Today – December 14th

Intro – Warm-ups out

Advanced – Warm-ups and laptop & headphones out

Reminders n' Stuff:

- PJ Day tomorrow! But <u>not</u> for… Mrs. Reed! Takin' it next level people!
- Bring your laptop/tablet for tomorrow's Employability Skills Reflection #13
- Job shadow needs?

Today – December 14th

Introduction to Sports Medicine

- Bone Diagram Packet key was posted yesterday; other resources on-line still
- Bring SCHOOL laptop for tomorrow's exam
- **Warm-Up:** Both Systems Review
- **Lecture:** 6th & 7th Finish the Skeletal System
- **Review Day!** *Short* study sesh after school

Advanced Sports Medicine

- Sem. Project check-in
- **Warm-Up:** Review (on lecture video)
- **Lecture:** Finish Mechanical Modalities

Warm-Up (No notes, no blanks)

1. What are the functions of the integumentary system? List as any as you can.
2. Identify 3 relationships the skeletal system has with other body systems
3. What are some *characteristics* of skin conditions/ wounds you can look for to help distinguish between the many different types?
4. Draw the following fractures: Transverse, oblique, greenstick, comminuted and avulsion
5. List things one can do to reduce the risk of getting numerous toe/foot skin conditions/wounds.
6. List the anatomical structures/features of long bones.

Warm-Up Key

1. Functions – Body temp. reg., excretion, barrier to pathogens, detection
2. *Some* relationships:
   Circulatory → Hematopoiesis; red marrow
   Muscular → Mobility
   Nervous → Protection
3. Characteristics of skin conditions/wounds? Color? Size? Elevated? Pus? Edges? Scales? Itchy?
4. Draw the following fractures: (see the whiteboard)
5. Reduce risk of toe/foot skin pathologies: Take of wet socks, don't walk in public places barefoot, wear steal toed boots, cut toenails straight across, proper shoe size, practice basic hygiene…
6. Anatomy of long bones: Diaphysis, epiphysis, spongy bone, compact bone, periosteum, endosteum, articular cartilage, *epiphyseal plate/line*, red & yellow marrow…

Warm-Up (No notes, no blanks)

1. What distinguishes *mechanical modalities* from other modality types?
2. What has recent research made *unclear* in terms of the local effects of massage?
3. Why would a clinician use *biofeedback* as part of a rehab plan?
4. What modality has three grades and can be performed manually or with the use of a device?
5. What is the name if the modality below?
6. Describe these massage strokes:
    a. Petrissage
    b. Friction
    c. Effleurage
    d. Tapotement

Warm-Up Key

1. Distinguishes *mechanical modalities*? They use mechanical energy (movement) to influence the injury response process.
2. Research *unclear* about massage? Whether it improves circulation…evidence suggests not.
3. Why use *biofeedback*? mm re-education or relaxation, giving the pt visual/auditory feedback whether a mm is contracting or not.
4. 3 grades, performed manually/with device? Traction
5. What is the name if the modality below?
   A continuous PROM unit
6. Massage strokes:
   a. Petrissage – "lifting & kneading"; frees adhesions
   b. Friction – circular or transverse (perpendicular to cell alignment); deep and typically uncomfortable
   c. Effleurage – "stroking the skin"; deep or superficial
   d. Tapotement – tapping, pounding; desensitizes nerves