



## The NLSC Daily

Working to keep  
our members  
active and fit!

Starting later this week, or early next week, NLSC will begin exploring other ways to interact with our members. We have several ideas for online conferencing, including group dryland, goal setting, fitness tracking, etc. Stay tuned for more information as it develops.

### Fritz Needs a Walk

Coach Cliff will be walking his dog Fritz regularly and will be posting the trailhead and departure time each day. Wanna walk? Parents are welcome and will help to keep our groups under 10 people. See you there!

3/18/20 – Service Pool Parking Lot @ 2:30p. About a 1 hour walk. Dress warm and wear appropriate footwear for snow. BLM Trails.

We will practice social distancing

### Dryland from Coach Grant

- Planks x3
- Front, Left, Right, :15,:30,:45,1:00,r:15
- Bridge :15,:30,:45,1:00,r:15
- Push Up :15,:30,:45,1:00,r:15  
or 8x,12x,16x,20x,r:15
- Squats :15,:30,:45,1:00,r:15  
or 8x,12x,16x,20x,r:15
- Streamline Reverse Lunges :15,:30,:45,1:00,r:15  
or 8x,12x,16x,20x,r:15
- Pull up Hold, Negative Pull up, or Pull up  
15,:30,:45,1:00,r:15  
or 8x,12x,16x,20x,r:15
- Burpee to Streamline
- 3,2,1x(Bicycles 1:00,:30 r:10
- Russian Twists 1:00,:30 r:10
- Crunches with toes extened, keep lower back on  
ground 1:00,:30 r:10
- 3:00, 2:00 Max Burpee r:2:00)
- 5 min Stretch and slow breathing work.

### Video of the Day

Need some inspiration to work on your underwater kicking?

This is a good video featuring the amazing underwater kick of Caeleb Dressel

<https://youtu.be/mHyp5qVBRng>

From Coach Grant - 3/18/20 - percentages are a percentage of your maximum effort. Rest intervals are in parenthesis with suggested amounts of rest.

100 Kick/50 Swim.....6-10(:40sprint wall kick, :20 Pressout)

20x25 Choice Swim, Focus: check that core is engaged and body is straight. @:30,:30,:45 r:10

6x25 From the middle of the Pool, No Breather focus:keep chin on chest through the turn @:100 r:35

4x125 No fins Choice Swim, focus balanced breathing, with consistent times. @ 1:40, 1:50, 2:00, 2:10, 2:20, 2:30, r:07-:15

2x25 fins opt. Sprint no breather under water no breather streamline dolphin. Focus: use entire body @1:00

4x50 fins opt. Choice down, Sprint returning, focus: attack the turn @1:30 r:30 or more

6,4x25 fins opt. Odds: sprint 1st 1/2, technique 2nd 1/2. Evens: Sprint Focus: Race @ :45,1:00

3,2,1x(1x50 fins opt. Fast kick

6,4x75 fins opt Best Possible Average, focus: consistent turns and breakouts. @:50,1:00,1:10,1:20,1:30,1:40,r:04-07

1x50 no fins Sprint kick @2:00)

2x25 no breather choice @1:00

1x100 best Technique

Thank you



### Swimming Specific Yoga Free Online Classes

<http://www.swimmingspecificyoga.com/online-yoga-classes-for-swimmers.html?fbclid=IwAR20kqnZpbUAZQDrDCxKV9WU-Npd9xpk9XrzQjYaXCzZtMVNtONTAztGg>

### Great Wall of China Virtual Walk-Run Race

Join Coach Cliff and a few swimmers from Fairbanks (SST) in this cool fitness challenge. Go ahead...try to beat me!

**This race is now full!**

### Let's Race the Grand Canyon

Join Coach Cliff as he virtually walks/runs through the Grand Canyon.

<https://northernlightsswimclub.racery.com/r/ak-swimmers-do-the-grand-canyon/>

Coach Matt has been working on a serial article for our newsletter. Below follows his first installment in his “Shoulder Shenanigans” series. Enjoy.

### Shoulder Shenanigans: Part 1

1990s’ Interior and Central Alaska was my swimming ‘stomping ground.’ I blindly stumbled into the most wonderful sport at the end of 1993 and opened my life up to a world of hard work, great reward, lifelong friends, and (in my case) an occupation. It changed and saved my life in many ways. Unfortunately, within 2-3 years of desperately trying to play catch-up to many of my teammates and fellow swimmers around the state that had started swimming years before I showed up, swimming was also slowly taking away the ability to use my shoulders. The last four years of my seven-year competitive career were plagued by every stage of chronic shoulder injury comprising the full spectrum from minor annoyance, to temporary full incapacitation of the shoulders and arms.

In the spring of 2000, when I traded my goggles for the stopwatch I still carry today, I made it my mission to work for an in-water prevention and rehabilitation program for this affliction. This article is a brief overview of what many, many shoulders have told me since 1995, as both swimmer and coach, but always student. **I would like to stress the “student” moniker. I am not a medical professional, yet I have a lot of first- and second-hand experience dealing with this ailment.**

#### What It Is:

**Swimmer’s Shoulder**, a term I probably first read in a 1995 copy of the USS (United States Swimming) Newsletter, is the name often given to a group of **chronic injuries** to the rotator cuff area in the shoulder, and can include injuries to the bicep connections and elbow. These injuries develop over a period of time (days, weeks, months, years) and range from minor strain and/or inflammation to severe tendonitis and/or tear of the tendons in these areas.

#### What You Feel:

Let’s begin with the symptoms, or **what the swimmer feels**. The process and path of this monster can be long, or short; it may be localized, or encompassing. I will try to highlight a few important stages, and types, of pain in and out of the pool that a swimmer may experience in this battle ranging from the first shot fired by the tendons, to the possible full-surrender of the swimmer from this sport, if not addressed.

The opening of hostilities often seems innocuous. It might be described as a **twinge**, or **tweak**. While the first recognition of this problem happens in a single moment, the damage to that area has been building quietly over time. It is important to realize that the first instance of pain is not signifying the beginning of the problem, rather that the end might be near.

The first symptom might pop up during any phase of the training cycle, but often comes after something unusual has happened out of the pool that day, or in recent days. **Examples:** “I shoveled a lot of snow yesterday;” “I helped my Great Aunt Trudy move to a new apartment last weekend and lifted more boxes of ceramic llamas than I care to count;” “I slept on my arm funny last night.” While the second example is surprisingly common, the last is probably the most. The combination of gradual breakdown and inflammation of the connecting tissue, an uncommon stress outside the pool, and one tired, unfocused moment in a breakout, start, silly stroke, etc. is often enough to kick the injury process into high gear.

The **twinge**, or **tweak**, might come and go during that practice, usually not on a regular, or rhythmic interval. It might occur more frequently over the next few days, or week. The occurrence might be accompanied by a low, dull pain following practice, but is usually gone by bedtime. Catching the process at this stage gives the swimmer and coaches the best chance to fix the problem in the water, without the need to miss a single set.

The middle stage of injury is usually signified by a slightly more intense, but (by most accounts) moderate **flare** or **flash** with the possibility of a residual **burn**. This flare usually happens with greater frequency and regularity. The swimmer might start to recognize that it happens in one or two specific parts of the stroke cycle, or practice. A more elevated, yet still mainly moderate ache around the injury location is present. This ache generally happens after every practice, regardless of the number of flare-ups during each individual practice, and is not connected to any unusual activity out of the pool. This ache is often there for the whole evening, but might be gone after a good night’s rest.

The next stage of symptoms is almost impossible to ignore, or work through for any significant period of time. A swimmer might feel a significantly heavier **stab** of pain. This stab happens very regularly, and may be present near the beginning of the practice, before any high-stress activity begins. This stab is often accompanied by a constant underlying ache that is oppressive, even in times of rest or recovery. It is at this stage that we see the out-of-practice ache present throughout the day. The constant pain is commonly accented by burns, flares or stabs with even moderate everyday activities such as lifting anything to shoulder/head height, reaching for something at arm’s length from the body, or maintaining a single position with the arm or shoulder for a period of time and extended from the body at any distance.

The often-final stage of this affliction can comprise a complex combination of any or all of the heretofore-mentioned symptoms in all activities both in the water, and out. What makes this stage special is that it also rears its ugly head during the night, often waking the swimmer up, or preventing sleep in the first place. The swimmer might be in a constant state of discomfort in any position sitting, standing, or laying down. Even the process of

laying down and sitting up often involves a great deal of pain. At this stage, the injured swimmer might find it impossible to lift their arms higher than their chest, near the body and carrying nothing at all.

If the previous segment was increasingly frightening, please understand that this progression is real, and more common than our swimmers let us know. Furthermore, there are often series of mini-, or transitional phases between these 4 distinct stages. The time between each phase and/or stage is different for each individual swimmer. Swimmers should know that although your specific experience is unique, you are not alone in the fight. Most swimmers believe that they can continue moving at high intensity the same way day after day, and just “tough it out.” **This specific type of pain is not the mark of weakness, but an important communication from the body that something is about to break in increasingly dramatic**