

MEGAN GALE: My name's Megan Gale. I'm a physical therapist at Mayo Clinic. Chris was injured October of 2010, almost-- well, a year and a half ago. He sustained a cervical spinal cord injury during a football game.

He spent a week up in the intensive care unit and then came down to our rehab unit. His first sign of movement that he had was approximately six weeks after his injury which he started with both toes wiggling, which happened to be on Thanksgiving Day. When a patient suffers a spinal cord injury, they're classified within ASIA impairment scale. ASIA stands for American Spinal Cord Injury Association, and it's a way for us just to classify the degree of injury.

Chris regained some sensory function back after his injury which categorized him as an ASIA B. He quickly transitioned to an ASIA C diagnosis. We initiated a pretty intense activity based therapy module at that time and working a lot on standing activities and pre-gait as well as locomotor training activities to gain as much motor function back in his arms, his legs, and his trunk as possible.

And now he receives therapy down in Decorah, Iowa, where he goes to school and continues with that locomotor training principles as well as doing a lot of aquatic therapy activities. To see him again and just to realize how far he's come has been very rewarding. He's really done more than anybody could ever have imagined, anybody would have expected

The main goal of this motion analysis lab is to really see how Chris' body functions and how he can initiate and coordinate his movement. And once we have a better idea of how that's occurring and how he's maximizing what he can control, we can really implement an aggressive program that would really focus on those areas that he can control. He does have spasticity throughout his body that we realize that he does utilize to function. Even when we're talking about the involuntary spasms, he still has some sort of control over how to initiate them and how to control them.

We're measuring motor activity of his entire body and assessing how that motor activity affects his ability to walk and trying to determine where the spasticity is occurring during the gait process. So we want to try to figure out how to use his body to maximize in that recovery. And so it's not just the normal way of doing it, but it's the Chris way of doing that.

So we want to make sure that we have as many people thinking about how to achieve that goal as much as possible. On a personal scale, to see him gain some function and some control of his own body because he's worked so hard over the last year and a half to gain anything he possibly can would be wonderful. He has worked harder than anybody I've ever seen. He's done everything he possibly can to maximize his recovery. And if there's something that we can do to help get him over that little hump to get him more function and get him more independence, I think that would just be a huge success for the medical field.