



Sacramento Spine & Physical Therapy **NEWS**

FALL 2005

SPECIAL Thanks!

I wanted to take this opportunity to thank all of our referral sources for giving us the opportunity to work with your patients. We have been fortunate in the past 10+ years to assemble an amazing group of therapists, managers, front desk and billing personnel with the collective goal of being the best. We have not lost our zeal to improve as a company or as individuals and we will continue to strive for the best possible product.

Jeff DeRaps
President



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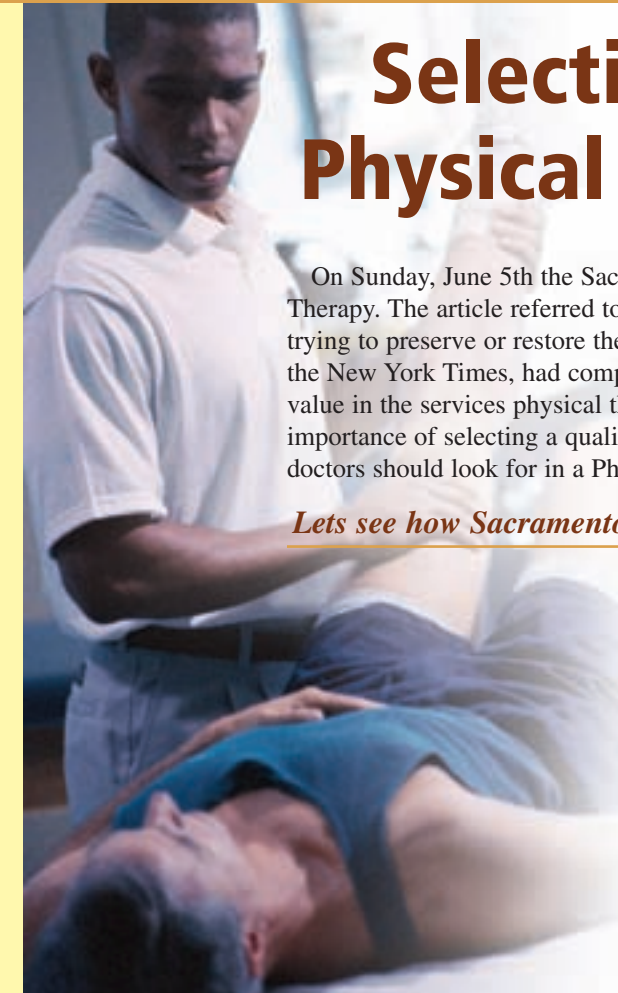
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Selecting a Quality Physical Therapy Clinic

On Sunday, June 5th the Sacramento Bee featured an article about Physical Therapy. The article referred to therapist as unsung heroes for millions of people trying to preserve or restore their ability to function. The author, Jane Brody of the New York Times, had completed four months of physical therapy and saw value in the services physical therapy provides to patients. She stresses the importance of selecting a quality clinic and outlines important criteria patients and doctors should look for in a Physical Therapy clinic.

Lets see how Sacramento Spine & Physical Therapy measures up.



3 The first visit should include an objective history and a look at the total person, not just an isolated body part.

Sac Spine is getting a perfect score, the reason we build our state-of-the-art facilities is to allow us to treat the whole patient and not limit ourselves to just the injured body part. We strive for a complete recovery and lifestyle modification for every patient.

4 Consider how much time the therapist spends with the patient. The therapist should not be constantly hopping from one patient to another giving each patient a minute at a time.

At SS&PT we spend a minimum of thirty minutes one on one with each patient and up to an hour depending on the treatment plan. No managing multiple patients!

5 Finally, therapist should give patients exercises to do on their own between treatments, and after therapy is complete.

At the initial evaluation patients go home with basic stretches and exercises, during physical therapy we encourage patients to take advantage of our facility and arrive early or stay late and perform cardiovascular exercises. At time of discharge we offer patients a home exercise program or the option of an independent membership at our facility with the support of the staff. ■

AT

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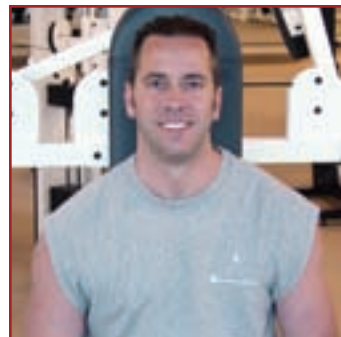
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SUCCESS STORIES

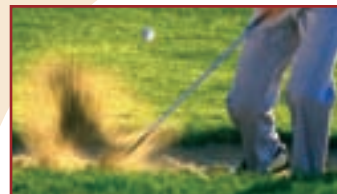
GREG PISTOCHINI

"The facility, staff, and customer service are the best!"



Greg began physical therapy at 4 weeks post-op with SS&PT in Roseville. He was transitioned from aquatic PT to land in just 3 visits and followed a functional restoration program for 4 weeks. Greg joined the Roseville Health & Wellness Center at the conclusion of his physical therapy and has been following his program 5 days per week.

Greg is a very pleasant male who was involved in a serious motor cross accident. He took a jump and landed on his back breaking his pelvis and suffering multiple back injuries. Pasquale X. Montesano performed a Global Fusion on L4-S1.



Since his injury Greg has played golf, full court basketball, and returned to 100% of his ADLs. He rates his success at 100% of normal activities and 99.7% of previous. He has gained 37 pounds since his surgery and is in better condition than before the accident stating he is stronger and leaner as a result of the rehab.

I have been a patient in numerous PT clinics throughout Sacramento as a college athlete and I rank SS&PT the best of them all. "The facility, staff, and customer service are the best!"



It has been a pleasure seeing Greg reach his goals. ■

TERRY WAGNER

"...a fully-equipped facility with all the rehabilitation and exercise options under one roof."

Terry plays for the NFL franchise St Louis Rams as a center. He ruptured his patella tendon during practice; the team physician Dr. Matava performed the repair on November 20, 2004.

Terry returned to Roseville to sell a home and researched several treatment options before choosing us. "It is nice having a fully-equipped facility with all the rehabilitation and exercise options under one roof."

Terry started his rehab program with us at 10 weeks post-op and attends physical therapy 5 times per week. Currently, Terry has progressed to a high level athletic training program.

"Coaches, trainers and agents are all hurrying the process but I am being told that I am right on

schedule" Terry's goal is to return to the NFL this season or next and compete in the NFL as long as possible.

Although the New England Patriots rule the NFL, we look forward to tuning in on Sundays and watching Terry and his Rams play. ■



Preventing ACL Injuries in Women

In general, musculoskeletal injuries are sport specific rather than gender specific. However, data collected since 1995 suggest that anterior cruciate ligament injury patterns are different in women and men who participate in the same sports (soccer, basketball and volleyball). The incidence of ACL injuries among women basketball players is twice that for

men, and female soccer players are four times more likely to suffer an ACL tear than their male counterparts. Both women and men incur ACL injuries in non-contact situations, nearly 60% of ACL injuries in female basketball players occur when landing from a jump. Following are training methods that could help prevent the risk of injury:



- 1. Safer Jumping Skills** - Women do not bend their knees as much as men do when landing from a jump causing more pressure on the joint. Learning to land reducing the forces per pound of body weight should be taught early.
- 2. Cutting Maneuvers** - Women turn and pivot in a more erect position, which strains the ACL. Learning to crouch and bend at the knees and hips could reduce the stress on the ACL.
- 3. Muscle Control Techniques** - Strengthening and flexibility training of the hamstrings, quadriceps, calves, and hip muscles should be part of a year round training program. Skill drills will improve balance and coordination and prepare the athlete before the season starts. ■

Bracing for Scoliosis Found Less Effective For Overweight Teens

A recent study at Johns Hopkins has shown that bracing treatment for scoliosis is significantly less effective for teenagers who are overweight. Currently bracing is the only non-operative treatment for adolescent idiopathic scoliosis that is advocated by the spine community.

In the study, which included 276 adolescents with scoliosis, the teenagers who were overweight

were 2.5 times more likely than those of normal weight teens to have curvatures progress despite wearing a TLSO brace. 44% of the overweight teens eventually needed surgery to correct the curve.

The findings of this study suggest that extra body weight may compromise the braces ability to exert the biomechanical forces on the spine necessary to prevent curve progression. ■

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