



# Summer/Fall 2014:

Welcome to the inaugural issue of SCI Matters, the newsletter of the Midwest Regional Spinal Cord Injury Care System (MRSCICS). This newsletter is designed to provide you with SCI-related information and updates on SCI Model Systems activities. Some of this information is a product of studies for which you may have been a

volunteer. In this inaugural issue we offer a background of the Model Systems program, define the role of the Model Systems Knowledge Translation Center (MSKTC), introduce you to the SCI Database team, and provide contact information and links for research opportunities. Enjoy!

## A Brief Background of MRSCICS

The Rehabilitation Institute of Chicago is the “home” of the Midwest Regional Spinal Cord Injury Care System, a federally-designated Model System of care. The Model System hospitals are national leaders in SCI-related care and research. The Model System program is funded by the National Institute on Disability and Rehabilitation Research (NIDRR). Model Systems hospitals were selected because they provide excellent patient care, conduct high-quality research, and help improve the health and quality of life for individuals with spinal cord injuries.

There are 14 SCI Model Systems across the country. RIC was initially named a Model System in 1973. RIC contributes to the National SCI Database and has been involved in multiple research studies to improve standards of SCI care, recovery, and quality of life. We will report findings these studies in future issues of this newsletter.

The ultimate goal of MRSCICS is to enhance community reintegration and continuity of care for people with SCI. As such, RIC has been integral in advocacy for persons with SCI, and has a long history of working closely with Access Living of Metropolitan Chicago. The MRSCICS grant also helps fund RIC’s LIFE Center’s Peer Visitor program.

For more information on MRSCICS please visit: [www.ric.org/conditions/spinal-cord/what-is-an-scims-center/](http://www.ric.org/conditions/spinal-cord/what-is-an-scims-center/)

## MSKTC

In support of the Model Systems, the Model Systems Knowledge Translation Center (MSKTC) “summarizes research, identifies health information needs, and develops information resources.”

In future issues of this newsletter we will introduce MSKTC SCI factsheets that provide important and useful information based on the latest research evidence. Topics covered by the factsheets include safe transfer techniques, employment after SCI, pain after SCI, pressure sore prevention and care, and other topics.

To find out more about the MSKTC, and to explore the many resources it makes available, please visit: [www.msktc.org](http://www.msktc.org)

## Are you due for MRSCICS follow-up?

If you’re coming up on your 1, 5, 10, 15, 20, 25, 30, 35, or 40 year anniversary of injury, you may be due for your next follow-up interview. If you don’t want to wait for us to contact you, please call or email Allison Todd (312-238-1226, [atodd@ric.org](mailto:atodd@ric.org)) to set up a time and date to complete your interview. We conduct interviews by phone call, in-person, or mail packet.

**MRSCICS**  
*Matters*

## Inside

### The MRSCICS Database Team

Meet the team that???

### Due for a Follow-up?

Read about how to contact us if you’re due for an interview.

### More Research Opportunities

Find out about other research opportunities that you may qualify for.

The Center for Rehabilitation Outcomes Research (CROR) conducts studies measuring how medical rehabilitation and health policies impact people with disabilities. The Center also examines methods to increase effectiveness and efficiency of the rehabilitation process. CROR is a part of the Rehabilitation Institute of Chicago – ranked #1 Rehabilitation Hospital for 24 Consecutive years by U.S. News & World Report.



Center for  
Rehabilitation  
Outcomes Research



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**Want to get involved in more research at RIC?**  
Contact Brian Weiland (312-238-3050, [bweiland@ric.org](mailto:bweiland@ric.org)) to learn more about the Center for Rehabilitation Outcomes Research’s (CROR) registry. After enrolling in this registry, you will be contacted about CROR’s upcoming studies in which you may be eligible to participate.  
Also visit [www.ric.org/research/clinical-trials/](http://www.ric.org/research/clinical-trials/) for a full listing of RIC’s research studies and clinical trials.

**MRSCICS Matters: 2014**  
Welcome to the Summer/Fall 2014 issue of MRSCICS Matters, the semiannual newsletter of the Midwest Regional Spinal Cord Injury Care System (MRSCICS) at the Rehabilitation Institute of Chicago (RIC).



## Meet the MRSCICS Database Team

### Dr. David Chen, MD

Project Co-Director  
 Role at RIC:  
 George M. Eisenberg Chair  
 Medical Director, Spinal Cord Injury Rehabilitation Program  
 Time at RIC: 20+ years  
 Fun Fact: Enjoys running and has run over 15 marathons including the Boston Marathon



### Dr. Allen Heinemann, PhD

Project Co-Director  
 Role at RIC:  
 Director, Center for Rehabilitation Outcomes Research (CROR)  
 Associate Director of Research  
 Time at RIC: 30+ years  
 Fun Fact: Enjoys hiking, bird watching, and opera



### Brian Weiland

Lead Recruiter  
 Role at RIC:  
 Research Assistant, Center for Rehabilitation Outcomes Research (CROR)  
 Time at RIC: 1year  
 Fun Fact: Started an organic vegetable farm with his wife



### Debbie Pucci, PT

Recruiter  
 Role at RIC:  
 Physical Therapist, Wheelchair & Seating Clinic  
 Research Project Manager, Recruiter & Data Collector  
 Time at RIC: ??? years  
 Fun Fact:



### Nick Formanski

Medical Chart Abstractor & Recruiter  
 Role at RIC:  
 Research Assistant, Center for Rehabilitation Outcomes Research (CROR)  
 Peer Visitor, The LIFE Center's Peer Visitor Program  
 Time at RIC: ??? 6 years  
 Fun Fact: Has 2 dogs, plays guitar, and enjoys bike riding



### Allison Todd

Follow-up Interviewer & Database Coordinator  
 Role at RIC:  
 Project Coordinator, Center for Rehabilitation Outcomes Research (CROR)  
 Time at RIC: 3 years  
 Fun Fact: Enjoys creative writing and DIY home décor projects



## Announcements:

Allen ISCOS Presentation

What are topics you interested in hearing about in future newsletters?  
 Let us know. Contact Allison Todd (312-238-1226; atodd@ric.org)

## Safe Transfer Technique

Transferring in and out of your wheelchair puts higher stress on your arms and shoulders than anything else you do on a regular basis. Learning the correct way to transfer is extremely important in order to keep your arms functioning and pain-free.

### Get proper transfer training

- Everyone needs individualized transfer training to preserve function and avoid injury. Work with a physical therapist to learn the best transfer technique for you and your body.
- Your transfer technique may need to be readjusted as years go by. If you develop any problems or if your living circumstances (e.g. pregnancy) or activities change, go back to your therapist for advice.

### Safe transfer rules and technique

- Frequency – Only transfer when necessary, keeping the number of transfers to a minimum.
- Transferring downhill is easier and, at modest height, safer than transferring uphill.
- Technique – Steps (These are general steps. Work with your therapist to fine tune them for you.):
  - Positioning/setup
    - Get as close as possible to the surface you want to move to.
    - Lock your wheels if transferring from a wheelchair.
    - Put your feet on floor (unless your therapist tells you not to).
    - Scoot to the edge of your chair.
    - Get your arm rest out of the way on the side next to the surface you are transferring to.



- Lean your trunk forward.
  - When transferring, your head should move in the opposite direction of your hips. This is known as a head-hips relationship and can help with movement and clearing obstacles.
- To protect your shoulders, keep your arms as close to your body as possible (about 30–45 degrees away from your body) while you are lifting your weight.
- To protect your wrists, try to grip an edge or grab bar with your fingers rather than laying your hands flat. Keeping your hands flat and putting your weight on your palms is a dangerous position that can lead to wrist problems such as carpal tunnel syndrome down the road.
- Lift-off
- Make sure you are clearing obstacles (not bumping or rubbing) to avoid shearing and pressure sores.
  - If you cannot perform the transfer in one smooth movement while keeping your arms close to your body, move in several small “steps” and/or use a transfer board.
  - Be careful sliding across the transfer board because the motion can damage your skin. Use a pad or towel on the board when bare skin may come in contact with the board during the transfer.
- Alternate leading arms and direction of transfers to keep your arm muscles balanced and reduce strain on one side.
- Maintain ideal body weight. The more you weigh, the more weight you have to transfer and the more stress you put on your shoulders and arms.
- If you are unable to perform a transfer safely or are at risk for developing arm pain, you should strongly consider using one of the many kinds of patient lifts available.

### Resources

Consortium for Spinal Cord Medicine. Preservation of Upper Limb Function: What You Should Know. A Guide for People with Spinal Cord Injury, Paralyzed Veterans of America, 2008.

### Source

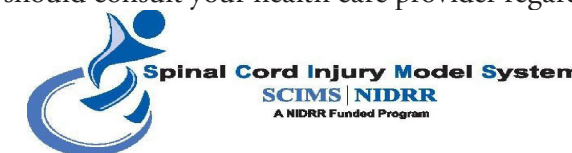
Our health information content is based on research evidence whenever available and represents the consensus of expert opinion of the SCI Model System directors.

### Authorship

Safe Transfer Technique was developed by Michael L. Boninger, MD, in collaboration with the University of Washington Model Systems Knowledge Translation Center.

### Disclaimer

This information is not meant to replace the advice from a medical professional. You should consult your health care provider regarding specific medical concerns or treatment.



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