



Office Hours:

Monday -

8:30am - 5:30pm

Tuesday -

8:30am - 7:00pm

Wednesday -

8:30am - 5:30pm

Thursday -

8:30am - 5:30pm

Friday -

8:30 - 4:00pm

Location:

40 Westlake Ave

Auburn, NY 13021

P: (315) 515-3117

INSIDE THIS ISSUE:

Heat or Ice? 1

**Exercise of the 2
Month - Ball Squats**

**Buchberger travels 2
to Big East and
Nationals with SU
Track & Field**

**Healthcare Part II 3
Addressing Health-
care**

**Ergonomics - 101: 4
Practicing Good
Habits at Home**

When to use heat or ice on an injury, ache or pain is as common a question in a health-care office as you will find. While there are generalities that can be followed it can also be an extremely specific self-treatment. It is very difficult to go wrong with ice. On the contrary if you put heat on an inflamed body part there is potential to worsen a condition. So to start with a general rule of thumb in our office is to recommend ice for 20 minutes to the painful body part with at least 40 minutes off before the next ice application. A thin protective layer should be placed between the ice and the skin such as a paper towel or t-shirt. Always inspect the skin after the application. It should be pink and cool, returning to normal before the next ice application.

The majority of injuries or musculoskeletal ailments will respond to ice. Unfortunately most patients fail to ice frequently enough to be effective. For instance if you have an ankle sprain you may need to apply ice to the ankle four to five times a day for two or three days for the ice to be effective. If any body part swells, becomes discolored or causes a loss of function in this case the inability to bear weight you should see a healthcare provider and most likely have an x-ray to rule out a fracture or additional pathol-

Heat or Ice?

ogy. Applying ice in this case should be for comfort and swelling control while arranging to see a provider.

The best form of cold therapy is ice itself. Your relatives may recommend frozen peas, corn or other frozen produce. Frozen produce will not supply the same degree of cold as ice itself. Counter irritants such as



rub that produce a cold sensation do not reduce swelling or inflammation. They are designed to relieve pain by tricking your brain to focus on the cooling or heating sensation produced by the ingredients in the lotion or cream. This is where the term "counter-irritant" comes from. Remember the acronym PRICE therapy when applying ice: Protect, Rest, Ice, Compression and Elevation.

It is also common for patients to bring up the old adage of ice for the first 24-72 hours and then apply heat. This is a poor rule to follow because it negates the presence of pain and

loss of function. If the condition is actively swelling or limiting function (weight bearing, sleep, work, etc.) it is appropriate to apply ice more than 72 hours after the onset of pain or injury.

Living in central New York I have come to think it is a natural reaction to prefer heat instead of ice. In general heat

usually feels nice and comforting. Unfortunately, it is not the right thing to do more times than not when it comes to an injury or painful musculoskeletal condition. If you do apply heat it should be moist in nature. A hot shower or hot bath are good forms of home heat application. There are special heating pads

available that are made with a moist sponge or there are also several microwavable devices available in your local pharmaceutical retailer. One thing that I would absolutely recommend you not use is a dry heating pad. As I tell my patients "if you own a dry heating pad give it to someone you don't like". Dry heat applications usually make the problem worse by creating local dehydration, edema and inflammation.

Ball Squat Start :



Ball Squat Finish:



Exercise of the Month - Ball Squats

The Ball Squat is an excellent way to strengthen the muscles of the quadriceps and glutes. Making the ball squat part of your daily exercise routine will help to improve posture and balance as well as prevent injuries to the lower extremities.

To start:

1. Stand with exercise ball between your back and the wall. The ball is positioned
2. Begin the exercise by bending down at hips, bringing hips under the ball as if you were sitting in a chair.
3. Stop with squat when your thighs are parallel to the floor. Hold the position for 5 sec

tioned between the shoulder blades, feet are hip distance apart and hands are on hips. Standing up straight, the ball should feel as if it is slightly pushing you forward.

then slowly return to the start position.

Start with 2 sets of 10 ball squats and progress in increments of 5 repetitions as you get stronger. For best results, perform this exercise 3 times a week.

As always if you have any questions about this exercise, feel free to call the office and speak to one of our therapists.

By: Maggie Whitehouse, PTA

Heat or Ice? - Cont'd

So when is heat the treatment of choice? Moist heat is very helpful when you have a chronic degenerative condition such as a non-inflammatory arthropathy such as degenerative joint disease of the knee or back.

Unfortunately these conditions usually are associated with some level of pain. In this case using "contrast therapy" may alleviate the stiffness and the pain. Applying moist heat

for 15-20 minutes followed by and ice application for 15-20 minutes and then gentle movement such as walking is a form of contrast therapy that works well for patients with arthritis of a non-inflammatory type.

Never go to bed with an ice pack or heating device applied to a body part. There is a risk of falling asleep with the ice or heat in place and this can result in worsening of

the condition or causing further injury or tissue damage. There are areas of the body where certain nerves are very superficial and at risk of injury from prolonged ice or heat application. The more common areas are the outside of the knee, inside of the elbow, the groin and lower abdomen. Lastly, if you are unsure or have a question about applying heat or ice to an injured area, call a healthcare professional that knows your medical history and that you trust.

By: Dale Buchberger, PT,DC,CSCS



Buchberger travels to Big East and Nationals with SU Track & Field

tournament was optimal. Again on March 8-10, 2012 Dr. Buchberger was asked to travel with the track and field representatives from Syracuse University to the NCAA indoor track and field nationals in Boise, ID. Dr. Buchberger provided treatments before and after races to both Flings Owusu-Agyapong and eventual Mens 60m HH National champion Jarret Eaton. Jarret not only won the National Championship, he broke the

facility record for the fastest hurdler at that track.

Dr. Buchberger works closely with the SU Track & Field team all season to prepare them for these events.

"It was an honor to work with such dedicated and humble athletes."



Healthcare Part II: Addressing Healthcare

Last month I finished by saying I would address efficiency in healthcare. There are several areas that can be more efficient. The most glaring place and the area that can be remedied the quickest is in the area of billing. It has been estimated that approximately 30% of healthcare costs are in paperwork. Currently there are three sets of codes used in healthcare billing: CPT or common procedural codes (owned by the AMA), HCPCS or Healthcare Common Procedure Coding System numbers, are the codes used by Medicare and monitored the CMS or Centers for Medicare and Medicaid Services and lastly the ICD codes. ICD means International Statistical Classifications of Diseases. ICD codes are alphanumeric designations given to every diagnosis, description of symptoms and cause of death attributed to human beings. These classifications are developed, monitored and copyrighted by the World Health Organization (WHO). In the United States the NCHS or National Center for Health Statistics, part of the CMS oversees all changes and modifications to the ICD codes, in cooperation with WHO. As you can see there are several issues of complexity and antitrust violation just in the mere issue of coding and billing. First of all there is no reason to have more than one procedural coding system. This only complicates billing procedures, confuses the public and raises the overhead of healthcare facilities. In order to add or change a CPT code the providers or product developer would have to go through and presumably pay the AMA. Therefore the AMA has control of the entire healthcare system via their ownership of the CPT coding system. Trying to create more efficient coding in all of the ancillary healthcare professions has to go through the AMA. This is an area where the government should be involved. Adopting an all-encompassing procedural coding sys-

tem that allows for addition and change with an efficient pathway and minimal cost. A private membership organization should not be in control of the healthcare procedural system. The ICD system is more accurate than the CPT system but could use updates and could use a streamlined approach to access and making additions. The current ICD systems of diagnostic codes are merely regional generalizations. There are certain body systems that have a very comprehensive and specific list of diagnostic codes while other regions lack specificity. This creates a problem for providers when communicating with other providers and third party payers. Having the ability to make additions to the coding in a timely manner would improve efficiency in communication, treatment and billing. Now lets look at some real numbers and see how the growing trend of inefficiency over the last 10 years is costing consumers more and making the "insurance industry" billions of dollars! The following numbers are my personal medical costs from 2004 until 2010. I consider myself a relatively healthy person as well as my family. The costs displayed are for two adults and one child over a six-year period. In the year 2004 my total out of pocket medical expenses (premiums, co-payments, deductibles, prescriptions, etc.) were \$6471. In the year 2010 they were \$14,267. So as a patient my medical expenses have more than doubled in 6 years. At the same time as a healthcare provider reimbursements for my services have been cut by 60%. Now you don't have to be a Harvard mathematician to figure out that someone is making boatload of cash on this and it's not you or I. There are several "insurance carriers" doing business in New York State that increase the paperwork for the provider and the patient to such a level that the gross inefficiency costs the provider more than

what the reimbursement is. The paperwork is merely an avenue for the "insurance carrier" to have "reason" to deny services. But wait isn't this where I started last month? Didn't you buy into a plan that covered you in case you needed to use healthcare services? But as I said last month your plan guarantees nothing. Then what was that 200% increase in premiums and out of pocket expense for? Most likely it was to pay for the CEO's multi-million dollar bonus.

To summarize to this point we have a coding system that is not up to date and lacks specificity. We have a repetitive paper trail specifically designed to discourage and prevent use of the product you purchased. The "insurance industry" continues to use deny and delay tactics regarding claims reimbursement. Lastly we have a system that allows premium increases at unchecked rates for fear of retribution that the carriers will pull out of the state and not insure any new cases. Next month, I will discuss my phase one plan to fix the healthcare system. I'll give you a clue; it's not rocket science.

By: Dale Buchberger, PT, DC, CSCS
February 18-19 was a very successful weekend for the Syracuse University Indoor Track & Field team at the 2012 Big East championship. This year's meet was held at the Armory in New York City.

The Orange brought home three gold medals and many of the athletes set personal records. Jarret Eaton took home the gold in the 60 meter hurdles, as well as setting a new Big East record of 7.70 seconds.

Dr. Buchberger traveled to New York with the team to provide chiropractic services and to help ensure the athletes' physical health throughout the



Active P.T. Solutions

40 Westlake Avenue

Auburn, NY 13021

Phone: 315-515-3117

Fax: 315-515-3121

E-mail: cara@activeptsolutions.com

website: www.activeptsolutions.com

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

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

...Because Life Should Be

ACTIVE!

Ergonomics 101: Practicing Good Habits at Home

A great deal of effort has been made to make the workplace safer for employees. The Federal Occupational Safety and Health Administration (OSHA) have played a large role in this effort. Statistics show that the efforts of OSHA have had a positive effect on reducing injuries in the workplace, but are employees using the lessons learned at work in the home? Often times the answer is no. Here are a few ways to apply ergonomic principles to home activities.

When performing tasks such as gardening, cleaning or cooking, be sure that you have the right tool for the job. Find tools that have a comfortable grip and limit the amount of bending required to complete the job. Using the wrong tools for the job causes unneeded stress on the body as well as prolonging the task further fatiguing muscles.

Another lesson often avoided with many activities at home is the use of proper lifting techniques. We don't always think about using good body mechanics with everyday activities but

it is important to be smart when lifting. Avoid lifting objects that are too heavy for you and ask for help when the load is heavier than one person should lift. Always keep the load close to your body when lifting. You should also remember to keep the back in a neutral posture, avoiding excessive flexion of the spine when bending. With activities like vacuuming or picking up objects off the floor, be sure to bend at the hips and knees and maintain good body mechanics.

When working in areas where you will be spending long periods of time; such as the kitchen, make sure that your work surface is adjusted correctly to avoid overreaching or bending. A height below your elbows will accommodate most activities. Take frequent breaks and vary the tasks to avoid overloading muscles. A shock absorbing mat can help reduce stress on the body with activities requiring long periods of static standing.

Many of these lessons are familiar to most people but continue to be left out of practice in the home. Practicing good ergo-

nomie principles with everyday activities in the home and at work will give you the best chance of avoiding repetitive strain injuries. Consistent use of ergonomic principles will become habit forming and carry through with all activities in any setting.

By: Thomas Zirilli, PT