



NEWSLETTER ♦ 55th Edition ♦ Mar. 2018

TAKING CHARGE – by Belinda

When faced by serious health issues, the challenges can be overwhelming. Sometimes we may feel like waving a white flag and saying, "I have had enough. I surrender." We feel as though we have been pushed to the brink, physically, emotionally, and often times financially.

For most amputees, the amputation itself is just one of the many obstacles we must overcome on a daily basis. Many of us have other underlying health problems that lead to the amputation; some must face the psychological healing from a traumatic accident, while others deal with complications due to aging such as arthritic knees and hips.

Following most surgeries, you have some pain and discomfort but you heal and life goes pretty much back to normal. The amputee's life is forever changed; some much more so than others depending upon the level and number of amputations. We are forced to adapt to a new way of life. Things that once were easy to accomplish, now become challenges. We must learn new ways to perform everyday tasks. The addition of dealing with other health issues, insurance companies, hospital bills, being unable to work, changes in relationships, and the loss of independence may make life seem impossible.

So what do we do? How can we overcome this? The key to this is **we**. Somehow, **we** must find that inner strength and courage to do what has to be done and continue on. Yes, we can seek the help of family, friends, support groups, doctors, prosthetists, and psychologists. Their contribution to our recovery process is extremely valuable, but ultimately **we** are the ones who must take charge.

I have seen examples of amputees taking charge in the past few months and I would like to share some of them with you. First, there is Conni. She badly needed a knee replacement on her sound leg to enable her to walk with her prosthesis. One health problem after another kept her from having knee replacement surgery for five years. She battled her fears and a surgeon who initially refused to do the surgery. I saw Conni walk at our last meeting for the first time since I have known her. It was beautiful!



Then there is Katie, who is a bilateral above-knee and partial hands amputee. She has been confined to a wheelchair for years since losing her limbs due to complications from sepsis and has dealt

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AMPUTEE COALITION

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How to Be a Good Patient

– by Jason T. Kahle, CPO, LPO, & M. Jason Highsmith, DPT, CP, FAAOP

It is important that the prosthetic industry focus on disseminating information that can most benefit the amputee, and it's understandable why amputees turn to the experts for answers. However, there is much that you can do for yourself to take control in the aftermath of amputation and well into your recovery. It's important to use your time wisely with your prosthetist to get the most out of your visit. The following advice is meant to enhance your experience with your prosthetist and to help you become as self-reliant as possible.

Choose your attitude wisely

The most successful patients are those who move on despite the speed bumps on the road to rehabilitation. When you become an amputee you have a choice – stay fixated on the fact that you've become an amputee or focus on what's important in your life and recognize that being an amputee doesn't mean that you can't achieve what you've always wanted to do. Your experience as an amputee is in part determined by which attitude you have.

Set reasonable expectations and goals

It's important to have an honest conversation with your prosthetist, therapist and physician about reasonable goals. Expecting that your prostheses will make you superhuman like the Six-Million Dollar Man is unrealistic. The human body is amazing, and cannot possibly be replaced, and a prosthesis will not make you more athletic than you were before your amputation. If you weren't a runner before your amputation, your prosthesis won't make you a runner now; only you can make a runner out of yourself. You should be able to go back to doing most things you were doing before your amputation. However, the situation may be different now, requiring trial and error, practice, therapy and, above all, patience and initiative. For people who have the desire and ambition, having a prosthesis or amputation is rarely a limiting factor. We have many patients who golf, run, sky dive, bike, rock climb, kayak and more.

The Agency for Healthcare Research and Quality (ahrq.gov/Ad Council) has excellent guidelines for both clinicians and patients. For example, the following questions (modified here to apply to prosthetics) are designed to help patients understand procedures better so they can play an active role in their care. Consider these and write a list of your own questions and concerns before you visit your healthcare provider.

- What is the test prosthesis, socket, foot, knee, etc., for?
- How many times have you done this procedure?
- When will I get the results?
- Why do I need this surgery?
- Are there any alternatives to surgery (prosthetic accommodations, etc.)?
- What are the possible complications?
- Which foot, socket, suspension, therapist, etc., is best for my needs?

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TAKING CHARGE (cont'd)

with chronic pain. Katie just completed 2 weeks of intensive physical therapy and is now walking on stubbies (shortened prosthetics). She is planning on traveling to Oklahoma City to take part in a boot camp for AK amputees. Katie took charge and is well on her way to walking once again.

Last but not least is Bill, whose determination has inspired so many. Faced with yet another obstacle, cancer, he battled his insurance provider to approve the treatment that he needs. He will begin immunotherapy treatment this week, is continuing his physical therapy, and plans to get back to his driver's training class. Here are three individuals who, despite facing what to many would seem insurmountable challenges, have found the courage to take charge and continue to strive to reach their goals. Each of them could have given up, and no one would have blamed them; but Conni, Katie, and Bill each found that courage in their own way to continue ***moving forward!***

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## QUOTE OF THE MONTH

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I'm Moving Forward . . .

Each month we are including a picture of one of our members ***moving forward*** after limb loss.



David & Conni Skidmore ***moving forward*** and having a great time at the AC Conference!

** If you have a picture that you would like to submit, please send it to Julie or Belinda. **

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## How to Be a Good Patient (cont'd)

- How do you spell the name of the prosthesis, socket, foot, knee, etc.?
- Are there any maintenance issues, additional costs, time commitments?
- Will this prosthesis, socket, foot, knee, etc., interact with the prosthesis, socket, foot, knee, etc., that I'm already using?

### Hygiene

Patients rarely have a reaction to a material that is used in prosthetics; most materials are either medical grade and/or hypoallergenic. While such reactions can happen occasionally, skin problems more commonly occur due to poor hygiene. When perspiration sits on the skin instead of evaporating, the skin can react to the microbes and chemicals in the perspiration or can break down due to chronic exposure to the patient's own body fluid. It's also important to your health and the health of the professionals who will be working with your prosthesis that you clean your entire prosthesis daily. Unless the manufacturer or prosthetist states otherwise, we recommend using a spray bottle with a 50/50 mixture of high-level isopropyl (above 70 percent) and water. Dry the prosthesis with a clean paper towel. Socks that go next to your skin should be washed after one use. Liners should also be hand-washed with soap and water after one use. In short, anything that goes next to your skin should be washed daily. Most socks are washing-machine safe. Ask your prosthetist for advice on cleaning your prosthesis. He or she will be glad you did.

### Self-adjustments

Many patients have a basic knowledge of mechanics and a basic tool collection, but this doesn't qualify them to make self-adjustments. When you change one thing on a prosthesis, it will always have implications and affect something else. Knowledge of biomechanics, anatomy and materials must be a part of the adjustment process. We have several prosthetists and prosthetic technicians who are our patients as well. They don't make their own adjustments; they call us when they have problems and we work it out together.

### Self-diagnosis

Different prosthetists may defer more or less to what the patient wants, while others will dictate what they deem best for their patients. Our philosophy is that it is our role to give you the best advice, and your role is to either take that advice or not. Whatever your prosthetist's philosophy – and your tolerance for that philosophy – remember that he or she sees hundreds, even thousands, of patients and has a wealth of knowledge. Use it to learn as much as possible and to meet your needs. Self-diagnosing may lead you in a direction that could be detrimental to your health.

### Timeliness

It's important to be on time with your prosthetist. Prosthetists have many patients, and sometimes their schedules are fragile. They may have to go to the hospital on an emergency call, book a special one-day procedure for a patient, or have eight patients scheduled that day. The point is, if they don't have the allotted time required to complete a task, then someone's time will be compromised; it might be yours. Walk-in appointments are ill-advised; call ahead and let someone know that you are coming.

### Overall health maintenance

The number one thing you can do for yourself as an amputee is to lose weight if you're overweight or not gain weight if you are not. Fitness is important to overall health – body, mind and soul. If you can't go for long walks or run, consider one of numerous other exercise routines, such as biking, swimming or even kayaking. Stay on your prescription protocols and let your prosthetist know if they change. Many prescriptions, like blood thinners and diuretics, will affect your volume. If your volume changes, then your fit will change.

### Be a patient patient

In a busy year, a prosthetist may fit 200 prostheses. It takes about an hour to fit a prosthesis. There are about 2,000 working hours in a year. So what does the prosthetist do with the other 1,800 hours? Mostly, adjusting those prostheses. Fitting plastic on the human body isn't easy, and often requires many adjustments to achieve a proper fit. Also, your body changes, and with it, your fit. Be aware of this and understand the process so that you can have the proper amount of patience required for the prosthetist to provide you with a proper fit.

### Help prevent medical errors

Know your past and present medical history. Knowledge of your

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## SPOTLIGHT — by Belinda

Each month in this column, we shine our light on a group member or special organization. For the month of March, that light will shine on the Amputee Coalition Paddy Rossbach Summer Youth Camp. Paddy Rossbach was a past President/CEO of the Amputee Coalition and oversaw the creation and expansion of the summer camp. Upon her retirement, the camp was named in her honor. The Amputee Coalition Paddy Rossbach Youth Camp is a six-day, traditional summer camp experience for youth ages 10-17 with limb loss/limb difference. The camp is held at the Camp Joy Outdoor Education Center in Clarksville, Ohio.

Campers come from across the United States to take on the rope course and rock climbing wall, to play volleyball and other team sports, to fish, canoe, and swim all without having to worry about the stares and comments of others. They can feel free just to be themselves, laugh, play, learn new skills, and make new friends. They see that they do not have to sit on the sidelines or watch from a window as other children play. The camp provides them the opportunity to adapt to their limb loss and build independence and self-confidence in a safe and supportive environment.

The camp counselors are all living with limb loss or limb difference and must be at least 20 years old. Many of them attended an Amputee Coalition camp when they were younger and are excited to be able to pass the experience along to the next generation.

Three years ago, a Leadership Camp to help 18- and 19-year-olds acquire life skills as they transition from high school to college and career was added. They also serve as mentors during the discussion groups that cover topics in a way that only others living with limb loss or difference really understand.

Each camper receives a scholarship which pays for all expenses including transportation. The Amputee Coalition arranges all travel plans and works closely with the airlines and the Transportation Security Administration to ensure the best possible flight experience for each camper.

*Moving Forward* is a proud sponsor of the Paddy Rossbach Summer Youth Camp. All proceeds from our March Madness Soup & Chili Supper will be donated to the camp. Please join us for this event and help us to provide these children with a life-changing opportunity.



## How to Be a Good Patient (cont'd)

medications, X-rays/images, physical therapy and surgical and prosthetic history provides important insight for efficiently designing the right prosthesis. Be sure to discuss your insurance with the prosthetist's staff. It's important, for instance, to understand the difference between Medicare and a Medicare supplement. Let the staff know if your insurance changes; if you're considering a change, discuss the implications of that change with your prosthetist. In summary, healthcare is a business – your business. You would never make a business investment or large purchase without being an informed consumer. Being a "good patient" is very similar. You have needs; understand them. A market exists to satisfy your needs; understand the market and its options. Be responsible and self-reliant, and if your prosthetist is not doing his or her part, go somewhere else, knowing that you are a good partner and a good patient.

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FEBRUARY RECAP

Moving Forward held its meeting at SIRH on Mon., Feb. 19th. Group member Jim Davis was the guest speaker for the evening. He shared some of his life experiences both while serving in the military and as a civilian. Jim discussed the importance of knowing self-defense and demonstrated ways in which we can protect ourselves. He also showed some of the devices available to aid us in self-defense. It was a very helpful discussion, and we appreciate his desire to help those with limb loss to feel safer in their day-to-day lives.

Group members Kelly Reitz and Mike Portman represented our group at the Harrison Co. Hospital Health Fair in Corydon, IN, on Sat. morning, Feb. 24th. While there, they distributed group information and publications from the Amputee Coalition. They also made contacts with other non-profit groups and individuals in the medical field.

Our KY meeting was held that afternoon. A special presentation was given by Dr. Brandon Gish from Commonwealth Pain & Spine. He discussed the different types and causes of pain. He also talked about the many different alternatives for relieving pain whether it is caused by an amputation, back problems, diabetic neuropathy, migraines or many other reasons. Along with medications, massage, acupuncture, chiropractic care, mirror-therapy, physical therapy, and other alternatives; Dr. Gish presented information on newer pain therapies including Spinal Cord Stimulation (SCS) and Dorsal Root Ganglion Stimulation (DRG). Pain management is of great importance not only to amputees but to others living with chronic pain as well. With the ever increasing opioid epidemic challenging our country, it is of increased importance to get information out to the public about the alternatives to using opioids. We wish to thank both Dr. Gish and Liz Thompson, who is a new patient specialist, for taking this time to help educate us about pain management alternatives.

NOTE: For those who couldn't attend this meeting, the Amputee Coalition recently hosted a webinar on the subject of pain management. It is available on their website at: <https://www.amputee-coalition.org/resources/amputee-coalition-webinars/pain-management-choices-developments-people-living-limb-loss/>

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## Thank You to the Amputee Coalition!

**\*\*** We want to thank the Amputee Coalition for allowing us to use their articles in our newsletters. We also want to thank them for the many brochures and publications that they provide to our group. It is not the intention of the Amputee Coalition to provide specific medical or legal advice but rather to provide consumers with information to better understand their health and healthcare issues. The Amputee Coalition does not endorse any specific treatment, technology, company, service or device. Consumers are urged to consult with their healthcare providers for specific medical advice or before making any purchasing decisions involving their care. **\*\***

## FUN WITH WORD SCRAMBLES

Unscramble these words and then use the letters in parentheses to finish the sentence. You can find the answers on pg. 6.

ITSULP                    \_ \_ \_ \_ ( ) \_  
OFDFSLAID            \_ ( ) \_ \_ \_ \_ \_ \_ \_  
NOIWRASB            ( ) \_ \_ \_ \_ \_ \_ \_  
HATMWR                \_ \_ \_ \_ ( ) \_  
AYEBTU                \_ \_ \_ \_ \_ ( )

SPRING IS NATURE'S WAY OF SAYING,  
"LET'S \_ \_ \_ \_ \_!"

~~~~~



– by Belinda

Our Q&A section is provided so that our readers can submit a "Q" and then I, in turn, ask some of the members of the group for a response. From time to time, I also do some research from various informational sources so I can better respond to the submitted question. I am not trying to provide medical advice, but just trying to help amputees who are in search of some answers. As always, I encourage you to talk to your family doctor, specialist, or prosthetist about your concerns. **Do not be afraid to ask them questions!**

In recent months, our group has had various speakers and presentations on pain management. We have all heard about and tried many of the medications and treatments available. What may work well for one may not provide sufficient relief for the other. That's why it is important to do your own research, and have an open dialogue with your doctors and prosthetists. One treatment for phantom limb pain that I am asked about quite



often is *mirror therapy*. How can simply looking at your limb in a mirror possibly provide any real pain relief? Honestly, I have never tried mirror therapy, so I can't give you my personal opinion on its effectiveness. I have talked to amputees who have done this type of

therapy and the results seem to be mixed, with some saying that it was extremely helpful and others saying they didn't experience any relief from it. I decided to do some research on the topic to find out how the therapy is done and the science behind how it works. First, let's begin by defining phantom limb pain (PLP). This is pain that feels like it is coming from a body part that is no longer there. Doctors once believed that this phenomenon was a psychological problem, but experts now recognize that this pain originates in the spinal cord and the brain. During imaging scans (MRI or PET), portions of the brain that had been neurologically connected to the nerves of the amputated limb show activity when the person feels phantom pain. Many experts believe that the pain may be a response to mixed signals from the brain. After an amputation, areas of the spinal cord and brain lose input from the missing limb and adjust to this detachment by triggering the body's most basic message, "pain".

Mirror therapy involves the amputee placing a mirror between his/her intact limb and the amputated limb. The amputee then looks at the mirror while moving the intact (sound) limb in different directions (ex: toe and foot flexions, ankle rotations) while visualizing moving the amputated limb (which is behind the mirror and out of sight) in those same directions. The reflection of the sound limb in the mirror appears to be the missing limb. This technique can be used for both upper and lower limb loss. That visual image seems to be the key component in achieving pain relief.



Dr. Tsao, a neurologist with the U.S. Navy, conducted a controlled trial to investigate the use of mirror therapy to treat phantom limb pain. He used 3 control groups in his trial. One group used a mirror to view their limb, the 2nd placed a covered mirror between their limbs which blocked the reflection, and the 3rd group used no mirror but was told to mentally visualize the movement in their amputated limb. Each amputee performed the therapy for 15 minutes/day for 4 weeks. At the end of that time, 100% of patients in the mirror group reported a decrease in pain, 17% in the covered mirror group, and 33% of the visualization group. There are several theories as to how mirror therapy

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LET'S GET MOVING!

– by Belinda

During the past few months, I have been sharing information with you about different ways to include aerobic or cardio exercise into your life. In the February issue, different types of exercise machines were described along with their pros and cons. I know for many of you when you hear the words "*stationary bike*", the first thing that comes to mind is "*that's too boring*." So for those readers, I will spice things up for you by discussing some fun and lively exercise options.

Before we start, though, I want to take you back to the decade when the concept of exercise really began to change.



That decade was the 80's. Along with big hair, the mullet, shoulder pads, spandex, leg warmers, and Madonna; the 80's is when exercising became more fun. This is when music and dance movements became a part of the workout scene. Exercise videos became big sellers; with some of the biggest names being Jane Fonda, Richard Simmons, Denise Austin, and Kathy Smith (my personal favorite). Fast forward to now, and the music and moves may be different (although the grapevine is still popular); but the idea is still the same, that to keep people motivated to exercise, it has to be fun.

To see what types of fitness classes are being offered in our area, I visited the YMCA website. This was one of those moments when I realized just how behind the times I am. A few of them, I am familiar with, but others I am not. The following are some classes being offered, and as not to scare you off, I will start with some of the more common ones that would be appropriate for beginners, the elderly, or individuals with mobility issues:

SilverSneakers Classic: Have fun and move to the music through a variety of resistance exercises designed to increase muscular strength and range of motion.

SilverSneakers Circuit: Upper-body strength work is alternated with low-impact aerobic movements.



SilverSplash: Improve agility, flexibility, and cardio endurance while having fun in the pool. No swimming ability is required.

Water Fitness Classes provide a great workout without stress on the joints. Classes range from basic low-impact to Aqua Zumba and Tai Chi.

Forever Fit: A low-impact aerobics class for beginners or older adults.

Step Express: A fun classic workout to music. Step aerobics provides cardio and toning.

Zumba: This class has been described as a dance-fitness party. Move to high-energy music. You will be having so much fun, that you won't realize that you're exercising.



Zumba Gold: This class is a modified version with low-impact moves.

TaijiFit: The class combines traditional Tai Chi with modern fitness and music. It provides a fun mind/body connected workout.

Cycling: This is a traditional stationary cycling class.

Now for some of the more advanced classes:

Endurance Ride: An hour-long session of cycling as you conquer various terrains.

H.I.I.T.: High intensity interval training.

Insanity: A cardio-based total-body conditioning program.

Pound: A full-body cardio jam session inspired by drumming.

Power Fusion: Incorporates strength training, balance, pilates, yoga, and boot camp.

Triple Threat: A unique combination of cardio, strength, and core.

Turbo Kick: A Kickboxing class that challenges you both physically and mentally.

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Q & A (cont'd)

works, but a basic answer seems to be that it tricks the brain into thinking that the amputated limb is still intact and well. Dr. Tsao believes that the failure of mirror therapy to work for some patients is due to insufficient length of treatment. "The greater the pain starting, the longer treatment you have to give before you say it's not going to work or you give up on therapy," Dr. Tsao said. He continued, "Our conclusion is that if you start with a mild amount of pain, you should be able to see a response in 1 week. If it's moderate, 2 weeks, and if it's severe, within 3 weeks."

Will mirror therapy work for you? The only way to find out is to give it a try. Like anything else, the attitude with which you go into it can affect your results. If you are thinking that this is nonsense and will never work, most likely it won't. On the other hand, if you do it correctly and for the designated amount of time, you may find the relief from phantom pain that you have been searching for.

The Amputee Coalition has an excellent webinar on the topic of mirror therapy on their website at:

amputee-coalition.org/resources/amputee-coalition-webinars/mirror-therapy-for-phantom-limb-pain/

References for this article:

practicalpainmanagement.com

medscape.com

mayoclinic.org

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## SPECIAL ANNOUNCEMENT

**Moving Forward** will be holding an Amputee Coalition Peer Visitor Certification class on Sat., May 12, 2018. The class will be held in the board room at the Okolona Fire Station, 8501 Preston Hwy. in Louisville. The course will be instructed by Valerie Gibbs, an AC Certified Peer Trainer and Coordinator of Amputee Rehab at Cardinal Hill Rehabilitation Hospital in Lexington KY. A fee of \$10.00 will be charged by the Amputee Coalition to cover the cost of course materials. All participants are also required to get a criminal background check. The fee for this is \$37.00. Once you have been accepted into the class, you will receive a link by email telling how to obtain the background check. This course is open to both amputees and caregivers. Pre-registration is required, and you are encouraged to register as soon as possible. Qualifications and an application are available at our website: [ampmovingforward.com](http://ampmovingforward.com) or by contacting Belinda at 812-620-3694. It is a full day class, and the time will be announced later. Breakfast and lunch will be provided.

\* The deadline for registering for this course is March 14th.

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Krafty Kids by Katie

GRAHAM CRACKER RAINBOWS

A snack & a craft all in one! All you need to make them is:
graham crackers
blue frosting (vanilla frosting tinted with blue food-coloring)
marshmallows (large & small)
rainbow airhead candy



To make them, start by spreading the frosting thickly on a graham cracker. Place some marshmallows at each end of the cracker to bookend the rainbow airhead. You may need to trim the airheads just a little, so they will stand up better. The kids will love to share this yummy snack with friends!

LET'S GET MOVING! (cont'd)

U-Jam: An intense cardio-dance fitness program

These are just a few of the classes available to you. Visit or contact your local YMCA or area fitness facility to see their options. Please remember to always check with your doctor before beginning any exercise program. It's also important to use common sense when choosing an exercise class. Pick a class that is appropriate for your current ability level. When exercising, it is important to push oneself, but not to the point of injury. By pushing too hard, you can do more harm than good. With the vast number of exercise programs available, we should all be able to find one that is a perfect fit for us. One that both improves our physical fitness and that we enjoy doing.

So come on everybody, let's dig out our spandex and leg warmers (okay, maybe we should skip that part), and **let's get moving!!**

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## MARCH UPCOMING EVENTS

### MEETINGS:

**March 7th**, Wed., from 6:30 - 8:00 pm at Harrison Co. Hospital, 1141 Hospital Dr. N.W., Corydon, IN, in the Baumgart Room.

**March 19th**, Mon., from 6:30 - 8:00 pm at Southern IN Rehab Hospital, 3104 Blackiston Blvd., New Albany, IN, in the Education Conference Room.

**March 24th**, Sat., from 2:00 - 4:00 pm at Norton Brownsboro Medical Plaza 1, 4950 Norton Healthcare Blvd., Louisville, KY, in Community Room 301B. We will have a presentation by Amira Idris about a wearable medical device which she developed that uses vibration therapy to relieve both phantom and residual limb pain. George Bay and Roosevelt Smith with Veterans Voices of Kentuckiana will also be there to speak to the group about the services provided by their organization.

### EVENTS:

Our March Madness Soup & Chili Supper will be held on Sat., **March 10th**, from 5:00 - 8:00 pm at the Okolona Fire Station, 8501 Preston Hwy., Louisville, KY. Parking and the entrance are in the rear of the building. We will be on the 2nd floor, and an elevator is available. Everyone bringing soup or chili will be entered in our cook-off competition. A group of fire fighters will be determining the winner of the Judge's Choice Award in both the soup & chili categories. A People's Choice Award will also be presented in each category. We will also be holding our Best-Dressed Fan contest, so be sure and wear your favorite team apparel. A basketball trivia contest will be included in the fun! You are asked to bring soup, chili, or a dessert if you can. Everything else will be provided. There will be a fee of \$5.00 for all the soup, chili, hot dogs, and dessert that you can eat. Children 12 & under eat free. All proceeds from the event will be donated to the Amputee Coalition Paddy Rossbach Summer Youth Camp.



### Important Upcoming Dates:

**March 9th - 18th: The 2018 Winter Paralympic Games** will be taking place in Pyeongchang, South Korea. The games will be televised on NBC and some of their affiliates. You will want to cheer on Louisville's own Oksana Masters as she competes in her 4th Paralympics. To learn more about the games and Oksana, visit: [teamusa.org/PyeongChang-2018-Paralympic-Winter-Games](http://teamusa.org/PyeongChang-2018-Paralympic-Winter-Games)

**March 14th** is the deadline to register for the Amputee Coalition Peer Visitor Training Course that we will be offering on May 12, 2018, at the Okolona Fire Station. For more information, please see the notice in this newsletter or visit

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## KATE'S KITCHEN

### SWEET POTATO CASSEROLE

This Sweet Potato Casserole would make a great addition to your Easter dinner or just a delicious side dish on a chilly March night.

**Ingredients:** 3 cups mashed sweet potatoes, 2 eggs, 1 cup sugar, 1/3 cup milk, 1/3 cup butter melted, and 1 tsp. of vanilla

**Topping:** 1/3 cup flour, 1 cup chopped pecans, 1/3 cup melted butter, 1 cup brown sugar



Combine sweet potatoes, eggs, sugar, milk, butter, and vanilla in a casserole dish. Combine topping ingredients and sprinkle over casserole. Bake 25 min. at 375 degrees. Optional: Cover with mini marshmallows and bake until melted and begins to bubble.

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FUN WITH WORD SCRAMBLES ANSWERS (from Page 3)



TULIPS, DAFFODILS, RAINBOWS, WARMTH, BEAUTY

SPRING IS NATURE'S WAY OF SAYING, "LET'S P A R T Y !"

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## MARCH UPCOMING EVENTS (cont'd)

our website. You do not have to be a member of *Moving Forward* to take this course.

**March 24th** from 9:00 am - 3:00 pm Kenney Orthopedics will be offering an Amputee Walking School at Bellarmine University. The clinic will introduce treatment approaches for improved function and a return to a more active lifestyle. Instructors are Dennis Oehler and Todd Schaffhauser, both who are amputees and past Gold Medal winners in the Paralympics. Dennis and Todd have traveled the world working with amputees for over 20 years. The class is for amputees of all ages and for professionals in the field of rehabilitative medicine. They will hold another Amputee Walking School in Louisville on **August 18th** at the Masonic Home. For more information or to register for the classes, call Kenney Orthopedics at 502-882-9300.

**March 31st:** The Challenged Athletes Foundation will present an Ossur Running & Mobility Clinic in Nashville, TN. To learn more, visit: [ossur.com/mobility](http://ossur.com/mobility)

**April 16th - 17th:** Amputee Coalition Hill Days will be held in Washington, D.C. Join the AC as they visit with members of Congress and the Senate to address issues of importance to those living with limb loss. To register or for further information, go to: [amputee-coalition.org/events-programs/limb-loss-awareness-month/hill-day/](http://amputee-coalition.org/events-programs/limb-loss-awareness-month/hill-day/)

**April 19th - 21st:** The Hanger Clinic Bilateral Above-Knee Amputee Bootcamp will be held in Oklahoma City. *Moving Forward* group member Katie Flanigan plans to take part in the bootcamp this year. Registration is closed for this event, but you can still contact them to get on a waiting list. Information is available at:

[hangerclinic.com/limb-loss/adult-lower-extremity/Pages/bootcamp.aspx?refer=bootcamp](http://hangerclinic.com/limb-loss/adult-lower-extremity/Pages/bootcamp.aspx?refer=bootcamp)

**April 20th - 22nd:** The Turnstone Endeavor Games will be held in Ft. Wayne, IN. These games allow athletes of all ages with physical disabilities to compete against their peers. Many of the athletes go on to compete in the Paralympics. Registration for athletes is now open. Volunteer registration is also available. The website is: [endeavorgames.com/fortwayne/](http://endeavorgames.com/fortwayne/)

**June 11th - 16th:** The Amputee Coalition Paddy Rossbach Summer Youth Camp for children ages 10 -17 will be held at the Joy Outdoor Education Center in Clarksville, OH. For more info go to:

[amputee-coalition.org/events-program/youth-camp/](http://amputee-coalition.org/events-program/youth-camp/)

**July 12th - 14th:** The 2018 Amputee Coalition National Conference will be held in Tucson, AZ. To register or for more information visit the website at:

[amputee-coalition.org/events-programs/national-conference/](http://amputee-coalition.org/events-programs/national-conference/)

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