Introduction

With the spiraling costs of health care, the old adage, “An ounce of prevention is worth a pound of cure” is more relevant than ever. And it’s especially true for musicians—“the elite athletes of the small muscles,” as Janet Horvath so eloquently describes them in her article Musician: Protect Thyself.

She would know. Horvath, associate principal cello of the Minnesota Orchestra and author of the book Playing Less Hurt, is an award-winning advocate and lecturer on injury prevention for musicians. Her article is a must for anyone who wants to stay in top form on his or her instrument and enjoy a long career. She also has provided a list of selected practitioners, complete with their specialties and contact information.

Eugenia Zukerman, another musician-journalist, interviews two artists who have suffered major injuries and come out a winner on the other side. Case Study No. 1 is Peter Oundjian, who launched an entirely new (and hugely successful) career as a conductor after being diagnosed with focal dystonia from years of playing the violin. Case Study No. 2 is Nora Shulman, who weathered not one but two injuries that severely impaired her ability to play the flute. Today she is principal flute of the Toronto Symphony.

For some, performing and the anticipation of it causes severe emotional distress. Dr. Noa Kageyama, a noted performance psychologist, offers advice on making that dreaded anxiety work for, rather than against, you.

Musicians in the market for individual health insurance plans should check out the chart of trade organizations that provide group health insurance. And for arts organizations looking to insure their staffers, we’ve conducted an informal survey of a few of your colleagues to find out what plans they chose and why.

Whatever side of the industry you may be in, there’s a font of information here to keep you operating in top form and robust health. We hope you find it helpful.

Susan Elliott
Editor
Special Reports
Musicians: Is your body at peace—or in pieces?

According to a recent study in the journal *Biological Psychiatry*, daily stress literally chews holes in our brains. As musicians, then, it stands to reason that our stressful and unrelenting schedules put us at high risk for some... unpleasant consequences.

Admit it—you’ll do anything to produce that perfect performance, physical pain and mental fatigue notwithstanding. Keep it up and those consequences will be severe enough to remove you from the game altogether.

Elite athletes of the small muscles

Mastering a musical instrument is an amazing achievement, requiring years of training and torturous, often tedious, amounts of practice. Our goal is to create beauty, to transport our audiences with skill and passion. We are elite athletes of the small muscles and demand the utmost precision, coordination, fluency, speed, and endurance from our bodies.

Unlike the typical athlete or dancer, whose careers can’t continue much past their mid-30s, if that, we musicians can have unusually long careers. But only if we take great care along the way.

Consider the icons of long careers:

- Bud Herseth, recognized as the world’s greatest symphonic trumpet player, principal trumpet for 53 years of the Chicago Symphony Orchestra
- Joseph Silverstein, concertmaster of the Boston Symphony for 22 years
- Richard Horowitz, who made the timpani sing all through his 66 years with the Met Orchestra
- Arnold Jacobs, tuba player with the CSO for 44 years
- Artur Rubinstein, pianist extraordinaire into his 90s

They began their careers in the old days... when orchestras had seasons, when musicians had to travel by train or ship and there was time between gigs.

Today, those same orchestras are full-time with virtually year-round seasons. Even freelancers seek to play constantly to earn a living. No wonder the incidence(s) of injury are on the rise—and those are just the players willing to admit to it. Many are reluctant to speak up for fear they will be considered damaged goods.

How can we assure long, injury-free careers?

Playing involves an awesome amount of repetition (see sidebar, Heavy Lifting: Works of Notorious Notes). When poor and awkward postures, excessive force or tension, and physical and emotional stress are added to the mix, injury can and does occur.

The most common problem is repetitive strain injury (RSI), or overuse, a loose term applied when body tissues have been stressed beyond their biological limits. After years of overuse, wear and tear and insufficient recovery time, our muscles, tendons, and tissues may reach a point where they simply are done. Chronic pain ensues.

The Vicious Cycle and How to Avoid It

Typically, we continue to play through the pain, perhaps even blaming ourselves for faulty technique. The show must go on, right? So, we work harder to compensate for the weakness, further
decreasing our range of motion, increasing soreness, and perhaps even losing feeling in the afflicted area. Brass players make their music with bruised lips; string players re-finger or grab the bow harder, cock or twist their torsos, lower the instruments to baby a painful shoulder; percussionists lean in farther, stressing their backs to save a sore arm. We end up compromising our posture and technique and stressing other areas, which then leads to further injury—and the vicious cycle is well underway.

If you end up at this point, you will need to seek immediate treatment [see page 8, Clinics and Medical Practitioners]. In the spirit of “an ounce of prevention,” here are some important tips for maintaining your chops over a long career.

### The Vicious Cycle =

\[
\text{Force} + \text{Tension} + \text{Repetition} + \text{Poor Posture} + \text{No Rest}
\]

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### ATTENTION ORCHESTRA MANAGEMENT: You Can Help

*Here are a few inexpensive ideas to keep your musicians playing well and without pain.*

#### Get Good Chairs

Many companies make chairs specifically for musicians. Concert Design, for instance, offers fully adjustable ones with back support for harp, keyboard, and bass.

#### Give them a break

Provide recovery time for your players. The artistic staff should take into account how taxing the programs are. Alternate huge, virtuosic repertoire with less challenging works.

#### Save their hearing

Explore hearing-protection options. Experiment with risers and Plexiglas shields. Avoid placing the timpani directly behind the horns. Offer earplugs and adopt rotation so the same musicians are not always in the line of fire. Provide warm-up rooms and silent rooms backstage. Make ice packs and massage tools such as foam rollers, Thera Canes, and exercise balls available.

#### Team up

To help prevent injuries, establish a safety committee of musicians and staff to keep a watchful eye on your musicians.

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### A Few Onstage Tricks

You can do any of these unobtrusively, some even while you are playing.

#### 1. Don’t Sit Still!

We have been taught to sit like statues! Static postures and holding our instruments cause tension to build. Here are a few ways to keep moving while seated:

- Pull in your chin and slowly roll your head forward, stretching the back of your neck.
- Turn your head from side to side and tilt your head ear to shoulder.
- Lower and uncurl your arms and let them hang whenever possible.
HEAVY LIFTING: Works of Notorious Notes
(from the experience of Janet Horvath, associate principal cello of the Minnesota Orchestra and author of Playing (Less) Hurt—An Injury Prevention Guide For Musicians.)

Ravel’s Bolero requires 5,144 strokes from the snare drum. This does not take into account the tremendous control necessary to be unwaveringly steady in rhythm and to build from the very soft opening to the huge climax at the end of the piece—all within just 14 minutes.

Mahler’s Symphony No. 5 has 940 measures of eighth notes in the cello part, and even more for the violins. That totals 6,400 left-hand movements in the fourth movement alone.

John Adams’s Harmonielehre requires 976 repeated eighth notes for flute, piccolo, clarinet, piano, and harp in the first 94 bars of Part 3.

Danse de la Terre in Stravinsky’s Rite of Spring starting at rehearsal No. 75 has 360 notes. Our orchestra has performed this in 36 seconds!

Sibelius Oceanides in 22 measures has 589 bow strokes. I approached our Maestro about this in rehearsal and said, “Osmo [Vänskä], from here to here we have to perform 589 bow strokes!” He appeared taken aback for a moment and then he bopped me on the head with his baton and replied, “Thank you for counting.”

Don’t forget your lower extremities:

- Move your feet. Periodically turn your knees and thighs inward.
- Roll your pelvis. Adjust your seating. Squeeze your buttocks.

2. Make a Face
Did you know that clenching your teeth can cause severe ear pain and damage to your jaw joints (a.k.a. temporomandibular joints or TMJ)? To avoid face and jaw tension, release your jaws by making a fish face, doing an “air mouthwash” or by opening your mouth.

3. Breathe
Think “lips together, teeth apart.” Take deep slow breaths through your nose and exhale quickly through your mouth. At the same time pull in your abs to give yourself a lumbar stretch.

4. Sit Up
Studies indicate that sitting all day is bad for your health. The best position for your back is actually the horse-riding position. When you sit, your knees should descend from your hips so that the lumbar curve in your back can be maintained and your weight is forward and on your feet. So look for a chair that is knee height or higher when you stand next to it.
5. Stand Up
For those of you who stand to play, bend your knees slightly and avoid leaning forward or backward. Sitting or standing immobile is a risk factor for injury. Keep moving.

6. Speak Up
Effective rehearsals and exciting performances require the best possible environment. Seek solutions before pain sets in. Ask for ergonomic chairs. Request better lighting, proper temperatures, hearing protection, and favorable space.

A Few (More) Solutions
Sometimes, our instruments require awkward postures and unnatural holding positions. Unfortunately some of these come with the territory. If you must stretch to reach a chord, release it as quickly as possible and use the least force necessary. Lower your instrument when you can.

Some manufacturers are ergonomically adapting instruments: woodwind and brass makers are moving or extending keys and making the instruments lighter; string instruments’ shoulders are being shaved for easier access to high positions; percussion sticks are being made longer so that percussionists don’t have to lean or reach.

Exercise can slow and even reverse both the brain’s physical decay and stress and muscle wear and tear. Include a stress-reducing and strengthening regimen to your daily routine. Above all, listen to your body.

COMPETITION DEADLINE:
December 1, 2012

COMPETITION REQUIREMENTS:
women, any age, any nationality, non-published works, SATB chorus with organ accompaniment, small ensemble or a cappella

3 winners will receive:
1. New York City Premiere with the critically acclaimed professional chorus, Voices of Ascension, conducted by Dennis Keene
2. Hotel and Travel to New York
3. Cash Prizes from $1000–$5000

For more details, www.sorelmusic.org

The Sorel Medallion in Composition 2012-2013
Reinventing Choral Music

The Pellegrina viola is an example of an ergonomically adapted instrument

Longer percussion sticks can help prevent leaning or reaching.

Musician, PROTECT Thyself
A Few Ounces of PREVENTION
Test yourself to see if you’re risking injury and you need to make changes.

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<thead>
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<th>INJURY SUSCEPTIBILITY QUIZ</th>
<th>YES</th>
<th>NO</th>
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<tbody>
<tr>
<td>Does your teacher have an intense teaching style?</td>
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<tr>
<td>Is your playing style intense, emotional, macho?</td>
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<td>Is your position awkward or uncomfortable?</td>
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<td>Do you have a predilection for difficult, pyrotechnical, challenging, loud repertoire?</td>
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<tr>
<td>Do you love to slam your bow or slap your fingers into the strings or slam or squeeze down keys?</td>
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<td>Do you practice mostly at the forte dynamic range?</td>
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<td>Do you squeeze your instrument while holding it?</td>
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<td>Do you jam the keys down, even when playing softly?</td>
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<td>Do you lose track of time when practicing?</td>
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<td>Do you have difficulty saying “no”?</td>
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<td>Do you clench your jaw or grit your teeth?</td>
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<td>Do you schedule back-to-back rehearsals, gigs, and performances?</td>
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<td>Do you play in spite of fatigue and pain?</td>
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<td>Do you fling your fingers off strings or keys?</td>
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<td>Do you grip your bow tightly or grab your fingerboard or squeeze it?</td>
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<td>Do you play without warming up?</td>
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<td>Do you play a very large, heavy, or very resistant instrument?</td>
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<td>Do you play with a heavy bow, keep your strings high or use a worn-out, ill-fitting chin rest?</td>
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<td>Do you stretch to reach notes or keys?</td>
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<td>Do you hold fingers uplifted and/or curled?</td>
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<td>Do you hold stretches, double stops or chords down?</td>
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<td>Do you snap your elbow when changing from downbow to upbow?</td>
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<td>Are you a tense, stressed person?</td>
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<td>Are you depressed?</td>
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<td>Do you neglect to warm-up?</td>
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<td>Do you sleep poorly?</td>
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<td>Are you physically inactive?</td>
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<td>Are you overweight?</td>
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<td>Do you consume more than two cups of caffeinated beverages a day?</td>
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<td>Do you take drugs or drink more than a moderate amount of alcohol?</td>
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**If You Answered “Yes”**

If you answered “yes” to 10 or more of these questions, you need to rethink your approach to your instrument. Watch yourself in the mirror: Are you tensing up? How’s your posture? Are you holding your instrument awkwardly? Take more breaks per hour; pay close attention to aches and pains. Use a daily diary to keep track of fatigue or any soreness.

Note: If you have trouble “nailing” a passage, if your technique feels sluggish, if your fingers or lips don’t want to do what you need them to do, these are all indicators that something is amiss. Ignore them at your peril.—JH
## Clinics & Medical Practitioners

### CLINICS—In United States, sorted by Specialty

<table>
<thead>
<tr>
<th>SPECIALTY</th>
<th>NAME</th>
<th>TITLE</th>
<th>MEDICAL INSTITUTION</th>
<th>DEPARTMENT</th>
<th>TELEPHONE</th>
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<tbody>
<tr>
<td>Hand Surgery</td>
<td>Peter C. Amadio, MD</td>
<td>Professor of Clinical Surgery/Director of Hand Surgery</td>
<td>Mayo Clinic 200 First Street SW, Rochester, MN 55905</td>
<td>Department of Orthopedic Surgery</td>
<td>(507) 284-2806</td>
</tr>
<tr>
<td>Hand Surgery</td>
<td>Richard G. Eaton, MD</td>
<td></td>
<td>St. Luke's Roosevelt Hospital Center / Columbia University College of Physicians and Surgeons New York, NY 10019</td>
<td></td>
<td>(212) 582-3258</td>
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<tr>
<td>Integrative Medicine And Pain Management</td>
<td>Marc Brodsky, MD</td>
<td></td>
<td>Stamford Hospital 32 Strawberry Hill Cour Stamford, CT 06902</td>
<td>Tully Health Center / Center for Integrative Medicine and Wellness</td>
<td>(203) 276-2000</td>
</tr>
<tr>
<td>Interdisciplinary Team, Health Care For Musicians; Music Therapy</td>
<td>Joanne V. Loewy, DA, LCAT, MT-BC</td>
<td>Director</td>
<td>Beth Israel Medical Center 5 Silver 18 First Avenue at 16th Street New York, NY 10003</td>
<td>The Louis Armstrong Center for Music and Medicine</td>
<td>(212) 420-2704</td>
</tr>
<tr>
<td>Internal Medicine</td>
<td>Cathi Fontenot, MD</td>
<td>Medical Director Program Director NOMC</td>
<td>Medical Center of Louisiana at New Orleans 3700 St. Charles Avenue New Orleans, LA 70115</td>
<td>LSU Medical Center Musicians Clinic</td>
<td>(504) 412-1366 (504) 415-3514</td>
</tr>
<tr>
<td>Internal Medicine</td>
<td>Ralph Manchester, MD</td>
<td>Associate Professor of Medicine</td>
<td>University of Rochester Box 270617 738 Library Road, Rochester, NY 14642</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Movement Disorders, Focal Dystonia</td>
<td>Steven Frucht, MD</td>
<td></td>
<td>The Mount Sinai Hospital 5 E. 98 St., Box 1138, Lobby Level New York, NY 10029</td>
<td>Neurology Department</td>
<td>(212) 241-5607</td>
</tr>
<tr>
<td>Neurology</td>
<td>Mark Hallet, MD</td>
<td>Chief</td>
<td>National Institutes of Health NIH Building 10, Room SN226 10 Center Drive, MSC 1428 Bethesda, MD 20892</td>
<td>Human Motor Control Section</td>
<td>(301) 496-9526</td>
</tr>
<tr>
<td>Neurology</td>
<td>Richard J. Lederman, MD</td>
<td>Director</td>
<td>Cleveland Clinic Foundation 9500 Euclid Avenue S-91 Cleveland, OH 44195</td>
<td>Medical Center for the Performing Arts</td>
<td>(216) 444-5545</td>
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<tr>
<td>Neurology, Dystonia</td>
<td>Stephen U. Schuele, MD</td>
<td></td>
<td>Northwestern University Abbott Hall #1122 710 North Lake Shore Drive Chicago, IL 60611</td>
<td>Department of Neurology</td>
<td>(312) 503-3589</td>
</tr>
<tr>
<td>Orthopedic Hand Surgery</td>
<td>Alexander Y. Shin, MD</td>
<td></td>
<td>Mayo Clinic 200 First Street SW Rochester, MN 55905</td>
<td>Orthopedic Surgery Surgery of the Hand &amp; Microvascular Surgery</td>
<td>(507) 284-3399</td>
</tr>
<tr>
<td>Orthopedic Surgery, Disorders Of The Shoulder And Elbow</td>
<td>Daniel Buss, MD</td>
<td></td>
<td>Sports and Orthopedic Specialists, PA 11855 Ulysses Street NE Blaine, MN 55434</td>
<td></td>
<td>(612) 879-6623</td>
</tr>
<tr>
<td>Orthopedic Surgery, Spine Care</td>
<td>James G. Garrick, MD</td>
<td></td>
<td>St. Francis Memorial Hospital 900 Hyde Street, San Francisco, CA 94109</td>
<td>Center for Sports Medicine</td>
<td>(415) 353-6400</td>
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<tr>
<td>Orthopedics</td>
<td>George T. Shybut, MD</td>
<td>Partner</td>
<td>Wellington Orthopedics &amp; Sports Medicine 4440 Glen Este-Withamsville Road Cincinnati, OH 45245</td>
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<td>(513-293-6090</td>
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<tr>
<td>Otolaryngology</td>
<td>C. Richard Stasney, MD, FACS</td>
<td>Director</td>
<td>Texas Voice Center 6550 Fannin, Suite 2025 Houston, TX 77030</td>
<td></td>
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<tr>
<td>Otology (Adult And Pediatric), Head Neck Nose &amp; Sinus Surgery, Voice &amp; Sleep Disorders</td>
<td>Oleg Froymovich, MD</td>
<td>Director Of Auditory Research</td>
<td>Paparella Ear Head &amp; Neck Institute, PA/The Hearing Institute</td>
<td>Sister Kenny Institute</td>
<td>(612) 339-2836</td>
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<td></td>
<td></td>
<td></td>
<td>701-25th Avenue South #200 Minneapolis, MN 55454</td>
<td>Work Injury Program and Hand Rehabilitation Services</td>
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<tr>
<td>Physical Therapy Of The Hand</td>
<td>Julie E. Liebelt, PT CHT</td>
<td></td>
<td>Abbott Northwestern Hospital</td>
<td>Sister Kenny Institute</td>
<td>(612) 863-4446</td>
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<td>2800 Chicago Avenue South Minneapolis, MN 55407</td>
<td>Work Injury Program and Hand Rehabilitation Services</td>
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<tr>
<td>PM&amp;R (Physical Medicine &amp; Rehabilitation)</td>
<td>Clay Miller, MD</td>
<td></td>
<td>Sports Medicine North</td>
<td>Sister Kenny Institute</td>
<td>(978) 818-6350</td>
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<td>One Orthopedics Drive Peabody, MA 01960</td>
<td>Work Injury Program and Hand Rehabilitation Services</td>
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<td>PM&amp;R (Physical Medicine &amp; Rehabilitation), Artists Clinic</td>
<td>Jennine Speier, MD</td>
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<td>Abbott Northwestern Hospital</td>
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<td>(612) 863-8806</td>
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<td>Work Injury Program and Hand Rehabilitation Services</td>
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<tr>
<td>PM&amp;R (Physical Medicine And Rehabilitation), Rehabilitative Care And Arts Medicine</td>
<td>Rebecca Clearman, MD</td>
<td>Executive Director</td>
<td>Personal Physician Group LLP</td>
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<td>(713) 524-9800</td>
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<td></td>
<td>4100 Shepherd Drive Houston, TX 77098</td>
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<tr>
<td>Rehabilitation</td>
<td>Leah T. Fleisher, MPT</td>
<td>Physical Therapist, Rehabilitation</td>
<td>Physical Mind Institute</td>
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<td>(301) 775-1291</td>
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<td>4708 Wisconsin Avenue NW #2 Washington, DC 20016</td>
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<td>Rheumatology</td>
<td>Richard Hoppmann, MD</td>
<td>Dean, School of Medicine</td>
<td>University of South Carolina</td>
<td>School of Medicine</td>
<td>(803) 733-3188</td>
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**CLINICS — Outside United States, sorted by Specialty**

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<td>Marshall Chasin, MSc Aud</td>
<td>Director Of Auditory Research</td>
<td>Musicians’ Clinics of Canada</td>
<td></td>
<td>(416) 96-MUSIC</td>
<td>Canada</td>
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<td></td>
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<td>340 College Street, Suite 440 Toronto, ON M5T 3A9</td>
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<td>(966-8742)</td>
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<tr>
<td>Hand Surgery/Author, The Musician's Hand—A Clinical Guide</td>
<td>Ian Winspur, MD, LL FRCS, FACS</td>
<td></td>
<td>The Hand Clinic</td>
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<td>+44-(0)20 7404-8444</td>
<td>Great Britain</td>
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<td>30 Devonshire Street London W1G 6PU</td>
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<tr>
<td>Neurology</td>
<td>Eckart Altenmüller, MD, MA</td>
<td></td>
<td>Institute of Music Physiology and Musician's Medicine</td>
<td>Hanover University of Music, Drama and Media</td>
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<td>Boni Rietveld, MD, BA (Mus)</td>
<td>Director</td>
<td>Westeinde Hospital</td>
<td>Medical Center for Dancers and Musicians</td>
<td>+31-70-330-2042</td>
<td>The Netherlands</td>
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<td></td>
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<tr>
<td>Otolaryngology—Head And Neck Surgery</td>
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<td>Helsinki University Central Hospital</td>
<td>The Finnish Association for Musician's Medicine</td>
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Musical America: When did you first notice something was wrong? What were your earliest symptoms?

Peter Oundjian: From the early 1980s, something in my shoulder seemed to be seizing up, and I had to cancel concerts occasionally. Then, seven years later I noticed my ring finger seemed to be lingering behind, losing its independence. Eventually, I realized I couldn’t vibrate without lowering my ring and pinky fingers completely.

MA: Did you know what was wrong?

Oundjian: Not at the time. I spent a lot of time trying to strengthen my ring and pinky fingers when nothing was actually wrong with them. I had lots of tests, and results showed those digits were not compromised.

Then someone recommended I visit the Miller Healthcare Institute for Performing Artists in Manhattan. It was there, in 1994, that I first heard the word “dystonia.” It’s an uncontrolled motion that occurs only in a specific situation.

MA: Did having a diagnosis help?

Oundjian: Not really. In those days there was not much information about dystonia—pianists Leon Fleisher and Gary Graffman both had been struggling with dystonia for years, but didn’t have much to say to me in the way of advice.

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MA: Is this when you had the surgery?  
Oundjian: That was in 1996. It had been suggested that the ulnar nerve in my left arm might be impinged, and so I had an operation in which that nerve was moved up an inch and no longer goes through my funny bone. It had little effect except to make me less amusing on my left side [he smiles].

MA: Ha! Very funny.  
Oundjian: Not at the time. I soon began to feel that the medical profession really didn’t know how to help me. Now I think my problem had more to do with a kind of “bullying” of the index and middle fingers, a kind of grasping without total control.

MA: How did you know to turn to conducting?  
Oundjian: As a kid I had always jumped at the chance to conduct a brass group or a choir. At Juilliard I was a violin major, but I took a minor in conducting. In 1976 Herbert von Karajan came to Juilliard to give master classes. I was concertmaster of the orchestra, and he made me stand up and conduct Brahms’s First Symphony while he went out in the hall to check balance. He was very encouraging of my ability to become a conductor.

MA: You’ve mentioned André Previn was a supporter.  
Oundjian: He was a great friend and wonderful advisor and was keen that I start to conduct. It was he who gave me a boost by inviting me to share the podium with him at Caramoor’s 50th-anniversary concert, in 1994. Then Frank Salomon put me on his roster, and he has been a great mentor and manager.

MA: How are you dealing with focal dystonia now?  
Oundjian: I recently found an extraordinary doctor, Steven Frucht. He was a pre-college violin student at Juilliard, went on to Harvard, and became a neurologist. He’s now Director of Movement Disorders at Mount Sinai Hospital in New York City. I went to see him because I’ve been practicing violin for the last few months.

MA: That’s great news! What prompted you to pick it up again?  
Oundjian: This being the 90th anniversary of the Toronto Symphony, I decided that I would play the Bach Double Violin Concerto with my teacher and friend, Itzhak Perlman. I knew that if I was going to have one more try at the fiddle, I was going to have a major concert in front of me because I’m far too busy to practice without being forced to.

MA: Sounds familiar.  
Oundjian: In a recent conversation, Itzhak gave me the most extraordinary insight: “So when you pick up the violin, you’re waiting for this thing to happen, and it never lets you down.” Itzhak suggested that I’ll never heal myself while I fight it.

MA: In other words, mind over matter.  
Oundjian: I’ve actually started meditating recently. Part of the idea is to be open about everything, and not to try to find conclusions. I think the concert will be a great joy, even if it’s difficult to play. Right now, I’m perfectly happy not to know how it will go. And I’m grateful for what’s happened to me. I would never have had the opportunity to teach and conduct without having had dystonia. It opened a door for me. [Editor’s Note: The concert, on April 28, went well.]

MA: Do you have any advice for colleagues that might be dealing with injury or movement disorders?  
Oundjian: I think you have to keep an open attitude. You should not nauseate yourself with fear, which is a condition from which it’s difficult to heal. I do often remind myself of something violinist Arnold Steinhardt said to his fellow fiddler Shmuel Ashkenasi: “I’m just so worried that without my violin I’ll be nothing.” And Shmuel replied, “If you’re nothing without your violin, you’re nothing with your violin.”
“Simply the best, the most perfect violinist I have ever heard.”

—Yehudi Menuhin

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Performance anxiety strikes fear in the hearts of the most seasoned performers. Lily Pons, legendary coloratura soprano of the Golden Age, used to get sick before every performance. Paul McCartney nearly quit the Beatles in the early days because of it. Examples abound of experienced performers (some real surprises here) who have admitted to performance anxiety: Barbara Streisand, Sir Laurence Olivier, Lucille Ball—even Winston Churchill and Abraham Lincoln.

In the performing arts, it’s not just soloists who are susceptible to this most insidious of conditions. According to a survey by the International Federation of Musicians, as many as 70 percent of orchestra players experience enough performance anxiety to affect their playing. For some, the feelings of doubt, fear, and dread can lead to substandard playing and humiliating moments. For others, pre-showtime jitters yield peak performances.

“The very moment you go on stage you MUST be scared. If you are not scared, then you are not an artist,” Luciano Pavarotti declares in a video [see below] which also contains frank discussions with artists about their performance anxiety.

How do we make sense of this? How can we transform ourselves from the performer who chokes under pressure to the one who soars? Like the joke about Carnegie Hall, the answer is practice, practice—of a different sort than you may be used to.

Just as double-tonguing or down-bow staccato require a very specialized set of technical skills, so does managing anxiety to work for, rather than against, you. Here are a few strategies.

“A common problem

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“Strategy #1: Centering

Many athletes rely on a specific pre-performance routine to help them get into a more focused state before leaping into action. The following seven-step routine, called “centering,” has been used by many musicians who have won auditions and competitions and generally achieve their personal best under pressure.

(1) Focus

Minimize external distractions by identifying a place to rest your eyes. Ever notice how tennis players often keep their eyes glued to the strings on their racquets between points? Same idea.
FINDING YOUR CENTER

The following is an easy exercise to find your “center,” as discussed in the article.
Imagine you have an invisible Hula Hoop. Rotate your hips, and with each revolution imagine that the Hula Hoop shrinks and the rotation of your hips becomes smaller and smaller. Soon, the Hula Hoop has shrunk down to the size of a pea, and your hips are no longer rotating. Pay attention to the location of that pea-sized Hula Hoop and drop it down a few inches... that's your center. Notice how much more balanced and connected to the ground you feel.

(2) Imagine a positive outcome
Under pressure, we tend to think about what we don’t want to happen, rather than what we do want. Cue up an image of exactly how you want to sound and state your intention in clear, affirmative terms (e.g., “I am going to nail the opening,” instead of “Don’t miss the high note”).

(3) Breathe
Diaphragmatic breathing is one of the keys to controlling the body’s fight-or-flight response. Breathe in through your nose and fill up your lungs fully by allowing your belly to expand outwards, then breathe out slowly through your mouth, directing all of your attention to what your breathing sounds and feels like.

Focusing on internal sensory processing will help to slow down and quiet your thoughts, facilitating a mental state that is more concentrated and conducive to playing well.

(4) Balance
Taken from the martial arts concept of *ki* or *chi*, achieving a grounded, centered, and balanced state can help calm our nerves and give us a strong base from which to project.

(5) Release muscle tension
In much the same way that we keep a lot of unnecessary tension in our neck and shoulders when typing, we generally play with more muscular effort and tension than is necessary—even in non-performance settings. Learn to let go of this excess tension in the practice room; it will enhance your ability to play with ease and freedom on-stage as well.

(6) Avoid paralysis by analysis
We tend to hyper-focus on technique and mechanics under pressure, resulting in a phenomenon called “paralysis by analysis.” It’s more effective to focus on the big picture, meaning the sound, a kinesthetic sensation, or even an image of the end result we want. This is a technique that artists like Arnold Jacobs and Leon Fleisher often discuss in master classes.

(7) Assert yourself
Under pressure, it is tempting to play tentatively. However, this only increases the likelihood of errors. Commit to playing confidently, even if you don’t feel confident. Channel all of your nervous energy into a stream of focused sound.

Centering takes time to master. However, if you devote five to 10 minutes every day to practice these seven steps, you will soon be able to get a handle on your nerves and nail those big, scary, exposed entrances with confidence.
Strategy #2: Expanding the Optimal Zone

We all have an anxiety “comfort zone,” where we naturally achieve our personal best. We can’t always rely on finding it, however, so it’s critical to expand that zone of optimal functioning. As mindfulness expert Dr. Jon Kabat-Zinn says, “You can’t stop the waves, but you can learn to surf.”

You can “surf” by using a strategy called simulation training, where you practice playing in conditions similar to those under which you have to perform. [Note: Please consult with a physician before doing this exercise if you are pregnant or being treated for an ongoing health condition.]

1. Record your performance
   Give yourself permission to focus all of your attention on the music and playing freely, instead of listening for flaws, thinking about technique, and dwelling on the physical discomfort and distractions you are about to experience (you’ll see what I mean in a moment). You can hear all that in the playback(s).

2. Get your heart rate up
   Go for a quick run around the block or walk up and down the stairs a few times. You want to increase your pulse and respiration to simulate the symptoms of anxiety.


4. Go for it
   Since first impressions are key, test your ability to rise to the occasion by performing just the first 60 seconds of an excerpt to the absolute best of your ability—no holding back or careful, tentative playing allowed.

5. Rate and review
   Listen to your recording: On a scale of one to 10, how successfully did you realize your clear intention? Write down any observations or thoughts you might have had during the experience.

6. Repeat steps two through five immediately, with the same excerpt of music. Do five to seven total repetitions at each sitting, once or twice a day.

It may take a few days to become more adept at channeling the extra energy instead of fighting it, but as you listen back to the recordings, you’ll notice the extra zing, aliveness, and sense of freedom in your playing. If so, then congratulations: You’ve earned to ride the wave.

Additional Resources

Today’s musicians may be under more stress than ever before; thankfully, there are also more tools at our disposal than ever before. The following offer additional techniques and advice for performing at your best when it matters most.

Lecture by Mihaly Csikszentmihalyi on achieving a state of “flow.”

Performance Success (by Dr. Don Greene), an applied sport psychology book written specifically for performing artists

10-Minute Toughness (by Dr. Jason Selk), another helpful collection of sport psychology exercises, though written more with the athlete and business professional in mind

And in the department of You Are Not Alone...

Soundcheck discussion, Coping with Performance Anxiety, with Dr. Noa Kageyama and Blair Tindall

Rolling Stone interview with pop artist Adele about her stage fright
Musical America: When was the first accident?
Nora Shulman: It was in 1987, during a recording session. I was demonstrating something to a colleague and somehow I hyperextended my left hand’s third and fourth fingers. It was a demonstration that went awry. I felt pain, but I kept going and got through the session.

MA: Did you know you had been seriously hurt?
Shulman: I was young, and medically not too savvy. I continued to have pain. I tried acupuncture for a few months, which helped the pain, but it did not contribute to healing.

MA: So what finally worked?
Shulman: In 1988, I went to a doctor at the Musicians’ Clinics of Canada in Hamilton, Ontario. He ruled out stress fracture and diagnosed an interosseous tear between the middle and ring fingers of my left hand.

MA: What treatment did he prescribe?
Shulman: He recommended a splint, rehabilitation, and rest. But being a workhorse, I kept playing. Musicians are so driven—we’ve learned the music and feel we should be able to perform it. That kind of determination can be dangerous. Finally, in the summer of 1988, I stopped playing.

MA: Sounds wise.
Shulman: I decided to take the entire summer off. I got a medical leave from the orchestra and felt so relieved that I could properly address the injury. I have no regrets, because two wonderful things happened that summer—I took French classes and I got pregnant!

MA: Did you think you’d ever be able to play again?
Shulman: I certainly wanted to. I had stopped playing in June and the orchestra season was to begin again in September. A superb
A rehab specialist had suggested that I try playing only five minutes at a time, and gradually add a minute a day.

**MA:** Did it work?

**Shulman:** Yes! In the six weeks before the Toronto Symphony season began, I slowly, carefully, redeveloped my playing. I came back to the orchestra in good shape, and continued my rehab. However, almost two decades later in 2007, I injured the same hand again.

**MA:** How?

**Shulman:** I slipped on the ice and broke my left wrist, fracturing the ulnar and radius bones. Having had an injury that I ignored and simply coped with for a year, I knew that this time I had to put my faith in a process in which healing would be possible.

**MA:** What process was that?

**Shulman:** I saw a wonderful hand surgeon. The radical thing he advised was not to have surgery. He felt that casting the hand would eliminate the potential problem of internal scarring. So we casted the hand, and in four weeks the cast came off and was replaced by a splint. I started immediate work with a physiotherapist.

**MA:** How soon before you were able to play again?

**Shulman:** It was awhile. My wrist was stiff, and I couldn’t bring my hand around to get my fingers close enough to the left-hand flute keys. I went to a brilliant, resourceful instrument repairman, Jay Gemmill, who built out my left hand keys to extend into a more congenial position for my hand. My surgeon and physiotherapist were monitoring me very closely, and I started to play again, carefully and slowly.

**MA:** Sounds like a win-win.

**Shulman:** Rehab is a wonderful thing. It can be uncomfortable, but the practitioners are so important for the process of healing. Once I could get my fingers into better positions, Jay would move the keys back a little bit and eventually the flute was normalized. My playing came back quickly.

**MA:** How quickly?

**Shulman:** I broke my wrist on March 4, 2007, and on May 26, 2007, I played a concerto, the beautiful Divertimento for Flute and Strings by John Weinzweig.

**MA:** Do you have any advice for colleagues who might be dealing with an injury or movement disorder?

**Shulman:** I think the most important piece of advice is to face your injury and acknowledge that you have a problem. Find really good medical advice and care and don’t stress over the time it will take to heal. Just do it well and slowly. I came back full time from both injuries and I still spend at least 30 to 45 minutes warming up, really slowly. It’s the logical, sensible thing to do.
We asked our intrepid reporter…

... to do a completely unscientific survey of small-business CEOs in the arts and the group health care plan they chose for their employees. We wanted to know what insurers they use and why.

We discovered that group insurance options for small businesses in the arts are essentially no different from those offered to other businesses. With the proviso that laws and providers vary from one part of the country to another, and that some of our colleagues were more forthcoming than others, the following is a brief guide for small to mid-size businesses seeking group health insurance.

Alliance Artist Management (New York, NY)

Alliance Artist Managing Partner Rob Robbins chose The Blue Cross Blue Shield Association over Oxford. He said he did so because it covers multiple states and Alliance’s other managing partner, David Middleton, resides in Rhode Island; Oxford Health Plans, LLC, a division of United HealthCare Services, Inc., was not available in Rhode Island. Though Robbins said he is satisfied with Blue Cross Blue Shield, he added, “I don’t know anyone who is happy with their insurance company. You don’t win in this game; it’s just bloody expensive. There’s no point in changing companies, because the rates will increase anyway.”

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Alliance Artist Management covers the lion’s share of the premium payment for all four of its employees (including the managing partners). “We felt like we had to,” said Robbins. “It was an aching decision to make, but as a business owner, I felt it was important to offer this benefit which other organizations the same size might not provide.”

Ironically, the day after our interview, Robbins called to say he had received notice of a 25 percent increase in premiums.

Virginia Arts Festival (Norfolk, VA)

Virginia Arts Festival has 28 eligible employees (i.e., people who work at least 30 hours a week); 24 participate in the company’s health insurance plan, Optima Vantage HMO, one of the Optima Health Insurance Co’s options. Finance Director Sandy Robinett decided to work through a broker and, after reviewing a number of them, he chose TFA Benefits, affiliated with TowneBank in Hampton Roads, VA. He has high praise for their rep: “She is awesome, she always responds rapidly,” says Robinett.

VAF is pleased with the current plan, but Robinette re-evaluates it every year to make sure it’s the best and most cost-effective.

The Schubert Club (St. Paul, MN)

The Schubert Club, the Twin Cities’ venerable recital and chamber music presenter, had been getting its health insurance as part of a consortium of small arts organizations in the region. Executive and Artistic Director Barry Kempton was of the opinion that the bigger the group, the better the deal. His broker, however, Gallagher Benefit Services, advised against it, arguing that the insurance needs of the other organizations could result in higher rates for the entire consortium. Schubert Club’s 10 full-time employees are on the Medica plan and are happy with it.
The Pacific Symphony (Santa Ana, CA)
Like all union orchestras, Pacific Symphony’s musicians are covered by the American Federation of Musicians’ insurance plan [see Group Health Insurance Plans for Performing Artists]. Executive VP and COO Sean Sutton chose United HealthCare for his 45-member staff, not just for the basics, but also for dental, vision, disability, life, and health. “We try to bring balance and depth of coverage to the extent of our financial capacity,” said Sutton.

He advised using a broker, since brokers have a broad perspective on the field and there's no extra cost involved. “Still,” he said, “you must educate yourself; don’t just rely [solely] on the broker.” Like Robinette at the Virginia Arts Festival, Sutton re-evaluates his plan regularly.

Concert Artists Guild (New York, NY)
Concert Artists Guild, a management company for up-and-coming performers, has eight employees who are eligible for its insurance plan, three of whom participate. Executive Director Richard Weinert chose Oxford because it offers group plans for small companies with as few as one or two employees. He opted not to work with a broker.

To Broker or Not to Broker?
Brokers can not only help groups to find the right plan, they can also provide support throughout the year, such as intervening if there is an issue concerning a claim. Brokers’ commissions are built into the insurance rate. In other words, your policy will cost the same whether you use one or not.

However, there may be a downside to using a broker. According to a recent article on MedSave.com, health insurance companies are increasingly unwilling to pay independent benefits brokers a commission for signing up small-business customers. If you rely solely on a broker’s pitches, you may be missing out on other available plans. In other words, do your homework.
Joining a professional organization often enables you to buy health insurance at a better rate than if you were purchasing it on
your own.

Each of these organizations has membership requirements and some charge a fee or dues. For instance, to be a member of ASCAP, you must be a composer, songwriter, or publisher and pay a $35 application fee.

Fees and providers vary by state. We have provided examples of the cost at both ends of the spectrum. For example, if you are a member of the American Federation of Musicians and live in New York, the provider is usually Empire Blue Cross and the cost of an individual policy can vary greatly depending on circumstances—between $182 and $1,367. If you are a member of AFM and live in Ames, Iowa, the provider is usually Assurant and the cost is between $77 and $296.

Note, too, that the world of health insurance is complex and constantly changing. The information provided is accurate as of April 15, 2012.

<table>
<thead>
<tr>
<th>ORGANIZATION</th>
<th>SAMPLE LOCATION &amp; PROVIDER</th>
<th>COST RANGES</th>
<th>INSURER(S)</th>
<th>ELIGIBILITY RULES</th>
<th>CONTACT</th>
</tr>
</thead>
<tbody>
<tr>
<td>American Federation of Musicians</td>
<td>New York City: Empire Blue Cross</td>
<td>$182-$1,367</td>
<td>$415-$4,238</td>
<td>Insurance managed by Marsh Affinity Group: Major medical provider varies by state</td>
<td>Membership in AFM</td>
</tr>
<tr>
<td></td>
<td>Ames, Iowa: Assurant</td>
<td>$77-$296</td>
<td>$238-$560</td>
<td>Provider varies by state or coverage areas in New York, New Jersey, Connecticut, California, Florida, Indiana, and Chicago metro area.</td>
<td>Residence in covered area and membership in affiliated associations (below)</td>
</tr>
<tr>
<td></td>
<td>Chicago Metro: CIGNA</td>
<td>$2,572-$2,679</td>
<td>$8,076-$8,413</td>
<td>Provider varies by state or coverage areas in New York, New Jersey, Connecticut, California, Florida, Indiana, and Chicago metro area.</td>
<td>American Guild of Musical Artists</td>
</tr>
<tr>
<td>Freelancers Insurance</td>
<td>New York City: Empire Blue Cross</td>
<td>$225-$603</td>
<td>$630-$1,687</td>
<td>Major medical provider varies by state</td>
<td>Membership in Freelancers Union</td>
</tr>
<tr>
<td></td>
<td>Ames, Iowa: Golden Rule</td>
<td>$73-$165</td>
<td>$158-$291</td>
<td>Major medical provider varies by state</td>
<td>Membership in Freelancers Union</td>
</tr>
<tr>
<td></td>
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</tbody>
</table>
Disclaimer: Health insurance is complex and constantly changing. The information included in the table was chosen as representative samples and is in no way meant to be a complete collection of required information.

<table>
<thead>
<tr>
<th>ORGANIZATION</th>
<th>SAMPLE LOCATION &amp; PROVIDER</th>
<th>COST RANGES Individual</th>
<th>COST RANGES Family</th>
<th>INSURER(S)</th>
<th>ELIGIBILITY RULES</th>
<th>CONTACT</th>
</tr>
</thead>
<tbody>
<tr>
<td>American Society of Composers, Authors &amp; Publishers</td>
<td>New York City: Various providers</td>
<td>$182–$1,367</td>
<td>$415–$2,060</td>
<td>Range of providers is available</td>
<td>Membership in ASCAP</td>
<td><a href="http://www.ascap.com">www.ascap.com</a> (212) 621-6000</td>
</tr>
<tr>
<td>BMI</td>
<td>New York City: Various providers</td>
<td>$182–$1,864</td>
<td>$415–$5,295</td>
<td>Range of providers is available in limited areas</td>
<td>Membership in BMI</td>
<td><a href="http://www.Bmi.com">www.Bmi.com</a> (212) 220-3000</td>
</tr>
<tr>
<td>Audio Engineering Society</td>
<td>New York City: Various providers</td>
<td>$264–$1,075</td>
<td>$793–$3,225</td>
<td>Range of providers is available depending upon region</td>
<td>Members can purchase individual coverage</td>
<td><a href="http://www.aes.org">www.aes.org</a> (212) 661-8528 <a href="http://www.healthinsurance.com/hi/">http://www.healthinsurance.com/hi/</a></td>
</tr>
<tr>
<td></td>
<td>Ames, Iowa Various providers</td>
<td>$77–$366</td>
<td>$162–$774</td>
<td>Range of providers is available depending upon region</td>
<td>Members can purchase individual coverage</td>
<td><a href="http://www.aes.org">www.aes.org</a> (212) 661-8528 <a href="http://www.healthinsurance.com/hi/">http://www.healthinsurance.com/hi/</a></td>
</tr>
<tr>
<td>Dance/USA</td>
<td></td>
<td></td>
<td></td>
<td>Membership can access health insurance through Fractured Atlas</td>
<td>Membership in Dance/USA</td>
<td><a href="http://www.danceusa.org">www.danceusa.org</a> (202) 833-1717</td>
</tr>
<tr>
<td>Music Teachers National Association</td>
<td></td>
<td></td>
<td></td>
<td>Forrest T. Jones <a href="http://www.ftj.com">www.ftj.com</a> (800) 821-7303</td>
<td>Members can purchase insurance, but availability varies by region</td>
<td><a href="http://www.mtna.org">www.mtna.org</a> (513) 421-1420</td>
</tr>
</tbody>
</table>

Notes

1 Ready access to health insurance is increasingly dependent upon membership in an organization that offers group coverage. Companies may still provide individual, or sole proprietor, policies, but they are expensive and provide no guarantee that an applicant will not be refused coverage. eHealth, Inc., the parent company of eHealthInsurance Services Inc., is the leading online source of health insurance for individuals, families and small businesses. Licensed to market and sell health insurance in all 50 states and the District of Columbia, eHealthInsurance has developed partnerships with more than 180 health insurance companies, offering more than 10,000 health insurance products online.

2 TEIGIT is a membership organization that provides its affiliates with access to guaranteed health insurance in a limited number of states and metropolitan areas. The organization also serves as a broker for nonguaranteed individual policies in selected other states and metropolitan areas.

3 Fractured Atlas is a membership organization that offers its affiliates access to a nationwide network of health insurance providers.
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- How to Find Your Social Media “Voice”
- Planning Your Social Media Marketing: The Resources, Time, Vendors and Budget You Need
- Tips, Tricks & Best Practices
- The 5 Things You Must Do (and 5 You Should Never Do) for Social Media Success
- Measuring Your Social Media Marketing—What to Track
- Using Instagram to Build Your Audiences
- Mobilizing Your Social Media Marketing

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- Musician, Protect Thyself: A Few Ounces of Prevention
- Good News Case Study No. 1: Peter Oundjian’s Personal Journey
- Heavy Lifting: Works of Notorious Notes
- Good News Case Study No. 2: Flutist Nora Shulman
- Attention Orchestra Management: You Can Help
- Turning Performance Anxiety into Your Personal Best
- Injury Susceptibility Quiz
- Insuring Your Staffers: An Informal Survey
- Group Health Insurance Plans for Performing Artists

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- **Musician, Protect Thyself: A Few Ounces of Prevention**
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  - How to find your social media “voice”
  - Planning your social media marketing: the resources, time, vendors and budget you need
  - Tips, tricks & best practices
  - The 5 things you must do (and 5 you should never do) for social media success
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