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Why Is a Service Line Important?



Brendan Burns, Orthopaedic Service Line Coordinator





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They help us deliver high quality care and streamline the patient journey through care

I have been living in South Carolina for 10 years now, and I still remember how, after moving here from Ontario, Canada, the first thing I noticed was the southern hospitality. It's a real thing!

It was no different when I began working at Carolina Pines. From the executive leadership to the front-line staff, there is no lack of compassion; it almost echoes in the halls.

Carolina Pines offers unique service line models for various areas and procedures within the organization. A service line is a group of related services. Service lines at hospitals are a way to streamline services to produce better quality care at lower costs for hospitals and patients. As a service line coordinator, I am available to serve as a guide for patients, making their journey through care as simple as possible.

So why is a service line important for orthopaedics? When dealing with orthopaedics as a patient, you will require care from many different departments within our facility. Office visits, physical therapy and surgery are just a few examples. The service line brings stability and increases communication across these departments. By creating this streamlined process, we provide coordinated care that can be tracked from a patient's initial visit all the way through post-surgery services, such as rehabilitation or home health. The orthopaedic service line at Carolina Pines strives to provide not only a hospital experience, but a hospitable one.

If you have any questions or are having joint pain, please feel free to contact Hartsville Orthopaedics and Sports Medicine at (843) 383-3742.

Sincerely,



Brendan Burns Orthopaedic Service Line Coordinator



A PATIENT JOURNEY

A patient at Carolina Pines Regional Medical Center typically interacts with many doctors and staff and visits more than one office or department. It's all part of the patient journey. Let's follow one fictional patient to see how Carolina Pines supports him throughout the process. We'll call him Bob.



The Patient

Bob is an active 55-year-old who enjoys playing golf.

The Problem

Knee pain is keeping Bob away from the golf course. He visits his primary care physician at The Medical Group.

Primary Care

Bob's doctor assesses his knee pain. It is severe, so he refers Bob to Hartsville Orthopaedics and Sports Medicine.

Treatment

The orthopaedist creates a specialized, nonoperative treatment plan that includes an MRI, x-ray, cortisone injections, a brace and physical therapy at Carolina Pines. A month later, Bob's knee pain is still prominent and the orthopaedist decides that Bob is a candidate for knee replacement surgery.

Preparation

Bob's orthopaedic surgeon takes the time to explain the procedure and recovery process. Bob also attends a joint replacement education class at Carolina Pines with his family.

Surgery

The orthopaedic surgeon performs the operation, and Bob is monitored closely in Carolina Pines' newly renovated surgical wing for one night.

Recovery

Bob is discharged from Carolina Pines and continues his recovery with outpatient rehabilitation at Carolina Pines, where he regains strength and independence.

Follow Up

The orthopaedist monitors Bob's recovery with regular follow-up appointments. At his final appointment, Bob is painfree and is cleared to get back on the golf course.



Whether you're an athlete or not, Carolina Pines' sports medicine team gets you off the disabled list and back to your life

You don't have to be a college football player or track star to come under the care of Aaron Wynkoop, MD, an orthopaedic surgeon who specializes in sports medicine at Carolina Pines Regional Medical Center. While Dr. Wynkoop has treated plenty of athletes in his career, most of his patients are everyday people with sports-like injuries.

Dr. Wynkoop refers to these patients as "weekend warriors" or "industrial athletes." They're bow hunters, runners, carpenters, assembly-line workers, police and corrections officers, parents, teachers and auto mechanics. "These folks aren't necessarily athletes, but they have strenuous jobs or active lives," he says.

Often, they come to Dr. Wynkoop after visiting their primary care physician,



Aaron Wynkoop, MD. is an orthopaedic surgeon who specializes in sports medicine at Carolina Pines Regional Medical Center

urgent care or the emergency room. They come to him with fractures, tears, dislocations, nerve conditions and other musculoskeletal injuries.

And just as their injuries can be sportslike, so can their treatments, thanks to sports medicine. "The techniques I've used on the 25-year-old former high school football star can also be used for other patients," Dr. Wynkoop says. "These are things that were initially developed to treat elite athletes and now have trickled down to the weekend warrior."

ORTHOPAEDIC ADVANCES

The knee is the largest joint in the body. Healthy cartilage in the knee makes it easy to move the joint without pain. But the cartilage can be damaged by injury or

26% of work injuries resulting in days off are related to slips, trips and falls.

> **37%** of these injuries result in a visit to the Emergency Department.

8.6 million sports and recreation injuries are reported each year.



REMEMBER TO RICE

The next time you're sidelined by a minor injury, such as a muscle strain or sprained ankle, think of RICE. Following these steps for the first two to three days after an injury helps relieve pain and reduce swelling.

your injury.

three times a day, 10 to 20 minutes each time.

Compress the injured

area with an elastic bandage. Make sure it's not so tight that it causes additional pain or numbness.

Elevate

the injured area at or above heart level and keep it supported.

normal wear and tear. Dr. Wynkoop and his staff at Carolina Pines have participated in several cartilage transplantations, a cuttingedge procedure where the surgeon takes healthy cartilage from a non-weight bearing area of the patient's knee and uses it to grow more healthy cartilage in a lab. The surgeon then implants the new cartilage in the patient's knee.

"With this technique, the cartilage grows with you," Dr. Wynkoop says. "There's only one lab in the country doing this right now."

Another recent surgical innovation addresses rotator cuff tears, one of the most common shoulder injuries. Each vear, almost 2 million Americans visit their doctors because of a rotator cuff issue. Superior capsular reconstruction is a grafting procedure that can restore movement and relieve pain in cases that up until five years ago were extremely difficult

"A lot of these problems stem from 40 years of active living or hard work," Dr. Wynkoop says. He's always looking for innovative treatments that will help his patients return to their lives faster and healthier.

ACTIVE RECOVERY

Almost all sports medicine surgeries are followed by extended periods of physical therapy (PT).

"The surgery is just one part of it—all I'm doing there is addressing the injury, putting the parts back," Dr. Wynkoop says. "The body has to heal after that, ideally enough to be able to return to its former lifestyle."

Dr. Wynkoop encourages his patients to think of recovery as an active time, not just a period of rest. "It's very important to move and engage following surgery," he says. "Very rarely do I have a patient whom I tell not to move afterward."

Dr. Wynkoop follows his patients from the time of surgery through PT, often staying in regular contact with patients and their physical therapists for about six months after surgery.

Carolina Pines has its own outpatient PT facility, which Dr. Wynkoop connects with daily. "If a patient is having a problem healing, we'll adjust the therapy to more closely target their exercises," he says. "I'm lucky that we have a PT office right here."

Are you injured?

To schedule an appointment with a Carolina Pines orthopaedist, call (843) 383-3742

Sideline Support Meet the Carolina Pines athletic trainers who keep student athletes safe

For nearly two decades, Carolina Pines Regional Medical Center has provided a helpful form of support for student athletes in and around Hartsville. Their team of athletic trainers has served at area high schools and Coker University, assisting with prevention and treatment of sports injuries.

WHAT WE DO

Carolina Pines athletic trainers spend about 35 to 55 hours a week with community sports teams, with a bulk of that time spent attending games and matches, and then following up with students afterward. Brad Robinson, a certified athletic trainer, coordinates the schedules of the eight athletic trainers as they move from the medical center to

the schools they support.

"We are a combination of a first responder, orthopaedic assistant and physical therapist, working with athletes from their initial injury through the rehabilitation process," Robinson says. "It's a really unique role." They can provide a first evaluation and treatment of an injury, from an abrasion to a sprain, strain or broken bone.

EXCELLENT CARE

A major benefit to having the athletic trainers on duty is that they have a direct line to Carolina Pines orthopaedists and sports medicine specialists. "If the athlete doesn't have a doctor or they sustain an orthopaedic injury, we refer them

It's a really good relationship, because we can get the kids in for X-rays or other tests quickly," Robinson says. After treatment or rehabilitation, the athletic trainers can gauge if the athlete has fully recovered and help physicians determine if they can to return to play.

Carolina Pines athletic trainers cover more than 20 sports, including volleyball, wrestling, softball, soccer and tennis—plus the spirit teams.

"For me, I really like working with the athletes and watching these kids as they mature and grow. We even have some who have gone on to become professional athletes," Robinson says. "It's really fun to see them in the pros."

A. PATRICK TAYLOR MS, ATC, SCAT

Coker University

B. ASHLEY CARLSON

MS, ATC, SCAT McBee High School

C. CHRIS JEPPSON

MS, ATC, SCAT Coker University (Head Athletic Trainer)

D. AREN MOORMAN

MS, ATC, SCAT Coker University

E. BRAD ROBINSON

ATC, SCAT (Carolina Pines Athletic Training Coordinator) Hartsville High School

F. CHLOE MCCOY

MEd, ATC, SCAT Coker University

G. JENNIFER NESSETH

MS, ATC, SCAT South Carolina Governor's School for Science and Mathematics

H. KINSEY DUNST

MS, ATC, SCAT, CSCS Coker University

6 Live Well





It's All in the Wrist

Here's what you need to know about common sports injuries to the hand and wrist



Terence Hassler, MD, is an orthopaedic surgeon at Carolina Pines Regional Medical Center. To make an appointment, call **(843)** 383-3742.

We use our hands and wrists every day, even when we're not being active. These body parts are made up of bones, ligaments, tendons and joints that allow movement and dexterity. However, the many moving parts in hands and wrists make them susceptible to injury.

During exercise, we put our hands and wrists to the test. This can lead to traumatic and overuse injuries.

TRAUMATIC INJURIES

Traumatic hand and wrist injuries include sprains, ligament tears and fractures. Terence Hassler, MD, an orthopaedic surgeon at Carolina Pines Regional Medical Center, says these injuries commonly occur in football, lacrosse and basketball players.

Sprains impact the tendons and ligaments. Tendons connect muscle to bone and help muscles contract. Ligaments connect bones to each other and help keep them stable. Sprains range in severity from a mildly stretched ligament or tendon to a ruptured ligament, which results in joint and bone instability.

Ligament tears can sideline athletes. Though ligaments are strong, extreme force can cause them to tear. For example, a basketball player landing hand-first on the court can tear ligaments in the wrist.

Fractures, or broken bones, are another common traumatic injury. Most

frequently, athletes fracture fingers or what's called a Colles' fracture in the wrist. "You extend your hand to brace yourself, and the distal radius (the big bone) in your forearm breaks," Dr. Hassler explains. "The wrist is not designed to support the whole body."

OVERUSE INJURIES

Practice makes perfect, but repeating the same motions over and over can lead to tendonitis or carpal tunnel syndrome.

Tendonitis is inflammation or irritation of a tendon. While tendonitis can occur in different parts of the body, the wrist is one of the most common areas. Sports with swinging movements, like tennis and golf, are common causes of tendonitis.

Carpal tunnel syndrome causes pain, numbness and tingling in the hand and arm. It occurs when the median nerve of the hand is compressed as it moves through the wrist. Repetitive hand and wrist motions in sports like volleyball, or pressure on the wrists in sports like cycling, can lead to carpal tunnel syndrome.

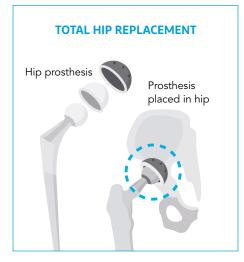
TREATMENTS

Treatment options depend on the severity of the injury. Resting, icing, taking anti-inflammatory medications, splinting, bracing or physical therapy are sufficient to treat many injuries. For ligament tears and fractures, your doctor may recommend joint relocation, casting or surgery.

For carpal tunnel syndrome, your doctor will probably start with non-surgical treatments, like steroid injections and nerve-gliding exercises. If these don't provide relief, you might consider carpal tunnel release surgery, which relieves pressure on the median nerve.

"That's by far the most satisfying surgery that we do," Dr. Hassler says. "It's a relatively quick procedure, and the patient usually feels better that night."







Jack Sproul, MD, is an orthopaedic surgeon at Carolina Pines Regional Medical Center. To make an appointment, call (843) 383-3742.

Sixty-nine-year-old Irene Joplin spends a lot of time on her feet. The retired housewife stays busy visiting with her three children, eight grandchildren and great-grandson, attending church and traveling.

Lingering hip pain started slowing her down in early 2019 and put a planned Mexican cruise in jeopardy. Her primary care physician gave her a cortisone shot, but the pain flared up again. Joplin had her other hip replaced six years ago at Carolina Pines Regional Medical Center, and she sensed she was due for another procedure.

"The pain got worse and worse, so I went back to my doctor and said, 'I'm ready to see an orthopaedist."

Joplin saw Jack Sproul, MD, an orthopaedic surgeon at Carolina Pines, in May 2019. One of her first questions was, "We have a cruise planned in July. How soon can you get me in for surgery?"

HIP REPLACEMENT

A total hip replacement involves removing damaged bone and cartilage and replacing them with prosthetic components. Irene experienced osteoarthritis, which wears

Thanks to a new hip, Irene Joplin can laugh, play and keep up with her great-grandson, Rowland Kirkley.

away the cartilage that cushions the hip bones.

"She had an X-ray that showed boneon-bone appearance, a textbook case of osteoarthritis that made her a perfect candidate for the surgery," Dr. Sproul says.

For Irene's surgery, which took place in June 2019, Dr. Sproul used the anterior approach, entering the hip from the front. "The advantage of this approach is that we don't have to cut muscles or tendons," Dr. Sproul says. "We go between the muscle layers, which makes recovery much easier and greatly reduces the risk of dislocation after surgery."

RECOVERY

Advances in surgical technique and knowledge have helped accelerate recovery after total hip replacement. "We get patients up and moving within four hours of surgery," Dr. Sproul says. "They're recovering much quicker than they used to."

Typically, patients spend one to three days in the hospital before being discharged. They can expect to resume light daily living activities within three to six weeks after surgery. Physical therapy helps restore movement and strengthens the hip.

Irene wasted no time recovering when she got home. A home health nurse and physical therapist worked with her on rehabilitation, and her children and sister also helped out around the home. Irene had a follow-up appointment in November 2019 and aced her exam. Today, she's back and better than ever.

"I do all my mopping, I'm driving and my life is pretty much back to normal," she says. "I highly recommend Dr. Sproul and Carolina Pines. I couldn't be more pleased with my doctor, and I couldn't be more pleased with my new hip."

"She was wonderful," Dr. Sproul responds. "She asked good questions and knew exactly what was going on."

Irene and her family did set sail on their cruise to Mexico in July 2019. With a new, healthy hip, she's not stopping there. "Next, we're going to Alaska to see the Northern Lights," she says.

。A Pain in the Hip?

This quick assessment can help you determine if you should talk with a provider about treatment.

HOW WOULD YOU DESCRIBE THE PAIN YOU USUALLY HAVE IN YOUR HIP?

- A. None
- B. Very mild
- C. Mild
- **D.** Moderate
- **E.** Severe

HAVE YOU HAD ANY TROUBLE GETTING IN AND OUT OF YOUR CAR OR USING PUBLIC TRANSPORTATION **BECAUSE OF YOUR HIP?**

- **A.** No trouble at all
- **B.** Very little trouble
- C. Moderate trouble
- **D.** Extreme difficulty
- E. Impossible to do

HOW OFTEN DO YOU EXPERIENCE PAIN FROM YOUR HIP WHILE RESTING OR RELAXING?

- A None
- **B.** Not often—once a week
- **C.** Sometimes—more than once a week
- **D.** Often—almost daily
- E. Constant—daily

HOW LONG ARE YOU ABLE TO WALK INDEPENDENTLY WITHOUT EXPERIENCING PAIN OR DISCOMFORT (WITHOUT THE USE OF A CANE OR OTHER ASSISTANCE)?

- **A.** More than an hour with no pain
- **B.** 16 to 60 minutes
- **C.** 5 to 15 minutes
- **D.** Around the house only
- E. Not at all—severe pain when walking

If you answered C, D or E on any of the above questions, you may need to see a provider to assess your hip health and determine if you are a candidate for joint replacement surgery. To take the full assessment, or to schedule an appointment with a provider, visit CarolinaPinesOrtho.com.

Should you see a doctor?

Our website offers assessments for hip, knee and shoulder pain. Visit CarolinaPinesOrtho.com to take an assessment today.









The Road to Recovery

Physical and occupational therapy help you return to your lifestyle

Get started.

Carolina Pines Outpatient Rehabilitation offers comprehensive care, including physical and occupational therapy, for patients recovering from illness, accident, surgery and trauma. To make an appointment, call (843) 383-5370.

HOURS:

Monday-Thursday 7:30 am-6 pm

Friday 7:30 am-5 pm



Rosemary Morgan-Lee is a physical therapist and outpatient rehabilitation director at Carolina Pines Regional Medical Center.

Physical therapy (PT) and occupational therapy (OT) are often confused with each other. In some ways they're similar, but they serve different purposes.

Rosemary Morgan-Lee, physical therapist and outpatient rehabilitation director at Carolina Pines Regional Medical Center, answers common questions about these forms of therapy.

WHAT IS THE DIFFERENCE BETWEEN PT AND OT?

I like to say PT gets you there, and OT is what you do when you get there.

PT treats pain, weakness and balance issues and helps with strengthening and moving your body correctly. OT is a more global discipline. It has some crossover with PT, but OT also teaches people to be successful with basic daily activities, like bathing and dressing, as well as higher level ones, like caring for others, or even financial planning. OT also addresses cognitive behavior and mental health.

WHEN WOULD I BENEFIT FROM PT OR OT?

You would need PT to regain movement or strength after an injury or illness. You need OT if you are suffering from pain, injury, illness or a disability that makes it difficult for you to care for yourself or

perform daily activities, like your job, homemaking or household tasks.

HOW DO I GET STARTED WITH PT OR OT?

A referral is needed from your primary care physician or orthopaedist.

WHAT CAN I EXPECT AT A PT OR OT VISIT?

For PT, we start with an evaluation of your injury and pain, and we take a family history. Then, we assess your motor strength, coordination, range of motion and mobility. From there, we set up a plan of care.

The OT evaluation is similar, but we focus on what you have to do on a daily basis. For example, if you are rehabbing a back injury and you have to prepare meals, we teach you how to properly reach for the microwave so that you're not aggravating your spine.

WHY SHOULD I HAVE PT OR OT AT CAROLINA PINES?

Between nine full-time therapists at Carolina Pines, we have 180 combined years of experience, and we have a diverse skill set. We've extended our hours to accommodate our patients, and we accept walk-ins.

Build a **Performance Plate**

If you want to improve your fitness, start with your plate

By Kimberly Alton, RD, CSSD, LD

Kimberly Alton, RD, CSSD, LD, is director of Food and Nutrition Services at Carolina Pines.

Eat right. A Carolina Pines dietitian can help you create a meal plan to support your goals. Call (843) 339-4530. Whether you are a serious athlete, a weekend warrior or just someone trying to stay fit, giving your body the nutrition it needs helps you maximize your outcomes. To get the most from your food, create a meal pattern that provides energy-packed, nutritious foods. To start, try thinking about food groups in terms of how they support your goals:

- Whole grains enhance energy.
- Lean proteins build muscle and help muscles recover.
- Fruits and vegetables are full of protective antioxidants.
- Fats boost immunity and flavor.
- Fluids promote hydration.

FOR RECREATIONAL EXERCISERS

For most of us, our plates should look very similar to MyPlate, the USDA's recommendation for healthy eating. This includes ½ plate of fruits and vegetables, ¼ plate of whole grains and ¼ plate of lean protein. **Sample meal:** Baked salmon, baked sweet potato, steamed broccoli, a side salad with oil-based dressing, and water or low-fat milk.

FOR ATHLETES

If you're working out consistently or training for something challenging, like a half-marathon, you will need ½ plate of whole grains, ¼ plate of fruits and vegetables, and ¼ plate of lean protein. **Sample meal:** Whole-grain pasta with tomato sauce and lean meatballs, a dinner roll, a side salad with oil-based dressing, and water or low-fat milk.

FOR THE INJURED

When you're injured, focus on nutrients that support healing. Choose lean proteins and foods rich in omega-3 fatty acids (salmon, tuna, sardines), vitamins C and A (sweet potatoes, apricots, mango), vitamin D and calcium (dairy, leafy greens, eggs), and zinc (almonds, sunflower seeds, beef).



BLACKENED CHICKEN AND CILANTRO QUINOA

This meal includes chicken, a good source of lean protein, and quinoa, one of the highest protein grains. Avocado is high in monounsaturated fatty acids that reduce inflammation.



TOO

- 2 boneless, skinless chicken breasts
- 1 tbsp. McCormick Grill Mates Cinnamon Chipotle Rub
- 1 tsp. vegetable oil
- 2 cups low-sodium chicken stock
- 1 cup quinoa
- 1 lime, juice and zest
- Dash of salt and pepper
- 2 tbsp. cilantro, chopped
- 1 avocado
- 2 tbsp. plain non-fat Greek yogurt

DIRECTIONS

- Prepare quinoa by package directions, but substitute chicken stock for water.
- 2. Season both sides of each chicken breast.
- 3. Heat the oil in a large pan.
 Add the chicken breasts and cook with the lid on for seven minutes per side, or until cooked all the way through.
 Remove chicken from the pan and let it rest seven minutes before slicing.
- Add the warm quinoa to a large bowl. Stir in the lime juice and zest, salt, pepper and chopped cilantro.
- 5. Blend the avocado and Greek yogurt until smooth.
- 6. Serve the sliced chicken breasts on top of the quinoa. Drizzle with the avocado sauce.



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CPR-008



Saturday, March 28, 2020

Registration: 7 AM Race Begins: 8 AM In Front of The Medical Group

Proceeds will be used to purchase medical equipment for community members

ENTRY FEE \$25

REGISTER ONLINE

www.strictlyrunning.com
Click on Registration > Register for Event > 3.28.2020 Jumpstart Your Heart 5K