

At Trio Rehab, our focus is to educate our patients about the three disciplines of therapy; Physical, Occupational, & Speech Therapy. We provide detailed insight into how therapy is beneficial to certain conditions as well as information on symptoms and treatments for different conditions. We believe that knowledge is power and knowing what is available to you is vital in getting the proper care.: https







LADIES OF TRIO REHAB

Stephanie Hernley, PT

Disease, Stroke Rehab

and Pain Manag

alizes in Parkinson

Karen Ross. SLP-CCC alizes in Parkinso ease, Aphasia and Dysphagia









Kathy Baker, OT, CHT

Elbow, Wrist and

Hand Disorders

Eileen Vogt, PT

Specializes in Sports Medicine and Knee

Rehabilitation

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Specializes in Should

Debi Cuellar, PT ializes in Shoulder, Hip, Debi Cuellar, PT



Knee, and Foot Disorde

At Trio Rehabilitation, our therapists specialize in fall prevention, fall recovery, and increasing patient confidence! We work with all patients individually for approximately one hour to assure they receive the best care possible.

Referrals are always welcome at Trio. We are a locally owned, female run clinic here to serve your clients! All three disciplines of therapy located under one roof.

### **PHYSICAL THERAPY**

HAND THERAPY tips and Ficks

### Reach Right Common mistake: Reaching with your arm fully stretched.

Typical tasks: Dusting; washing dishes; reaching overhead shelves; cleaning windows or walls; picking up objects.

### Safe solutions:

- Keep arms close to your body to minimize strain on shoulders.
- Bring objects to waist level instead of reaching out with arms.
- Utilize wands and poles with extended handles.
- Avoid excessive back and arm extension by using a sturdy stepstool when reaching for overhead items.





Primarily Primates is a non-profit sanctuary in Bexar County, Texas that provides lifetime care for 300 + animals, mostly primates, including 33 chimpanzees. Primarily Primates is in need of financial donations as well as nuts and dried fruit. To donate and to learn more, visit: primarilyprimates.org.

• 1 large lemon, juice of • <sup>1</sup>/<sub>2</sub> cup chicken broth

• <sup>1</sup>/<sub>2</sub> cup dry white wine

• 1 tbsp dried oregano, divided • Private Reserve extra virgin olive oil

**One-Skillet** 

Ingredients

equal size

Salt and pepper

**Mediterranean Chicken** 

**Recipe with Tomatoes** 

Easy Mediterranean Chicken Recipe

15 minutes to cook! Plus, it's loaded

with favorite Mediterranean flavors.

• 4 boneless, skinless chicken breasts of

• 2 tbsp minced garlic or garlic paste

that requires little prep, one skillet, and

and Green Olives

- 1 cup finely chopped red onion
- 1<sup>1</sup>/<sub>2</sub> cup small-diced tomatoes
- <sup>1</sup>/<sub>4</sub> cup sliced green olives • Handful of fresh parsley, stems removed,
- chopped
- Crumbled feta cheese, optional

Instructions: Pat the chicken breasts dry. On each side of the chicken breasts make three slits through. Spread the garlic on both sides; insert some garlic into the slits you made. Season the chicken breasts on both sides with salt, pepper and ½ of the dried oregano. In a large cast iron skillet, heat 2 tbsp of olive oil on medium-high. Brown the chicken on both sides. Add the white wine and let reduce by ½ then add the lemon juice and chicken broth. Sprinkle the remaining oregano on top. Reduce the heat to medium. Cover with a lid or tightly with foil. Cook for 10-15 mins turning the chicken over once (chicken's internal temperature should reach 165 degrees F.) Uncover and top with the chopped onions. tomatoes and olives. Cover again and cook for only 3 minutes. Finally add the parsley and feta cheese. Serve with a light pasta, rice or couscous. Enjoy!

Arthritis Care // Cardiac Rehab // Difficulty Walking // Fall Prevention Fine Motor // General Orthopedic Conditions // LSVT BIG/Parkinson's Intervention // Neurological Rehabilitation // Pain Management // Pre- and Post-op Therapy // Stroke Therapy // Total Joint Program // Vestibular (dizzy)/ Balance Rehabilitation // Wheelchair Seating and Positioning

### OCCUPATIONAL THERAPY

Arthritis Care // Cognition/Dementia Support // Daily Living Skills Intervention // Equipment Assessment & Recommendations // Fine Motor Coordination Remediation // Hand Therapy (CHT) // Low Vision // Stroke Therapy

### **SPEECH THERAPY**

Auditory Rehabilitation // Cognition & Language Support // Difficulty Swallowing (Dysphagia) // Dysarthria Therapy // LVST LOUD/Parkinson's // Vital Stim® Therapy // Voice & Speech Disorder Treatment

TRIE REHABILITATION & WELLNESS SOLUTIONS

18 Scenic Loop Rd. Suite 200-A Boerne, TX 78006 830.755.6091 | eFax: 1 (855) 923-0869 info@TRIOrehab.com | TrioRehab.com



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**KATHY BAKER Occupational Therapist Certified Hand Therapist** 

EDUCATE | PROMOTE INDEPENDENCE | IMPROVE FUNCTION

# An Interview with KATHY BAKER

**Q:** What made you want to be an Occupational Therapist (OT) and then pursue your Certified Hand Therapy (CHT) license?

I severely injured my left arm in high school requiring multiple surgeries. In order to regain functional use of my arm, I participated in Hand Therapy as part of my rehabilitation. That exposure led me to pursue being a therapist as well as wanting to advance my own career to become a CHT.

I have always believed having a personal experience with an injury impacts your life and your ability to relate to patients who have a hand injury.

**Q:** What is the difference between a Physical/Occupational Therapist and a Certified Hand Therapist (CHT)?

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According to the American Society of Hand Therapists (ASHT), "A hand therapist is an occupational therapist or physical therapist who, through advanced study and experience, specializes in treating individuals with conditions affecting the hands and upper extremity.

A qualified hand therapist can evaluate and treat any problem related to the upper extremity. The hand therapist can effectively treat and rehabilitate the patient through post-operative rehabilitation, preventative, non-operative or conservative treatment or industry consultation. The therapist works closely with the physician and patient to provide a continuum of care. This often starts within days of the injury or surgery right through the patient's return to work and/or a productive lifestyle." **Q:** What can a CHT treat? Why do you think it's important to see a CHT?

CHT's can treat repetitive use injuries, orthopedic injuries, fractures, tendon lacerations or ligament ruptures. I can treat pretty much anything that causes an individual to lose function in an upper extremity.

As a CHT I am able to treat anything from the neck down to the fingers including the nails! As a CHT, I have advanced continuing education with clinical experience along with the integration of knowledge in anatomy, physiology and kinesiology that allows me to be highly proficient in treatment of pathological upper extremity conditions resulting from trauma, disease, congenital or acquired deformity. Essentially, I feel like the "bridge" in continuity of medical care for the physician and the patient to achieve optimal outcomes.

Q: What is your favorite diagnosis?

I really can't say I have a favorite diagnosis but what truly intrigues me are those cases that are challenging and force me to think outside the box.

**Q:** If you could do it all over again, would you?

I am not one to second guess and play the "what if? "game. I truly believe the path I took was meant for me. Who am I to guess what God has planned for me?

6.What is your favorite phrase, quote, thought about your job?

"I can only guide my patients to improve. With their determination and perseverance while working with my guidance, we can never fail."

\*The mission of the ASHT is to to build and support the community for professionals dedicated to the excellence of hand and upper extremity therapy.

"Very professional service. Kathy Baker was always prepared for each session. This gave me a lot of confidence in trusting the pace she set concerning my rehabilitation." ~WILLIAM SIMPSON

Welcome TO THE TRIO TEAM



### DAVID ROSE Occupational Therapist Doctorate

David Rose earned his Doctoral degree in Occupational Therapy in May 2020; smack dab in the middle of a pandemic. He earned his degree from Creighton University. His emphasis during school was the upper extremity and hand rehabilitation.

David is a former, two-time national champion in the sport of cycling. In addition, he was a resident athlete at the Colorado Springs Olympic Training Center and competed in National and World Cups events. David is excited to transfer his sport clinic skills to the public!

David will be working alongside Jennica Colvin, OT and Kathy Baker, OT, CHT to gather the 4,000 hours and 3 years of experience required to sit for the CHT exam in 2023. David started working at Trio in March of this year and got engaged to the love of his life, Evon in April!

We are excited to have David on our team! Welcome, David!



Helping our clients become the best version of themselves through trustworthy and evidence-based rehabilitation. PATIENT SPOTLIGHT Anne and John Newman MARCH 17, 2021

- **Q:** Would you please explain the nature of your disorder and associated symptoms/difficulties for which you sought therapy?
- Both of my hands have MRSA that is expected to remain for rest of my life despite continuous treatment with antibiotics. As a result, right index finger has partial amputation and right ring finger has complete amputation. On my left hand I am unable to bend Index and middle fingers fingers at all. Unfortunately, I am left-handed resulting in limited dexterity and difficulty performing detailed tasks. In addition, Grip strength was greatly reduced in both hands. Purpose for treatment: Restore strength and dexterity in both hands. Seek tools to improve functionality in both hands, such as buttoning, opening a pill bottles, be able to write, etc.

**Q:** What type of therapy did you receive?

- Hand Therapy
- Q: Who recommended you to Trio?
- Personal friends.
- **Q:** What were your goals?
- Restore strength, dexterity, and basic functionality.
- **Q:** What interventions did you find the most interesting and/or helpful?
- Strength exercises with putty and grip tools. These exercises made my fingers and hands hurt for days, making me realize how little I had been using them and the extent of functionality that I had lost. Exercises to spread fingers and put them together again and all kinds of helpful exercises to improve dexterity as well as tools to help with writing were also needed.
- **Q:** What improvements did you notice and how did that make a positive impact on your life? Were your goals met?
- Increased grip strength and partial restoration of functionality. My goale were met, but I still have work to do to continue to improve. Now I have the tools to be able to improve. Additionally, I have "work-arounds" to better manage and perform my activities of daily living.
- **Q:** Please provide any additional details or information you wish to relay to the public!
- TRIO did wonderful work that helped me tremendously. I highly recommend TRIO. Initially, I was hesitant to come, but I soon learned that the treatments really did help me, and I really did need that help. TRIO immediately knew right away how to help me. TRIO took care of all administrative issues seamlessly, relieving me of that burden. The clinic was clean, bright, and arranged in a useful and functional pattern. The staff was very supportive and pleasant, although I don't know what any of them truly looked like with all of the mask requirements.

# HOW TO KEEP HANDHELD ELECTRONICS FROM CAUSING HAND AILMENTS

Recent research has shown that heavy use of handheld electronic devices such as cell phones, iPads, and video game controllers directly contributes to the onset of carpal tunnel syndrome, tendonitis and other ailments. Many handheld electronics users spend hours on these small electronics every day; sending text messages, responding to e-mails, and spooling through music lists; causing "BlackBerry Thumb," a term coined to reference the popularity of these activities. Because electronic devices are continuously being enhanced with more features and capabilities, encouraging heavier and more extended use, hand ailments will increase unless we, as a population, learn to take preventive measures.

## GUIDELINES FOR HEALTHIER USE OF HANDHELD ELECTRONICS:

- If you have pain during the activity, stop. Pain is one of the ways your body is letting you know that you are overextending a particular muscle group.
- Use a neutral grip when holding the device. A neutral grip is when the wrist is straight, not bent in either direction (not strong or weak); allowing more available wrist motion.
- Take a break every few minutes or switch to another activity. Overuse of repetitive motions, such as pressing buttons, can cause tendonitis of the elbow or lead to Carpal Tunnel Syndrome (tendon or nerve irritation).
- Use props to support the device. When possible, rest arms on pillows or use a desk or tabletop to support the device. This will allow you to keep your head and arms in more natural positions; decreasing neck and arm strain.
- Sit in an appropriate chair. This is a chair that allows you to put your feet comfortably on the floor and provides good back support.
- Switch hands frequently and vary the use of fingers/digit. This will allow the one hand or other fingers to rest and reduce fatigue.
- Frequently look away from the screen. Focus on a distant object to help reduce eye fatigue.

Go to https://www.triorehab.com/hand-therapy-handheldelectronics/ to learn about Exercises for preventing injuries due to overuse of handheld electronics  $( \bullet )$