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Please continue to fill out the Patient/Family Comment Cards and place them in the blue boxes that are located in the waiting areas of all our MTU’s. We really do want your feedback so that we can be responsive to your needs. Please see the results of our 2013 MTU Parent Survey in this issue.

Thank you!
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Please note:
If you would like an electronic copy of this publication please email me:
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CURTIS CROEL: 
A SHINING EXAMPLE OF HARD WORK AND DEDICATION 
BY LORI LOPEZ, PT 
FROM SIGRIST MTU

I have had the pleasure of working with Curtis Croel for the last 10 years. He was one of my first patients at Siegrist MTU when he was just 9 or 10 years old. Curtis has been an inspiration to me since the first day. He has a diagnosis of Cerebral Palsy with Spastic Diplegia, and he has never let it stop him from doing what he wants with his life. I recall when Curtis decided he wanted to learn to ride a skateboard. I wasn’t sure he would be successful with that but he proved me wrong. Curtis did learn to ride that skateboard with his forearm crutches and became pretty good at it.

Curtis attended regular education elementary, middle and high school and even wrestled with the high school wrestling team. It was not without some resistance that he made his way onto the wrestling team. Initially, the school staff was hesitant to let him wrestle as they were afraid of their liability should he injure himself. With persistence, he and his mother did the footwork necessary, obtaining medical clearance from his doctor and was ultimately allowed to start practicing with the team. However, he then encountered another obstacle. The rules of wrestling did not allow him to wear his lower extremity braces while wrestling, and he was unable to ambulate without them. Once again, he and his mother did the footwork and spoke with his Orthotist who then fabricated him a special pair of low profile flexible braces.

He became quite the athlete on the wrestling team, started training for Mixed Martial Arts and he even attended a summer camp with other MMA athletes. Curtis graduated from Granite Hills High School in June 2012. Following high school, Curtis enrolled in Victor Valley Community College with a major in Graphic Design and a minor in Business. His career goal is to open his own business for Graphic Design. He also hopes to open a gym someday that will be open to the public and will specialize in serving the disabled community.

Curtis recently married his high school sweetheart and, although they are currently living with his mother, they are working together to save money for a deposit on their own apartment. Just the other day, Curtis, his wife and I had a very interesting conversation regarding the additional stressors that a disabled child must face throughout their life. He informed me he would like to adopt a special needs child one day as he feels he will understand that child in a way that a non-disabled parent could not.

Recently, Curtis underwent a very extensive bilateral leg surgery. This was his third major orthopedic surgery. Curtis has always had aspirations to walk without his braces and as a result, he made the decision to undergo this recent surgery even though he knew that it would require extensive rehabilitation. Once again, his motivation and ambition is paying off in this post-surgical rehab period. In fact, we actually have to hold him back from doing too much!

Curtis is a wonderful example of how much someone can accomplish despite their disability. He has already far surpassed the doctor’s original predictions of what he would be able to accomplish in his life, and he has only just begun his adult years.
What Is Cerebral Palsy?

Source: kidshealth.org

Cerebral palsy is a condition that affects thousands of babies and children each year. About 500,000 people in the U.S. have Cerebral Palsy. It is not contagious, which means you can't catch it from anyone who has it. A kid with CP has trouble controlling the muscles of the body. Normally, the brain tells the rest of the body exactly what to do and when to do it. But because CP affects the brain, depending on what part of the brain is affected, a kid might not be able to walk, talk, eat, or play the way most kids do.

There are three types of cerebral palsy: spastic, athetoid, and ataxic. The most common type of CP is spastic. A kid with spastic CP can't relax his or her muscles or the muscles may be stiff. Athetoid CP affects a kid's ability to control the muscles of the body. A kid with ataxic CP has problems with balance and coordination. A kid with CP can have a mild case or a more severe case - it really depends on how much of the brain is affected and which parts of the body that section of the brain controls. If both arms and both legs are affected, a kid might need to use a wheelchair. If only the legs are affected, a kid might walk in an unsteady way or have to wear braces or use crutches. If the part of the brain that controls speech is affected, a kid with CP might have trouble talking clearly. Another kid with CP might not be able to speak at all.

What Causes CP?

No one knows for sure what causes most cases of cerebral palsy. For some babies, injuries to the brain during pregnancy or soon after birth may cause CP. Children most at risk of developing CP are premature babies and babies who need to be on a ventilator for several weeks or longer. But for most children, the problem in the brain occurs before the baby is born, and doctors don't know why.

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Doctors who specialize in treating kids with problems of the brain, nerves, or muscles are usually involved in diagnosing a kid with cerebral palsy. These specialists could include a pediatric neurologist, a doctor who deals with problems of the nervous system and brain in kids. Three other kinds of doctors who can help kids with CP include a pediatric orthopedist, who handles problems with bones or joints; a developmental pediatrician, who looks at how a kid is growing or developing compared to other kids the same age; and a pediatric physiatrist, who helps treat children with disabilities of many kinds. There is no special test to figure out if a kid has cerebral palsy. Doctors may order X-rays and blood tests to find out if some other disease of the brain and nervous system may be causing the problem. To diagnose CP, doctors usually wait to see how a kid develops to be sure. A case of cerebral palsy often can be diagnosed by the age of 18 months. Doctors follow infant and child development closely and look for problems with muscle tone and strength, movement, and reflexes. For a kid with CP, the problem with the brain will not get any worse as the kid gets older. The effect of CP on the arms or legs can get worse, however, and some kids may develop dislocated hips or scoliosis (curvature of the spine). That is why therapy is so important for a kid with CP. Kids with CP usually have physical, occupational or speech therapy to help them develop skills like walking, sitting, swallowing, and using their hands. There are also medications to treat the seizures that some kids with CP have. Some medications can help relax the muscles in kids with spastic CP. And some kids with CP may have special surgeries to keep their arms or legs straighter and more flexible.

**Living With CP**

Cerebral palsy usually doesn't stop kids from going to school, making friends, or doing things they enjoy. But they may have to do these things a little differently or they may need some help. With computers to help them communicate and wheelchairs to help them get around, kids with CP often can do a lot of stuff that kids without CP can do. Kids with cerebral palsy are just like other kids, but with some greater challenges that make it harder to do everyday things. More than anything else, they want to fit in and be liked. Be patient if you know someone or meet someone with CP. If you can't understand what a person with CP is saying or if it takes a person with CP longer to do things, give him or her extra time to speak or move. Being understanding is what being a good friend is all about, and a kid with CP will really appreciate it.
In March of 2013 a Parent survey was sent out to all the families who have children assigned to a medical therapy unit (MTU). We sent this out in both English and Spanish and asked you how you thought we were doing in terms of the services we are providing you and your child. Almost 25% of you responded and overall the results were very positive. 90% were satisfied with the overall treatment program being provided to them, with 82% reporting that parents are being included in the treatment planning process by being asked for input and by the therapists keeping the parents updated on what is being done and why it is being done that way. We asked you what you thought the most valuable part of the program was and below are some of the comments we received:

"I love working together as a team."
"The genuine care of the therapists."
"The way they help the children to better their way of life, to help them become more independent."
"The staff members' dedication to the children's overall wellbeing, my daughter loves going to her appointments."
"The information given on how to continue my son's treatment at home."
"That I am able to express my concerns about my son."
"The support they give the families."
"Getting the proper services and equipment for the child."
"The relationship/trust developed with the therapist."
"All the therapists are well trained and are committed to help my child reach her goals."
"They are friendly, fun and understanding."
"You can clearly see the interest they show in our children."
"Working together as a team to help my child reach her goals."
"The attention they give my child."
"The therapists."
"The staff are amazing."
"Professional treatment, loving attitudes and atmosphere of care and concern."
"The care and concern of the therapists."

We also found out about some things we need to pay a little more attention to and we are working diligently on making changes where we can. Thank you for your participation. We were both encouraged and challenged by your feedback. We encourage more of you to participate in this annual survey.

Manal Kassab, MA, OTR/L, Supervising Therapist
An Interview with

Dr. Leo Jeng

By Martha Fitiseamanu, PT
Montclair MTU

I had the opportunity to sit down for a few minutes with Dr. Leo Jeng, Montclair MTU's Pediatric Clinic doctor, to find out more about him. The questions were pretty average; his answers were not. Here's how it went...

Unbelievable to us, Dr. Jeng has been working for CCS running our Peds Clinic for eight years already. It was the year 2000 when he graduated from Medical School at New York Medical College; and completed his residency at Loma Linda University in 2003.

Dr. Jeng retold a childhood incidence when asked why he became a doctor. At a very tender age, he had a full understanding of what death is, an epiphany per se, that he, little Leo, would someday die. This realization caused in him sufficient toddler turmoil, that even later in life this epiphany directed him into wanting to keep children from having to experience something similar, and that it is and will be his role to offer hope.

Dr. Jeng tells us he enjoys a lot of things about working with CCS, our kids, and the families, but sums it up by saying that he and the team are truly making a difference and doing something for the clients and their families. The families come in with a problem or question, and receive more immediate, useful and practical solutions. He knows the impact that clarifying for parents why certain specialties are being referred and explaining the necessity of a certain medication is. He knows the importance of providing parents with the pertinent information they need.

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When patients return to clinic, he enjoys seeing the children and reviewing the success of the work of the clinic. He has seen how the referral services work, what doesn’t work, and what the advantages are. Dr. Jeng says that since working with CCS, he has become more comfortable with neurology and performing neuromuscular exams. He says of the “kiddos”, “I see how resilient and able to recover these kids are; the ability to gain function; it’s pretty amazing.”

Dr. Jeng loves to cook, especially his BBQ-style spare ribs; he enjoys scuba diving and likes sealife (has been a longtime member/donor of the Long Beach and Monterey Bay Aquariums and National Wildlife Federation); and although he says he wouldn’t make a second career of it, he is a “Wedding Singer” mainly performing InSync’s ‘I Promise You’ for his friends’ weddings. He was part of an acapella group in medical school!

There’s more... He is involved in his daughter’s Girl Scout activities; he is in a basketball league; he is part of the residency program at LLU presenting lectures for students and residents; and he is a Certified Circumcision Instructor.

One of his favorite and most interesting things about him is that it was he, not his wife, who was the first to feed their baby daughter. Having been born at 35 weeks, it was a requirement for her to be admitted into the NICU, unless the baby can take food well. So, to keep her from going into the NICU, Dr. Jeng gave his baby daughter a little pep talk and successfully fed her!

When asked what he would like to say to our CCS children and parents, he says, “Keep up the good work – you are your child’s first advocate” and “Keep Smiling”. Thank you, Dr. Jeng, for the care and compassion you have for our CCS families.