

ACTIVE P.T. SOLUTIONS
...BECAUSE LIFE
SHOULD BE ACTIVE

APTS Monthly



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Office Hours:

Monday -

8:00am - 5:30pm

Tuesday -

8:00am - 7:00pm

Wednesday -

8:00am - 5:30pm

Thursday -

8:00am - 5:30pm

Friday -

8:00am - 4:00pm

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Making Your Office Visit More Efficient

If you've had to visit a health care provider for any reason in the last 5 years, you may have noticed a few things that have changed. The first thing is that the initial paperwork has become increasingly complicated. It's not enough to provide your name, address, phone number, and insurance card. Because the insurance industry has become more complicated than getting a Masters degree, the office paperwork has become equally as complicated. It is now comprised of several sections.

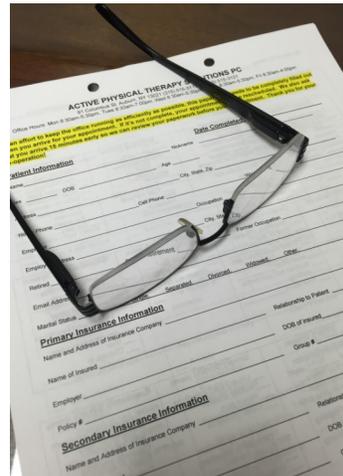
Usually you start with demographic information (name, address, phone number, insurance information). Your family and medical history is of major importance. In order to start your visit off right, arrive early with your paperwork filled out completely. Arriving at your appointment time is as good as arriving late. Your appointment time is the time your visit is supposed to begin or your face-to-face time with the provider. The front desk staff needs to scan your insurance card, finalize your chart, and look through the various sections of your paperwork. After the front desk takes and reviews your information, the provider needs to have a few minutes to look through your medical history. If you don't provide the office with necessary time to perform their duties, you risk having to reschedule your appointment, which would be an understandable inconvenience. But if you are late, that means everyone else in that office for the rest of the day is late.

When a health care provider is trying

to figure out your problem, there are many clues in the family and past medical history that can help. It is vital to provide this information in as much detail as possible. Providing your history of medications and surgeries as well as your family history can narrow the thought process and give the provider the best chance of helping you. Omitting information because you don't think it is important or because you are getting tired of filling out the

work is dedicated to the Health Insurance Portability and Accountability Act of 1996, or HIPAA. This is a government-mandated regulation and was put in place for your protection. After the HIPAA section, there is usually a lengthy section on office financial policies. Between private policies, Medicare, workers' compensation, and liability policies, there are many different regulations and payment arrangements. Regardless of your agreement with your carrier, the patient is ultimately responsible for their financial standing with the health-care office. Most offices work well with the various insurance carriers but it's up to the patient to ensure that payment is made. Most financial agreements merely have you recognize this fact.

Once the provider has reviewed your information, he or she will begin your face-to-face visit. You will be asked several questions pertaining to your primary complaint. You should be ready to answer these questions as directly and succinctly as possible. Providing an answer like "I don't know" or "I am never able to answer that" only prolongs the visit and does nothing to help the provider help you, which is why you are in the office in the first place. In some ways it is good to rehearse the facts about your problem before your visit. Practice answering questions such as: when did it start, how did it start, how long has it been there, what makes it better or worse, is your pain local to an area or does it



paperwork will not improve your chance of getting the answers you are seeking. Give yourself enough time to fill out the paperwork completely. In today's electronic age, you can easily get your paperwork packet from an office website or have it emailed to you. There is still the tried and true option of having it mailed by postal service, or you can even stop in the office and pick it up ahead of time. Filling it out at home gives you the best opportunity to fill it out completely and correctly.

A good portion of the initial paper-

Exercise of the Month: Seated Scapular Retractions



Seated scapular retraction, start position (left), end position (right)

In today's technology-driven society, many of us are stooped over a computer or smart phone for long periods at a time. This "flexed-forward" posture takes a toll on our bodies, especially when sustained for hours most days of the week. The following exercise is the most basic postural exercise to start firing those upper back muscles that have been weakened by this forward flexed posture. It can be done anywhere you can sit

down, so there are no excuses to not try it!

Begin seated with feet on the floor, hands resting on thighs. Slowly and gently squeeze your shoulder blades (scapulas) down and together (towards your waist) as hands slide back on thighs. Hold chin gently tucked to limit forward head posture. Hold this squeeze for 2-5 seconds then relax back to starting position. Perform 10 repetitions 2-3 times throughout the day to start. As you

get stronger and start tolerating it more, increase your frequency of the exercise to 4-5 times per day at 10 repetitions, and then *gradually* build your repetitions up to 30 by reps of 5. You'll start to notice your posture improving!

As with any new exercise, stop when you feel increased pain, numbness, or tingling during or after performing the exercise. If your symptoms become worse or more intense, call your health care provider for an evaluation.

You will always be asked to quantify your pain on a numerical scale of 0 to 10. It is imperative to monitoring progress and many insurance carriers use this as a guideline to ration out healthcare provisions.

Making Your Office Visit More Efficient Con't.

radiate into the arms or legs, does it affect your sleep, does it prevent your normal activities, have you lost work time, etc. You will be asked to quantify your pain on a numerical scale of 0-10 (0 meaning no pain and 10 meaning the worst possible pain you have ever experienced). Many patients have trouble with this, but it is imperative to monitoring pro-

gress, and many insurance carriers use this as a guideline to ration out healthcare provisions.

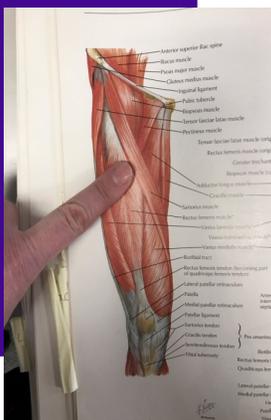
Once the provider has this information, they can tailor an examination to match your problem. Matching the examination results to the information you provided can lead to an accurate diagnosis. Once an accurate diagnosis is made, the

provider can then develop a treatment plan based on his or her knowledge level and your current level of functional ability. Getting the answers that will lead to a successful outcome starts with you providing a complete, detailed, and accurate medical history.

Article by Dale Buchberger, DC, PT, CSCS

Did You Know That...

The sartorius muscle (right leg shown)



...the **sartorius muscle** is the longest muscle in the human body! It is a thin, superficial muscle that originates at the pelvis, runs down the front of the thigh, and attaches on the inside of the knee. It assists in flexing, weak abduction, and lateral rotation of the hip, as well as flexion of the knee. Looking at the bottom of one's foot or sitting cross-legged

demonstrates all four actions of the sartorius. In fact, its name comes from the Latin word *sartor*, meaning *tailor*, thus it is sometimes called the *tailor's muscle*. One guess is that this name was chosen in reference to the cross-legged position in which tailors once sat. Another is that it refers to the "inseam" or area of the inner thigh that tailors commonly measure when fitting pants.

What causes an injury to the sarto-

rius muscle? *Pes anserine bursitis* is most common, which is an inflammatory condition of the inside portion of the knee. It usually occurs in athletes from overuse and is characterized by pain, swelling, and tenderness.

...Now you know!



Instant Gratification in Health Care: It Doesn't Work

It would be difficult to debate that today's world has largely been groomed into an "instant gratification" society. Like it or not, if you watch television, use a cell phone, or surf the Internet, you are being trained to live a life of instant gratification. This occurs in everything from your purchasing habits to relationships. Companies such as Apple and Samsung draw you in with the advertising strategy telling you why you need to wait in line to get the latest and greatest version of their products, even if you can't afford it. Patients are now bringing this societal training into their healthcare. Many patients seem unrealistically disappointed if their condition is not cured in one visit or one treatment. Here is the bad news: unless Dr. McCoy from Star Trek arrives with his "Tricorder", getting well will be one thing that maintains a focus on "delayed gratification".

There are five main reasons why rehabilitative medicine, such as physical therapy, takes more than one visit. While some people may experience symptom relief in one visit, they certainly are not "fixed" in one visit. The simple answer is time. The human body takes time to heal, time to rehabilitate, and time to return to pre-injury levels of activity. How much time? It can take as long as a year to heal from any particular surgery or injury depending on the invasiveness and complexity of the surgery or injury. It can take a minimum of 4 weeks to begin to retrain your body to perform an activity such as walking or running. Most strength gains within the first 4 weeks of rehabilitation are not

actually strength gains. It is your brain learning to perform the activity or exercise. You merely get better at performing the exercise. This is referred to as neurological training. It takes a minimum of 8 to 12 weeks to generate true muscle strength via muscle cell hypertrophy (enlargement of individual muscle cells) or hyperplasia (increase number of muscle cells). No one gets stronger or better at a task in one visit.

Once a plan of treatment and recovery is developed, it takes dedication from both the provider and the patient to follow through with the plan. There are usually moments along the way when the patient's dedication will be tested. This is when the healthcare provider needs to assist the patient with either following through with the plan or recognizing a medical reason why the plan is not working and alter the plan to improve the rate of progress. Good communication between the provider and the patient can usually answer any questions as to why the plan is speeding up or slowing down. Sometimes patients that have had a complex surgery or injury can feel as though they are behind schedule when they are actually *on* schedule.

The plan requires that the patient take responsibility for following through on the various aspects of the plan. This is one of the more difficult aspects of a plan for rehabilitation of an injury or surgery. This means that the patient must keep their scheduled appointments, communicate with the treating provider, and

follow through with the prescribed home exercise and treatment program. The patient may be asked to perform home exercises two times per day. Finding the two times can often be a challenge in a modern world. Therefore, performing a home rehabilitation program may require changes in the patient's schedule of normal daily activities. It also requires cooperation and understanding from the patient's family.

Behavior modification is the fourth and most difficult aspect. Changing the patient's mindset from instant gratification to delayed gratification will make the process smoother and reduce frustration. Make your home exercise program a priority instead of watching television. Change your diet to allow healing. Reduce harmful activities. Be open-minded to the rehabilitation process.

Finally, understand that the process of rehabilitation and healing is not linear, and that treatments and exercises are prescribed for specific reasons with specific goals in mind. Symptoms such as pain will change as the process goes on. As the rehabilitative process becomes more challenging, pain may temporarily increase. There may be increases in pain early in the process during exercise because the healing tissue is being selectively worked. Specific stresses improve healing but it doesn't mean it won't hurt along the way.

Article by Dale Buchberger, DC,
PT, CSCS

It can take as long as a year to heal from any particular surgery or injury, a minimum of 4 weeks to begin to retrain your body to perform an activity, and a minimum of 8 to 12 weeks to generate true muscle strength.

APTS Recipe Box: Hearty Beef Stew

This is the perfect winter recipe to throw together and let simmer for a couple of hours while you take time for yourself and relax! These ingredients are just a guide—get creative with your own kitchen staples!

Ingredients: 1 lb stewing beef; 2 tbsp paleo cooking fat; 4 cups beef stock; 1 cup onion, chopped; 1 cup celery, chopped; 3 carrots, peeled and chopped; 2 potatoes, peeled and cubed; 1 28-oz can diced tomatoes; 1/2 tsp fresh rosemary, finely

chopped; 1/2 tsp fresh thyme, finely chopped; sea salt and freshly ground black pepper to taste.

Instructions:

1. In a large saucepan over a medium-high heat, combine onions, celery, carrots, potatoes, and cooking fat. Cook for 3-5 minutes, stirring constantly.
2. Add the beef to the saucepan, followed by the tomatoes, beef stock,

rosemary, and thyme. Season to taste with salt and pepper.

3. Cover and cook for about an hour, allowing stew to simmer. Stir a few times during the cooking process.
4. Remove the lid and cook uncovered for about 45 minutes. If the mixture is too thick at the end of the cooking process, you can add a little bit of water or stock.

Source: paleoleap.com/hearty-beef-stew/



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Get Well...Get Active...Be Active

Newsletter Edited by Carolyn B. Collier, PTA

At Active Physical Therapy Solutions,
we utilize the most cutting edge
treatment and management
techniques available. Our goal is to
deliver the best possible healthcare in
a friendly, caring, and well-organized
environment. Our staff is here to
provide active solutions to achieving
your personal goals!

...BECAUSE LIFE SHOULD BE

ACTIVE!

Nutrition 101: “Good” Fats vs. “Bad” Fats

Dietary fats have often got a bad rap in the past. Most of us are aware of claims that high fat diets increase the risk of heart disease or should be limited to manage weight. More recently it seems that our current idea of fats may not be completely accurate. Current research has highlighted the importance of choosing the right fats rather than cutting them out of your diet. There is often a lot of confusion on the different types of dietary fats and which ones are “better” for your health. Let’s take a closer look at the three major types of fat.

Unsaturated fats include monounsaturated and polyunsaturated fats. These are the healthy fats often recommended for a healthy diet. These are beneficial for improving cholesterol levels and lowering your risk of heart disease. They are also helpful in controlling blood sugar levels. Examples of foods containing unsaturated fats include avocados, olives, nuts, flaxseed, fatty fish (think tuna or salmon), sunflower, sesame and pumpkin seeds, non-GMO sources of soy milk and tofu. One of the most well known unsaturated fats is the omega-3’s. These fats have been associated with reducing the risk of heart disease and stroke. Research has also linked the pro-

TECTIVE properties of these fats to conditions such as dementia

Trans fats are “bad” fats that raise your LDL (bad) cholesterol and lower your HDL (good) cholesterol.

Although there are small amounts occurring in meat and dairy products, most consumption is from manufactured processes which deforms the fat molecule during a process known as hydrogenation. This process makes the fat more stable and increases the shelf life of foods. Any product containing “hydrogenated” or “partially hydrogenated” ingredients essentially has some trans fat in it.

There has been quite a bit of debate over the consumption of **saturated fats**. This has traditionally been the type of fat we were always told to limit in our diet. The current USDA recommendation is to limit saturated fat to 20g per day for someone on a



2,000 calorie diet. The American Heart Association and American Diabetes Association continue to warn that eating too much saturated fat from any source increases the risk of heart disease and stroke, yet there are other nutrition experts that are more concerned about the source of the saturated fats. These experts claim that saturated fat from whole foods including salmon, whole milk, and coconut oil are much better for you than that from foods such as pizza, french fries, or processed meat. Many will also argue that a person’s genetic makeup and overall health may process these fats differently and lead to varying levels of cholesterol, which can be a factor in many cardiac diseases.

Adding good fats to the diet does not need to be complicated. Changing a few things in your diet can go a long way. You can begin by replacing your cooking or dressing oils to olive oil or coconut oil. Real butter will have less trans fat compared to margarine. Limit your consumption of fried foods. Work to add healthy omega-3 fatty foods to the diet. Before you know it, introducing healthy fats into your diet will become second nature and will no longer seem like a chore! You can do it!

Article by Tom Zirilli, PT

Source: www.helpguide.org