R.C.S. F.R.C.S.(Ed))
Orthopaedic Registrar
Orthopaedic Dept.
Muddersfield Royal Infirmary**

Carine 4/89

ABSTRACT

Two cases of the Clay-Shoveller's fracture are presented as a result of modern dancing and cricket injuries. The management is described and the literature reviewed.

INTRODUCTION

Fracture of the spinous process of C7 or T1 can result from sudden muscular contraction causing an avulsion injury. Such a fracture was termed a Clay-Shoveller's injury since it was recognized as an occupational hazard. Other causes include direct trauma and industrial accidents.^{1,2} The fracture is stable and easily treated conservatively, but it must be carefully distinguished from a cervical dislocation with associated fracture.

There have been case reports as a result of football and weight-lifting injuries.^{3,4} Two further cases are reported, one occurring as a result of modern dance, and another as a result of cricket.

Case 1

AF, a 20 year old girl, presented with a sudden onset of pain in her neck after a session of modern dance. This involved a forward somersault-type of movement. There was no direct trauma, but she felt a 'crack' in her neck which stopped her from continuing her dance lesson.

On examination, she was tender over the spinous processes of C6 and C7. There was full range of movement in rotation, but limited flexion and extension. There were no signs of any neurological deficit.

X-rays showed that she had sustained an avulsion fracture of the C7 spinous process.

She was treated with a cervical collar, analgesia and physiotherapy. Within two months she was asymptomatic.

Case 2

DP, a thirty-three year old man presented with a four week history of lower cervical pain. He reported a sharp pain as 'something gave way' while he was hitting the ball as a batsman. He stopped playing, but since his symptoms were mild, he did not go to the hospital. However, over the following weeks, he developed progressive neck pain.

On examination, he was tender over the lower cervical spine, again with restricted movements but normal neurology.

X-rays showed an old fracture of the C7 and T1 spinous processes, probably sustained during his game one month earlier. (Figure 2)

Following the use of a collar and physiotherapy, he became asymptomatic within six weeks. Both patients have regained their sporting activities.

DISCUSSION

Avulsion fractures of the lower cervical spinous process and/or the upper thoracic vertebrae are not common.

The fracture was first described by McKellar Hall in 1938 and termed the Clay-Shoveller's injury from its predominance in patients involved with digging.²

There have been few cases reported in the English literature occurring as a result of sports injuries. One case report occurred following weight-lifting, and another from a football injury^{3,4} but there were no such references in the Report of Olympic Weight Lifting Injuries.⁵ We were unable to find any reports of this fracture as a result of cricket injuries.

The trapezius, rhomboid minor and serratus posterior superior muscles all attach to the lower cervical spinous processes and insert into the scapula and posterior ribs. Acting together, they raise the scapula towards the spine and elevate the ribs, which is necessary to complete neck extension. Therefore, they are in the perfect position to avulse the spinous process by contraction.

These avulsion fractures are stable but it is necessary to differentiate them from cervical dislocations with associated fractures, and flexion-extension views are often helpful.

Surgical intervention is not necessary in acute cases and the treatment of choice is conservative by analgesics, cervical collar and physiotherapy.⁵

References

- 1) Hakkal-Halapag HH: Clay shoveller's fracture. *Am Fam Physician*, 8:104-106, 1973.
- 2) Herrick RD: Clay-shoveller's fracture in power lifting; a case report. *Am J Sports Med*, 9:29-30, 1981.
- 3) Kulund DN, Dewey FB, Brubaker CR, et al: Olympic weight-lifting injuries. *Physician Sportsmed*, 6:111-119, 1978.
- 4) McKellar Hall RD: Clay-shoveller's fracture. *J Bone Joint Surg*, 12:63-75, 1940.
- 5) Nuber GW: Clay-shoveller's fracture from football. *Am J Sports Medicine*, 15(2):182-183, 1976.



Figure 1; Cervical Spine X-ray illustrating a fracture of the C7 spinous process.



Figure 2; Cervical Spine X-ray illustrating an old fracture of the C7 and T1 spinous processes.

MEETING MINUTES

**ORTHOPAEDIC SECTION,
APTA, INC.
ANNUAL CONFERENCE
JUNE 11, 1989
OPRYLAND HOTEL
NASHVILLE, TENNESSEE**

SECTION BUSINESS MEETING MINUTES

CALL TO ORDER—9:06 A.M.

WELCOME

PRESIDENT'S REPORT

A. Approve Section Business Meeting Minutes —MOTION— It was moved and seconded to approve the CSM 1989 Orthopaedic Section Business Meeting Minutes as published in *Orthopaedic Practice* —PASSED—

B. Review and Accept Agenda. —MOTION— It was moved and seconded to accept the agenda as printed —PASSED—

EXECUTIVE COMMITTEE REPORTS

Vice-President—Duane Williams

Policies and Procedures Manual revisions— Duane Williams, Bill Fromherz and David Thomack met, prior to the APTA Leadership Seminar, to discuss updating and revising the Section's Policy and Procedures Manual. It was determined that a complete re-writing of the manual is necessary. A preliminary draft is to be completed by the Fall Executive Meeting.

APTA Leadership Seminar—Several of-ficers attended.

Strategic Planning Update— Duane is presently revising the description of the process of strategic planning, which is to be included in the Policy and Procedures Manual.

Leadership Training—At the Fall Executive Committee Meeting, the Executive Committee and Committee Chairs gather to discuss the Section's progress to date, conduct leadership training and finalize the next year's strategic plan. We are also looking at the feasibility of offering a home study/audio cassette course to assist members in

management and leadership. Duane will be presenting additional details at the Fall Executive Committee Meeting.

Treasurer—Bob Burles

The Section Balance sheet and income statement were published in the last issue of *Orthopaedic Practice*. For 1989, Section dues represent only 26% of our total income. We receive royalties and editorial allowances (from *The Journal*) representing 51% of our income. The Section has evolved to a point where our non-dues income is greater than our dues income. Income from registrations and exhibits was 17% of the total. Year-to-date we are already \$45,000 in the black.

Member-at-Large—Bill Fromherz

Bill Fromherz was unable to attend our meeting. There was no outstanding business to report.

Education Program Chair— Annette Iglarsh

Update on Forum Medicum — There were initial difficulties with the authors not meeting deadlines. At this point the original schedule applies for the remainder of the course. During the Fall Executive Meeting this course will be reviewed to determine if we will continue our contract with Forum Medicum or consider undertaking a project like this ourselves.

Additional Education — The Education Committee is looking for methods for the members to become better educated in their specialty areas without requiring them to attend continuing education courses. As more state licensing boards require continuing education, the cost of travel and related expenses results in the inability of some members to leave their work setting. Alternative educational systems need to be considered. This was the intent of the Forum Medicum project.

The Orthopaedic Section's 15th Anniversary — This meeting is our actual 15th anniversary. Because of scheduling problems the 15th anniversary celebration will be held at the Combined Sections Meeting in New Orleans on February 3, 1990. The Black Tie and Roses reception and 15th anniversary will be combined along with an Orthopaedic Minority Scholarship Fund Drive. This will consist of a sit-down dinner for up to 500 people including a nationally known keynote speaker and, hopefully, a nationally known entertainer. The membership will be in-

formed through *Orthopaedic Practice*. On this occasion our past-presidents will be recognized.

1st North American Orthopaedic Symposium, (with the Orthopaedic Division of the Canadian Physiotherapy Association) May 11-13, 1990, Ottawa, Ontario. Last Annual Conference in Las Vegas members of the Orthopaedic Section of the APTA met with Canadian counterparts, at which time it became evident that there were numerous similarities in the two groups, particularly from an educational standpoint and a practice view. There will be a meeting with the Canadian Physical Therapists every four years. The Canadians have offered to be the first hosts May 11-13, 1990 in Ottawa. Please watch for additional information.

Editor/Publications Chair— Jim Gould

JOSPT Contract—Requests for proposals (RFP's) for *The Journal of Orthopaedic and Sports Physical Therapy* were sent out to major publishers this spring; four proposals were returned. The APTA declined to bid on *The Journal* at this time citing that they were not yet prepared to take on a task of this magnitude. The bids were processed via blind review by a task force made up of Orthopaedic and Sports Section Executive Committee members. The proposals were, therefore, judged upon their merits rather than the companies which had submitted them. The task force members agreed upon one company which was The Williams and Wilkins Company, our current publisher. A three year contract will be signed here in Nashville. At the end of three years there will be another RFP.

Journal Survey. The Orthopaedics and Sports Executive Committees requested that a survey be sent out to the members. Of 28,000 issues mailed containing the survey there were 70 responses. The Editorial Board will be reviewing those. The survey queried whether *The Journal* was becoming too research oriented or whether we need more clinical aspects. The general responses were mixed. A summary report will appear in *The Journal*.

Orthopaedic Practice Advertising Contract—In January a new publication was initiated, *Orthopaedic Practice*, formerly *The Bulletin of the Orthopaedic Section*. This is a clinically oriented publication with unrefereed articles. The format will be magazine-like, having more graphics and photos. Comments

will be appreciated. In conjunction, the Executive Committee has authorized an advertising contract with Williams and Wilkins to solicit advertising for this publication. Printing and mailing will still be done in La Crosse. The ultimate goal will be a four-color publication.

10 Year Cumulative Index—A 10 Year Cumulative Index for *The Journal* is complete. It will be on sale to members for \$2.50. The June 1989 issue completes 10 years of JOSPT.

Administrative Director— David Thomack

David announced that for the first time in the three years that the Section office has been in La Crosse, it will not be moving. Last year's move afforded us the space necessary to prevent another move for some time.

The Section office continues to assist the many and varied projects which the officers and committee chairs are conducting. Some of those projects are: complete revision of the Section Policies & Procedures Manual, assisting with the "Review for Advanced Orthopaedic Physical Therapy Competencies" course, and membership maintenance.

The most dominant project has been attempting to maintain accurate membership records. As of January 1, 1989, APTA brought their new in-house computer system on-line for membership services. However no computerized membership update has been received since December 1988.

Specialization. The Section office, along with Meeting Planners, Inc., is coordinating the "Review for Advanced Orthopaedic Physical Therapy Competencies." David was in Phoenix this February and will be in Chicago this August for the next course. Kathy Johnson, of Meeting Planners, Inc., is currently conducting a site visit at Lake Tahoe for next February's course. Additionally, she just returned from a site visit to Cancun as another consideration. We are continually seeking members who are interested in serving as either a Committee Chair or as a member of a Committee. If you are interested please let us know.

COMMITTEE REPORTS

Nominating Committee— David Apts/Anne Campbell

Election Results—The Nominating Committee wishes to thank all who allowed themselves to stand as candidates for the positions available. Without members who submit their

names there would not be an organization. A total of 627 ballots were returned, 570 valid and 57 invalid. Jan Richardson has been re-elected President. Duane Williams has been re-elected Vice-President. Helen Price received the largest number of votes to become a member of the Nominating Committee. Scott Hasson, the next top vote receiver was named to fill the vacancy left by the passing of Steven Rose.

Research Committee— Joe Threlkeld

The Research Committee has entered its busiest time of the year. We have put out two calls in *The Journal*. One call is for platform and poster presentations to be presented at the Combined Sections Meeting, 1990 in New Orleans. The theme of this CSM is Research. The other call is for nominations to the Steven J. Rose Research article award. Please refer to *The Journal* for additional information.

Research Retreat. The Section on Research is sponsoring a research retreat targeted for August of 1990. The thought is to have a group of experienced researchers, neophytes, and graduate students come together as a critical mass. Please contact Joe Threlkeld if you have any specific topics you would like to suggest for this particular forum.

Public Relations— Jonathan Cooperman

The Practice Affairs Committee has continued to respond to correspondence from APTA Government Affairs relative to referral for profit and the Stark legislation amendment. We shared with APTA our survey information which was sent to chiropractic programs about numbers of contact hours on manipulation.

Practice Affairs— Garvice Nicholson

In March the APTA sponsored a back pain hotline in conjunction with an article in *McCall's Magazine*. The Orthopaedic Section was instrumental in staffing that phone line and providing guidelines for answering the questions callers generated. Display Booth. This conference the Orthopaedic Section booth is in the registration area. There are some special giveaways and the Section is raffling off a small two-inch color television. There are also the Section promotional items there for sale.

A future issue of *Orthopaedic Practice* will be devoted to the Section's 15 year anniversary and will provide a formal

written historical perspective on the Section. The Public Relations Committee thanked the past-presidents who contributed information regarding the Section during their term of office.

Specialization—Joe McCulloch

Orthopaedic Specialty Council Update—The first exam has been given. The process is confidential so numbers regarding how many sat for the exam and how many failed, etc. cannot be made public. The applicant pool was the largest ever to sit for a specialization exam. The council worked many days in Philadelphia at the new APTA testing service, ASI and put together three different exams. This will insure having exams for the next few years without having to return to the testing agency. Successful examinees will be notified in October of this year, with formal recognition at CSM 1990.

Orthopaedic Competency Examination Date. The next exam date will be January 31, 1990 in New Orleans. Applications to sit for the exam are due September 1, 1989. The Minimal Criteria and Application Packet are available from Patti Cox at APTA Headquarters.

Past Item Writers were thanked for participating in the previous item. Many comments on the exam have been received and many are appreciative of the work done. Much of the work was previously done and the present committee just brought it together to complete this first exam.

A Practical Stem to the exam. The question was raised regarding the possibility of a practical exam. The ABPTS is not opposed to doing practicals but we have to get the process outlined and demonstrate validity. The Council is working on that.

Beginning in 1990, all specialization exams will be given once per year at the Combined Sections Meeting.

OLD BUSINESS

Update on the Orthopaedic Section Challenge for Minority Scholarships— Jan Richardson

Last June in Las Vegas, the Orthopaedic Challenge was issued to the Minority Affairs office and the Foundation for Physical Therapy. This challenge stated that within a year's time these two groups were to raise \$25,000 of new money for the Minority Scholarship Fund through the Foundation for Physical Therapy. If this challenge was met, the Orthopaedic Section would donate our

pledged \$1 per member donation (\$10,000) to the Minority Scholarship Fund. The Section initiated the challenge with a check for \$1500. The goal of \$25,000 was reached this spring, with a check from the Section on Administration putting the fund over \$25,000. In May, a fund raising dinner was held in Chicago which generated another \$7,000. The \$10,000 check will be presented at the Foundation for Physical Therapy Banquet here in Nashville.

Two years ago the Orthopaedic Section was the first Section to develop an endowment through the PT Foundation. At that time the Section gave a half million dollar endowment in the name of Steven J. Rose for research. The Orthopaedic Section, as it has done historically since its inception, has attempted to take a leadership role, not only in the area of Orthopaedics but also in education, research, and practice. Other ideas as to how we can continue to broaden our efforts and our activities are welcome.

Other - CSM 1989 in Hawaii.

An overall lower meeting attendance significantly impacted our revenues for this meeting. The Program Committee has discouraged Headquarters Staff from seeking expensive vacation-type locations because of the low meeting attendance. Staff are investigating those areas of the country which we have not gone to before for CSM, such as the winter belt. There are many cities which have developed tunnels, etc. making it easier to get around in the winter. Some are also offering hotel rates which are about half those in other cities. The House of Delegates will be dealing with the rotation of meeting sites which will allow staff to seek more competitive bids and plan farther ahead. Because of size, the Combined Sections Meeting now requires that the facility be a convention center.

Black Tie and Roses was a huge success. Additional members are gained from such an effort.

The two individuals nominated from the Section as Lucy Blair Award candidates were winners. They are Rod Schlegel from Maryland and Bob Richardson from Pennsylvania.

NEW BUSINESS

Recommendations for the establishment of distinguished service and teaching awards—
Duane Williams

The Section Executive Committee is

considering, in addition to the Research Award already established, awards for Distinguished Service and Teaching. These awards will be discussed at the Post Executive Committee Meeting. We will keep you informed.

A new Chair for the Awards Committee as well as three or four members are needed. Interested members should contact Duane.

Policy on Endorsements— Jim Gould

At the Executive Committee Meeting Jim introduced and the Executive Committee passed a policy on endorsements by the Section. The policy states that any person requesting endorsement by the Section must supply the description in total to the Section office six weeks prior to the next scheduled Executive Committee meeting. The Executive Committee will consider the submission and determine if they wish to consider the endorsement. (The Orthopaedic Section has not done any product endorsing to date.) This policy was developed after observing what some other APTA components have experienced.

Course participants— Annette Iglarsh

Several of the national speakers in orthopaedics have approached the Section regarding concerns about non-physical therapists attempting to take advanced clinical courses given by physical therapists. These speakers are looking to the Section for support of a possible policy statement which would assist them in denying the attendance of non-physical therapists at advanced courses specifically targeted to physical therapy.

Information Services Report— Bob Burles (Dennis Gyllenhaal)

In this age of information, the Orthopaedic Section continues to seek out what is most beneficial in serving its membership. Dennis Gyllenhaal from Kansas City, Missouri, has some unique ideas on using our computer area networks along with the Orthopaedic Section to develop a service, based on real time or on-line time, which would allow individuals to dial in with personal computers and retrieve information. This might consist of a placement service or a tutorial service for testing knowledge and skills in preparation for the specialization exam. Dennis will be further exploring these possibilities with the Executive Committee. Members having questions or comments should contact

Bob Burles or the Section office.

Other

CSM 1990 will be in New Orleans. The highlight for educational programs will be the Orthopaedic Roundtable discussions, with the goal of providing a forum for subspecialties within Orthopaedics. Two hours of concurrent educational programming are planned and an hour of Roundtable or open discussion to establish a protocol for fostering these groups. A proposal to the Executive Committee to establish a policy on the development of subspecialties within orthopaedics is initially considering four subspecialties; industrial physical therapy, podiatric physical therapy, TMJ and head and neck pain physical therapy, and another category to be announced.

There will be a three hour research presentation organized by Joe Threlkeld and the Research Committee. - The advanced competencies review course will be held in Chicago, August 7-13, 1989. There were over 100 in attendance at the last course.

Annual Conference in 1990 will be in Anaheim, CA. at the Anaheim Marriott.

Drawing for Competency Manual

Dennis Gyllenhaal won the drawing for the Competencies manual.

Adjournment—11:08 A.M.



**ORTHOPAEDIC
PHYSICAL
THERAPY
PRACTICE**

1989 MASTER CALENDAR

ORTHOPAEDIC SECTION APTA

SEPTEMBER

- 1 DEADLINE: Application to sit for 1990 Orthopaedic Specialty Exam due to Patti Cox, ABPTS.
- 1 DEADLINE: All preliminary 1990 Strategic Planning Programs due to Section office.
- 4 Labor Day—APTA Headquarters and Orthopaedic Section office closed
- 4 DEADLINE: Nominations for the Steven J. Rose Research Award due to Section office.
- 10 DEADLINE: Editorial materials for the November issue of *Orthopaedic Practice* due to Section office.
- 15 DEADLINE: Foundation Research Grant Application due to APTA Headquarters.
- 18 JOSPT mailing date, October issue.

OCTOBER

- 1-7 NATIONAL PHYSICAL THERAPY WEEK—Hands-On Health.
- 11 DEADLINE: Advertising for November *Orthopaedic Practice* due to Section office
- 12-15 Fall Executive Committee Meeting—Section office, La Crosse, WI.
- 17 JOSPT mailing date, November issue.
- 20-22 WORKSHOP: Professional Issues Workshop—Savannah, GA.

NOVEMBER

- 1 DEADLINE: Nominations for APTA BoD and Nominating Committee—APTA Headquarters.
- 6 DEADLINE: Annual Conference Research/Theory/Special interest paper abstracts due to Research Committee Chair.
- 10 DEADLINE: Editorial materials for January, 1990 issue of *Orthopaedic Practice* due to Section office.
- 23-24 Thanksgiving—APTA Headquarters and Section office closed.

DECEMBER

- 1 DEADLINE: Minority Achievement Award, Minority Initiatives Award, and Chapter Award for Minority Enhancement Applications due to APTA Headquarters.
- 1 DEADLINE: Marian Williams and Baethke-Carlin Award Nominations due to APTA Headquarters.
- 1 DEADLINE: Mary McMillan Scholarship Award Nominations due to APTA Headquarters.
- 1 DEADLINE: McMillan Lecture Award Nominations due to APTA Headquarters.
- 1 DEADLINE: Lucy Blair Service Award Nominations due to APTA Headquarters.
- 1 DEADLINE: 1990 Honorary Membership and Worthingham Fellows Award due to APTA Headquarters.
- 1 DEADLINE: 1991 Annual Conference Program input for Conference Program Committee due to APTA Headquarters.
- 1 DEADLINE: Excellence in Clinical Teaching Award due to APTA Headquarters.
- 16 DEADLINE: Advertising for January, 1990, *Orthopaedic Practice* due to Section office.
- 18 JOSPT mailing date, January, 1990, issue.
- 25-26 Christmas—APTA Headquarters and Section office closed.

JANUARY (1990)

- 31 Orthopaedic Specialty Exam, New Orleans, LA.

FEBRUARY (1990)

- 1 CSM, New Orleans, LA.

MARCH (1990)

- Tentative Date for 1990 Orthopaedic Physical Therapy Competencies Course is March 4-10.

MAY (1990)

- 12-13 First North American Orthopaedic Physical Therapy Symposium (with Canada) Ottawa, Canada

**RESEARCH COMMITTEE OF THE ORTHOPAEDIC SECTION
APTA, INC**

CALL FOR PARTICIPANTS

**RESEARCH PLATFORM AND POSTER PRESENTATIONS
APTA COMBINED SECTIONS MEETING
NEW ORLEANS, LOUISIANA, FEBRUARY 1-4, 1990**

Persons wishing to make platform or poster presentations of research dealing with Orthopaedic topics (basic science, applied sciences and clinical sciences) are invited to submit abstracts for consideration.

LIMITATIONS:

Presenter must be a current member in good standing of the Orthopaedic Section of the APTA, Inc. or must be sponsored by a current member in good standing of the Orthopaedic Section.

Each Prospective presenter may submit no more than two abstracts. These abstracts must contain original material and may not be presented at any national meeting or published prior to the 1990 CSM.

SUBMISSION REQUIREMENTS:

Deadline for Receipt of Abstract: Abstracts must be received at the below address before 4:30 pm Eastern Standard Time on September 4, 1989. Address abstracts to:

Research Committee
Orthopaedic Section, APTA, Inc.
c/o A. Joseph Threlkeld, P.T., Ph.D.
University of Kentucky
Division of Physical Therapy
UKMC Annex 1, Room 4
Lexington, KY 40536-0079

Format for Abstracts: The abstract must be typed double-spaced on one side of a single 8½" x 11" sheet of paper. The type must be clear, dark, elite- or pica-size and produced on an electric typewriter, letter quality printer (impact or laser) or a high quality dot matrix printer with near-letter-quality type. The abstract must use standard abbreviations and should not contain subheadings, figures, tables of data or information that would identify the authors or the institution. Margins for the BODY of the text must be 1" on all sides.

The identifying information must be single spaced in the 1" top margin and include 1) the title in all capitalized letters; 2) the names of the author(s) with the presenter's name underlined; 3) the place where the work was done; 4) the address of the presenter enclosed in parentheses; 5) acknowledgement of any financial support for the work being presented.

In the lower left margin, type single-spaced 1) the APTA membership number of the presenter (or name and membership number of APTA member/sponsor if the presenter is not an Orthopaedic Section member); 2) the telephone number and area code of the presenter.

In the Lower right margin, indicate the preferred mode of presentation (Platform or Poster).

Copies: Include one original and one copy of the complete abstract with all the identifying information as outlined above.

Include 10 copies of the abstract with only the title and the body of the text (eliminate all identifying information except the title).

CONTENT:

All abstracts must be reports of RESEARCH and must include in order 1) purpose or hypothesis of the study; 2) number and kind of subjects; 3) materials and methods; 4) type(s) of data analysis used; 5) summary data; 6) numerical results of statistical test(s) where appropriate; 7) conclusion; 8) clinical relevance.

EVALUATION AND SELECTION:

All abstracts are reviewed by members of the research committee without knowledge of the identity of the authors. Abstracts are selected on the basis of compliance with the content requirements, logical arrangement, intelligibility and the degree to which the information would be of benefit to the members of the Orthopaedic Section. All selections are final.

PRACTICE SPOTLIGHT

COLORADO ATHLETIC CONDITIONING CLINIC

By: Dan Sims, P.T.

The philosophy behind CACC is one of involvement— involvement with our patients and their families, the area physicians and their staffs, the community in which our clinic is located and in our professional organizations. The Colorado Athletic Conditioning Clinic, P.C. was initiated in 1985, by Carol Kishiyama, P.T., A.T.C., in order to fulfill the need of an outpatient physical therapy clinic committed to a long term involvement in the city of Aurora, Colorado. This philosophy of involvement extends far beyond the clinic setting for both Carol and her staff.

When first organized, CACC saw the Aurora area high schools in need of licensed health professionals to be on site during organized sporting events and practices. The certified athletic training staff and physical therapy staff at CACC are now directly involved in the high school athletic programs. In addition, our staff provides coaches and parents with injury prevention clinics, presents lectures to area booster clubs, and offers a variety of pre-season athletic screenings for specific sporting events. Our largest commitment is the annual pre-season athletic screenings offered to all the students in the Aurora public high school and middle schools. Promoting wellness and health does not stop with the physical therapy and athletic training staff. Rosemary, the office manager directs a twice-a-week aerobic class in the clinic for all persons located in the medical complex. When appropriate, some patients attend these sessions in the later stages of their rehabilitation.

The primary goal of the physical therapy staff at CACC is to deliver the most up to date and individualized quality care possible. In order to accomplish this goal, the staff is continually pursuing educational programs throughout the country.

Furthermore, each member is actively involved with affiliating professional organizations such as the American Physical Therapy Association and the National Athletic Trainers Association, both on the state and national levels. Each staff member is also involved in different areas of special interest. Carol is presently heading the formation of a preferred provider organization for the private practice physical therapists in Colorado. She is also a member of the National Committee for the Advancement of Clinical and Corporate Athletic Trainers. Dan is involved in the Colorado Research Committee and is continuing to publish clinical research in the related journals. Jeannie has been involved with organizing the public school pre-season athletic screenings for the past two years. She also directs a student training program at Hinkley High School.

The future plans for CACC are many, but promoting clinical growth through involvement is utmost. To do so the staff will

continue to strive for more educational involvement in the community and public schools on injury awareness, prevention and rehabilitation, work closely with the area medical community in promoting the physical therapy profession and increase certified athletic training involvement at the secondary school level.

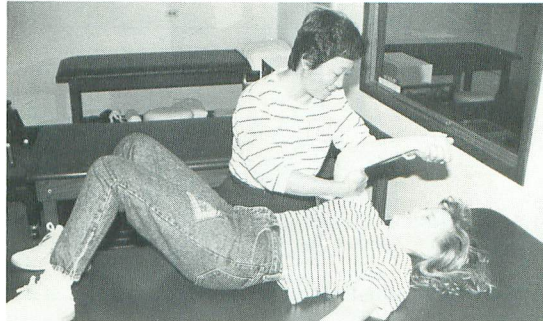


Fig. 1: Carol Kishiyama, P.T., A.T.C., involved in clinical care.



Fig. 2: Jeannie Markey, M.S., A.T.C., is very involved with the local high school athletics programs.



Fig. 3: Rosemary Williams, taking a break from the rigors of the front office to lead an afternoon aerobics class for the medical complex office staff members.

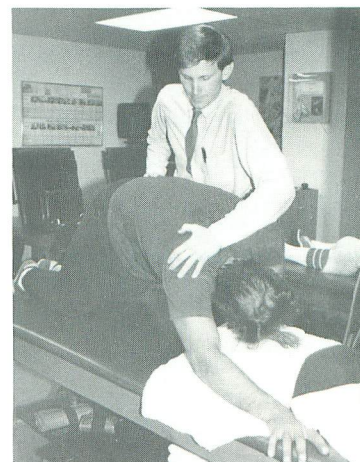


Fig. 4: Dan Sims involved in patient care at the clinic.

Referral For Profit

In order to gain as much information as possible regarding referral for profit, members of the Orthopaedic Section are requested to complete the following questionnaire. Please feel free to copy the format and have colleagues (who may not be members of the Section) submit their input also. It is essential that adequate, documented data be collected to support our position.

Name: _____

Address: _____

Phone: (Daytime) (_____) _____ (Evening) (_____) _____

Population:

City (1,000,000+)	_____	Small City (50,000+)	_____
Large Metropolitan Area (500,000+)	_____	Town (up to 50,000)	_____
Metropolitan Area (100,000+)	_____		

Are you aware of referral for profit situations in your area? _____

Type of referral for profit: (If more than 1, indicate %)

_____ Joint Ventures	_____ Totally owned by referral source
_____ POPTS	_____ Other (indicate): _____

Do you see referral for profit situations increasing? _____

Have you (your practice situation) been affected by the proliferation of referral for profit? _____

If so, how? _____

Have you been approached by a referral source to participate in a referral for profit situation? _____

Would you be willing to go on record and allow your name to be used when this survey is completed? Yes _____ No _____

Remarks: (Please feel free to expound with any facts and/or opinions you feel may be helpful.) _____

Please send responses to: Donald L. Hiltz, P.T., 601 South 4th Street, Gadsden, AL 35901 (205) 549-0033



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- Diane Lee, MCPA, British Columbia, Canada
- Susan Mercer, M.Sc., Pennsylvania, U.S.A.
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CLINICAL ANATOMY of the
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COURSE:**

ASSESSMENT and TREATMENT
of the UPPER CERVICAL SPINE
by Cliff Fowler and Erl Pettman
May 14, 15 & 16, 1990

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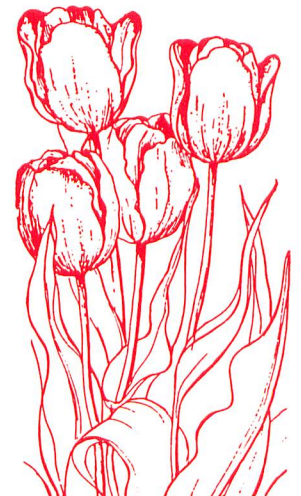
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strategy

C'MON LETS TWIST

by Christine Saudek

Do you remember the song by Chubby Checker with the words "let's twist again like we did last summer"? And do you have any patients who have expressed this? Activities from vacuuming to bending over at the breakfast table to pick up the piece of toast one of the kids just dropped on the floor require twisting



Figure 1: Supine Relaxing Twist

movements. In addition, all sports require rotational movements of the spine. These activities frequently result in muscular strains or possibly sprains of smaller structures in the back due to inadequate range of motion or strength. And when that happens, the patient is often told to rest, to be sure not to twist the spine, and by all means to avoid all flexion and rotational movements.

When rehabilitating a patient who has back pain, as therapists we must remember that we are expected to help our patients regain functional movement. Would someone who could not move out of the cardinal planes be very functional?

Besides that what if they want to play any racquet sports or golf?

Farfan has stated that the torsional injury is the most malignant injury of the spine.² Grieve believes a frequent cause of annular tearing is the rotational bending stress.³ And historically rotation has been discouraged because of excessive forces on the fibers of the intervertebral disc. Rotational torsion does affect the fibrous laminae in that their attachments are drawn apart. This is particularly true when the force is a combination of flexion and rotation. So if this has been the case in the initial injury, a patient may be told to rest and definitely not to rotate

for fear of aggravating the injury. However, in my experience controlled rotation is beneficial and absolutely necessary even in the very beginning phase of rehabilitating those many back injuries that come to physical therapy with the diagnosis of "low back strain".

Cummings et al.¹ summarize the healing process that takes place in soft tissue. Following sprains and strains, scar tissue is laid down according to the forces placed upon it. In the first 8 to 10 weeks following

injury to soft tissue, the collagen molecules in immature scar are held together by relatively weak hydrogen bonds. Immature scar can be stretched and modified by stresses put upon it. More mature scar, however, is much more resistant to the stresses placed on the collagen filaments and their bonds to the ground substance. Also, at about 4 weeks postinjury, myofibroblasts begin to emerge and pull the tissues adjacent to the scar closer and closer together. This drawing together of the scar tissue can result in a progressive loss of functional range of motion. So the direction of the stresses put on the scar tissue early on in rehabilitation will determine the range of motion available following rehabilitation.

Controlled and judiciously administered rotational exercises are beneficial in rehabilitating most back injuries. They are important for proper remodeling of deep scar tissue and for preventing further injury. In addition to flexion and extension



Figure 2: Therapist Assisted Supine Relaxing Twist

strengthening and flexibility exercises, rotational movements as described in the exercises below can be extremely effective in back rehabilitation. Although only rotation exercises are discussed here, the

reader is referred to a previous article in *The Journal of Orthopaedic and Sports Physical Therapy* for a complete description of other stretching and strengthening exercises for the back⁴. The use and progression must ultimately be determined by the therapist through careful monitoring of the signs and symptoms.

I begin most back patients with the supine relaxing twist (Figure 1). The purpose of this exercise is primarily for relaxation of the low back musculature and for mild mobilization of the spinal segments. In my experience, this seldom causes any discomfort in "low back strain" cases. The patient lies supine with the knees bent and keeping the knees together and the shoulders on the surface, rotates the knees alternately to each side

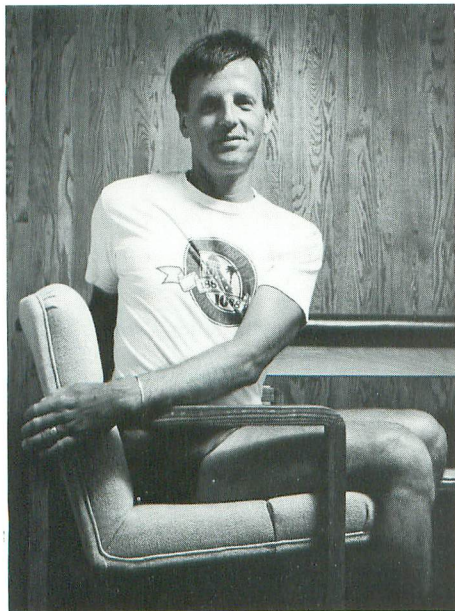


Figure 5: 9 to 5 Twist

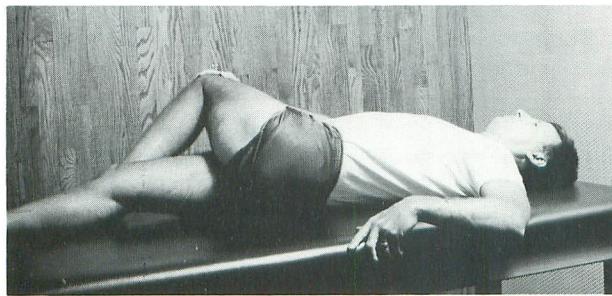


Figure 3: Modification of Supine Relaxing Twist

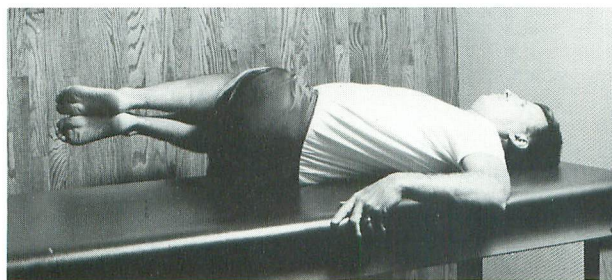


Figure 4: Strengthening Supine Twist

within the pain-free range. This exercise is generally done rhythmically but the stretch can also be maintained for a prolonged period and can be done with the assistance of the therapist for a mobilization effect

(Figure 2). For more intense self-mobilization of the lumbar segments, one leg is crossed over the other and the lower body is rotated to the opposite side (Figure 3). A modification of the supine relaxing twist when the feet are raised from the surface will provide a mild strengthening of the internal and external obliques and rectus abdominus as well as the multifidi (Figure 4).

Figure 5 shows the 9 to 5 twist. The twist shown in figure 5, besides strengthening and stretching the obliques, multifidi, and rotators, will also help promote postural awareness and mild mobilization of the spine. A good lift in the spine should be emphasized before, during and after the twisting movement. Maximum rotation will not be achieved if the spine is flexed (kyphotic posture). This should be held 30-60 seconds on each side.

Figure 6 shows a similar twist that is done in the standing position. If balance is a problem in this exercise it can be done facing the wall placing the free hand on the wall. If the patient can comfortably flex the hip beyond 90 degrees without any compensations, the foot should be taken higher for a more effective twist.

The chair twist (Figure 7) combines hip flexion and rotation of the spine in a controlled movement. Its purpose is to increase that combined movement and to stretch the lateral musculature of the spine, particularly the quadratus lumborum, and to stretch the small rotators of the spine. It is important that the practitioner move forward from the hips and not flex the spine. This twist should be held 30-60 seconds on each side.

(Continued on page 27)

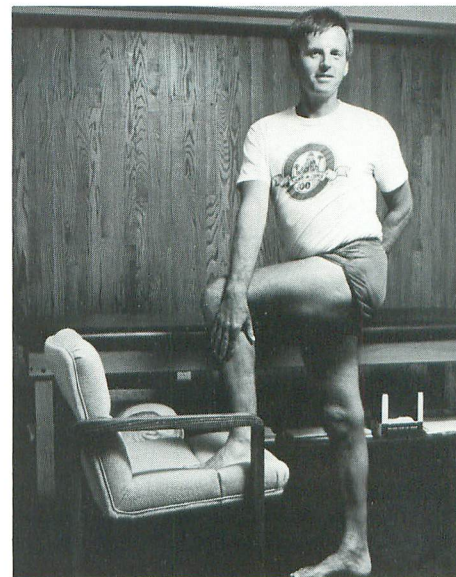


Figure 6: Standing Twist

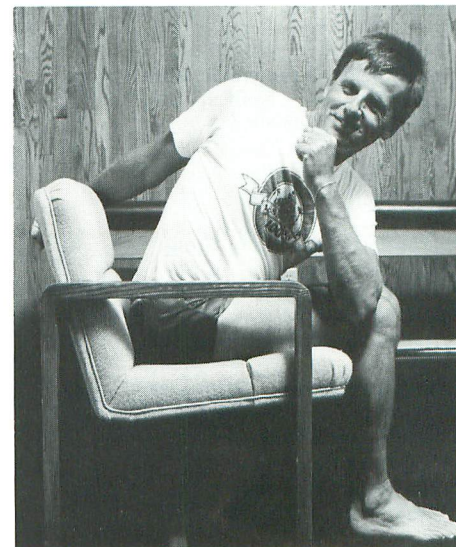


Figure 7: Chair Twist

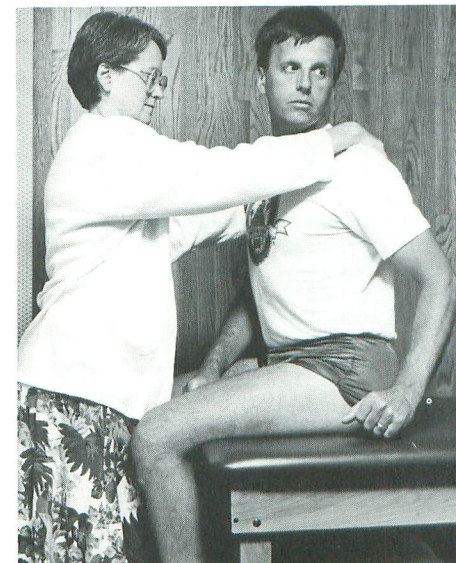


Figure 8: Isometric 9 to 5 Twist with Therapist Assistance

ORTHOPAEDIC STUDY GROUPS

In an attempt to identify for section members study groups which are functioning in their area, the following list of persons concerned with study groups is published. It is our hope to develop a network of study groups to facilitate acquisition of the vast amount of knowledge encompassed in the area of orthopaedics.

ALABAMA

Tuscaloosa Area Orthopaedic Study Group

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DCH Regional Medical Center
809 University Boulevard E
Tuscaloosa, AL 35403
(205) 759-7157

ARIZONA

The Phoenix Manual Therapy Study Group

c/o Arizona Physical Therapy Professionals
Timothy O. Fearon
6135 North Seventh Street
Phoenix, AZ 85014
(602) 230-9871

CALIFORNIA

Los Angeles Orthopaedic Study Group

Lyman Kennedy, Chairman
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Orange, CA 92665
(714) 638-9309 (Home)
(714) 847-1367 (Work)

Manual Therapy Study Group

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Northern California Orthopaedic Study Group

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San Luis Obispo Orthopaedic Study Group

Ross Dover
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Morro Bay, CA 93442

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Joan Schmidt, P.T.
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Santa Barbara Orthopaedic Physical Therapy Study Group

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Bay Area Orthopaedic Physical Therapy Society

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CONNECTICUT

Regional Physical Therapy

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Tampa Bay/St. Petersburg Orthopaedic Study Group

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ILLINOIS

PIAC Sports Medicine Study Group

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Palos Heights, IL 60463
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Bayou Orthopaedic Study Group

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Portland, OR 97212
(503) 281-1924

STRATEGY

(Continued from page 25)

All of the above twists can be done with the assistance of the therapist to provide a greater mobilization effect and verbal cues should emphasize good posture while twisting. They can be modified according to the flexibility of the patient. Strengthening rotational exercises can begin with isometrics. For example, the 9 to 5 twist can be done with the therapist resisting at the shoulders in different ranges of the movement beginning with no rotation as shown in Figure 8. The same can be done with supine twists and the chair twist. If an isokinetic rotational unit is available the stops can be set within the pain-free range and the patient can be instructed to slowly move to the stop, push for 5-10 seconds, reverse and slowly move to the other stop etc. Eventually the exercises can be advanced by extending the lever arms, i.e. the arms or the legs, the therapist can resist the movement, pulleys can be used, or weights can be added to the arms or the legs.

Conclusion:

Rotational exercises with a program geared toward a balance between strength and flexibility should be included in treatment of most "low back strain"

PENNSYLVANIA

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Tennessee Orthopaedic Study Group

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The Sullivan Center
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WASHINGTON

Washington Orthopaedic Special Interest Group

Michael Chamberlin, Chairman
Edmonds Physical Therapy and Sports
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21727 76th Avenue, West
Edmonds, WA 98020
(206) 774-3226

patients. The exercise program needs to be individualized for each patient with the goal of returning them to functional activities and according to the goals of the patient (i.e. to twist like they did last summer). So, c'mon lets twist again!

References:

1. Cummings GS, Crutchfield CA, Barnes MJ: Orthopedic Physical Therapy Services, Vol I, Soft Tissue Changes in Contractures. Atlanta: Stolesville Publishing Co., 1983
2. Farfan HV: The application of biomechanics to the treatment of lumbar intervertebral joint derangements. Clin Neurosurg 25:284-295, 1978
3. Grieve GP: Common Vertebral Joint Problems. New York: Churchill Livingstone Co., 1981
4. Saudek CE, Palmer KA: Back pain revisited. J Ortho Sports Phys. Ther. 8(12):556-566, 1987

WISCONSIN

Indianhead Orthopaedic Study Group of Wisconsin

Doug Litscher
Rt. 1, Box 98-A
Rice Lake, WI 54868
(715) 234-2273

SHORT TERM COURSE

October 13-14, 1989

Advanced Orthopedic Examination and Manual Therapy of the Pelvis

Dan Dyrek, MS, PT
Stoughton, MA

January 4-6, 1990

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Russell Woodman, MS, PT
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For more information: Education Resource Associates, P.O. Box 243, Natick, MA 01760, (508) 653-7479.

PROFESSIONAL ISSUES WORKSHOP SAVANNAH, GEORGIA OCTOBER 20-22, 1989

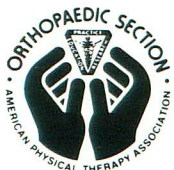
Increase your awareness of the issues. At the Professional Issues Workshop you will learn about issues that face the physical therapy profession. This is a unique opportunity to join your peers in thought provoking discussions. You will explore and strengthen your understanding of the obstacles and possibilities that confront the issues of reimbursement, human resources, and appropriateness and quality of care.

The three-day workshop blends lectures, group discussions, and social events to foster interaction between speakers and participants. Highlighted this year will be discussion of the issues affecting the utilization of physical therapy services, and the issues that impact on the career path decisions of physical therapists.

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The next Orthopaedic Specialization Examination will be **January 31, 1990** at the New Orleans Hilton Riverside in New Orleans, Louisiana. The deadline for application is **September 1, 1989**. The application process requires a lengthy time committment so you are urged to begin this process as soon as possible. For further information on the minimal criteria and the application booklet please contact either the Orthopaedic Section office (800/326-9056, at the dial tone 1133) or Patti Cox at the American Board of Physical Therapy Specialties (ABPTS) office (800/999-APTA).