

# Pool Access For Disabled Sparks Controversy

BY ANDREW TAYLOR  
Associated Press

WASHINGTON — The Obama administration is sidestepping an election-year confrontation with the hotel industry and other pool owners to give them more time to comply with access rules for the disabled.

The rules have been in the works since the early 1990s, but the Justice Department created an uproar among hotels, waterparks, health clubs and the like earlier this year when it said it will require many such facilities to install fixed lifts to comply with the Americans With Disabilities Act.

After initially setting a March 15 deadline — and telling the industry it wouldn't budge — the department has granted two extensions. After first saying it might grant a reprieve until September, Justice announced last week that pool owners won't have to comply with the new requirements until early next year, a move that gets the controversy safely past the election.

At issue is whether hotels and other facilities will have to install fixed lifts to assist disabled people getting in and out of their pools, a move that can require hiring a contractor and tearing up the pool deck at a cost of as much as \$6,000. Many pool owners were hoping to comply with the rules by purchasing less costly portable lifts that could be wheeled out to poolside as needed. Hotel owners who already have lifts say few of their customers ever ask for them.

Advocates for the disabled are

frustrated by the delay, saying it means another summer swim season without lifts at most pools. They accused the hotel industry of creating an 11th hour tempest to undo rules that have been in the making since the Clinton administration.

"It's a little disingenuous to say that came out of nowhere," said Heather Ansley, a lawyer with United Spinal Association.

But they're pleased that Justice isn't caving to demands that every body be allowed to get by with portable lifts.

"They've been trying to duck it for 10 years, and the agency keeps putting it off, putting it off," said Rep. Jerold Nadler, D-N.Y. "Enough already."

Disabled people complain that in cities where lifts are already required, portable lifts are often stowed away and that not all employees know how to operate them. And they say that the hotel and motel industry has a long record of trying to evade access rules for the disabled, sometimes waiting to be sued before complying.

The issue gets even trickier. There's a longstanding exemption in the law that says existing facilities can avoid an ADA requirement if they determine compliance is not "readily achievable." That's pretty ambiguous, but as defined in the law it basically means you're eligible for the exemption if you determine that it's too difficult or expensive. Figuring out whether one qualifies for the exemption can be difficult.

good weather we've been having. And with no threat of flooding, it should be a great summer."

Bertsch said all the necessary campground repairs have been completed, and the weather this winter also allowed the department to get a running start on its grounds work.

"If people haven't been out to the park yet, they should come out and take a look," he said. "It's in really good shape right now."

Bertsch said individuals who like visiting the parks should also enjoy a new promotion this year called the Fitness Passport Challenge. The program gives visitors to state parks, recreation areas, fish hatcheries and The Outdoor Campuses passport books that can be stamped at each location throughout the summer. Prizes can then be redeemed based on the number of visits made.

"We instituted it this offseason as a way to get people out to the parks, and our main goal is to get children outside," Bertsch said.

To participate in the challenge, passport books can be found at any state park or GF&P office. Copies can also be requested by emailing parkinfo@state.sd.us.

With reservations filling up fast, Bertsch warned prospective campers not to wait too long to make their plans.

"We recommend if somebody still wants to camp, to make reservations as early as they can," he said.

Reservations can be made by calling 1-800-710-2267 or by visiting www.campsd.com.

You can follow Derek Bartos on Twitter at twitter.com/d\_bartos

# Ballot

From Page 1

nating petition.

Mitchell's lawyer, Sam Khorooosi of Sioux Falls, said 42 of the 211 legislative candidates submitted nominating petitions with various kinds of flaws.

Rep. Brian Gosch, R-Rapid City, who is speaker pro tem in the House, was the only candidate among the 42 who notarized his own nominating petition, Khorooosi said.

Gosch, a lawyer, said he doesn't believe he violated any law because he only notarized the signature of another person who was the official circulator of the nominating petition.

"I'm not notarizing my own signature," Gosch said.

Barnett noted that if he had ruled Mitchell violated South Dakota law by notarizing his own petition, it could raise questions about the legality of petitions submitted by other candidates.

"I can easily envision candidates who think they are behind in an election viewing a legal challenge as an easy way out the door," the judge said.

Khorooosi said he was not challenging the petitions of other candidates and only submitted the 42 other petitions as a defense against Gant's notarization argument.

After the judge ruled that

# ASK THE EXPERTS

## Comfort Care

Q Our loved one with a terminal illness has been considering hospice. What would you advise?



Lars Aanning, MD  
Medical Director

A Cancer, heart or lung disease, or dementia can sometimes be so advanced that further treatment appears futile. Families and their loved ones then focus on comfort and dignity as their prime goals of further care at home or in a hospice facility.

The dedicated hospice staff and medical director work with your family physician to assure freedom from pain and to manage any symptoms. Spiritual support by chaplains and priests is also emphasized.

Eligibility is determined by your loved one's physician and hospice medical director. Hospice care is especially designed for end of life care expected to last 6 months or less.

Private insurance, Medicare, Medicaid, and Department of Veterans Affairs are major financing sources. Contact the hospice staff who will gladly provide you and your loved one with further information and assistance.



605-689-0382

Yankton, SD

## Family Medicine

Q Should I be concerned about West Nile?



Jeffrey Johnson, M.D.

A West Nile virus is a mosquito borne infection that can cause only mild flu like symptoms or can cause a severe illness such as encephalitis. Encephalitis is an infection of the brain. Symptoms may include headache, high fever, stiff neck, disorientation, tremors, convulsions, weakness and paralysis. Symptoms may last for several weeks, although the neurological effect may be permanent.

There is no human vaccine for West Nile. This time of year, you should try to reduce your risk of being bitten by mosquitoes in order to reduce your risk of getting West Nile.

In addition to reducing stagnant water in your yard, make sure all windows and doors have screens, and that all screens are in good repair. Minimize time spent outdoors between dusk and dawn. Wear shoes, socks, long pants and a long sleeved shirt when outdoors for long periods of time or when mosquitoes are most active. Use mosquito repellent containing DEET, Picaridin, oil of lemon eucalyptus, or IR3535, according to directions, when you are outdoors.

If you are experiencing concerning symptoms or have concerns related to West Nile, please schedule today at Lewis & Clark Family Medicine, Morgan Square.



Above information obtained from the SDDOH.

1101 Broadway, Suite 103A, Morgen Square, Yankton, 260-2100

## Ear, Nose & Throat

Q Dr. Rumsey, I have been told I have Meniere's disease. What is Meniere's disease and what can I do about it?



Matthew Rumsey, Au.D. CCC-A

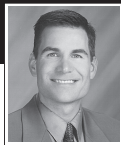
A Meniere's disease is characterized by four specific symptoms, which include intense episodes of prolonged dizziness, fluctuating hearing loss, sense of fullness in the ear and tinnitus. These symptoms occur when a fluid filled membrane within the inner ear bursts due to excessive pressure. Reduced salt intake and use of diuretic medications help, but little can be done to treat and resolve the disease. Fortunately, people generally are symptom free between episodes and Meniere's disease is not life threatening. The best advice I can offer is to keep your ear nose and throat physician's phone number close and limit your salt intake.

Jeffrey J. Liudahl, M.D.  
Matthew Rumsey, Au.D., CCC-A  
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## Podiatry

Q I am diabetic.



Terence Pedersen, D.P.M.



Scott Torness, D.P.M.

A Charcot is a sudden softening of the bones in the foot that can occur in people who have significant nerve damage, or neuropathy. The bones are weak enough to fracture, and with continued walking the foot eventually changes shape. As the disorder progresses, the arch collapses and the foot takes on a convex shape, giving it a rocker-bottom appearance, making it very difficult to walk.

Charcot foot is a very serious condition that can lead to severe deformity, disability, ulceration's, and even amputation of the leg. Because of the seriousness of Charcot, it is important that patient's with diabetes or neuropathy take preventative measures and seek immediate care if signs of foot swelling and redness appear.

The symptoms of Charcot foot may appear after a sudden trauma or even after "normal activity." Many people do not remember hurting their foot in any way. The first thing they notice is a red and swollen foot. Immediately they think they have infection. Most people who get Charcot, do not have any feeling in their feet. Therefore, the Charcot process is usually painless. Infection and Charcot usually present in the same way, so one must determine if it is infection, or is it Charcot?

Early diagnosis of Charcot foot is extremely important for successful treatment. To arrive at a diagnosis, the doctor will examine the foot and ankle. The doctor will first assess the circulation. Pulses are usually very strong in the Charcot process. The doctor will then perform an X-ray. The x-ray should be weightbearing. X-ray will usually show at least one or more fractures, or dislocation of the joints. It is also possible that during the early Charcot process, the fractures and dislocations are not yet observed.



Avera Sacred Heart Hospital Professional Office Pavilion  
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## Orthopedics

Q What is a trigger finger?



Dr. Dan Johnson, M.D.  
Board Certified  
Orthopedic Surgeon

A Firing a gun has nothing to do with the painful popping or catching sensation in a finger or thumb, known as "triggering". It is caused by the entrapment of a flexor tendon when the hand is opened or closed. Normally the flexor tendons smoothly glide through a series of fibrous tunnels on the palm side of the metacarpal and finger bones. If this tunnel becomes constricted, the flexor tendon catches at the narrowed opening of the tunnel and becomes stuck. Trigger finger is most common in middle-aged, otherwise healthy women. It may develop after strenuous use of the hand.

Initial treatment is rest and anti-inflammatory drugs. Triggering that persists beyond several weeks should be evaluated by an orthopedic surgeon. Treatment may require splinting and/or tendon sheath injection. More tenacious cases of triggering may be resolved with a surgical release of the tight tunnel, a simple outpatient procedure.



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## Urological

Q Want to "Spice" up your life?



Dr. Joseph Boudreau MD, F.R.C.S.

A 1) Turmeric – has strong anti-infective and anti-inflammation properties from arthritis wounds, digestive disorders, diabetes and cancer. Be careful if you have stomach ulcers or history of gallstones. Can stimulate interactions so avoid if you are pregnant. Be careful if you have a history of heart disease or liver disease.

2) Ginger – has anti-inflammatory, anti-nausea and anti-infective abilities good for coughs and motion sickness.

3) Cinnamon – lowers blood sugars and lowers cholesterol and also lowers your triglyceride levels. It is also an antioxidant and fights cancer and can help keep our arteries clear. Aim for half to one and a half teaspoons a day.

**Yankton Urological Surgery, Prof., L.L.C.** 2009 Locust, Yankton • 689-1100

## Chiropractic

Q Why does chiropractic use nutrition?



Sheila Fitzgerald, DC

A Traditionally, chiropractic has included nutrition and patient education to work through individual problems. More research shows the connection between diet and disease in the way that food can create different reactions in the body. By understanding how certain foods react in our body, we can 'reset' our body's reaction with alternate choices. Now more than ever, pieces to the health 'puzzle' are easier to apply. It is exciting to know that by applying new practices, we can change how our muscles and joints respond to our own activity. We can set and meet goals of wellness of the body with better health practices.



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## Fitness/Health

Q What is the cause of muscle soreness and how is it best relieved?



Angie O'Connor  
Clinical Exercise Specialist

A The muscle soreness noticed by most after a good workout is called delayed onset muscle soreness (DOMS). It is generally an aching type of pain and tenderness that is felt in the muscles hardest hit by activity completed about 24-48 hours prior. Research suggests it is caused by micro-tears that occur naturally during a hard workout. These are not a dangerous occurrence but a part of making the muscles stronger and the reason you should never lift weights with the same muscle group two days in a row. They need this time to repair themselves. As your body becomes used to an activity, this type of pain will not occur until your intensity builds and your muscles have to re-adapt yet again. Generally stretching, ice, massage and NSAID's will relieve the pain. Unfortunately this is the soreness that tends to drive away many new exercisers after they begin a program at a level that was perhaps a little to high. Just another reason to START SLOW when you begin an exercise program.



501 Summit • 665-9006

## Pharmacy/Nutrition

Q Is there harm in taking excessive amounts of over the counter (OTC) medicines?



Leah Dempfer Pharm. D.

A The flashy marketing colors and easy accessibility to OTC products do not mean they are always safe. If taken outside the recommended guidelines, all drugs including OTC products have the potential to cause serious adverse effects.

For example, throughout the country in many local newspapers, there most likely are articles related to teenage deaths associated with overdosing on OTC products containing the particular cough and cold ingredient dextromethorphan. At normal dosages, dextromethorphan acts to relieve coughing from the common cold or flu. However, when used recreationally at high doses, it may cause insteadness, seeing things or hearing voices that do not exist, difficulty in breathing, or even a coma. Although some in the present culture believe high doses of dextromethorphan are safer than other known abused drugs, dextromethorphan is also dangerous and can cause detrimental effects. The high risk of abuse potential due to low cost and purchasing capabilities has lead many pharmacies to place dextromethorphan and other similar products behind the counter to help monitor purchasing patterns.

Within family and friend circles, people should observe the behavior of loved ones to understand if medication abuse is happening and talk to them if there are suspicions. Following the indicated dosages on OTC medicines, reading the labels of all current OTC products, and consulting a pharmacist with questions can also decrease the potential of adverse effects.



Pharmacy • 665-8261