AFTER A DIFFICULT CHOICE:
You Helped Reshape Korene’s Life

Korene Mosher slid into the warm water of Flagg pool and pushed off the wall. As she kicked, the flipper on her right foot undulated smoothly. But something about her technique looked amiss. There was no left flipper?

As she reached the pool’s far end, the reason became apparent. The 39-year-old’s lower left leg was amputated. Determined to train for a triathlon, Korene was doing outpatient aquatic and physical therapy at Gaylord.

“I was a swimmer, and when I got into the water for the first time after the amputation, I floundered around,” she said. “My body balanced differently and I had no idea what to do!” Working closely with Aquatic Therapist Ingrid Marschner, Korene quickly mastered new swimming skills to help her compensate for the loss of her leg.

Cancer Discovery
Korene was only 12 years old when osteosarcoma, or bone cancer, was diagnosed in her left femur. At first, her leg pain was chalked up to “growing pains.” But then a large swelling appeared above her knee, instigating an x-ray. Physicians quickly determined that most of her femur had to be removed.

While Korene kept her leg, she endured 18 operations over 26 years that included a knee replacement and the replacement of her femur, first with two cadaver femurs and then with a succession of titanium rods, and finally an amputation. The perpetual cycle of operations, hospitalizations, and recoveries kept her living most of her life in the hospital. “I wanted more out of life — a career, a family, and freedom from pain!” she explained.

Continued on page 7
Dear Friends,

Every day important life decisions are discussed and made in our hallways, patient rooms, gyms, staff offices, and break rooms. Patients and their loved ones plan for the future, staff members make care decisions and career choices, volunteers donate their time, and donors decide to send gifts of support.

In this edition of Contributions, we continue to look at the many ways individuals and families are connected to and influenced by Gaylord.

The diverse and often unseen experiences, relationships, healing, and decisions that occur at Gaylord can be life changing. Your gifts help to transform Gaylord into a place of hope and possibility, making it more than a hospital. We are so grateful for your partnership!

You offer hope when things seem hopeless by supporting skilled care when it is critically needed and enabling us to provide the latest technology and make important updates to our facilities.

Your gifts of compassion help to build a strong community, where patients, with the support of their families, can rebuild their lives and futures.

Thank you for your support!

With deep appreciation,

Tara Knapp
VP of Development, Marketing, and Public Relations
tknapp@gaylord.org
(203) 284-2838

The greatness of a community is most accurately measured by the compassionate actions of its members. Coretta Scott King
DIFFERENT AND DEDICATED:

Father and Son Serve Together

My dad and I love Gaylord! We both want it to be successful, and as members of Gaylord’s board of directors, we bring different skills to the table. I’m a data guy and a researcher. My father, Buck, is an excellent businessman and a one-person social network! Perry Wilson, MD

For more than twenty years, as a member of Gaylord’s board of directors, Buck Wilson has deftly wielded his skills and business acumen to contribute to Gaylord. But when he was first asked to join the board, by then-Board Chairman Hank Bartels, Buck didn’t think he had the right skills. “Hank thought I was a great marketing guy, but I wasn’t,” he said. “I wasn’t all that familiar with Gaylord and didn’t understand the type of care Gaylord offered and how it differed from an acute care hospital. But I was intrigued and said ‘Yes!’”

A Family Affair
That decision began the Wilson family’s journey of involvement with Gaylord. Over the years, the Wilsons have not only supported Gaylord, but they’ve also tapped into the care it offers. Buck’s wife, Pam, a polio survivor, received outpatient therapy to help manage post-polio syndrome. And, at one point, Pam’s mother was treated at Gaylord for serious pulmonary issues.

Buck and Pam’s son, Perry, grew up hearing about Gaylord from his parents and is now a Yale physician focusing on clinical research. “A couple of years ago, there were some vacancies on the board,” Perry explained. “My dad was thinking of stepping down and put in my name.” At first, Perry didn’t think he belonged on the board — echoes of his father — because he was 38 years old and assumed board members were senior business people in the community. “But I found out that the board wanted people with all kinds of skill sets who could contribute to making the hospital a better place.”

As he considered the position, Perry felt he could bring a statistical eye to some of the activities at Gaylord, such as performance metrics and quality measures. Meanwhile, Buck was writing a letter of resignation. He wanted to ensure that there were no conflicts of interest or that other board members wouldn’t feel outnumbered by two participants from the same family. Board Chairman Robert Lyons dissuaded Buck from resigning for a year, citing the need for Buck’s ongoing involvement as new members transitioned onto the board.

Offering Their Skills
Although the father and son duo bears the same last name, they bring diverse skills and experience. Being immersed in the medical world allows Perry to prod more deeply into information that can affect board decisions. “There is a role for someone who knows what questions to ask,” Perry said. “It’s good to be able to inquire about some of the statistics and ask why things happened or if X, Y, or Z has been investigated.”

Buck also noted that Perry’s relative youth offers a different perspective and said that his son’s ability to see and explain the simplicity of complex issues is a tremendous asset. While Buck admits there is a component of fatherly pride in his son’s skills, he stressed this was not his motivation for encouraging Perry to join the board. Instead, he wanted to support an organization that he felt strongly about while giving his son a positive opportunity to serve and contribute.

Why Serve on a Board?
A common core of values runs through most non-profit boards — known as the three “Ts” of time, talent, and treasure. “These are the things that most boards expect of you,” Buck noted. “You have to give them the time to understand the issues the organization is facing. You have to have an ability or talent to contribute, and regarding treasure — you have to put your money where your mouth is.” The Wilsons take these values seriously, as evidenced by their multi-generational commitment to Gaylord’s present and future.

“Whether it is Gaylord or some other non-profit that has helped family members or friends, it often inspires you to want to do something to give back to that institution,” Buck said. “Being on the board of directors is one way of doing that. At Gaylord, your opinions are valued, and you know that you can help shape the destiny of the hospital.”
For months, Melissa DeSandre, RN, toted a pair of brightly colored running shoes to work. The sneakers were more than just comfortable footwear for the 27-year-old Gaylord Hospital nurse. Rather, they were a means of caring for one young man that proved to be as therapeutic as any medicine to heal his mind and soothe his spirit.

Jogging Toward Recovery

The traumatic brain injury (TBI) patient had spent more than a year recovering at Gaylord. One day, the restless man asked Melissa if she would go for a jog with him around the hospital’s campus. Though the request was unusual, Melissa understood his motivation. “He needed to vent all of the energy and anxiety bottled up inside,” she explained. “It was a quick jog but when we returned, I could see the relief on his face.”

Their jogs soon became a daily ritual that continued for months until the patient’s discharge. Melissa acknowledges that although running isn’t a conventional form of nursing, the outcome was unmistakable. The once short-fused young man had grown much calmer and more content. “Sometimes it’s the smallest things that can make the biggest impact,” she said.

Healing as a Legacy

Although described by one peer as a “natural-born” clinician, Melissa readily admits that nursing was not her first passion. Her original plans to be a gym teacher were derailed by a souring economy that brought cuts to school physical education and sports programs throughout the country. “I wanted to find a career that was both fulfilling and in demand,” she said.

Melissa’s thoughts turned towards her mother, Lisa DeSandre, a certified nursing assistant and rehab aide at Gaylord who loved her job and was happy to help her patients. “I started thinking, ‘Maybe healthcare is for me, too!’”

While still enrolled in nursing school, Melissa followed in her mother’s footsteps, becoming a CNA at Gaylord. Not only did the first-hand experience of caring for the hospital’s critically ill and injured patients cement her determination to become a nurse, it was also at Gaylord that she found her calling — caring for patients with traumatic brain injuries.

Nuances of Nursing

Because the brain can be affected at many different levels, TBI patients can be prone to emotional and behavioral outbursts. Melissa seemed to have an innate talent for working with these patients. She was able to read their often swiftly changing moods and could alter her approach on a dime.

“It’s hard for our patients,” Melissa said. “Sometimes they’re not sure where they are or who you are, so when you come at them with needles and medications, they can be skeptical and aggressive. But you gradually form a bond. And then comes the day when they finally start to remember your name and it’s like, oh wow! Such a huge reward!”
A Special Nomination
Although Melissa is still in her twenties, her colleagues and those under her care agree that her nursing intuition goes well beyond her years. She smiled as she recalled one young patient who recently asked her age. “When he realized I was only two years older than he was, he said, ‘Oh my gosh … Then why do you act like such a mom?’ I laughed because I do feel like a mom to my patients. You have to be compassionate and caring and keep them positive.”

When Melissa was one of 78 nurses nominated by their peers for the 2017 Greater New Haven Nightingale Awards, her mother, Lisa, cried. “I am so honored and happy,” Lisa said. “People often tell me, ‘your daughter is so sweet; she’s so good with her patients.’ She has a true heart for nursing … she loves her job just as much as I love mine. She makes a mother proud, for sure!”

Lisa DeSandre with Vice President of Human Relations, Wally Harper, when she was nominated for the 2018 Joseph A. Lindenmayer Employee of the Year award.

Complete this form and return it in the envelope in the center of this magazine.

Thank You!
WHY WE GIVE:

Terry’s Brush with Death

While at Gaylord, Laura and I shared both joy and tears with other patients who had special financial needs and care issues. We heard personal stories and witnessed remarkable displays of determination and courage in the face of unpredictable life challenges. Terry Halladay

Terry Halladay shares his story of care at Gaylord and why he and his wife Laura are monthly donors.

A year and a half ago, a rigorous bi-coastal travel schedule, family commitments, visits with a friend in hospice, and two funerals — all in just four weeks — left me exhausted and physically run down. Then, in mid-March, my wife, Laura, and I went to Manhattan, where I worked a five-day trade show. Toward the end of the trip, I didn't feel well, and we left early to drive home to Connecticut. Oddly, I found myself confused by the ramps exiting the RFK Triborough Bridge, a drive I'd navigated countless times. That was the last thing I remembered before waking up two and a half weeks later, in the ICU of Yale New Haven Hospital.

A Superbug

I'd contracted a severe case of community-acquired Klebsiella pneumonia, likely a result of my travel, schedule, and contact with large groups of people. It was extremely serious — a life-threatening, antibiotic-resistant superbug that, according to the literature, has a 50 percent mortality rate even among the young and relatively healthy. I was placed in a medically induced coma for nearly two weeks as doctors worked to save my life. After four weeks of intensive treatment, I was alive, but 40 pounds lighter, barely able to speak or walk, and struggling for breath from being intubated.

On the recommendation of my medical team and concerned friends, Laura and I turned to Gaylord, a place we had heard of but didn't know much about. We discovered that Gaylord is a special and healing place. When asked about my experience, I first thank my wife (who was at my side 24/7) and then my Yale New Haven doctors for saving my life.

Quality of Life

I then enthusiastically thank Gaylord for returning me to a wonderful quality of life. I spent three weeks as an inpatient, under the care of the unbelievably conscientious and thoughtful Gaylord staff, and received intensive respiratory, physical, and occupational therapy, some of which incorporated specialized equipment, as well as exercise in the pool. I walked out of Gaylord largely under my own steam and returned home. For weeks afterward, my outpatient therapy at the hospital included physical, speech, and occupational therapy sessions, which furthered my progress and recovery.

Remarkable Courage

While I was at Gaylord, Laura and I shared both joy and tears with other patients who had special financial needs and care issues. We heard personal stories and witnessed remarkable displays of determination and courage in the face of unpredictable life challenges. We know that it is critical for patients to have access to the right tools and best care for their recovery, and how difficult it can be to manage the financial strain that a health crisis brings. We decided to help others by donating monthly to Gaylord and we enjoy knowing that we have made an impact throughout the year.

Your regular gifts help make exceptional care and restored lives possible, and help ensure that the story of my recovery is just one among thousands. Please consider joining Gaylord as a monthly donor.

Download our Monthly Giving form: https://www.gaylord.org/support-gaylord or return the form on page 5.
Difficult Choice, continued from page 1

I wanted more out of life – a career, a family, and freedom from pain!
Korene Mosher

An Experiment
In her mid-30s, Korene teamed with her Yale surgeon to try growing a new section of bone below her hip joint. The experiment, which took several years, was successful, and allowed her to have an operation to connect a customized titanium rod to the new bone.

Then, while doing rounds as part of her naturopathic medicine program at the University of Bridgeport, Korene heard a loud crack. “At first I had no idea what the sound was. But my leg felt like jelly,” she said. The connection had snapped between the new rod and the bone.

Making a Decision
As Korene and her surgeon discussed possible next steps, she began researching various procedures. “I had a metal knee, and my left leg was three inches shorter than my right,” she explained. “I was in pain and limited in what I could do. As I researched, it was clear that an amputation would free me from further surgeries and allow me to do more.”

Initially reluctant to resort to amputation, her surgeon finally agreed and decided to take the tibia from her lower leg and attach it to the new bone near her hip. This procedure would preserve Korene’s hip joint and provide a solid stump for a prosthetic leg. She had the surgery in November of 2017.

What Next?
Once released from the hospital, Korene went home to recover but had no idea what to do next. “I had some physical therapy at home to help with basic living skills, but that was all,” she said.

In March, Korene happened to meet Gaylord staff member Kim Thompson at a health fair. “When I realized that Korene didn’t know what to do, I offered to connect her with Gaylord’s amputation support group,” Kim said. Before the meeting, she met Korene and her fiancé, Marc, in the parking lot, stayed with them during the meeting, and afterwards introduced them to members who could offer support and advice.

Weeks later, a physiatry appointment with Luci Juvan, MD, resulted in Korene starting outpatient therapy at Gaylord. Surprisingly, Korene had been at Gaylord before — her mother was hospitalized at Gaylord several years ago, and her father did rehab at Gaylord after a spinal cord injury. “I knew the two wings my parents were on. But I had no idea Gaylord offered outpatient therapy or a support group for someone with an amputation,” she said.

Changed Life
Korene graduated from her medical program this spring and Marc has supported her every step of the way. She also completed peer-mentoring training with the goal of meeting with every new amputee in Connecticut to provide support and information.

“The amputation, along with the therapy and support I received at Gaylord, was life-changing. I’m no longer in pain, and I can do more things than I could do with my leg. I can do anything I want to!” Korene said.

Amputee Success Group
1st Thursday of every month 5 p.m. - 6 p.m.
Luscomb Inpatient Gym • Open to the Community
Amputee Support (203) 741-3424
It was October 2, 2016. Nick Napoli, a college senior, was riding his dirt bike at the Milford Riders Club. He loved the outdoors and savored the competition. Rounding a corner, he pushed the throttle wide open to gain speed for the straightaway.

Then, approaching a dip in the course, he eased off the throttle — but instead, it stayed wide open. The bike popped a wheelie and as he struggled to regain control, it shot out from under him. Nick slammed onto the ground, landing on his buttocks. “I instantly knew that something wasn’t right, that something life-changing had just happened,” he said.

A Clear Memory
Nick never lost consciousness and remembers the ambulance ride to Yale New Haven Hospital. There, within hours of the accident, doctors performed spinal decompression surgery to fuse several of his vertebrae together. The bike’s mechanical failure left Nick paralyzed from the groin down, the result of a burst T12 fracture.

A dirt bike enthusiast from a young age, Nick was a seasoned rider who took safety seriously. The day of the accident, he was wearing a helmet and a neck brace that went a short way down his back. “I also had fractures at T3 and T7. If I hadn’t had the neck brace on, my injury would probably have been even worse,” he explained.

Nick ended up with some leg movement and sensation, but would still need to use a wheelchair. For the 21-year-old who was studying to become a teacher of technology and engineering education, the accident was surreal. “I went riding every week,” he said. “I can’t tell you how many times I’ve had the throttle wide open. I never thought it would stick!”

On to Rehab
After a week of recovery at Yale New Haven Hospital, Nick arrived at Gaylord determined to maximize his rehab. He spent about a month receiving inpatient physical and occupational therapy. “The therapists were awesome,” he said enthusiastically. Nick progressed so quickly that he was discharged several weeks early.

His next steps included returning to college and doing outpatient therapy at Gaylord. As a student teacher first at a middle school and then a high school, Nick taught from his wheelchair, noting that the students were very curious about what had happened to him.

“Before I was injured, I had no idea what a spinal cord injury was, so I have no problem spreading awareness,” he said. “It’s a life lesson that an accident and injury can happen to anyone.”

Outpatient Therapy
Nick’s outpatient therapy at Gaylord included regular physical and aquatic therapy. “The pool helped a lot. I’m able to move my legs and walk in the water,” he said. One exercise had him walking across the pool in front of a float with weights on his legs. “It’s really slow. But my quads are working a little better, and I can practice walking backward and forward in the water,” Nick said.

Physical therapy included walking in leg braces, which often left him covered in sweat from the intense effort and exertion. He also practiced walking in the Ekso exoskeleton and was one of the first volunteers to try out the ReWalk exoskeleton at Gaylord. (The Ekso is a robotic exoskeleton only available in the hospital, while the ReWalk can be purchased for use in the home.)
Moving Forward

“Life is different now. I can’t keep wondering what would have happened if I’d just sold the dirt bike when I’d planned to,” he said. “I can’t change the past, but I’m determined to make the most of what I do have! My parents and younger sister are very supportive. At each step, they’ve encouraged me to move forward with life and to try new things. In fact, life has pretty much taken up like it was before the accident.”

Forced to make some concessions, Nick replaced his dirt bike with a four-wheel ATV and he is planning to purchase a hand cycle with the funds from a grant he was awarded. Recently, he was hired as a middle school woodshop teacher.

Continuing to press forward, Nick focuses on maximizing every opportunity, including using Gaylord’s pool. “I practice walking in the pool on my own,” Nick said. “I’m continuing to see improvement with my quads. So you can’t give up; you just have to keep on trying!”

You Can Make Future Stories Possible

By completing the simple, yet powerful, act of including Gaylord in your estate plans, you will make it possible for our community of caring to continue by helping people like Korene, Nick, and Martha when they need it most. When you let us know of your plans, you will become a member of The David Lyman Society, a group whose members are committed to ensuring a healthy future for Gaylord for generations to come.

To help you with planning, we offer sample language for the many ways you can contribute. Just visit http://gaylord.plannedgiving.org

Contact Major and Planned Giving Officer Mike Burke at (203) 284-2867 or Email him at MIBurke@gaylord.org with any questions. You can also let us know if you are making a gift to Gaylord in your estate plan by returning the enclosed envelope.
Accidents often occur when doing simple activities in the place we feel the safest: at home. But many of these mishaps, especially falls, can have life-altering consequences.

On the evening of May 30, 2018, Martha Zenner, an energetic 57-year-old executive assistant, finished the laundry in her basement and then loosely piled some groceries in her arms to bring upstairs. But about five steps up, Martha lost her balance, tumbled backwards, and landed at the bottom, where she struck the back of her head on a can of soda.

One moment, Martha was accomplishing an everyday task and the next she was on the basement floor bleeding from a two-inch gash. Conscious but dazed, she called for her husband. A paramedic, John launched down the stairs and put pressure on the wound. He said it might need a couple of staples and suggested going to the hospital.

A Hidden Threat
But Martha insisted that she was fine. “To appease me, John didn’t take me to the hospital,” she said. After checking Martha over carefully, John didn’t see any symptoms that might flag a more serious issue and they went to bed.

The next morning, Martha was heading out for work when she felt woozy and collapsed in the doorway of the kitchen. John saw that her speech and right side were affected and immediately called 911. Martha was rushed to St. Vincent’s Hospital, where tests revealed a large subdural hematoma exerting pressure on the left side of her brain.

“Even if we’d gone to the hospital [right after the accident] and had a scan, the bleed wouldn’t have shown up,” John explained. “Unless it’s a large vessel, it takes time for this type of injury to appear.” As Martha slept, the slowly accumulating blood bubbled up from deep in her brain and began exerting pressure. She now needed a craniotomy, the removal of a bone flap from the skull to ease the pressure and prevent further damage.

Sudden Changes
After the surgery, Martha did well. When she first saw John, she said, “I want to go to Gaylord!” But a few days later, she began having seizures and her condition deteriorated. “I was told to prepare for the worst,” John said. She was transferred to Yale New Haven Hospital, where she could be monitored with the appropriate equipment.

Martha stabilized and when she finally understood what had happened and why her right arm and leg didn’t work, she took it in stride. “I’m the kind of person who just rolls with things,” she said. “It was a shock. But I decided that I was going to kick this!”

Gaylord Times Two
Her next step was rehabilitation. “We didn’t ask what my options were,” she said. “I knew all about Gaylord and that was where I wanted to go. John and I were confident that it was the best place for me.”

Shortly after arriving at Gaylord, blood work indicated an infection and Martha was forced to return to Yale for another week of recovery. By the time she returned to Gaylord, she was raring to go.

The daily rounds of physical, occupational, and speech therapy were exhausting but rewarding, and soon Martha was able to raise her arm over her head and kick her leg. The future looked bright and participating in seated yoga and tai chi chair yoga offered a change of pace. “These activities made me more aware of ways to circumvent a disability,” Martha explained.
BEYOND UNCERTAINTY:

Jillian Crushes Her Goals


In April of 2016, Jillian was on vacation in Mexico when she lost her balance and fell off the railing, while sitting on the third floor balcony railing talking on the phone. She was told that she would never stand or walk again. Paralyzed from the waist down, she came to Gaylord Hospital for rehabilitation. “There was a lot of uncertainty,” Jillian recalled. “I was scared that I’d never drive a car, have a relationship, or feel the crunch of leaves under my feet.”

Part of Jillian’s inpatient therapy included walking in the Ekso bionic exoskeleton, an activity she continues in her outpatient care at Gaylord. Every week, Jillian logs thousands of steps through Gaylord’s corridors. The physical benefits to its users include improved circulation and bladder function and increased bone density. But for Jillian, the most significant benefit of all is the feeling of freedom. “Having face-to-face conversations with my friends is liberating,” she said. “When I am in Ekso, I can’t stop smiling!”

Since her injury, Jillian has been on a mission to “try out as many different ‘impossible’ tasks that people wouldn’t expect to see from someone in a wheelchair” and credits Gaylord for helping her regain the physical strength and confidence needed to crush her goals. “I’m driving, working, dating, and I’ve been to concerts. I’ve gone skiing, waterskiing, tried wheelchair archery and basketball, and even finished a half-marathon!” she said.

Jillian’s Gaylord physical therapist encouraged her to consider participating in the Gaylord Gauntlet 5K this past June. At first, she was skeptical. But always ready for a challenge, Jillian conquered the 2018 Gaylord Gauntlet with the support of a team from the Gaylord Sports Association. She said, “It’s crazy to think that in such a short time, I’ve gone from my normal life … to the lowest point … to back to where I was before, if not better!”


A Video Star

While Martha was at Gaylord, the ZeroG® Gait and Balance System was installed in the inpatient gym, and a call went out for patients willing to be videoed using it. Katie, Martha’s physical therapist, immediately thought of Martha who, when asked, said yes. The ZeroG uses a harness system tethered to a ceiling track to help patients walk and balance and requires the help of only one therapist.

Arriving at the gym wearing a jaunty hat and a ready smile, Martha stepped into the harness as the therapists showed her how the system worked. After nine weeks at Gaylord, Martha went home with the goal of eventually returning to her job.

“I think someone was looking out for us,” John said. “The aftermath of the fall could’ve been deadly if I hadn’t been home that morning or if Martha had collapsed while driving to work.” As Martha continues to improve, they both marvel at the miracles that occurred, including being able to receive care at Gaylord. “It was the only place I wanted to go for rehab,” Martha said.

Martha Zenner was the first Gaylord patient to test the new ZeroG Gait and Balance System. The harness is tethered to a computerized ceiling system and allows patients to begin rehabilitation sooner.

Jillian Harpin at the 2018 Gaylord Gauntlet.

Jillian Harpin at the 2018 Gaylord Gauntlet.
We recently purchased two new technologies to enhance rehabilitation at Gaylord.

**AlterG® Anti-Gravity Treadmill**

The AlterG uses a pressurized “anti-gravity” chamber that counteracts gravitational forces by gently and precisely adjusting body weight from 100 percent down to as low as 20 percent. This uniform lifting force reduces impact, pain, and effort while supporting normal gait and balance and encourages full, free range of motion and natural movement. We have three AlterGs, one at each of our Physical Therapy Orthopedics and Sports Medicine locations in Cheshire and North Haven, and the third is used in our inpatient and outpatient Neuro Rehab Program at the hospital. This exciting technology can be used with high-level athletes, orthopedic and neurological patients, children, and seniors.

**ZeroG® Gait and Balance System**

The ZeroG Gait and Balance System protects patients from falls while providing dynamic body-weight support to practice walking, balance tasks, sit-to-stand maneuvers, and even stairs. Because the ZeroG is mounted to an overhead track, there are no barriers between the patient and therapist. The system allows patients to begin rehabilitation sooner in a safe, controlled environment where they aren't inhibited by fear of falling. Many of our inpatients will benefit from this new technology, including those with stroke, traumatic brain injury, spinal cord injury, multiple sclerosis, amputation, and orthopedic injuries.