



Keeping you...

Active

... is a quarterly newsletter from West Tennessee Bone & Joint Clinic. The clinic's 11 physicians specialize in sports medicine and orthopedic problems. For copies of the newsletter, contact Adam Kelley, Marketing Director, at 731.661.9825.

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Knee surgery helps Sacred Heart athlete recover from an injury

There was nothing unusual about the play that sidelined soccer standout Blaine Gundersen for her entire junior year before the season even began.

As goalkeeper for Sacred Heart of Jesus High School, Gundersen simply turned around to retrieve a ball during a late-summer practice and heard a loud pop in her right knee.

"After I fell down and couldn't move, I knew something was wrong," Gundersen said.

The next day, Gundersen went to visit Dr. David Johnson at West Tennessee Bone & Joint Clinic. She had an X-ray, but it didn't show anything. A week later, she had an MRI and learned that she completely tore her anterior cruciate ligament and partially tore her posterior cruciate ligament when she twisted her knee.

So Dr. Johnson scheduled outpatient surgery for the next week at the Physicians Surgery Center to repair the damage.

Gundersen was worried about the procedure going into the surgery, she said, but Dr. Johnson did a fantastic job. "I was really, really freaked out. I didn't expect it to be as simple as it was. It wasn't bad at all. The incision is so small. It's been a really pleasant experience."

She was pleased to see that her nurse was Anne Hudson, a member of Gundersen's church. Hudson was a friendly face and helped settle Gundersen's nerves. In fact, Gundersen said the entire staff at West Tennessee Bone & Joint was nice and friendly, and they helped her relax before the procedure.

Now, she has a long road of recovery ahead. The injury will cause her to miss soccer, basketball and cheerleading for the year. And, she'll return to West

Blaine Gundersen is sitting out of sports her junior year while she recovers from a knee injury.

Tennessee Bone & Joint for physical therapy three times a week for several months.

So far, her visits have been pleasant, and her recovery is going well. The physical therapy staff is great, she said, adding that her physical therapist, Tom Johnson, is helpful and hilarious.

It's too early to know when Gundersen will take to the field again, but she said she expects to return for her senior year. "I think I'll be ready to go and play soccer again and do what I love to do."

She hopes to earn a soccer scholarship to play for the University of North Carolina at Chapel Hill — one of the country's elite college soccer programs. And, because of her experience at West Tennessee Bone & Joint Clinic, she said she's considering a career in physical therapy or sports medicine.



Jammed finger injuries range from simple jams to dislocation, fractures

One of the most common basketball or volleyball hand injuries is a jammed finger. This injury occurs from a blunt impact or forced motion to the proximal interphalangeal joint (PIP) of the fingers.

Fingers are comprised of three different joints. Each joint is supported by ligaments, called collateral ligaments. On the palm aspect of the joint is a structure called the volar plate. A jammed finger is generally a sprain or injury to one of these ligaments.

Depending on the severity of the impact, which will stress the ligaments at your PIP, the varying degrees of this injury will range from a simple jam to a more serious finger fracture or dislocation.

As with all sprains, the severity of the injury can vary.

First degree sprains are mild, involving a stretch but no tear of a ligament. A second degree sprain is a partial but not complete tear of a ligament. And a third degree sprain is a complete rupture of the ligament. In such cases of complete ligament ruptures, the finger generally becomes dislocated.

Symptoms of a jam to the PIP include swelling, loss of range of motion, pain and tenderness to touch. With first-time dislocations, it is not uncommon for a small piece of bone to be torn off along with the ligament. This type of fracture is called an avulsion fracture.

By Michael Dolan, M.D.

Treatment Options

If you are like many athletes, one of the most common recommendations for an acute finger sprain is to "pull it out." **This should not be done.** Pulling on any joint could create further stress on a newly injured ligament.

If you have any deformity or if you suspect that the finger is dislocated, get an X-ray of the finger to determine if there is a fracture or an avulsion fracture.

In most cases, RICE therapy is recommended, which involves the following steps:

- Resting the injured finger/hand.
- Icing the finger 15 minutes every hour for the first 48 hours. (After 48 hours, switch over from ice to heat.)
- Compressing the finger with a splint to keep it from bending.
- Elevating the finger above chest level.

During the early stages of healing, limiting motion



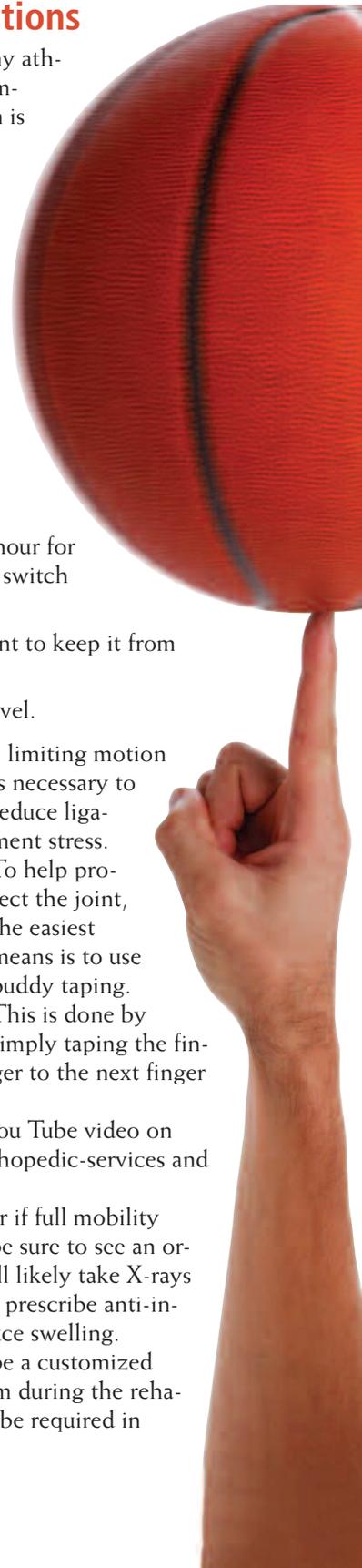
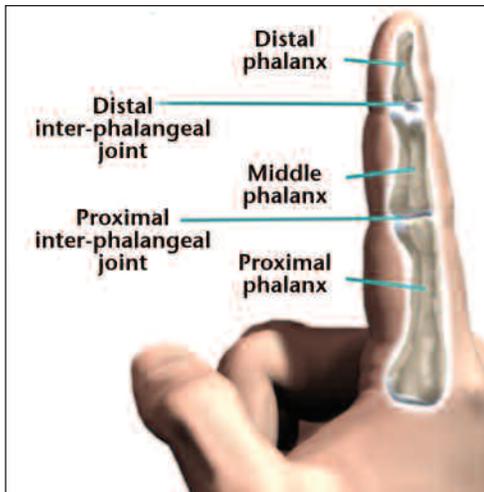
is necessary to reduce ligament stress.

To help protect the joint, the easiest means is to use buddy taping. This is done by simply taping the finger to the next finger

to help splint and support it. Visit our website for a link to a YouTube video on how to do this. Go to wtbjc.com/orthopedic-services and then hand surgery.

If symptoms persist or worsen, or if full mobility does not return in a matter of days, be sure to see an orthopedic surgeon. Your physician will likely take X-rays to rule out a finger fracture, and may prescribe anti-inflammatory medications to help reduce swelling.

Your physician also may prescribe a customized stretching and strengthening program during the rehabilitation stage. Formal therapy may be required in more severe cases.



The McKenzie Method

An approach to treating spine and extremity pain

The McKenzie Method, also known as Mechanical Diagnosis and Therapy or MDT, is a world-renowned approach to treatment of the spine and extremities.

Developed in the 1960s by Robin McKenzie of New Zealand, the McKenzie Method involves a combination of active patient self treatment and clinician-taught educational tools to help patients return to normal function.

This form of treatment begins with a comprehensive and systematic assessment to evaluate the patient's problem. The examination involves a thorough patient history and uses special test movements and positions to identify pain responses and to determine what makes symptoms better or worse.

The McKenzie Method is grounded by finding a cause- and effect-relationship between the po-

By Cheryl Murray, PT, Certified MDT

sitions the patient usually assumes while sitting, standing or moving, and the generation of pain as a result of those positions or activities.

The treatment consists of a series of repeated exercises based on the directional preference of movement that offers centralization, or when pain that is referred or radiating into the leg or arm reverses and returns to the center of the back or neck and eventually goes away.

The McKenzie Method teaches the patient how to self treat the problem, restore independence with daily activities and minimize the risk of recurrence.

This approach reduces dependency on medical intervention, including medication, modalities and surgery.

If you are interested in trying the McKenzie Method, contact West Tennessee Bone & Joint Clinic or visit mckenziemdt.org to locate a licensed health care practitioner near you who is trained and certified in the McKenzie Method.

From the couch to running a 5K

Yes, you can. If the most significant exercise that you have done lately is to pick up the kids' toys from around the house ... or to walk from the parking lot to your office and back at the end of the work day ... or just to control the remote as you watch other athletes on television ... yes, you can be fit enough to run a 5K (3.1 miles) in less than three months of conditioning.

With a plan and determination, you can go from the couch to completing a 5K run, from a sedentary lifestyle to being able to run for 30 minutes. You can do this in nine to 10 weeks. Before you get started, though, you should ...

- Check with your doctor before starting any exercise program.

- Buy yourself a comfortable pair of running shoes.

- Do a little research online or at the library to find a couch to 5K plan that you can follow.

Most plans start slow. They combine walking and jogging for 20 to 30 minutes three days a week. In the beginning, you may be doing more walking than jogging; as you complete

your transformation from a couch potato to a jock, you'll be doing only the running. It's time to get started ...

- Alternate your workouts every other day so that your body can rest a little and get psyched for another workout.

- Begin each workout by stretching and walking briskly for a few minutes. End each workout with a little stretching.

- You can measure your progress by time or distance.

- As the weeks fly by and you decrease the amount of walking and increase the amount of running with each workout, you'll feel a great sense of accomplishment.

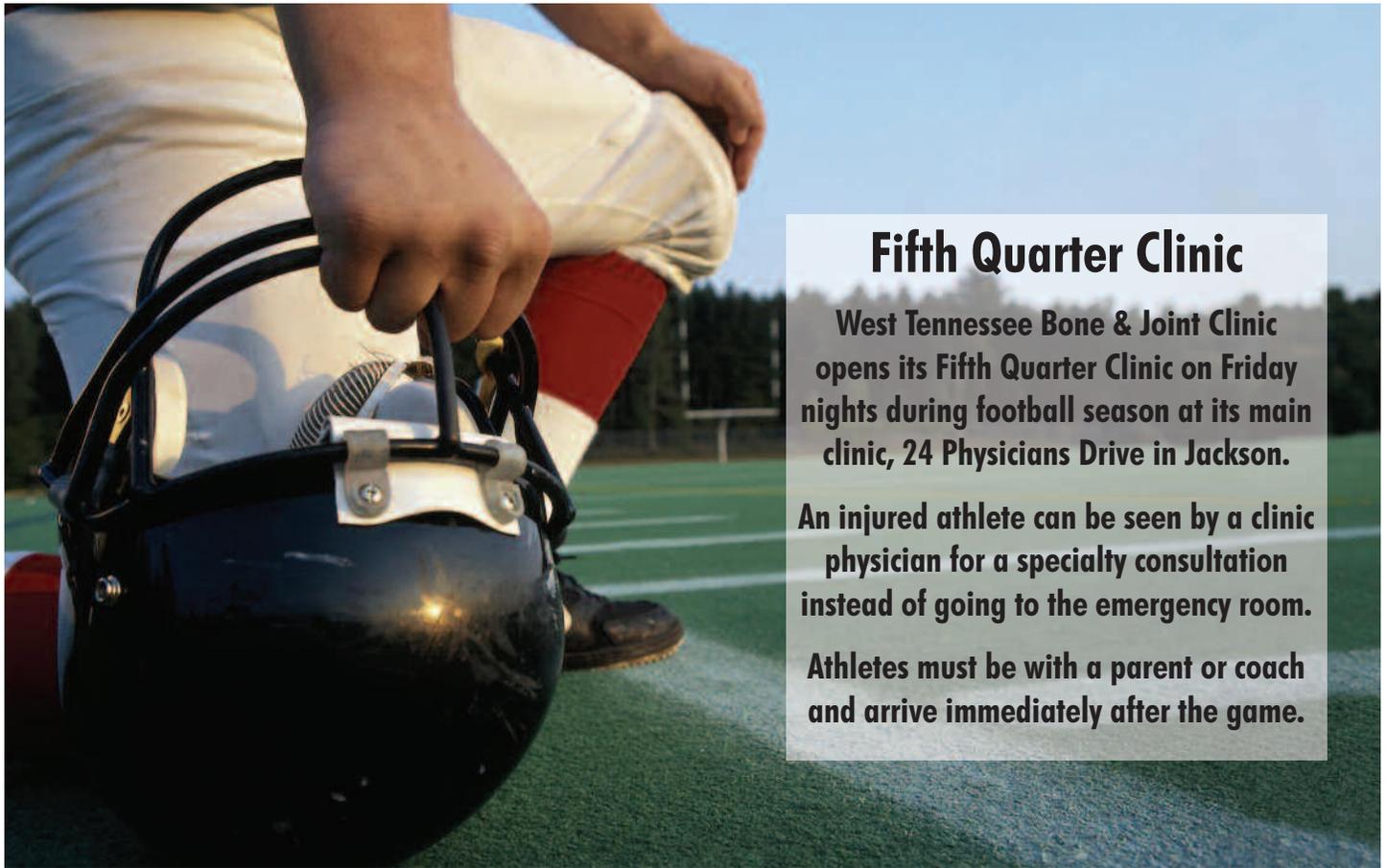
- Don't try to skip ahead in your running program, even if you feel you can. Go ahead and repeat a week, however, if you aren't ready to move on to a more strenuous workout.

The goal is to stick with your plan. You'll be building endurance and strength. You'll feel better; you'll

look better. Running, folks say, is a good way to burn calories and get in shape. Many say it helps to relieve stress.

Besides, just imagine how you will feel when you earn that T-shirt in your first 5K run.





Fifth Quarter Clinic

West Tennessee Bone & Joint Clinic opens its Fifth Quarter Clinic on Friday nights during football season at its main clinic, 24 Physicians Drive in Jackson.

An injured athlete can be seen by a clinic physician for a specialty consultation instead of going to the emergency room.

Athletes must be with a parent or coach and arrive immediately after the game.



Sports Medicine • Orthopedic Excellence

Keeping You Active

The physicians at West Tennessee Bone & Joint Clinic, P.C. specialize in comprehensive orthopedic care. They diagnose and treat diseases and injuries of the bone, muscles, tendons, nerves and ligaments in adults and children. They are Board Certified.

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