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Paraplegic Canadienne des
Association Paraplegiques
(Manitoba) Inc.

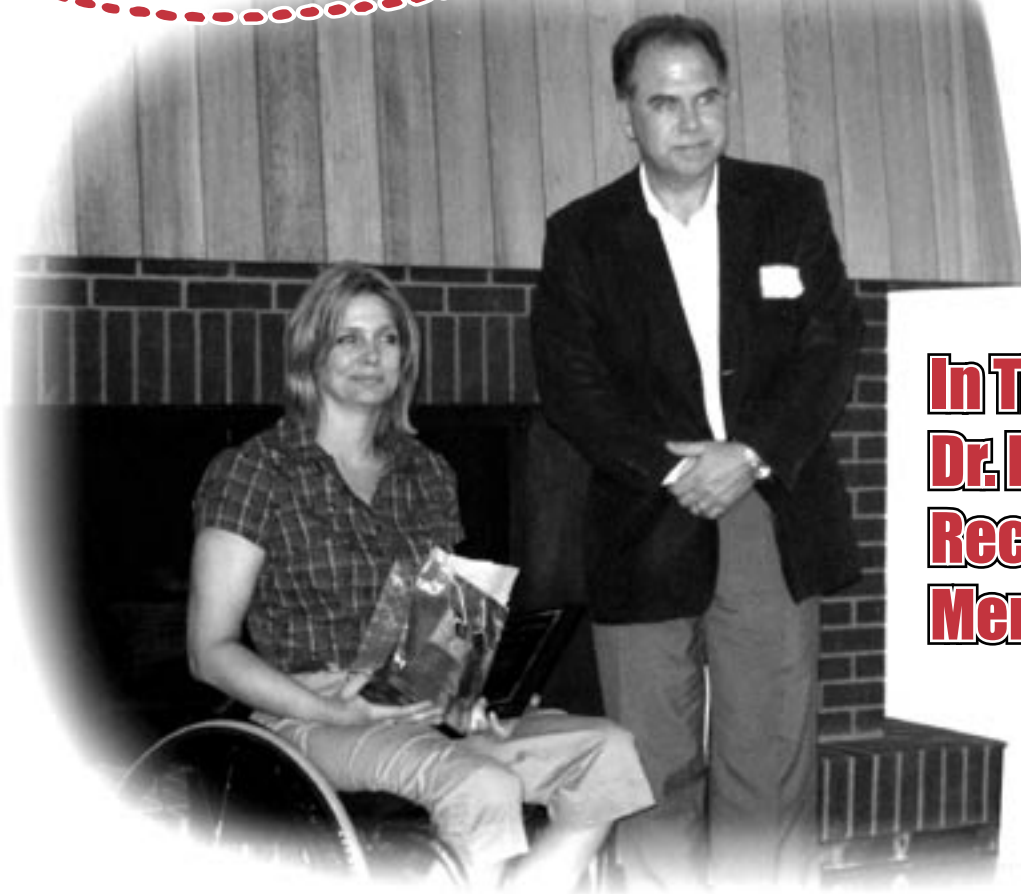
MPF MANITOBA
PARAPLEGIA
FOUNDATION INC.

August 2009

Summer Issue

Newsletter of the Canadian Paraplegic Association (Manitoba) Inc.

PARA TRACKS



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Dr. Kristine Cowley
Receives the 2009
Merit Award**

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Toll-free: (800) 720-4933 (within Manitoba only)

Visit CPA's website at www.cpamanitoba.ca

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MANITOBA PARAPLEGIA FOUNDATION INC. (MPF) NEWS

MPF funds go to work in four main areas that are not supported by any other sources in Manitoba: special projects, product testing, research and direct aid to persons with a spinal cord injury who do not have the necessary financial resources for equipment and/or services. All requests for direct aid are initiated through CPA. Individuals must provide information on their financial status, explain why they cannot meet the expense within their own budget, and identify any other potential sources to support the request including potential for contribution from family.

CPA thanks MPF for its continued support to improving the quality of life of persons with spinal cord injuries.

MPF Trustees

Doug Finkbeiner, Q.C (President), Arthur Braid, Q.C (Vice-President), James Richardson Jr. (Treasurer)
Isabel Auld, Dr. Lindsay Nicolle, Ernie Hasiuk, John Wallis

MPF has approved several requests for financial support during the past few months.

Some of the highlights are as follows:

During the month of March 2009:

☞ Funding was granted for the purchase of a bath seat for a CPA member. The member is unable to transfer independently and is reliant on attendant care for transfers to and from bed, as well as to and from the bathtub. When lowered into the bathtub, the member must sit in a bath seat that holds them in a semi-reclined position. Without the bath seat, the member would lie flat on their back and not be able to hold their head out of water.

During the month of May 2009:

☞ Funding was granted for the purchase of a bath board and a toilet safety frame for a CPA member. These two equipment items allow the member to be more independent in bathing and toilet transfers.

During the month of June 2009:

☞ Funding was provided to cover the cost of a two-wheeled walker for a CPA member who has an incomplete spinal

cord injury. The walker is required for the member's discharge from hospital.

☞ Funding was granted for the cost of a custom cushion and backrest for a CPA member. The cushion and the backrest are meant to work together to relieve pressure while the member is sitting and to promote healing of the member's pressure ulcer.

☞ Funding was provided for the cost of home modifications to a CPA member's home. These home modifications, which include widening doorways and removing one part of a hallway and kitchen wall, are required to accommodate the member's extra width of his new wheelchair. These modifications will allow the member full access to his home.

You can visit MPF's website at:

www.cpamanitoba.ca/mpf Applications for assistance are available through the website or by contacting the CPA office.

We Need Your Feedback

What would you like to see in future issues of ParaTracks?

We try our best to publish articles and stories that are of interest to you, our members. To ensure we continue with this practice, we need your help. Without feedback from CPA members, we can't always be sure that we're providing you with the information you require.

Please take a moment to provide us with your feedback. Was there an article that was of great interest to you? What did you like about this issue of ParaTracks? What didn't you like?

Please send your comments by email to aconley@canparaplegic.org
or give Adrienne a call at 786-4753 or 1-800-720.4933 ext. 222.

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Saturday - Sunday 2 - 4:30pm

Tuesday - Thursday 5 - 8pm

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CPA (MANITOBA) INC. BOARD OF DIRECTORS UPDATE

At CPA's Annual General Meeting on June 16, 2009, President John Wallis thanked those Board Members who were retiring from service with the following words:

"Our volunteer board is, of course, an integral part of the organization's success. The contribution of time and experience made by Board Members during the last year have made our recent successes possible."

To those Board Members who are retiring from service this year, please accept our special thanks for your years of service and contribution. You will be missed, and your contributions have been and will be valued."

Resignations from the Board were accepted from:

Ed Giesbrecht:

Ed served 8 years on the Board, most recently as Vice-President. Ed's area of expertise is occupational therapy and he brought a vast amount of skills and knowledge to the table in the following areas: wheeled mobility, assistive technology, spinal cord injury and pressure ulcer prevention and management.

Debbie VanEttinger:

Debbie served 2 years on the Board. Debbie brought to CPA many years of practical experience as a Board Member on several different boards such as Manitoba League for Persons with Disabilities and Ten Ten Sinclair Housing Inc., as well as her work experience as Director of Fokus Housing at Ten Ten Sinclair Housing Inc.

Nominations to the Board were accepted from:

Adam Terwin:

Adam has spent the past 5 years as the Chief Financial Officer at Exchange Industrial Income Fund, an income trust listed on the TSX. Prior to this he was employed by Deloitte & Touche LLP, in their Assurance and Advisory Group. Adam holds both a Chartered Accountant designation and a Chartered Financial Analyst designation. Adam received his Bachelor of Commerce Degree from the University of Manitoba where he earned the university gold medal.

Adam's father, Gerard Terwin, has been a member of CPA since 1963. Gerard competed for Canada as a Paralympian in the 1976 Olympics, 1979 World Championships, 1981 World Championships, 1982 Pan American Games and was chosen to compete for Canada in the 1984 Paralympic Games, winning medals in every competition he attended. He also was the creator and founding member of the game Wheelchair Rugby "Murderball".

Chris Sobkowicz:

Chris is currently employed with the City of Winnipeg Access Advisory Committee. Prior to this, Chris was General Manager of the Dakota Community Centre in St. Vital and Director of Community Services with the Town of Morden. Chris has been a Board Member with the Manitoba Wheelchair Sport Association for 10 years. Chris graduated from the University of Alberta with a BA in Recreation Administration.

Chris competed for Canada in the 1976 and 1980 Paralympics in basketball and swimming. He is a member of Team Manitoba Wheelchair Curling and recently won

a Bronze Medal at the Canadian National Wheelchair Championships. Chris is also a member of Team Canada Wheelchair Curling and competed at the first ever World Wheelchair Curling Championships in February 2009, winning the Gold Medal.

Chris is married to Sherry and has two sons Jaret and Jordan. Chris is also presently co-owner of SS Enterprises, offering private consulting in Sports, Leisure, Marketing and Management Leadership.

Pauline Day:

Pauline has a keen interest in strategic planning for non-profit organizations. Pauline has a career specializing in workplace diversity and Employment Equity at Manitoba Lotteries Corporation (MLC). Pauline focuses on the equal treatment and opportunities for Aboriginal peoples, women, people with disabilities and visible minorities in the workplace.

Pauline's current roles include Committee member of the Progressive Aboriginal Relations Committee at MLC, member of the Manitoba Aboriginal Human Resource Strategists Group, member of the Manitoba Employment Equity Practitioners Association and alumnus of Brandon University and Vancouver Island University.

Pauline is from Garden Hill First Nation and lives with her significant other in St. James where she cultivates her enthusiasm for Aboriginal literature and art. She enjoys spending time with family and supporting community events in her spare time.



Adapted Yoga Seated Stretch and Strength

~ By Regan Block ~



For as long as I can remember, since my injury back in the late 80's, I have been struggling with leg and back spasms along with a great deal of lower back pain. They are always with me and some days I feel like I will always have these medical issues.

One way I have been coping for all this time has been going to massage therapy. In the last two years, I have been seeing some Registered Massage Therapists and Physiotherapists that have given me some real hope in lessening the discomfort. They have taught me some simple methods, like how to use proper breathing techniques to help me get through the pains and spasms when they occur, so I don't tense up as much and make it worse for myself. Other therapists have shown me that my legs need almost as much attention, so I am getting that worked on weekly. I can now almost make it through an entire weekend without having one of my major spasm attacks as I refer to them.

Then one day one of my massage therapists, who is also a Yoga instructor, called me up and told me of a flyer she received about a Yoga class which had been adapted for people in chairs or wheelchairs. I was intrigued as that was one of the therapies I had

not tried yet. Enabling Access' Adapted Yoga-Stretch and Strength boasts the credentials of an Occupational Therapist and a Registered Yoga instructor, so I had to try it out.

Here were my first impressions of the 45 minute **Adapted Yoga- Seated Stretch and Strength** class as it pertains to my situation:

- 1) Yoga is not as easy as it looks.
- 2) Being seated throughout the session certainly helps the participant remain comfortable and the instructors were mindful that the participants had to keep their balance in their seats.
- 3) The Yoga instructor used easy-to-understand terminology.
- 4) There were more than a few times that I twisted myself around so that I didn't know my left from my right.
- 5) Marnie Courage, the occupational therapist who created the program, was very attentive and quick to help participants get into the positions the instructor was demonstrating.
- 6) As a person with a T-10 Paraplegia, staying balanced in my chair during some of the movements was difficult at times, but made me think about using what trunk muscles I have to stay steady. The class includes some positioning accessories that can help stabilize your pelvis as you sit in your wheelchair.
- 7) I was quite exhausted after the first 30 minutes; the remaining 15 minutes were spent doing purposeful breathing and relaxation.
- 8) The cost is \$12.00 per 45 minute session. I was only able to attend the last two classes of the Spring session. (If you are a member of the Independent Living Resource Centre, Leisure Program, your registration fee may be covered, inquire at ILRC).
- 9) All in all, I was very impressed at how good I felt. I was not sore or out of breath. I felt loose, relaxed and my #1 goal was achieved - sitting comfortably, in my chair, with my hands palms down on my legs, without feeling the need to lean forward.

Next sessions start in September. Marnie has planned two classes: Tuesday evenings at 6:30 pm



and Friday Mornings at 11am. The sessions will run for 8 weeks and then Winter Sessions are planned to follow.

Marnie is very passionate about continuing to build the Adaptive Yoga – Seated Stretch and Strength program to meet the needs of all Manitobans who are unable to enjoy traditional Yoga, due to any physical limitation. She says that between her experience and training in working with people of varying abilities, and the Yoga Instructor's knowledge of Yoga poses and breathing, that many people in our membership will finally be able to experience the well-known benefits of traditional Yoga in a way that accommodates their specific needs.

I asked Marnie and Adrianna, (Yoga instructor) a few questions:

Question 1: *"What made you decide to start up such a program?"*

Marnie states that "as an Occupational Therapist, enabling access and promoting wellness programming is essential." She attended traditional Yoga classes and realized that people with physical disabilities and especially those with mobility challenges, would really benefit from the goals of the poses and the breathing training, but obviously the mat work would be impossible for some. She researched Seated Yoga and then hired a Yoga Instructor to put together a fabulous program that is easily adapted for people who want to stand, sit on a chair or stay in their mobility device.

Question 2: *"Do you know if this is the first of its kind in the province?"*

Marnie informs me although there are other seated classes in Winnipeg, this is the first Occupational Therapist and Registered Yoga Instructor coordinated class in our province and she hasn't seen another like it in Canada. The sequence of poses, breathing exercises and facilitated stretching with positioning accessories are unique to our program.

Question 3: *"Can you tell me more about the program and its goals?"*

Adrianna states that "the goal of the Adapted Yoga program is to modify a series of Yoga postures

for all types of abilities so that more people can gain the health benefits from the practice."

The 45-60 minute low-impact exercise program incorporates therapeutic Yoga poses that work the body from head to toe, to the best of any practitioner's ability. The gentle flow of breath and movement calms the mind, increases blood circulation, improves strength, reduces muscle tension, and enhances respiration. It's also grounding, improves focus, and helps people become more in touch with themselves and what they need. The many movements, bending and twisting, in a regular Chair Yoga session, help stimulate the elimination of toxins within the body, improve digestion, and the immune system.

The chair allows for greater stability, and reduces the fear that keeps us from trying new poses. If we feel supported and safe, we're more willing to push ourselves, ultimately achieving new poses and allowing our bodies to show us just how capable and strong they can be. For people with disabilities, Yoga can improve range of motion, digestion, circulation, core stability, improve motor control, develop self-esteem and help people discover their unique abilities in a non-competitive atmosphere.

Question 4: *"What kind of challenges did you face when teaching the classes?"*

Adrianna states that, "since this was a pilot project and because it was very new to her and the students, the first few classes were challenging, but once the students were familiar with the poses they were able to synchronize their breathing better with the movements and gain more benefits from the practice."

She also states that "sometimes it is challenging to keep the class flowing since the participants have various abilities. Marnie's confident that once they know their students and students can maintain a regular practice, each person will know their specific modification and the class will flow much smoother."

Contact information:
Marnie Courage, OT
Website: <http://ea-solutions.ca/>
Email: info@ea-solutions.ca
Ph: 204-475-0433

(See advertisement in this issue of ParaTracks)



New Accessible Housing Development Opens in St. Boniface



Welcome to Place Bertrand - an affordable housing initiative in a cluster of 20 households with half of the homes featuring full wheelchair accessibility and universal design concepts.

Don Onofriechuk, chairperson for Ten Ten Sinclair Housing Inc., which operates Place Bertrand, says "In keeping with Ten Ten Sinclair's values, we see Place Bertrand as a cluster of homes that are inclusive to all people - with or without disabilities." He adds, "We want to see and promote neighbourhoods that are inclusive of the diverse needs of our community." This community at 396 Bertrand Street has already taken shape and has 2 CPA members living there."



"What a beautiful place to live!" "How I wish I were one of the occupants in this place!" These are only a few of the remarks that people who come to Bertrand Place can't help but say.

It is really wonderful and I am so thankful to be accommodated in this well-planned project of the Government of Manitoba and Ten Ten Sinclair Housing Inc. Every section of the house has been designed to suit the needs of the wheelchair residents, from the spacious living room and kitchen to the walk-in shower. What else can a person with a disability ask for?

I would highly recommend this housing community to other CPA members. The project caters to all the needs of a disabled person and it is family oriented as well. The living accommodation promotes independence because one has the freedom to do what they want to move freely inside the house.

I consider myself very fortunate for having been accommodated in this housing community.

~ Maria Tongol ~

Family Services and Housing Minister, Gord Mackintosh, proudly calls projects like Place Bertrand, "Barrier Busting". Federal and Provincial funding for the project was made possible by the HOMEWorks Affordable Housing Initiative.

There are 10 wheelchair accessible suites available to applicants with low to moderate income, who are eligible for rent subsidies. All of the accessible suites have similar floor plans with the biggest difference being 1, 2, or 3 bedrooms. If you or someone you know is interested in applying to move to a neighbourhood such as Place Bertrand, please contact Don Ament at 339-9268 ext 226 and ask for an application to be sent out to you.

Wolseley Woodworking & Construction



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667-5787 **Mike Hladky** (SMR, U of M)



2009 Merit Award Presented to Dr. Kristine Cowley

CPA's Merit Award was initiated in 1965 to recognize organizations, supporters and persons with spinal cord injuries who have made a contribution to the Association either through their personal efforts or as an example of successful rehabilitation.

At CPA's Annual General Meeting on June 16, 2009 President John Wallis presented the 2009 Merit Award to Dr. Kristine Cowley "for her dedication, commitment and tireless efforts in improving the quality of life of persons with disabilities".

Kris sustained a spinal cord injury over 20 years ago. She participated in wheelchair track, competing in the 1992 Paralympics in Barcelona, Spain, where she won two gold medals, one silver medal and set two world records in the 800 and 400 metre events.

Kris served on the CPA Board of Directors for 5 years from 1990 to 1995 and held the position of

President for the 1994/95 year. In 1995 Kris accepted the position of Executive Director of CPA Manitoba, which she held until 1998

Kris obtained a Bachelor Degree in Science in 1990 and a PhD in Neurophysiology in 1998. She's currently a Research Associate at the Spinal Cord Research Centre at the University of Manitoba. Over the years Kris has obtained numerous awards, bursaries and has a long list of professional and community service. For the past six years, Kris has written numerous articles on spinal cord injury research for ParaTracks and has recently started to write articles for Total Access, CPA National's magazine.



Kris, her husband Todd, and three children – Meghan, Laurel and Ryan, reside in East St. Paul, Manitoba.
~ Congratulations, Kris! ~

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Spinal Cord Injury Follow Up Program

The Annual Urological Check up:

In order to provide optimal urologic care, the Spinal Cord Injury Outpatient Clinic maintains a renal registry, which ensures all SCI clients from Manitoba and Northwest Ontario are followed. Newly injured clients are screened annually for the first five years, followed with biannual screening. This assessment with a physiatrist and clinic nurse is recommended for people with spinal cord injury (SCI) to prevent long-term complications, wellness promotion and monitor progress over time. A urological appointment will include: a renal ultrasound, fasting, blood work, a 24 hour urine collection for Creatinine clearance, and a collection of a sterile urine specimen following the renal ultrasound for a urinalysis.

Urodynamic studies are used routinely to evaluate bladder function after SCI. They are the “gold standard” for evaluating bladder and sphincter function and for documenting the effectiveness of new drugs or other treatment modalities. Another important application of urodynamic studies is the detection of silent autonomic dysreflexia. Urodynamic studies are an important component of a comprehensive assessment of the lower and upper urinary tract in conjunction with other modalities such as cystoscopy, renal ultrasound, and renal nuclear medicine scan.

The urological rehabilitation of spinal cord injury patients depends on an optimal urological treatment plan and good cooperation between the client, general practitioner, urologist, and physiatrist specializing in treating spinal cord injuries. If you wish to follow up with your own urologist or general practitioner please contact the clinic at 787-2281 and we will let your physiatrist know and remove you from the registry. If you have missed several appointments and have not contacted the clinic to cancel, you may be removed from the renal registry and will require a new referral to see your physiatrist. If you move or change your phone number, please contact the Spinal Cord Injury Clinic to update your demographics. We appreciate 24 hours notice if you need to change your urologic appointment.

Urinary Tract Infections:

Persons with SCI have an increased risk of developing urinary tract infections. SCI produces profound alterations in lower urinary tract function. Risk factors include: over-distention of bladder, vesicoureteral

reflux, high pressure voiding, large post-void residuals, presence of stones in the urinary tract, and outlet obstruction. The method of bladder drainage also influences the risk of urinary tract infection. Indwelling catheterization, intermittent catheterization, including suprapubic, and urinary diversion are most likely to lead to persistent bacteriuria.

Many SCI patients have asymptomatic bacteriuria, which represents colonization of the urinary tract without symptoms or signs. The overall rate of urinary infection in SCI patients is approximately 2.5 episodes per patient per year. According to The Infectious Diseases Society of America Guidelines (IDSA) for the Diagnosis and Treatment of Asymptomatic Bacteriuria in adults, it is recommended that Asymptomatic Bacteriuria should not be screened for or treated in SCI patients. Antibiotic Prophylaxis is generally not recommended because of its unproven benefit in several studies and its association with emergence of antimicrobial resistance according to the IDSA.

Indwelling (Foley) Catheters:

Attempts at eliminating bacteriuria associated with indwelling or intermittent catheters have generally been unsuccessful. There is now appreciation of the fact that a creeping adherent biofilm of bacteria frequently ascends through the luminal and external surfaces of an indwelling catheter, often within 8 to 24 hours, leading to bacterial adherence to the bladder surface and correlating with symptomatic infection. The use of antimicrobial agents to clear or prevent bacteriuria in patients on indwelling or intermittent catheterization has had mixed success.

UTI Symptoms

- Fever (temperature greater than 100°F /37.7 c)
- Chills
- Incontinence
- Increased spasms of legs, abdomen, or bladder
- Feeling the need to catheterize more often (frequency)
- Feeling the need to catheterize immediately (urgency)
- Burning of the urethra, penis, or pubic area
- Nausea
- Headache
- Mild low back pain or other aches
- Malaise and fatigue

UTI Signs

- Sediment (gritty particles) or mucus in the urine or cloudy urine
- Malodorous urine
- Blood in urine (pink or red tinged urine)

Note: The appearance and odour of your urine may change because of changes in your diet or fluid intake. If you observe changes in the appearance of your urine but are asymptomatic (see list above) it is not necessary to be screened for or treated for a UTI.

People who empty their bladders by self-catheterization may occasionally observe small blood clots or streaks of blood on their catheters because of trauma (bumping against the bladder or urethra or forcing the catheter past the sphincter). This is not cause for concern unless it happens frequently. Larger amounts of blood, or urine that is red from blood, should always be reported to your health care provider.

When to call your health care provider

If you develop a fever (temperature greater than 100°F /37.7 c) or if your symptoms are interfering with your life, you should call your health care provider. He or she will want to know your temperature, current symptoms, and whether you have any allergies to antibiotics. Your health care provider will also want to get a urine specimen and will discuss with you whether antibiotics should be started right away or after the results of the culture are available.

How to collect a good specimen for urine culture

The accuracy of any urine test depends on careful collection of the specimen to avoid contamination by bacteria from other sources, such as your hands or the specimen container. Following the instructions below will help ensure accurate results.

1. **Open your sterile container** -- either one from the clinic or your general practitioner. Do not touch the inside of the container.
2. **For Intermittent Catheterization:** Using a new, sterile catheter, catheterize yourself as usual and allow some of the urine to flow into the container. Collect at least 30 cc (1 oz.) of urine.

For Indwelling (Foley) Catheters: To collect the best specimen, your catheter should be changed and the urine should be collected immediately from the newly inserted sterile catheter. Collect at least 30 cc (1 oz.) of urine. Occasionally, it may be impossible to change the catheter for specimen collection, and urine may have to be obtained from the indwelling catheter. The specimen will be contaminated by the bacteria that dwell on the catheter, as well as those

that live in the urine, and the number of colonies that grow will tend to be larger. The laboratory may not be able to accurately determine which bacteria are causing your symptoms.

3. **Never** collect a urine specimen for culture from a leg bag or a night bag.
4. **Refrigerate the specimen** and keep it cool until you can get it to your health care provider. It should be delivered within two hours of collection.

Self Care

Many people are able to prevent a UTI from developing by taking some self care steps:

- Careful hand washing before and after each catheterization.
- Catheterize more frequently (every 2 - 4 hours) on the onset of UTI symptoms.
- Increase their fluid intake.

According to research by Siroky, individuals who use hydrophilic catheters show a reduced infection rate.

For those with an indwelling catheter, an increase in fluids is necessary to ensure the urine is clear and has the appearance of water or is only slightly yellow in color.

Generally, changing your catheter every month should be sufficient to keep you healthy, but people who get frequent UTIs or whose catheters tend to become encrusted with built-up mineral deposits may require a change more frequently.

There is growing evidence that Cranberry extract tablets should be considered for the prevention of UTI in SCI patients with neurogenic bladder and those with a high GFR may receive the most benefit.

There is not enough data to recommend bladder irrigation as a means of treatment for bacteriuria in persons with neurogenic bladder.

*Nicole Dubois
Nurse Clinician
SCI Outpatient Clinic*

FOR SALE:

2003 VICTORY 3 Wheel Scooter by Pride Mobility for sale by original owner.

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If having children or enjoying intimate relationships are important priorities for you, then consider

FERTICARE® Personal

Until recently, the only successful method for most men with spinal cord injuries to achieve sexual satisfaction usually involved hospitalized treatment. **FERTICARE® Personal** offers a better approach allowing men to achieve successful results and it does so without taking away the human need for private intimacy because it can be done at home. when they choose to.

The **FERTICARE® Personal** vibrator was developed by Multicept, in cooperation with specialists at Rigshospitalet (the University Hospital of Copenhagen, Denmark), in order to remove human sexuality from the hospital's control and place it with the individual, where it belongs.

This hand-held device works by using a simple technique called Transcutaneous Mechanical Nerve Stimulation (TMNS). It is easy, and above all safe to use (FDA Registered).

Success Rates of Better than 80%

While vibration techniques are not new, the ability to control parameters like frequency and amplitude to achieve satisfaction in the vast majority of SCI men is.

By applying adequate vibration power, PVS has proven successful in better than 80% of spinal cord injured men with lesions above the T10 spinal cord level.

Battery operated

FERTICARE® personal comes with a built-in rechargeable battery. No cords or wires are necessary. For safety, an indicator light on the vibrator tells you if you are applying too much pressure.

Adjustable vibration levels

Through research it was discovered that a certain level of intensity optimized success in 80% of the SCI men tested. This is the level we recommend. But since men are individual, **FERTICARE® personal** has adjustable vibration levels.

"Choose the setting which works best for you."

Why the miracle of life no longer needs a miracle.

FERTICARE® personal improves the prospects of becoming fathers for men with spinal cord injury.

While other techniques are available, they must be performed in a clinical setting and are often expensive.

With **FERTICARE® personal**, you can arrange private time for you and your partner, and thereby satisfy your need to be alone together.

IntimateRider™ = Ultimate Freedom

Imagine being able to please each other with an effortless sway. Minimal body movement sets the **IntimateRider™** into a quiet, smooth and natural motion. Comfortable fabric conforms to your body, and a selection of colors and pattern will certainly set the mood.

With its sleek design, not much room is required to set up the **IntimateRider™** at home, in a hotel or wherever the night may take you.

The IntimateRider™ can be used by those with...

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9th Annual Day at the Beach

West Grand Beach, Manitoba

There was joy, there was fun, there were bus loads of wheelchair users in the sun at West Grand Beach for the 9th Annual Day at the Beach this past July 17th. The nasty wind and rain stayed away most of the day making this latest installment of fun in the sun another success. Tubing and water skiing, using a Sit and Ski, have been trialed at the event for years. While they are still not yet Paralympic sports, it is always good to see some of the brave souls from RR5 taking to the watercraft for a test ride.

Most people participated in the water sports - three person tubing, water skiing, while others participated in water skiing using the customized Sit and Ski. No kayaks this year... possibly due to having to move the wheelchair dock farther east due to the recent rain. I'm sure the kayaks will be back next year.

It was great to see a few new events that were added this year, consisting mostly of games for the kids and the

addition of a basketball hoop.

Tubing is my favorite activity as almost anyone can participate in this exhilarating ride. Last year my long legs bounced out of the tube – a bit of a rush for me to say the least. This year's ride was just right but I am still not sure which part I like best – the whip or the wake.

The water skiing never fails to draw more than a few onlookers. One day I may move from a spectator to participant, but for now watching all of the skiers at all levels, novice to professional, was enough for me.

We hope to see more CPA Members out at West Grand Beach next year. Remember that there is always an abundance of food, drink, prizes and fun, including accessible transportation to and from Grand Beach. Watch next Spring's ParaTracks for event dates and contact information.

~ Regan Block ~



BECOME A CPA MEMBER TODAY!

Your membership dollars support us in our efforts to remove barriers in the community, publish the newsletter ParaTracks and provide rehabilitation counselling services to our members.

We are in the process of making the following improvements to CPA's membership program.

We are seeking sponsors to provide additional discounts and benefits to individuals who are paid members.

At present members may receive discounts from:

Stevens Home Health Care Supplies—special priced supplies & 10% off equipment

The Access Store—10% off purchases with membership card

Northland Home Health Care—10% off medical supplies with membership card

Disabled Sailing, Oak Hammock Marsh—25% off membership

Other benefits also enjoyed by members:

Voting privileges at the CPA Annual General Meeting.

"ParaTracks" Manitoba CPA newsletter (3 times/year).

"Total Access" CPA National Magazine (4 times/year).

**We are changing our membership program from monthly renewal to annual renewal.
This change will help us reduce costs.**

(Current members will receive notification of the change by mail.)

**Please take a moment to fill out the application on the back cover
and send in your membership today!**

Thank you for your commitment to the vital work of our member-based organization!



Automotive News

If you go back a few years it seems every major car manufacturer offered a minivan in its lineup. The current recession has caused major restructuring in the North American automotive industry. This could have ramifications on the types of vehicles available to be modified for wheelchair access. Minivans are going through major changes. Initial changes took place as car manufacturers started disappearing. When Plymouth was dropped after 2001, it took the Voyager minivan off the market. When Oldsmobile was discontinued after 2004, the Silhouette van disappeared. Now Pontiac is on the chopping block, which means the Montana will not be available. Further change took place as some car manufacturers voluntarily dropped minivans from their line-up. The Mercury Villager was dropped after the 2002 model year. Ford dropped the Windstar / Freestar after the 2007 model year and Buick dropped the Terraza at the same time. Even before the financial meltdown GM announced they were getting out of the minivan market. 2009 will be the last year for the Chevy Uplander. Why all the cuts in minivans? It seems the baby boomers are either downsizing their vehicles or moving to crossover/SUVs which can still carry seven passengers but don't have the "soccer mom" look of a minivan.

All is not lost. There is still the Dodge Grand Caravan / Chrysler Town & Country along with the Honda Odyssey, Toyota Sienna, Kia Sedona, Volkswagen Routan, Mazda 5 and Nissan Quest. Nissan has stated they will discontinue the Quest after the 2010 model year but have hinted they may bring out a replacement. It is interesting to note the Volkswagen Routan is a rebadged Chrysler Town & Country minivan. The front and rear exteriors feature a distinctive Volkswagen design but the rest of the sheet metal and the engine / transmission are Chrysler. Ford is set to re-enter the minivan market with the introduction of the Transit. This vehicle has been around for some time in Europe. Its initial introduction to North America will be as a cargo / utility van. One interesting aspect of the Transit is that it is a tall narrow van with considerable headroom. We will have to wait and see if the new Ford Transit can be modified for wheelchair access.

In doing a bit of research, I have found that currently no one seems to be converting the Nissan, Mazda or Volkswagen vans. The Mazda 5 is a very small vehicle that probably does not have enough interior space to

allow for a low floor conversion. The only Kia conversions I could find are for rear entrance ramps which work fine for some passenger conversions but are not practical for a disabled driver. So that leaves us with Dodge/Chrysler, Honda and Toyota. While the Honda and Toyota minivans continued to receive very high ratings, they are also considerably more expensive than the Dodge/Chrysler models. Both can be converted to provide low floors and side entrance ramps which allows for flexible seating and the ability to drive from a six way power seat or from a wheelchair. The only concern that seems to pop up is that Honda will not honour its warranty once their vans receive a low floor conversion. It would appear that the bulk of converted minivans from 2010 on will be the Dodge/Chrysler models. Hopefully demand for these vehicles in the general public remains high enough for Dodge/Chrysler to continue manufacturing them.

One very big challenge in the years to come will be trying to convert any minivan that embraces Hybrid Technology. Hybrids have huge banks of batteries and complex wiring that could prove to be major obstacles for the companies that modify floor heights to provide wheelchair access. But we'll cross that bridge when we come to it.

~ Greg Winmill ~

UPPERTONE GYM TO GIVE AWAY

The Uppertone Gym enables quadriplegics to exercise independently from a wheelchair.

This is a weight exercise machine specifically designed for use by individuals without hand grip strength; no cuffs are required. CPA has a unit that was previously used in the physiotherapy department at the Rehab Hospital. Anyone interested should call Greg Winmill at CPA's office. 786-4753 ext:226





Freedom Behind the Wheel¹

On July 22, 2006, I was involved in a vehicle accident. The youth group I was involved with was doing some voluntary service at a mission in Dryden, Ontario. Ten people were hauling firewood from a stockpile to one of the mission houses, with seven of us on a car hauler. We traveled this road many times throughout the day, but this last time, we hit a bump and I fell off the trailer. I landed in such a way that I broke my back and pulled nerves from my left arm out of my spinal cord. This left me paralyzed from T-03 down. I also sustained a brachial plexus injury to my left arm, which left it with no movement. I spent about six months in recovery and therapy at the Health Sciences Centre in Winnipeg.



In the Spring of 2007, Linda Johnson, Driver Assessment & Management Program, and I started working on arrangements to allow me to drive. Unfortunately, a pressure sore prevented me from sitting, and I was confined to my bed until the beginning of December 2007, postponing my driving plans. I now have a customized Ride Cushion to help prevent pressure ulcers.

On January 11, 2008, my dad was involved in a farm accident and passed away. This was very tragic for me. Yet, I have the comfort of knowing that he is in heaven, and that I will see him again. Through all these difficulties, my family and I have experienced the peace and the presence of God.

In February 2008, I bought a new Dodge Caravan. Lowering the floor took about six weeks. In June 2008, I had a driver's evaluation completed in Minneapolis for the use of a joystick. I then had one week of training in Michigan in November 2008 and in January 2009, a friend drove my van to Minneapolis to get the joystick system put into the vehicle. It was ready by the middle of February 2009 and the next step was the road test, which I passed.

There were a few complications with getting a 2008 Caravan converted. Because it is a newer vehicle, the companies that did the floor lowering and the joystick modifications needed to make changes to their systems. It was a long wait to get the floor lowered, but having it done in Minneapolis sped up the process.

Modifying a vehicle is very expensive. The total cost

was \$103,000.00 US. The breakdown is as follows:

Lowering the van floor

\$18,000.00 US

Driving system

\$67,000.00 US

Assessment and training

\$16,000.00 US

Travel, lodging, and food

\$ 2,000.00 US

Total cost:

\$103,000.00 US

I need the joystick driving system because I do not have enough function in my left arm to be of use while driving a vehicle. With the joystick, I can do everything with one arm and hand. The

joystick provides the acceleration, braking, and steering. I have a touchpad that I use to start the engine, shift gears, and control such things as air and lights. Included is a button on top of the joystick that I use for signals because it is easier than having it on the touchpad.

On my way to pick up the van, I flew from Winnipeg to Minneapolis. After I had booked my ticket, I called United Airlines to ensure that my power chair would fit into the luggage compartment. They said that everything should work out fine. When my friend and I were checking in at the airport, the lady helping us said, "I don't think that the chair will fit into the luggage compartment." "You're kidding," I thought. They measured the chair dimensions and found out that it would not fit. They then booked an afternoon flight for us.

Although I wasn't happy with the change in flight, we managed to complete the prep work and got started on the final training the next day. We didn't get far, however, as we immediately realized that the brakes were not cooperating. Investigation indicated that the brake fluid was almost empty. The van now needed to go to the shop because there was a leak. We dropped the van off at a Dodge service station, with the understanding that they would get it repaired the next morning. However it wasn't until several days later that the van was fixed. I finally finished my training almost a week later and headed home.

Since then, I have been enjoying the freedom of going wherever I want, whenever I wish.

~ Carlton Reimer ~



Technology - Skype Communication Software *By Regan Block*

Hello all. This issue's topic is about the Voice over IP technology called Skype. This VOIP (acronym) product allows any computer owner / user to communicate just like a telephone for free with any other Skype user. The reason Skype is the focus for this issue is that it is the best known, cheapest and most cost-effective. Apparently, even Oprah regularly takes Skype users/callers on her show. Skype users can call any other computer Skype user for free and any landline telephone or mobile phone (depending on where you are calling to, there may be a small cost involved). You or your family members are never far out of reach as long as your internet connection is up and your computer is running nearby. Even better is that if you were to purchase a VOIP Headset or Cordless phone – you would have even more connectivity and convenience (not to mention cost savings on long distance calls) and the sound quality would improve.

Skype is free to download and you can call any landline or mobile phone in most countries free-of-charge. You can also do a 1 to 1 video call with your friends or family, which is my favorite feature within the last few releases of Skype.

Here are a few reasons why our members may find this free communication software so appealing:

- ✧ It's free to use and for other Skype users to download as well
- ✧ Video quality very good and very clear audio – only 1 to 1 calls allowed
- ✧ Skype's developers were the same Estonian brainiacs that brought us Kazaa – one of the better peer to peer file sharing programs back in the day
- ✧ It's hands free mode pretty much once the conversation starts

What you would need to get the most out of Skype:

- ✧ High speed internet connection
- ✧ Wireless router
- ✧ A Webcam
- ✧ Laptop computer with the webcam / microphone built right in
- ✧ Even one of those Nokia web devices or PDA's with WI-FI are quite Skypeable, plus small and portable

So once you are connected and you are conversing with someone, here are a few hints:

- ✧ Test your audio setup before you start the conversation or video conference
- ✧ It takes a bit of time to get the talk, respond, talk into a seamless conversation
- ✧ During conference calls, no 1 to 1 video is allowed – just voice
- ✧ Don't accept something called POD's requests, as it is some kind of scam we have all heard of before
- ✧ Pay attention to who your kids are talking to and if their Skype friends are someone they actually know

What are the downsides of Skype you may be wondering – well aside from the sound not being as good as a landline or cell phone, not much really. To get the most out of the program, a user would most likely want to set up an account and then purchase Skype credits so you can call landlines and mobile phones anywhere in the world or you can even get your own Skype internet phone number so your friends and family can leave you messages.

Possibly the coolest feature that our membership would utilize, is the 1 to 1 video calls, as it is hands free communication. Once you have video 1 to 1 going, if you're up to it, you can lead a tour around your house or apartment and watch a real time tour of anything within your friend's webcam's line of sight. I am sure the day will soon come when I could attend a family event somewhere via the internet while I am at still at home resting comfortably watching a football game live. – I think that day should be this Fall sometime!

I hope you all will give this software a try out sometime.

Things to get for later:

- ~ A full out - VoIP phone
- ~ Software for recording Skype calls
- ~ A new wireless N router

Until next time, Regan



Links + Photos <http://www.skype.com>



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Volunteer Spotlight ~ Regan Block



In this issue of ParaTracks we'd like to shine the spotlight on volunteer *Regan Block*.

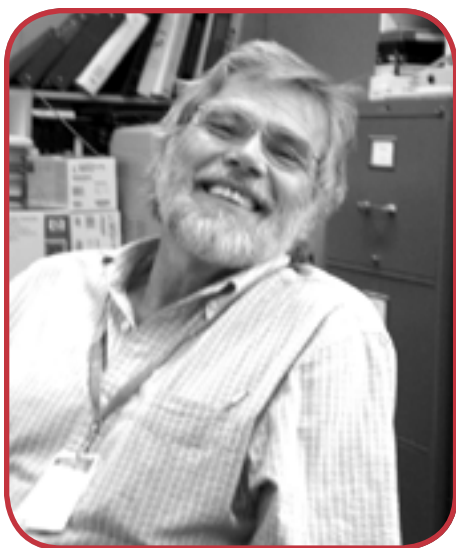
Regan has been gracing the CPA offices with his presence for 6 months now. He's been busy inputting statistical data for the Stakeholder Training and Education for Pressure Ulcer Prevention (STEP UP) program. He's been helping out with many other projects, including writing several articles and assisting with getting this issue of ParaTracks into the hands of our members.

Regan's work has been invaluable and his dedication is much appreciated!

Thanks, Regan!



CPA (Manitoba) Welcomes Two New Staff Members



Paul Routhier

I accepted a 2 month contract position with CPA to fill a vacant position as the CPA Rehab Counsellor on RR#5 HSC SCI – Rehab Unit. The contract was renewed for another 2 months.

I have worked in the field of rehabilitation serving different communities for over 30 years. I have been privileged to serve yet another community of adults – adults who sustained an SCI. I have come to appreciate and respect these individuals whose lives were forever altered and I have come to admire their determination and focus to move on and their willingness to help others who are facing their own personal journey of recovery.

Cheers!

Scott Coates

I am originally from Boissevain and I recently moved to Winnipeg from Brandon. I completed a Master's of guidance and counselling and a Master's in special education degree.

I have been a teacher for 8 years as well as a junior hockey coach for 5 years and I also worked for 3 years as a support worker in mental health services. Throughout my educational experience, I have worked with adults and children with a variety of different needs and abilities. I am looking forward to meeting and supporting the individuals of the Canadian Paraplegic Association (Manitoba) Inc.



ParaTracks is a publication of:

**Canadian Paraplegic
Association (Manitoba) Inc.**
825 Sherbrook Street
Winnipeg, Manitoba R3A 1M5

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YES! Count me in as a member of the Canadian Paraplegic Association (Manitoba) Inc. All members receive "Para-Tracks" CPA (Manitoba) newsletter, "Total Access" CPA National Magazine and voting privileges at the Annual General Meeting. Members also receive discounts at various health care supply stores – Stevens Home Health Care Supplies (special pricing for supplies & 10% off equipment), The Access Store (10%), Northland Home Health Care (10% off medical supplies) and Disabled Sailing membership (25%).

I wish to select the following category of Membership:

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All Monies donated remain in Manitoba to support CPA (Manitoba) Inc. An income tax receipt will be issued for any amount over \$15.00. Sustaining, Charter and Patron Members will receive recognition of their generous contribution in the context of events such as our Annual General Meetings or in the programs of other CPA (Manitoba) Inc. functions.

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