Start Conditioning Now for An Injury Free Ski and Boarding Season

Dr. Kevin Plancher with Plancher Orthopaedics & Sports Medicine on common ski and boarding injuries and tips to help prevent them.

NEW YORK, and GREENWICH, Conn. (PRWEB) November 20, 2018 -- The 2018-19 ski and snowboarding season is just around the corner. According to orthopaedic surgeon, sports medicine specialist and USSA Ski Team Doctor Dr. Kevin Plancher, “you can’t start your pre-season conditioning soon enough for strength building and injury prevention.”

It’s a known fact that skiing and snowboarding are high-risk injury sports. According to the U.S. Consumer Product Safety Commission, more than 114,000 skiing-related injuries were treated nationwide in 2014, along with another 79,000 injuries involved with snowboarding. Fortunately, Dr. Plancher, a US Ski and Snowboard Team Physician, is here in Manhattan and Greenwich, Connecticut.

“Snow sports involve use of several key muscle groups including the quadriceps; hamstrings and glutes; inner and outer thighs; the calves and the arms,” notes Dr. Plancher, a US Ski and Snowboard Team Physician and founder of Plancher Orthopedics & Sports Medicine with offices in NYC and Greenwich, CT.

“There are just too many muscle groups essential for skiing to get out on the slopes without a thought to pre-conditioning,” Dr. Plancher says. “Skiing and snowboarding are high-intensity sports that require at least some preparation to perform successfully and injury free.”

Typical and common ski and snowboarding injuries
Dr. Plancher provides an overview of the most prevalent injuries related to skiing and snowboarding.

- Fractures: Hard falls or collisions with another person or tree or other structure can lead to fractures of the wrists, arms or legs. Try to learn how to be aware of your surroundings.
- Injury to the Shoulder: It is typical for skiers to break their fall by extending their arms. As a result, shoulder injuries such as sprains and dislocations can occur. Dr. Plancher advises to tuck your hands and arms inward to avoid the shoulder dislocation.
- Injury to the Knee: Twists, turns and bends on the on the slopes are hard on the knees, particularly ACL (anterior cruciate ligament) and MCL (medial collateral ligament). Dr. Plancher advises to slow your speed and keep your weight forward.
- Skier’s thumb: This condition occurs when a skier falls on an outstretched hand while grasping a ski pole. The pole grabs into the snow and jams into the inside of the thumb, causing the thumb to overextend. Fall, if you can, with a closed fist.
- Snowboarder’s ankle: A high-energy ankle sprain or fracture, this condition triggers high, constant ankle pain. Dr. Plancher advises to keep weight forward and check that your boots are well fitted. Buy new boots every few years.
- Head or spine injuries: Injury to the head or spine can be particularly serious and life threatening. Concussions and other head trauma can occur from falls or collisions, as can vertebral fractures in the spine. Luckily, head and spinal injuries from skiing or snowboarding are far less common compared to other injuries, but they can be more devastating, so safety is critical. Dr. Plancher advises to slow your speed, watch your surroundings and ski within your limits. Quit early in the day!
Tips for smart conditioning now for an injury free season
Conditioning should ideally should be performed several times per week all year. However, it’s never too late to start, adds Dr. Plancher. Training should be aimed at overall body conditioning and also focus on important muscles groups involved in skiing and snowboarding. Dr. Plancher offers the following regimen for ski and boarding conditioning.
- Cardio for General Fitness: Cardio is important in mountain sports, so jogging, climbing stairs or cycling regularly to maximize fitness and keep muscles limber.
- Lunges: 3 sets of 12 to 15 reps while holding light dumbbells per workout, never doing a deep lunge.
- Squats: 3 sets of 12 to 15 reps 3 times per workout done safely, never doing a deep squat.
- Kettle Bell Sumo squats: 4 sets of 10 to 16 reps per workout done appropriately, never doing a deep squat.
- Leg press: 3 sets of 12 to 15 reps per workout, alternating between seated and standing leg presses on different days, never locking in or out.
- Box jumps: 3 sets of 12 to 15 reps per workout, with the box slightly taller than the top of your kneecaps. Jump up using both feet and land on two feet. Be cautious to avoid meniscal injuries. Dr. Plancher advises to avoid this exercise if over 30 years old unless in a day of competition.


Dr. Plancher advises that another key to ski and snowboarding injury-prevention is making sure that your equipment fits you correctly and is in line with your abilities. For example, he points to the importance of properly fitted helmets and wrist guards. Additionally, he advises to stay on the ski runs that best fit your abilities. Don’t go off piste without a guide or instructor. Lastly, Dr. Plancher advises taking ski or snowboarding lessons for beginners and even for more advanced skiers or snowboarders, Ski instructors regularly teach students how to fall correctly and safely, reducing injury risks and only improving your skills.

Kevin D. Plancher, MD, MPH, is a board-certified orthopaedic surgeon and founder of Plancher Orthopaedics & Sports Medicine. He is a clinical professor of orthopaedics at the Albert Einstein College of Medicine in New York. Since 2001, he has been listed annually in the Castle Connolly directory as a “top doctor” in his field.

Plancher Orthopaedics & Sports Medicine is a comprehensive orthopaedics and sports medicine practice with offices in New York City and Greenwich, CT. [www.plancherortho.com](http://www.plancherortho.com)
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