



**“Better Together” 2018 SCAPTA Annual Conference
April 13-14, 2018
The Medical University of South Carolina, Charleston, SC**

SUMMARY OF EDUCATIONAL SESSIONS

FRIDAY, APRIL 13, 2018

Friday, April 13, 2018

11:45 am – 2 hr course

Leaving Behind the Silo and Transforming Society with Interdisciplinary Care

Patrick Michael Berner, PT, DPT, RDN and Ryan Maddrey, PT, DPT

Overview: This course will cover the reasons, and the how to, for why physical therapists need to branch outside of their silo and utilize the expertise of other healthcare providers to transform society.

Objectives: - Discuss the prevalence of non-communicable disease and the need for preventative and holistic care to improve patient care.

- Educate on the roles and responsibilities of other healthcare providers, emphasizing their level of education and credentials.
- Discuss how to refer to and network with other healthcare providers.
- Review cases that demonstrate the benefits of interdisciplinary care.

Detailed Description: There exists a systemic problem within the healthcare field, where providers tend to practice within their silo and disregard other important aspects of health. Most notably a person's eating pattern, sleep habits, psychological well-being, and various social determinants. Many providers choose to ignore the need to screen for other pertinent aspects of health, which in turn provides an insufficient plan of care. This presentation will highlight those predominantly missed elements, as well as missed opportunities for referral and collaboration with other healthcare providers. An integrative approach will not only boost outcomes, reduce the risk of disease, and improve quality of life, but aid in the transformation of society.

Speaker Bios: Patrick Berner, PT, DPT, RDN is a physical therapist currently practicing in the state of South Carolina while completing clinical work on his way to also becoming a Registered Dietitian Nutritionist. This blend of content knowledge has quickly positioned Dr. Berner as a sought after voice in conversations related to health promotion and wellness practice where he has been an invited presenter at the state and national level, urging the integration of nutrition and movement for enhanced outcomes and risk reduction of chronic disease.

Ryan Maddrey, PT, DPT is a graduate of the Medical University of South Carolina. He is currently an Orthopedic Resident Physical Therapist with ATI Physical Therapy in Greenville, SC. Dr. Maddrey is a past member of the APTA Student Assembly Board of Directors and current member Orthopedics Section and HPA Sections member.

Friday, April 13, 2018

12:15 pm – 4 hr course (Part 1)

Neurologic Thoracic Outlet Syndrome: It's more common than we originally thought

Ulysses Juntilla, DPT, OCS, Dip. Osteopractic, FAAOMPT and Andrew Roberts, DPT, Dip. Osteopractic, FAAOMPT

Overview: Neurologic thoracic outlet pain can be experienced to the neck, shoulder, arm and hand. This poses a challenge among clinicians as the condition often leads to mismanagement, which in turn result in persistent pain and suffering. Worst-case scenario patients may be subjected to unjustifiable surgical intervention. Clinicians should be aware of ways to recognize and can differentiate it from other conditions that present with neck pain and arm pain and can provide a specific intervention to address the associated impairments.

- Objectives:**
1. Describe the new criteria in identifying neurogenic thoracic outlet syndrome developed by the Consortium for Outcomes Research and Education on Thoracic Outlet Syndrome (CORE-TOS) versus cervical radiculopathy.
 2. Describe the indications and utilizations of neurogenic thoracic outlet - specific rehabilitation program.
 3. Utilize and demonstrate specific manual therapy (MT) techniques including the application of clinical reasoning skills in the selection of MT techniques including but not limited to joint and soft tissue mobilizations and manipulation.
 4. Utilize and demonstrate specific therapeutic exercises and the clinical reasoning behind the selection of specific exercise techniques.

Detailed Description: Pain experienced in the shoulder, upper, and lower arm can stem from a myriad of medical conditions including mechanical pain from nearby musculoskeletal structures such as the shoulder, cervical spine or from regional structures such as the thoracic spine and brachial plexus. Patients are frequently referred to physical therapy with the diagnosis of shoulder and arm pain. During examination and evaluation of the patient, the therapist must consider all potential causes of the patient's symptoms.

Thoracic outlet syndrome is estimated to affect 80 in 1000 patients overall but comprises three separate conditions based on the neurovascular structure that is involved. Neurogenic TOS (nTOS), which accounts for approximately 95% of all TOS cases, involves compression of the brachial plexus. The rest being venous (4%) and arterial (1%).

Because nTOS mimics cervical radiculopathy, this condition often leads to mismanagement, which can, in turn, result in persistent pain and suffering. In the worst-case scenarios, patients may be subjected to unjustifiable surgical intervention. Because the clinical findings are "pathognomonic", clinicians should be aware of ways to recognize this disorder and can differentiate it from other conditions that present with neck pain and radiculopathy and can provide a specific intervention to address the associated impairments.

Speaker Bios: Dr. Juntilla has been with the VHA for 11 years in which he is currently the Clinical Education Coordinator (Dorn VA). He is a Diplomate with American Board of Physical Therapy Specialties in Orthopedic PT, a Fellow of the American Academy of Orthopedic Manual Physical Therapists and an Osteopraphic Physical Therapist. In addition, he is an Advanced Credentialed Clinical instructor through APTA. UL presented numerous presentations nationally and internationally in the field of Orthopedic Manual PT. Prior to working at the VHA, he was a member of the faculty at Asian Institute of Medical Sciences, Asian College of Technology in which he taught Gross Anatomy and Physiology. He is currently serving as President of the Philippine Association of Orthopedic Manual Physical Therapists.

Dr. Roberts finished his Doctor of Physical Therapy from Andrews University in Michigan in 2009 and Osteopraphic physical therapy training in 2016 with the American Academy of Manipulative Therapy. Currently, he is a Fellow of the American Academy of Orthopedic Manual Physical Therapists. He uses various soft tissue treatment techniques focusing on improving peak performance and reducing disability. He is also among the few who is a certified practitioner in Active Release Technique and nerve entrapments. He has had the opportunity of working with Olympians, NFL players, world title powerlifters, and professional figure competitors. Andrew continues to work with world title powerlifters to develop new techniques to treat high level athletes in addition to treating chronic pain and spine conditions. Andrew is an avid road cyclist and practices Manual Orthopedic Physical Therapy in Spokane, Washington.

Friday, April 13, 2018

12:30 pm – 4 hr course (Part 1)

Forever and ever we never will part, Ortho/Neuro "Better Together"

Sara Kraft, PT, DPT, NCS, ATP and Gretchen Seif, PT, DPT, OCS, FAAOMT

Overview: This course series will explore common musculoskeletal impairments associated with neuromuscular disease. Concepts will be introduced in a lecture format with lab sessions following for hands on learning.

Objectives: Lecture

- Learner will identify important components of a lower limb and spine evaluation including special tests.
- Learner will understand the neurological diagnosis that may impact the clients' pain pattern.
- Learner will assess motor control problems that are common with a variety of neuromuscular processes that may be contributing to the client's pain.
- Learner will understand the implication of common medications and how they impact both the motor control and the pain process.
- Lab Portion - Learner will perform a lower limb and back examination on clients with a neuromuscular disorder.
- Learner will analyze the information from the lower limb and spine exam and determine a differential diagnosis.
- Learner will develop a treatment intervention to address the client's issues.
- Learner will analyze the client's motor control and movement patterns to determine their role in the client's pain.

Detailed Description: In the lecture series, we will explore both the lower limb and the spine in a client with a neuromuscular disorder. We will discuss common lower limb pathologies in this population and why they occur. We will analyze and discuss common movement and motor control patterns in the neurological population and their impact on the musculoskeletal system. We will explore common pharmacology and how it may impact the client's movement and pain. Finally, we will discuss common examination tools specific to both the lower limb and the spine in order to make our differential diagnosis. We will use lecture, small group discussion and video analysis for the lecture.

In the lab series, we will present clients with both lower limb and spine pathology whose primary diagnosis is neuromuscular. The group examine the client using information from the lecture series. We will analyze the client's movement patterns in order to determine the impact that the movement has on the client's musculoskeletal dysfunction. We will then develop a treatment plan that will address the client's impairment and implement the treatment as a group.

Speaker Bios: Dr. Kraft has over 20 years of clinical experience working in the field of neurorehabilitation. She has worked as a clinician, manager, and now educator in all settings. Dr Kraft is currently on faculty at MUSC teaching the neuromuscular coursework to DPT students. She graduated from MUSC in 1996 with her bachelors in physical therapy and a masters in health science. Since graduating she went on to get her transitional doctorate in physical therapy and has been a certified neurological specialist since 2002 and an assistive technology professional since 2007. She currently serves as the faculty coordinator of the CARES student run free pro-bono clinic at MUSC, practices clinically at the MUSC seating and mobility clinic, and is the MUSC Neurological Residency director.

Dr. Seif has been a licensed clinician since 1993 specifically working with individuals with musculoskeletal dysfunction as in an outpatient physical therapy setting. She is an Associate Professor at The Medical University of South Carolina (MUSC), teaching in the musculoskeletal lab series. She also serves as the faculty co-coordinator of the MUSC student run interprofessional free PT/OT clinic.

She received her BS in Physical Therapy from The Ohio State University in 1993, her Master's in Health Sciences from MUSC in 1997 and a Doctorate of Physical Therapy in 2009 from Regis University. She maintains a current clinical practice.

Friday, April 13, 2018

1:30 pm – 1 hr course

Haitian Autonomy: How rehabilitation science can provide healthcare sustainability

David C. Morrisette, Pt, PhD, OCS, FAAOMPT, ATC

Overview: FSRL is the only program in Haiti to offer rehabilitation degrees. This presentation will discuss the country's need for Haitian therapists and how MUSC is involved in the curriculum development.

Objectives: 1. Understand the importance of establishing a rehabilitation school in Haiti.
2. Recognize the Episcopal University of Haiti as a leading provider for rehabilitation degrees in the country.
3. Identify the role of American students, educators, and clinicians in collaboration with FSRL.

Detailed Description: Faculté des Sciences de Réhabilitation de Léogâne (FSRL) is a new department at the Episcopal University of Haiti that offers Occupational and Physical Therapy degree programs. The country has survived many natural disasters, causing political instabilities and delayed recovery leading to limited opportunity for Haitians with disabilities. Many Haitians with disabilities struggle to perform simple ADLs and are stigmatized in their communities. Haiti lacks rehabilitation specialists; however, FSRL has assembled students from all over the country with strong desires to help improve the quality of life of others.

FSRL's current Acting Dean, Dr. Janet O'Flynn faced many challenges while establishing a program in a country so severely impoverished. There are no licensed rehabilitation clinicians in Haiti, and therefore, no qualified rehabilitation educators. Additionally, the program is dependent upon financial support for student scholarships, maintaining campus infrastructure, and inviting foreign clinicians to teach at the University.

MUSC's involvement began in 2015 when Dr. Patty Coker-Bolt received a grant to support FSRL. Since, faculty and students from MUSC have been visiting the Episcopal University to teach and assist in curriculum development for our peers at FSRL. FSRL will need further assistance and volunteerism to produce clinicians to empower Haiti.

Speaker Bios: David Morrisette is a Professor in the Division of Physical Therapy at the Medical University of South Carolina (MUSC). Dave is on the Haitian Rehabilitation Foundation Board of Directors and is on the faculty and teaches a musculoskeletal course at the Université Episcopale d'Haïti Faculté des Sciences de Réhabilitation de Léogâne in Leogane, Haiti. Dave has been a faculty member at MUSC since 1988 and has instructed numerous continuing education courses, as well has presented research nationally and internationally. Dave is passionate about the benefits of working nationally and internationally in promoting physical therapy.

Friday, April 13, 2018

1:30 pm – 2 hr course

Decreasing Unwanted Variability: Use of Treatment Based Classification for Patients with Neck Pain

Thomas Denninger, DPT, OCS, FAAOMPT

Overview: This session will explore the practical application of treatment based classification for patients with cervical complaints. Key examination findings and associated classification based interventions will be reviewed.

Objectives: 1. Following completion of the course learners will understand the rationale for use of treatment based classification over other alternative classifications.
2. Following completion of the course learners will associate key examination findings with recommended initial patient management strategies.
3. Following completion of the course learners will apply TBC principles to patient cases.

Detailed Description: Despite continuing evidence in support of treatment based classification, that center on key patient reported sign and symptoms; alternate classification based on proposed pathoanatomy or mechanical constructs continue to prevail. In part due to this, wide unwanted practice variability in the management of patients with acute to sub-acute neck pain continue. This session is aimed to help connect patient factors with recommended, evidence based treatments to improve and optimize patient centered outcomes.

Speaker Bios: Thomas Denninger completed his Bachelors of Science in 2005 and his Doctorate in Physical Therapy in 2008. Following graduation Dr. Denninger remained an additional year at Sacred Heart's Orthopedic Residency. Dr. Denninger received the 2008 Dean's Leadership Award for the School of Education and Health Professionals, and 2012 Distinguished Alumni Award. Dr. Denninger is recognized as an Orthopedic Clinical

Specialist by the American Physical Therapy Association and a Fellow of the American Academy of Orthopedic Manual Physical Therapists.

Following graduation Dr. Denninger has presented at multiple national and state conferences. He was an author on the Orthopedic Section of the American Physical Therapy Association's Clinical Practice Guidelines on Low Back Pain. Dr. Denninger serves as reviewer for the Journal of Orthopedic and Sports Physical Therapy and the Journal of Manual and Manipulative Therapy. Dr. Denninger presently practices in Greenville, SC at ATI Physical Therapy. He is Certified by Kinetacore as a Level I and II Functional Dry Needler. Dr. Denninger serves as primary faculty for both Sports and Orthopedic Residencies through ATI Physical Therapy and Evidence In Motion. Dr. Denninger has published numerous manuscripts related to manual therapy, differential diagnosis, and timing of physical therapy intervention.

Friday, April 13, 2018

2:00 pm – 2 hr course

Fuzion Orthotic System – Innovative Solutions for Pediatric and Adult Patients

Norman V. Yankus, CO

Overview: This presentation deals with gait, biomechanics, range of motion assessment, orthotic management strategies to improve alignment, increase function and relieve pain; innovative approaches to managing deformities while providing greater comfort, compliance and compression than traditional thermoplastic orthoses.

Objectives: 1. Review the anatomy of the foot and ankle, discussing common pathologies that cause dysfunction.
2. Learn innovative approaches to the management of patients with deformities and spasticity using materials that fuse traditional plastics with colorful, skin-friendly foam.
3. Discuss strategies designed to improve alignment, increase function and relieve pain, especially in candidates difficult to brace.

Detailed Description: Patients with neuromuscular issues can be a real challenge. This presentation will deal with Normal and Pathological Gait, Lower Extremity Anatomy and Biomechanics, Range of Motion Assessment, Casting Recommendations and Case Studies. A full spectrum of Orthotic management strategies is discussed to improve alignment, increase function, and relieve pain. This presentation will present innovative approaches to the management of patients with deformities and spasticity using new materials that provide greater comfort, compliance, and compression than traditional thermoplastic orthoses.

The Fuzion presentation will cover the use of foam enhanced products and their effects on patients with spasticity. The presentation will feature the Fuzion Family Orthotic Bracing System. The Fuzion AFO was originally conceived to address the needs of challenging patients who have a hard time fitting into plastic AFO's. The unique design of the Fuzion AFO totally encompasses the lower extremity utilizing compressive control to assist in relaxing the leg resulting in greater comfort, control and compliance.

Speaker Bios: Norman is involved in product development for the lower extremity line and administers the fabrication and manufacturing of lower extremity products. Bringing his vast and diverse experience to Orthomerica, Norm also consults as needed in other key product areas (upper extremity, spinal, hip, etc.) Prior to joining Orthomerica, Norm owned his own O&P practice in Orlando, FL for a number of years. He also managed the O&P Department at a leading hospital-based teaching institution and has a wide range of experience including pediatrics, geriatric and trauma orthotic care. Norm is a graduate of the New York University Orthotics Program as well as the Orthotic Program at Century College at White Bear Lake Minnesota. He has been in the field of Orthotics since 1979 and has been ABC-certified since 1984.

Friday, April 13, 2018

2:15 pm – 2 hr course

Hip Arthroscopy: The proper candidate for rehab to post-operative management

Joshua E. Pniewski, DPT

Overview: There are many pain generators when it comes to the hip. Cam and pincer lesions are very problematic if left untreated. There has been significant evidence to support the use of arthroscopic debridement and labral repair when conservative management has failed. Looking at the right candidates and post-operative management literature is essential to achieve optimal outcomes.

Objectives: Evaluate the literature in order to design a rehabilitation plan to minimize impact to the hip with femoral acetabular impingement.

Utilize current evidence to support a safe and progressive rehabilitation program for hip arthroscopic debridement and/or labral repairs.

Describe proper imaging and findings in order to be prepared the patient for surgical consultation if conservative management has failed.

Detailed Description: As surgeons evolve with their surgical techniques, the rehabilitation professional falls behind in the development of proper rehabilitation guidelines. Many times the PT will fall back on the tried and true “protocols” that may not necessarily progress the patient due to lack of information on certain surgical techniques. With close interactions with surgeons, the proper technical literature was collected. Identification of outcomes and careful data collection a criterion based post-operative progression was developed. Patients that may have femoral acetabular impingement may have a difficult time getting back to their desired level of activity participation. It is paramount that when therapists treat these patients prior to surgery, particular attention be paid to hip internal rotation and flexion forces in weight bearing and non-weight bearing movements. If the patient continues to have issues and the medical team of surgeon and therapist may decide the patient is a candidate for a hip arthroscopy. Using the best evidence can help prevent post-operative complications and stiffness which will be outlined in detail.

Speaker Bio: Dr. Pniewski has been a physical therapist for over 11 years just recently accepting a Clinic Director position with ATI Physical Therapy in Aiken, SC. Prior to this position he spent a majority of his career in the Department of the Army and a stint as an assistant professor with Augusta University. He has authored several publications in peer reviewed journals with the Orthopedic Surgery Staff at Dwight D. Eisenhower Army Medical Center. He has spoken on these topics at national conventions to include the APTA Combined Sections Meeting and The National Conference for the American Society of Shoulder and Elbow Therapists (ASSET). His poster on Functional Outcomes Following Hip Arthroscopy was voted best poster at the SCAPTA Annual Conference in 2013. He is also a manuscript reviewer for the American Journal of Sports Medicine.

Friday, April 13, 2018

2:30 pm –2 hr course

Telehealth by PT's: Is it Legal? Can I get Paid?

Janet M. Shelley, PT, DPT

Overview: Physical therapists are joining other healthcare specialties in delivering services to patients via telehealth. The discussion is centered around licensure, scope of practice and payment as therapists seek to expand their practice beyond a physical footprint.

Objectives:

1. Identify position of the SC Board of Physical Therapy in regards to telehealth scope of practice.
2. Describe the current regulation in regards to a physical therapist treating a Medicare patient via telehealth.
3. Describe the current SC Medicaid and SC Blue Cross Blue Shield policy on payment for therapy services delivered via telehealth.
4. Identify CPT codes, modifiers and place of service codes used to bill telehealth.
5. Identify opportunities to participate in policy changes that could enhance the delivery of physical therapy services via telehealth.

Detailed Description: As the healthcare landscape in the United States evolves, telehealth is becoming a more feasible practice option for providers and payers alike. Advances in technology, consumer comfort with this medium of care as well as demand for more efficient care paradigms have helped start to move the needle in the political and payment realms for this practice environment. This presentation will provide an overview of the current environment of telehealth with physical therapists in South Carolina related to payment, licensure and practice. Participants are invited to share examples of telehealth in their therapy practices. Attendees will discuss payer policies as known, specific to Federal payers and South Carolina payers.

Speaker Bio: Janet M Shelley PT, DPT is the CEO of Medical Billing Center (MBC). MBC specializes in billing for outpatient therapy. Janet founded MBC in 2001 following the sale of a large regional private practice that she was instrumental in growing to 13 practice locations employing over 100 employees. While in private practice, Janet participated in oversight and management of independent therapy offices, hospital joint ventures and facility management contracts. She is past President of the South Carolina Chapter, APTA and currently serves on both State and National Payment Policy Committees. Clinically Janet has worked in hospital settings, home health and finally ownership in private practice. These varied experiences lend to the innate understanding of the challenges and opportunities before facilities and private practices.

Friday, April 13, 2018

3:00 pm – 4 hr course (Part 2)

Neurologic Thoracic Outlet Syndrome: It's more common than we originally thought

Ulysses Juntilla, DPT, OCS, Dip. Osteopractic, FAAOMPT and Andrew Roberts, DPT, Dip. Osteopractic, FAAOMPT

Overview: Neurologic thoracic outlet pain can be experienced to the neck, shoulder, arm and hand. This poses a challenge among clinicians as the condition often leads to mismanagement, which in turn result in persistent pain and suffering. Worst-case scenario patients may be subjected to unjustifiable surgical intervention. Clinicians should be aware of ways to recognize and can differentiate it from other conditions that present with neck pain and arm pain and can provide a specific intervention to address the associated impairments.

Objectives:

1. Describe the new criteria in identifying neurogenic thoracic outlet syndrome developed by the Consortium for Outcomes Research and Education on Thoracic Outlet Syndrome (CORE-TOS) versus cervical radiculopathy.
2. Describe the indications and utilizations of neurogenic thoracic outlet - specific rehabilitation program.
3. Utilize and demonstrate specific manual therapy (MT) techniques including the application of clinical reasoning skills in the selection of MT techniques including but not limited to joint and soft tissue mobilizations and manipulation.
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Detailed Description: Pain experienced in the shoulder, upper, and lower arm can stem from a myriad of medical conditions including mechanical pain from nearby musculoskeletal structures such as the shoulder, cervical spine or from regional structures such as the thoracic spine and brachial plexus. Patients are frequently referred to physical therapy with the diagnosis of shoulder and arm pain. During examination and evaluation of the patient, the therapist must consider all potential causes of the patient's symptoms.

Thoracic outlet syndrome is estimated to affect 80 in 1000 patients overall but comprises three separate conditions based on the neurovascular structure that is involved. Neurogenic TOS (nTOS), which accounts for approximately 95% of all TOS cases, involves compression of the brachial plexus. The rest being venous (4%) and arterial (1%).

Because nTOS mimics cervical radiculopathy, this condition often leads to mismanagement, which can, in turn, result in persistent pain and suffering. In the worst-case scenarios, patients may be subjected to unjustifiable surgical intervention. Because the clinical findings are "pathognomonic", clinicians should be aware of ways to recognize this disorder and can differentiate it from other conditions that present with neck pain and radiculopathy and can provide a specific intervention to address the associated impairments.

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Dr. Roberts finished his Doctor of Physical Therapy from Andrews University in Michigan in 2009 and Osteopactic physical therapy training in 2016 with the American Academy of Manipulative Therapy. Currently, he is a Fellow of the American Academy of Orthopedic Manual Physical Therapists. He uses various soft tissue treatment techniques focusing on improving peak performance and reducing disability. He is also among the few who is a certified practitioner in Active Release Technique and nerve entrapments. He has had the opportunity of working with Olympians, NFL players, world title powerlifters, and professional figure competitors. Andrew continues to work with world title powerlifters to develop new techniques to treat high level athletes in addition to treating chronic pain and spine conditions. Andrew is an avid road cyclist and practices Manual Orthopedic Physical Therapy in Spokane, Washington.

Friday, April 13, 2018

3:00 pm – 2 hr course

Goal Attainment Scaling: Capturing and Measuring Objective Physical Therapy Outcomes in Patient Care

Cindy Dodds, PT, PhD, PCS and Lori Bartleson, PT, DPT

Overview: In this session, learners will capture an understanding of Goal Attainment Scaling (GAS) and its ability to measure change at an individual, group, or program level. Learners will create, score, analyze, and interpret GAS goals.

Objectives: 1. Understand Goal Attainment Scaling as an objective outcomes measure at an individual, group, and program effectiveness level.

2. Create, score, analyze, and interpret Goal Attainment Scaling goals.

3. Be introduced to the GOALed app and its utility.

Detailed Description: Measurement of outcomes to support effective physical therapy treatment is critical in order to satisfy and motivate patients and families, fulfill obligations to funders, and assure governmental entities; however, accurate measurement of some specific patients and/or settings can be challenging when validated outcome measures are lacking or fail to capture change. In these cases, Goal Attainment Scaling (GAS) provides an ideal alternative by providing an objective and effective outcome method for measuring change at an individual, group, or program level. Participants of this course will be introduced to GAS as well as how to create, score and interpret findings. Participants will also learn of a newly developed GAS app that enhances GAS implementation.

Speaker Bios: Cindy Dodds, PT, PhD, PCS graduated from Medical College of Virginia and has over 25 years of experience in the field of physical therapy. She completed a Master's in Health Science from the Medical University of South Carolina and a Doctorate of Philosophy in Pediatric Science from Rocky Mountain University of Health Professions. Dr. Dodds' clinical and research interests focus on children with complex disabilities, examining physical activities, and quality of life. She also is currently validating the Pediatric Awareness and Sensory Motor Assessment to measure cognitive awareness in children with complex disabilities. She is an Assistant Professor at the Medical University of South Carolina.

Lori Bartleson, PT, DPT, is a pediatric PT with 22 years of experience specializing in school-based practice. She graduated with a Physical Therapy degree from the Medical University of South Carolina in 1995. She received her transitional Doctor of Physical Therapy from A.T. Still University in 2012. She has been involved in SCAPTA

throughout her career serving several years as the Lowcountry District Co-chair, two terms on the board of directors, and three years on the nominating committee. Nationally, Lori served the APTA six years as the Academy of Pediatric Physical Therapy's South Carolina representative. Currently she serves on the board of directors for the Medical University of South Carolina's College of Health Professions Alumni Association.

Friday, April 13, 2018

3:30 pm – 4 hr course (Part 2)

Forever and ever we never will part, Ortho/Neuro "Better Together"

Sara Kraft, PT, DPT, NCS, ATP and Gretchen Seif, PT, DPT, OCS, FAAOMT

Overview: This course series will explore common musculoskeletal impairments associated with neuromuscular disease. Concepts will be introduced in a lecture format with lab sessions following for hands on learning.

Objectives: Lecture

- Learner will identify important components of a lower limb and spine evaluation including special tests.
- Learner will understand the neurological diagnosis that may impact the clients' pain pattern.
- Learner will assess motor control problems that are common with a variety of neuromuscular processes that may be contributing to the client's pain.
- Learner will understand the implication of common medications and how they impact both the motor control and the pain process.
- Lab Portion - Learner will perform a lower limb and back examination on clients with a neuromuscular disorder.
- Learner will analyze the information from the lower limb and spine exam and determine a differential diagnosis.
- Learner will develop a treatment intervention to address the client's issues.
- Learner will analyze the client's motor control and movement patterns to determine their role in the client's pain.

Detailed Description: In the lecture series, we will explore both the lower limb and the spine in a client with a neuromuscular disorder. We will discuss common lower limb pathologies in this population and why they occur. We will analyze and discuss common movement and motor control patterns in the neurological population and their impact on the musculoskeletal system. We will explore common pharmacology and how it may impact the client's movement and pain. Finally, we will discuss common examination tools specific to both the lower limb and the spine in order to make our differential diagnosis. We will use lecture, small group discussion and video analysis for the lecture.

In the lab series, we will present clients with both lower limb and spine pathology whose primary diagnosis is neuromuscular. The group examine the client using information from the lecture series. We will analyze the client's movement patterns in order to determine the impact that the movement has on the client's musculoskeletal dysfunction. We will then develop a treatment plan that will address the client's impairment and implement the treatment as a group.

Speaker Bios: Dr. Kraft has over 20 years of clinical experience working in the field of neurorehabilitation. She has worked as a clinician, manager, and now educator in all settings. Dr Kraft is currently on faculty at MUSC teaching the neuromuscular coursework to DPT students. She graduated from MUSC in 1996 with her bachelors in physical therapy and a masters in health science. Since graduating she went on to get her transitional doctorate in physical therapy and has been a certified neurological specialist since 2002 and an assistive technology professional since 2007. She currently serves as the faculty coordinator of the CARES student run free pro-bono clinic at MUSC, practices clinically at the MUSC seating and mobility clinic, and is the MUSC Neurological Residency director.

Dr. Seif has been a licensed clinician since 1993 specifically working with individuals with musculoskeletal dysfunction as in an outpatient physical therapy setting. She is an Associate Professor at The Medical University of

South Carolina (MUSC), teaching in the musculoskeletal lab series. She also serves as the faculty co-coordinator of the MUSC student run interprofessional free PT/OT clinic.

She received her BS in Physical Therapy from The Ohio State University in 1993, her Master's in Health Sciences from MUSC in 1997 and a Doctorate of Physical Therapy in 2009 from Regis University. She maintains a current clinical practice.

Friday, April 13, 2018

4:00 pm –1 hr course

Pain Management in Rehabilitation: Multidisciplinary Intervention and Psychologically Informed Physical Therapy

David C. Morrisette, Pt, PhD, OCS, FAAOMPT, ATC and Kelly Barth, DO

Overview: Chronic pain is a profound problem, costing society more than cancer and diabetes combined. Pain has commonly been managed with opioids, which have led to addiction and other societal problems. Techniques such as cognitive behavioral therapy and mindfulness have evidence as interventions that are effective in the management of chronic pain. Current research is investigating the role of the techniques integrated with physical therapy in preventing acute pain episodes from becoming chronic. This talk will review the current crisis in pain management, as well as promising interventions regarding the management of pain, including working in multidisciplinary teams and psychologically informed physical therapy.

Objectives: Identify patients with acute lower back pain who have a greater probability for the problem to become chronic.

Recognizing methods for intervention for patients with chronic pain that are supported by the best evidence. Recognize when referral for psychological intervention is warranted, and the need to work in multidisciplinary teams.

Detailed Description: Chronic pain is at epidemic levels, with more resources spent on chronic pain than cancer and diabetes combined. Over the past 20 years, chronic pain has been most commonly managed with opioid medication, which has now led to an addiction epidemic, with professional organizations and the Federal Government recognizing the problem and developing policy changes. Past research and current best evidence points to the role of behavioral and psychological interventions along with physical rehabilitation in the management of chronic pain. These two types of intervention form a multidisciplinary approach that has proven effectiveness for a number of people with chronic pain. This course will provide an overview of the problem and approaches to help people with chronic pain, including developing multidisciplinary teams.

Speaker Bios: David Morrisette is a Professor in the Division of Physical Therapy at the Medical University of South Carolina (MUSC). Dave is on the Haitian Rehabilitation Foundation Board of Directors and is on the faculty and teaches a musculoskeletal course at the Université Episcopale d'Haïti Faculté des Sciences de Réhabilitation de Léogâne in Leogane, Haiti. Dave has been a faculty member at MUSC since 1988 and has instructed numerous continuing education courses, as well as presented research nationally and internationally. Dave is passionate about the benefits of working nationally and internationally in promoting physical therapy.

Dr. Kelly Barth is an Associate Professor of Psychiatry and Internal Medicine at Medical University of South Carolina. Board-certified in Internal Medicine, Psychiatry and Addiction Psychiatry, she has developed expertise over the past 9 years in evaluating and managing individuals with chronic pain and opioid use disorder. She is a core member of South Carolina's 21st Cures Initiative to improve access to Medication-Assisted Treatment for opioid use disorder in South Carolina, and she spearheaded the effort to bring a Chronic Pain Rehabilitation Program to MUSC. She is also the PI of an NIDA-funded K23 investigating opioid tapering options in those with chronic pain, and a Co-Investigator on a NIDA-funded R01 evaluating non-pharmaceutical interventions for veterans with co-morbid chronic pain and opioid abuse.

SATURDAY, APRIL 14, 2018

Saturday, April 14, 2018

8:00 am – 1 hr course

The Importance of Quality Assurance

Beth Olson, PT, DPT, LSVT certified and Courtney Finley, PT, DPT, GCS, LSVT BIG Certified, APTA Credentialed Clinical Instructor

Overview: Learn how good quality assurance practices can help with staff retention and happiness, ensure clinically excellent care and provide a support network for all levels of a company.

- Objectives:**
- 1) Promote good communication across all aspects of a company providing skilled rehabilitation.
 - 2) Ensure clinically excellent and evidence-based care across all therapy disciplines through education.
 - 3) Provide a support system for concerns or questions for all staff.
 - 4) Perform documentation reviews and site visits annually with all staff to ensure quality services.

Detailed Description: Several years ago, Fox Rehabilitation began looking for ways to improve clinician retention, to ensure clinically excellent and evidence-based care across all therapy disciplines and to find a better and more efficient way of communication across the practice. The Regional Quality Assurance Liaison position was created to be the link at the local or regional level to our administrative team. The RQAL position works in tandem with Regional Directors on each team to ensure quality of care and use of evidence-based treatment practices through the performance of ongoing documentation reviews, field visits with each clinician and constant contact with each clinician. Since the creation of the RQAL position, Fox Rehabilitation has had improved staff retention, especially with new graduate clinicians, as well as increased scores on chart audits and less denial of claims from payor sources. Our recommendation is that each company have a quality assurance plan in place.

Speaker Bios: Dr. Olson graduated from the Medical University of South Carolina with a Doctor of Physical Therapy degree in 2008. She focused on acute care for the first seven years of her career and now works for Fox Rehabilitation as a Physical Therapist and a Regional Quality Assurance Liaison for Columbia and Lexington, SC. She lives in Lexington, SC, with her husband and two boys and enjoys getting outdoors, singing and spending time with her family.

Dr. Finley is a Physical Therapist and a Regional Quality Assurance Liaison with Fox Rehabilitation. She received her DPT from The University of Indianapolis in 2007. She has been with Fox Rehabilitation for nearly 3 years and working with the balance/vestibular and geriatric population for 10 years. She lives and works in Charleston, SC, and enjoys spending time with her family.

Saturday, April 14, 2018

8:00 am –2 hr course

Better Together: Women Helping Women Succeed in Leadership

Lisa K. Saladin, PT, PhD and Dr. Gretchen Seif, PT, DPT, OCS, FAAOMPT

Overview: This session will provide both emerging and established women in leadership concrete ideas to improve their skills in conflict management, mentorship and networking.

- Objectives:**
1. Participants will have strategies to improve conflict management in work and other various leadership positions.
 2. Participants will have strategies to improve skills related to developing mentorship through networking at work and in other organizations.
 3. Participants will be able to identify barriers to their own advancement.

Detailed Description: There are unique gender differences in leadership. Both with achieving leadership positions and interactions with colleagues and others while in these positions. This panel presentation is aimed to empower women to succeed in leadership, but all are welcome. We will begin with brief lecturette on general

gender differences, then specific short (10 minute) presentations on conflict management, mentorship and networking. The speakers will have prepared questions for the audience to initiate open and honest discussions and will conclude with questions/answers and discussions for the participants.

Speaker Bios: Dr. Lisa Saladin is currently the Executive Vice-President for Academic Affairs and Provost at the Medical University of South Carolina and Vice President of the American Physical Therapy Association. She has been widely recognized for her teaching excellence with three University Health Sciences Teaching Excellence Awards; a South Carolina Governor's Distinguished Professor Award, and a 2009 MUSC Master Teacher designation. In 2008, she was recognized nationally for her teaching excellence with the receipt of the Award for Excellence in Academic Teaching from the American Physical Therapy Association. In addition, she has been an invited speaker locally and nationally on the topic of leadership development.

Lisa has been an active participant in the American Physical Therapy Association (APTA) for 25 years and a strong advocate for the profession. She served as Chapter President for South Carolina from 2004-2008 and in 2008 Lisa was elected to the APTA Board of Directors. Lisa has also served as Chief Delegate for SC (3 terms) and as a member of numerous national committees and task forces including the APTA Vision Task Force and Movement Systems Board Workgroup. She is currently chairing the APTA Movement System Task Force and the APTA Public Policy and Advocacy Committee.

Dr. Seif has been a licensed clinician since 1993 specifically working with individuals with musculoskeletal dysfunction as in an outpatient physical therapy setting. She is an Associate Professor at The Medical University of South Carolina (MUSC), teaching in the musculoskeletal lab series. She also serves as the faculty co-coordinator of the MUSC student run interprofessional free PT/OT clinic.

She received her BS in Physical Therapy from The Ohio State University in 1993, her Master's in Health Sciences from MUSC in 1997 and a Doctorate of Physical Therapy in 2009 from Regis University. She maintains a current clinical practice.

Saturday, April 14, 2018

8:00 am – 2 hr course

Differential Diagnosis and Treatment Considerations between Entrapment UE Neuropathies and Rotator Cuff Dysfunction

Frank Layman, PT, DPT, EdD, MTC

Overview: To provide effective approaches to discern between Entrapment Neuropathies vs Rotator cuff dysfunction by exploring anatomy, clinics testing, differential diagnosis. Review treatment approaches for both dysfunctions.

Objectives: 1. Explore the relationship of neural system dysfunction vs musculoskeletal problems
2. Discover differential diagnosis procedures to use for successful identification of UE dysfunctions
3. Discuss effective treatment approaches for NE and RC

Detailed Description: Using clinics reason combined with evidence based approaches to improve discernment between Entrapment Neuropathies vs Rotator cuff dysfunction will help Clinician address the problem of delayed recognition of treatable issues. By reviewing anatomy, clinics testing, differential diagnosis, and treatment options the problem of poor recognition and treatment prescriptions can be improved. Recognition of accurate diagnosis within the realm of shoulder pain can be problematic to clinicians. Review of improved evaluation and treatment methodology can advance clinical reasoning and improve outcomes.

Speaker Bios: Frank Layman, PT, DPT, EdD, MTC, has been a specialist in the field of orthopedics and sports medicine for nearly three decades. He holds a Bachelor of Science degree in Sports Medicine/ Athletic Training from Radford University, earned his Master of Science degree in Physical Therapy from Old Dominion University, and has an EdD from the University of Virginia in Curriculum and Instruction, with concentrations areas in

Administration and Sports Medicine. He received a transitional DPT from the University of St. Augustine, along with his Manual Therapy Certification. He also holds a certification in Dry Needling.

Dr. Layman is a speaker for Vyne education. He is an officer in the United States Army Reserves, an author, lecturer, consultant, adjunct faculty member (HPU- Leadership and Professionalism), and Board Member and VP of Business Development for Tapout Fitness in the Raleigh/Durham area.

Saturday, April 14, 2018

8:15 am – 3 hr course (Part 1)

Early Mobility in Children with Disabilities

Caitlin Keller, SPT, CSCS and Cindy Dodds, PT, PhD, PCS

Overview: This course will describe the purposes of offering early mobility to children with disabilities as well as the impact on developmental processes. To support the use of early mobility in clinical practice, course participants will also learn how to modify commercially available ride on cars for young children with disabilities.

Objectives: 1. Understand the purposes of offering early mobility to children with disabilities
2. Recognize the development of mobility skills in children with disabilities
3. Learn how to modify commercially available ride on cars for young children with disabilities

Detailed Description: Evidence indicates the early mobility for children with disabilities enhances mobility, socialization (Ragonesi, Chen, Agrawal, Galloway 2011; <http://www1.udel.edu/gobabygo/>) and participation (Field, Miller et al. 2015). Using lecture, demonstration, and hand-on learning, this instructional course will highlight the importance of early mobility of children with disabilities. The stages of mobility in children with disabilities will also be discussed. Lastly, course participants will learn how to successfully modify commercially available ride on cars, which will enhance pediatric physical therapy practice and improve outcomes for children with disabilities.

Speaker Bios: Caitlin Keller, SPT, CSCS is a third-year Doctor of Physical Therapy student at the Medical University of South Carolina. She completed her Bachelor of Science degree at Clemson University in Secondary Education and her Master of Education in Administration and Supervision. While at MUSC, Caitlin has completed the South Carolina Leadership Education in Neurodevelopmental and Related Disabilities program and participated in the Pediatric Mini-Fellowship. She has also worked on a case study involving a young adult with arthrogyposis, served as a member of the CARES Therapy Clinic board, and worked with the Upper Extremity Motor Function Research team.

Cindy Dodds, PT, PhD, PCS graduated from Medical College of Virginia and has over 26 years of experience in the field of physical therapy. She completed a Master's in Health Science from the Medical University of South Carolina and a Doctorate of Philosophy in Pediatric Science from Rocky Mountain University of Health Professions. Dr. Dodds' clinical and research interests focus on children with complex disabilities, examining physical activities, and quality of life. She also is currently validating the Pediatric Awareness and Sensory Motor Assessment to measure cognitive awareness in children with complex disabilities. She is an Assistant Professor at the Medical University of South Carolina.

~~**Saturday, April 14, 2018**~~

~~**—THIS COURSE HAS BEEN CANCELLED**~~

~~**8:30 am – 1 hr course**~~

~~***Promoting Health and Wellness in Physical Therapy***~~

~~**Reed Handlery, PT, DPT**~~

~~**Overview:** Physical therapists' role in promoting health and wellness in individuals and communities. Includes discussion of physical, mental, social, and occupational health and methods to incorporate wellness into practice.~~

Saturday, April 14, 2018

- NEW COURSE ADDED

8:30 am – 1 hr course

Population Health in a Physical Therapy World. It's How WE "Transform Society"

Patrick Michael Berner, PT, DPT, RDN

Objectives: Discuss the clinician's role in prevention, health promotion, and wellness. Define population health, social determinants of health, and the social ecological model. Understand community assessments and making impacts beyond individual patient care.

Speaker Bio: Patrick Berner, PT, DPT, RDN is a physical therapist currently practicing in the state of South Carolina while completing clinical work on his way to also becoming a Registered Dietitian Nutritionist. This blend of content knowledge has quickly positioned Dr. Berner as a sought after voice in conversations related to health promotion and wellness practice where he has been an invited presenter at the state and national level, urging the integration of nutrition and movement for enhanced outcomes and risk reduction of chronic disease.

Saturday, April 14, 2018

9:15 am –2 hr course

One-on-One Patient Care: Gold Standard or Fool's Gold

Chris Wilson, PT, DPT, CHES

Overview: One-on-one patient care is the gold standard, right? For a profession whose focus is to transform SOCIETY, we may be missing the forest for the trees.

Objectives: Compare one-on-one patient care to alternative model(s).
Review financial implications of care model(s) with respect to population health and the physical therapist
Apply principles to chronic health dysfunctions
Understand implications with respect to outcomes

Detailed Description: Enter a discussion with almost any physical therapist and the topic will likely include the desire and need to focus on one-on-one patient care as the gold standard. Mentioned alongside those comments are the skills of a physical therapist to work in a direct access role, to be employed at the top of their skill set and to use those skills to transform society. What is left out of those discussions is how doing may compromise our ability to achieve another goal of transforming society by optimizing movement. Transforming SOCIETY is a population health goal. Population health issues aren't usually solved with one-on-one solutions. Instead the sexy conversations are about #cashPT as the solution, without really understanding the financial implications, exploring the evidence, contemplating billing nuances, or critically appraising what practicing at the top of our scope really means. One-on-one patient care is necessary for some of our patients some of the time. Challenging ourselves and our patients in larger contexts is how we transform society in a financially rewarding and financially responsible manner.

Speaker Bios: Dr. Chris Wilson, PT is an accomplished physical therapist focused on helping individuals move and perform better through exercise, education and empowerment. Dr. Wilson won the Private Practice Section's student business concept contest in 2013, was selected by APTA as an Innovator in 2013, was honored as an APTA Emerging Leader in 2015 and was chosen by the Sports Physical Therapy Section to be a Travelling Fellow in 2015. He has been published in both Impact magazine and PT in Motion. Dr. Wilson has also helped guide multiple practices to 5-star Facebook and Google ratings and secured a Charleston Choice Award for a recent employer. Beyond his accomplishments as a PT he is also a Certified Health Education Specialist, former Air Force Officer, and previous project manager for an Information Technology company.

Saturday, April 14, 2018

9:45 am – 2 hr course

Sports Medicine approach to ACL Rehabilitation from Pre-op to Post-op to Return to Play

Michael J. Barr, PT, DPT, MSR

Overview: Review and discuss common principals and stage related goals throughout the recovery process for athletes who have sustained an ACL injury starting from the pre-operative phase to the post-op phase and return to play guidelines. Presentation will include treatment techniques: therapeutic exercises, manual treatment, and sport specific functional activities.

Objectives:

1. Understand the principals and goals for each phase of the rehab process
2. Discuss the importance of muscular endurance for return to play and injury prevention
3. Review a variety of treatment specific techniques for range of motion, strengthening, muscular endurance, proprioception and sport specific functional activities.
4. Understand return to play guidelines including isokinetic and functional testing.

Speaker Bios: Sports Medicine Manager: part of the Musculoskeletal Institute, our Sports Medicine program is a fully integrated multidisciplinary team. Managerial responsibilities include but are not limited to: supervising, evaluating, and coordinating athletic trainers; community talks and injury prevention program education; contract negotiations, marketing (overall plan development including print, social media and sponsorships), developing and overseeing Saturday sports injury orthopaedic clinic, organization of Charleston Battery, Charleston RiverDogs and Volvo Car Open medical coverage, facilitate new sports medicine patient referrals, budget analysis and development, revenue/contribution margin tracking, developing and implementing business plans, MSK ICCE group leader, strategic planning and implementation for the overall growth and development of the Sports Medicine Program.

Physical Therapist: focusing on sports medicine and orthopedic rehabilitation, with patients ranging from pediatric to adult, youth to adult to professional athletes; pre-op, post-op, and non-operative rehabilitation; proficient in manual therapy and kinesio taping; team Physical Therapist for the Charleston Battery, Charleston RiverDogs, the Lowcountry Highrollers, MW Tennis Academy, and a number of local high school, youth and adult teams/leagues.

Saturday, April 14, 2018

10:15 am – 3 hr course (Part 2)

Early Mobility in Children with Disabilities

Caitlin Keller, SPT, CSCS and Cindy Dodds, PT, PhD, PCS

Overview: This course will describe the purposes of offering early mobility to children with disabilities as well as the impact on developmental processes. To support the use of early mobility in clinical practice, course participants will also learn how to modify commercially available ride on cars for young children with disabilities.

Objectives:

1. Understand the purposes of offering early mobility to children with disabilities
2. Recognize the development of mobility skills in children with disabilities
3. Learn how to modify commercially available ride on cars for young children with disabilities

Detailed Description: Evidence indicates the early mobility for children with disabilities enhances mobility, socialization (Ragonesi, Chen, Agrawal, Galloway 2011; <http://www.udel.edu/gobabygo/> and par1cipa1on (Field, Miller et al. 2015). Using lecture, demonstration, and hand-on learning, this instructional course will highlight the importance of early mobility of children with disabilities. The stages of mobility in children with disabilities will also be discussed. Lastly, course participants will learn how to successfully modify commercially available ride on cars, which will enhance pediatric physical therapy practice and improve outcomes for children with disabilities.

Speaker Bios: Caitlin Keller, SPT, CSCS is a third-year Doctor of Physical Therapy student at the Medical University of South Carolina. She completed her Bachelor of Science degree at Clemson University in Secondary Education and her Master of Education in Administration and Supervision. While at MUSC, Caitlin has completed the South Carolina Leadership Education in Neurodevelopmental and Related Disabilities program and participated in the Pediatric Mini-Fellowship. She has also worked on a case study involving a young adult with arthrogyposis, served as a member of the CARES Therapy Clinic board, and worked with the Upper Extremity Motor Function Research team.

Cindy Dodds, PT, PhD, PCS graduated from Medical College of Virginia and has over 26 years of experience in the field of physical therapy. She completed a Master's in Health Science from the Medical University of South Carolina and a Doctorate of Philosophy in Pediatric Science from Rocky Mountain University of Health Professions. Dr. Dodds' clinical and research interests focus on children with complex disabilities, examining physical activities, and quality of life. She also is currently validating the Pediatric Awareness and Sensory Motor Assessment to measure cognitive awareness in children with complex disabilities. She is an Assistant Professor at the Medical University of South Carolina.

Saturday, April 14, 2018

10:30 am –1 hr course

CARES Therapy Clinic: Consistency of Care Improves Patient Outcomes

Gretchen Seif, PT, DPT, OCS, FAAOMPT and Meghan Bowman, SPT

Overview: The MUSC CARES Clinic is a non-mandatory, student- initiated, pro-bono organization providing therapy services. This study analyzes the implementation of more consistent care on patient outcomes and student satisfaction.

Objectives: 1. Variations in student schedules can have a positive or negative effect on patient no show/cancellation rate.
2. Consistency of care has an impact on patient no show/cancellation rates, student confidence, patient satisfaction, and patient outcomes
3. Improvement in communication between clinicians can be directly attributed to the repeat nature of the student schedule

Detailed Description: Problems: The CARES board noticed a high patient no-show/cancellation rate, difficulty scheduling student clinicians, student confusion about notes and patient information, inconsistency of taking outcomes, and a lack of efficiency of patient care.

Approach: A change in the scheduling process was implemented to improve consistency of care. Student clinicians were previously scheduled arbitrarily throughout the semester and students typically did not see the same patients. Students now see the same patients two weeks in a row on a rotating team basis with one student always having seen the patient the previous week.

Challenges: CARES patients are under or uninsured with more complex diagnoses and often have unreliable transportation. These factors contribute to a lack of investment from the patient. Furthermore, because participation in CARES is not mandatory, student involvement decreases drastically over time. Communication between students and board members is not consistent or reliable.

Method Analysis: Data will be tracked through student surveys, no-show/cancellation rates, and outcomes.

Conclusion: At this time, implementation of this change over the summer semester showed a decline in no show/cancellation rate and an increase in student satisfaction. We hope analysis of the fall semester will also show an improvement in our outcomes scores and efficiency of care as a whole.

Speaker Bios: Dr. Seif has been a licensed clinician since 1993 specifically working with individuals with musculoskeletal dysfunction as in an outpatient physical therapy setting. She is an Associate Professor at The Medical University of South Carolina (MUSC), teaching in the musculoskeletal lab series. She also serves as the faculty co-coordinator of the MUSC student run interprofessional free PT/OT clinic. She received her BS in Physical Therapy from The Ohio State University in 1993, her Master's in Health Sciences from MUSC in 1997 and a Doctorate of Physical Therapy in 2009 from Regis University. She maintains a current clinical practice.

Meghan is a 3rd year DPT student at MUSC. She is finishing up her last few rotations and plans to work for Indian Health Services post graduation. She has represented her class as the APTA liaison and StudentScheduler for the CARES pro bono orthopedic and neuromuscular clinic. Meghan received her bachelors in Nutritional Science from Michigan State University.

Saturday, April 14, 2018

10:30 am –1 hr course

Scoliosis and Schroth in the United States

Chintan Pancholi-Parekh, PT, DPT

Objectives: Identify the 3 dimensions that scoliosis impacts and deviates the spine from anatomical neutral. Identify leading causes of scoliosis. Describe The Vicious cycle as it relates to scoliosis progression. Perform scoliosis screening for transverse and coronal planes with a scoliometer and plumbline. Describe how scoliosis specific exercises are integrated across the life span of scoliosis patients. Identify patients that are candidates for scoliosis specific 3-D exercise

Speaker Bio: Dr. Pancholi-Parekh completed her Master of Science in Physical Therapy (MSPT) in 2001 and completed her post professional clinical doctorate degree (DPT) in 2005 both from Rutgers University, formerly known as UMDNJ, Newark NJ. She has served both pediatric and adult patients including, school based, EIP, outpatient, aquatics, acute care, sub-acute, and SNF.

She has worked with PRNY, rising to become a partner in 2009 and is currently the Vice-President. Her professional development includes NDT training, Sensory Integration training and C1 and C2 Schroth based scoliosis specific exercises from the Barcelona Scoliosis Physical Therapy School (BSPTS). As a clinical instructor for Rutgers Doctoral PT program and Quinnipiac University, she provides invaluable clinical experiences for doctoral students wishing to pursue pediatrics.

Administratively, she developed and maintains the company's website, practice management and budgeting and provides lectures/in-services for professionals, physicians, and the community. She also serves as a lab assistant for the C1 certification for 3 Dimensional treatment of Scoliosis, BSPTS, for the classes held in the NYC/ Boston area. Dr. Pancholi-Parekh has also joined Shift Scoliosis as part of their Medical Advisory Board. Memberships past and present include: APTA, APTANJ, SOSORT, and SRS.

Saturday, April 14, 2018

10:45 am –2 hr course

One-on-One Patient Care: Gold Standard or Fool's Gold

Chris Wilson, PT, DPT, CHES

Overview: One-on-one patient care is the gold standard, right? For a profession whose focus is to transform SOCIETY, we may be missing the forest for the trees.

Objectives: Compare one-on-one patient care to alternative model(s). Review financial implications of care model(s) with respect to population health and the physical therapist. Apply principles to chronic health dysfunctions. Understand implications with respect to outcomes.

Detailed Description: Enter a discussion with almost any physical therapist and the topic will likely include the desire and need to focus on one-on-one patient care as the gold standard. Mentioned alongside those comments are the skills of a physical therapist to work in a direct access role, to be employed at the top of their skill set and to use those skills to transform society. What is left out of those discussions is how doing may compromise our ability to achieve another goal of transforming society by optimizing movement. Transforming SOCIETY is a population health goal. Population health issues aren't usually solved with one-on-one solutions. Instead the sexy conversations are about #cashPT as the solution, without really understanding the financial implications, exploring the evidence, contemplating billing nuances, or critically appraising what practicing at the top of our scope really means. One-on-one patient care is necessary for some of our patients some of the time. Challenging ourselves and our patients in larger contexts is how we transform society in a financially rewarding and financially responsible manner.

Speaker Bios: Dr. Chris Wilson, PT is an accomplished physical therapist focused on helping individuals move and perform better through exercise, education and empowerment. Dr. Wilson won the Private Practice Section's student business concept contest in 2013, was selected by APTA as an Innovator in 2013, was honored as an APTA Emerging Leader in 2015 and was chosen by the Sports Physical Therapy Section to be a Travelling Fellow in 2015. He has been published in both Impact magazine and PT in Motion. Dr. Wilson has also helped guide multiple practices to 5-star Facebook and Google ratings and secured a Charleston Choice Award for a recent employer. Beyond his accomplishments as a PT he is also a Certified Health Education Specialist, former Air Force Officer, and previous project manager for an Information Technology company.

Saturday, April 14, 2018

2:30 pm – 2 hr course

What I Wish I Would Have Known: Fresh PT Primer

Will Butler, DPT

Overview: Presentation is the born of a critical review of transition from student to clinician and resulted in a list of practical applications and knowledge bits. The topics that will be covered include: student loans, employer benefits, contract negotiations, basic money management, and goal setting.

Objectives: Participants will be able to recognize key differences between the most common employer benefits offerings. Participants will know how to assess their student loans to determine plausible repayment strategies. Participants will be able to explain the 3 primary phases of financial planning
Participants will be able demonstrate the use of a Time Value Money Calculator (TVM).

Detailed Description: Clinician burnout noted through personal experience, colleague interview, and being sought out by countless clinicians and SPTs regarding loans, negotiations, and financial questions. There isn't adequate education being provide prior to professional entry to permit clinicians to effectively actualize general professional autonomy. Clinicians need to understand what they don't understand, so they can intentionally and intelligently seek answers related to financial preparedness to permit them to focus on their primary professional pursuits to improve the lives of those in their chosen setting.

Speaker Bios: Will is a physio by training and practices financial planning by choice. He is motivated by human potential & past misfortune. His mission is to change healthcare by improving the life of the clinician through education and application financial planning. He received his DPT from the University of St. Augustine. He enjoys few things more than Ben & Jerry's ice cream, helping clinicians is one of those things. He values humor, knowledge, and building lasting relationships. His presentation, "What I Wish I Would Have Known...", is the result of a critical review of his transition from student to clinician which turned into a wish list of knowledge that would have made his personal and professional life easier. The topics that will be covered include: student loans, employer benefits, contract negotiations, basic money management, and goal setting. The most common responses to Will's presentation, "Why has no one told us these things?!" and "Thank you, I've searched for hours and days for the things you answered in minutes." Those who attend will leave with greater sense of mission and vision.

Saturday, April 14, 2018

2:30 pm – 2 hr course

"Improving Patient Outcomes with 'The ABCs of Prevention, Fitness and Function.'"

C. Vicki Gold, PT, MA

Overview: This mini-workshop introduces participants to a simple mind-body system for optimizing patient outcomes and well-being. Learn "The ABCs of Prevention and Fitness" for achieve measurable results – a fun and informative presentation.

Objectives: 1. Name and describe the 5 steps of "The ABCs of Prevention and Fitness" system.

2. Provide at least one example of using “The ABCs . . . ” system to enhance patient physical therapeutic outcomes.
3. Demonstrate teaching one component of “The ABCs . . .” System.

Detailed Description: “This program developed out of the presenter’s desire to provide a simple way for patients and workshop attendees to learn, remember and apply basic principles and techniques related to safe, efficient movement and over-all motor function. It evolved from the instructor’s personal and professional experiences with patients over her more than 40+ years of both clinical and academic work in a large variety of settings.

The “ABCs” system teaches the integration of Alignment, Breathing and Centering into everyday activities, physical therapy sessions and worksite wellness programs. It has proven to be an effective training tool because of its simplicity and ease of applying. The 5-step approach includes a segment on “*S-l-o-w-M-o-t-i-o-n*” and its effectiveness for improving strength, balance and motor control. “The Basic Moves” component reinforces the skills necessary for safe bending, lifting and carrying – including patient transfer technique.

The principles and techniques promoted in this work-shop are continually being corroborated by research. However, a current challenge is evaluating and scientifically validating the use of “The ABCs . . .” system as an effective training tool. To date, the findings are primarily anecdotal. It is the hope of its creator that research and education-minded individuals will take this on as a research project. In the meantime – feedback regarding the effectiveness of this “system” from people who have tried it is encouraged and welcome.

Speaker bio: C. Vicki Gold, PT, MA brings 50 years of personal and professional experience to this “seriously-fun” mini-workshop. Ms. Gold has served on several academic faculties and is a former Director of the Physical Therapist Assistant Program at LaGuardia Community College in New York City.

“The ABCs of Prevention and Fitness” System (Alignment, Breathing and Centering) evolved from Ms. Gold’s background in traditional medicine and her observations of how stress, insufficient patient education and training lead to less-than-optimum patient functional outcomes.

Also contributing to the creation of this unique system is Ms. Gold’s training in a wide range of “mind-body” and “transformation” studies. Among these are: Yoga, Tai Chi, Pilates, Alexander and Feldenkrais techniques. Basic “cognitive therapy” techniques are woven into this presentation as tools to facilitate enhanced patient confidence and success.

Ms. Gold is a Life Member of the APTA. Other memberships include: IDEA (International Dance-Exercise Association); WELCOA (Wellness Council of America), The Hauppauge Industrial Association of Long-Island (HIA-LI), Senior Umbrella Network of Suffolk County (SUNS), Geriatric Professionals of Long Island (GPLI)

Saturday, April 14, 2018

2:30 pm – 2 hr course

IASTM Redefined: Basic, Gentle Soft Tissue Techniques for Patient Care

C. Shante Cofield, PT, DPT, OCS, CSCS

Overview: This session introduces effective new techniques for movement therapy and performance enhancement that integrate Instrument-Assisted Soft Tissue Mobilization (IASTM).

Objectives: 1. Explain the theory & science of IASTM

2. Describe movement screening techniques to identify faulty motor patterns

3. Examine strategies for combining instrument-assisted fascial tooling with functional kinesiology taping to change movement quality & presentation

Detailed Description: This session introduces effective new techniques for movement therapy and performance enhancement that integrate Instrument-Assisted Soft Tissue Mobilization (IASTM). Attendees will review dysfunctional movement screening patterns and the utilization of soft tissue tools to improve patient outcomes. The anatomy, physiology and neurology of myofascial soft tissue work are covered, and IASTM intervention

strategies are demonstrated in conjunction with kinesiology taping and corrective exercise techniques as part of a comprehensive approach to patient care. This course is intended for practitioners and therapists with all levels of experience with soft tissue techniques.

Speaker Bios: Dr. C. Shanté Cofield, aka The Movement Maestro, is a former Division I athlete with a passion for movement surpassed only by her passion for learning. Shanté graduated from Georgetown University and continued her educational pursuits at New York University, graduating with a Doctorate in Physical Therapy (DPT) and becoming a Certified Strength and Conditioning Specialist (CSCS).

Shanté is a board certified Orthopedic Clinical Specialist (OCS) who practices in Los Angeles, California with specialties ranging from CrossFit injuries to pelvic floor dysfunction. As a Selective Functional Movement Assessment (SFMA) provider, Shanté utilizes a movement-based treatment approach that incorporates manual therapy, NeuroKinetic Therapy (NKT), corrective exercises, and techniques such as kinesiology taping and IASTM (instrument assisted soft tissue mobilization). Additionally, Shanté is a Functional Range Conditioning mobility specialist (FRCms) and holds a CrossFit Level I trainer certificate.

Shanté is the creator of The Movement Maestro, a website and social-media based platform devoted to all things human movement and mobility related. Shanté is a proud instructor for RockTape and considers herself fortunate beyond measure to be able to travel the country as an educator, promoting the benefits of movement and teaching others just how incredible the human body really is.

Saturday, April 14, 2018

2:30 pm – 2 hr course

A Dynamic Integrative Needling (DIN) Approach to Cervicogenic Headaches

Matthew Grubb, PT, DPT, MS, FAAOMPT, ATC, CSCS and Rachel Grubb, PT, DPT, FAAOMPT

Overview: Through the exploration of a patient presenting with cervicogenic headaches, participants will be instructed on the neurophysiological mechanisms of dry needling and its use within a multimodal approach to patient care.

Objectives: 1. Explain three evidence-based differential diagnostic criteria of cervicogenic headaches (CGH).
2. Explain the evidence-based proposed peripheral, segmental, and supraspinal mechanisms of DIN.
3. Describe a common postural pattern/presentation seen in patients with CGH.
4. Understand and demonstrate four differing treatment approaches to treating patients with CGH, including non-thrust mobilization, thrust mobilization, neuromuscular re-education, and DIN.

Detailed Description: Through the exploration of a patient presenting with cervicogenic headache (CGH), participants will be instructed on the neurophysiological mechanisms of dry needling (DN) and its use within a multimodal approach to patient care. Participants will be instructed on the proposed evidence based mechanism of dry needling in regards to peripheral, segmental, and supraspinal effects of DN. In addition, participants will understand the difference between superficial, trigger point, segmental, periosteal, and connective tissue needling approaches that may be used within a comprehensive, clinically reasoned approach to patient care.

In addition, participants will be presented a postural pattern of dysfunction seen in patients with CGH as well as the diagnostic criteria and common clinical features of according to the IHS. Evidenced-based testing to rule in or out CGH will be presented, as well as an understanding on how to identify the specific segmental contributors to CGH (C0-1, C1-2, vs. C2-3) and frequency of involvement according to the research.

Lastly, participants will be instructed on a diverse treatment approach including non-thrust, thrust, and neuromuscular re-education techniques that may be used in the treatment of patients with CGH as well as when and how to incorporate the use of DIN.

Speaker Bios: Dr. Matthew Grubb has practiced in outpatient orthopedics for the past 6.5 years and currently is a clinical lecturer for the Doctor of Physical Therapy program at the University of Tennessee – Chattanooga. Dr. Grubb completed his DPT in 2011 from UTC and has received degrees in exercise science as well as human performance

and sports studies from the University of Tennessee – Knoxville. Dr. Grubb has also served as an associated instructional faculty member for the Doctor of Physical Therapy program at the University of South Carolina.

Dr. Grubb is a credentialed Fellow of the American Academy of Orthopaedic Manual Physical Therapists and currently serves as a mentor for fellows in training. Dr. Grubb also has previous professional experience in the fields of sports medicine and sports performance and is a Certified Athletic Trainer (ATC) with the National Athletic Trainer's Association, a Certified Strength and Conditioning Specialist (CSCS) from the National Strength and Conditioning Association, and holds a Level 2 Medical Certification through the Titleist Performance Institute.

Dr. Grubb has pursued an extensive post-graduate education in orthopedic manual therapy, manipulative technique, and dry needling. Dr. Grubb is listed as co-author of "[Peripheral and Spinal Mechanisms of Pain and Dry Needling Mediated Analgesia: A Clinical Resource Guide for Health Care Professionals](#)", published in the peer reviewed International Journal of Physical Medicine & Rehabilitation.

Dr. Rachel Grubb practices outpatient orthopedics in the Chattanooga, TN area. She received her Doctor of Physical Therapy degree from the University of Tennessee- Chattanooga in 2010 and is a credentialed Fellow of the American Academy of Orthopaedic Manual Physical Therapists.

Dr. Grubb has been very active in the Tennessee and South Carolina Chapters of the American Physical Therapy Association and has taught continuing education at participating district meetings to encourage professional advocacy. As a member of the Tennessee Dry Needling Task Force, she was part of a successful collaboration that passed legislation to legally allow dry needling to be included within the scope of practice for physical therapists. She has volunteered extensively in promotion of the physical therapy profession by serving in various leadership roles including her current position as TN board member and Practice Chair. She is also on Tennessee's legislative committee.

Dr. Grubb has completed extensive post-graduate education from a wide variety of influences in both manual therapy and dry needling. She has taken over 500 hours of dry needling training.