

Registration

Course Registration fee includes:

Extensive course booklet; reference list of evidence-based library materials sent electronically one month prior to the course; recommended supply list sent prior to course; evaluation tools available for practice; light morning and afternoon refreshments.

LINK TO REGISTER

<https://aptac.memberclicks.net/headstrong-course---april-25---26--2020#/>

You will be required to sign in. If you do not have a current APTA CO account you will need to create one.

Continuing Education Units

Physical Therapists: The course meets Colorado standards for 15 hours of Category I continuing competence activities (C.R.S. § 12-41-114.6)

Occupational Therapists: The course meets Colorado standards for 15 hours PDA (C.R.S. § 12-40.5-109.3, may use 12 hours)

Neuropsychologists: Required continuing professional development TBD by September 1, 2017.

Satisfactory Completion: participants will document attendance, complete a course evaluation, and complete the post-course assessment. No partial hours may be awarded.

Registration

APTA Member	\$525
APTA Student Member (3rd yr)	\$275
Non-APTA Member	\$625
Repeat Participant	\$275

3rd year Physical Therapy students are invited to apply to the course with written recommendation indicating a working knowledge of vestibular disorders.

Heather Campbell, PT, DPT, MA, OCS (e) has over 40 years of experience integrating musculoskeletal and neurologic recovery. Dr. Campbell has served on faculties of first professional and post-professional academic programs in physical therapy, medicine, and dentistry, as well as giving local, national and international professional continuing education seminars. She currently serves as affiliate faculty at Regis University. With a career emphasis in musculoskeletal spine care, she focuses on postural, visual and vestibular interdependence and how to influence central sensory processing for recovery after injury or neurologic disease. Her expertise in concussion management links cervicovestibular assessment to all other components in a multidisciplinary approach to care.

Nicole Miranda, PT, DPT specializes in complex neurological and vestibular rehabilitation as well as rehabilitation following lower extremity limb loss, working with all ages from pediatrics through geriatrics. Her current passions involve mentoring physical therapists to develop critical thinking skills necessary to evaluate and treat patients with expert and compassionate care. Dr. Miranda has participated in the development and presentation of a national concussion course available through the APTA Academy of Neurologic Physical Therapy and has presented at local education courses and workshops as well as international multidisciplinary conferences. She has been an affiliate faculty member and guest lecturer at Regis University since 2005, and joined the adjunct faculty of the DPT Program at South College (TN) in 2018.

Drs. Miranda and Campbell developed a comprehensive vestibular and neuromuscular rehabilitation department and program for the Marcus Institute for Brain Health, a multidisciplinary intensive assessment and treatment group that opened in January 2018 to serve veterans and retired athletes coping with post concussive disorders at the University of Colorado School of Medicine in Aurora, CO. They contributed substantively to the novel chapter on Concussion in Umphred's Neurologic Rehabilitation 7th Edition and co-authored the chapter on Headache in Goodman and Fuller's Pathology: Implications for the Physical Therapist 5th Edition. The Colorado Chapter of the APTA honored Dr. Campbell and Dr Miranda as 2019 *Physical Therapists of the Year* for their education in, advocacy for, and legislative action promoting physical therapists' role in diagnosis, management and determination of safe Return to Play decisions.

Sponsored by the Colorado Chapter of APTA.

Course Proceeds will support Colorado Physical Therapy legislative efforts related to concussion.

HEADSTRONG



DIFFERENTIAL DIAGNOSIS AND
MANAGEMENT OF CONCUSSION
RECOVERY

ADVANCED CLINICAL REASONING
FOR PHYSICAL THERAPISTS

Heather Campbell, PT, DPT, MA
Nicole Miranda, PT, DPT

APRIL 25-26, 2020

**GRAND RIVER HOSPITAL AND
MEDICAL CENTER
501 AIRPORT ROAD
RIFLE, CO 81650**



**Introduction to an
Innovative
Clinical Decision
Support Tool**

Course Objectives: Upon completion of the course, participants will be able to:

Describe the neural pathophysiology of mild traumatic brain injury and transition to post concussion disorders, considering personal risk factors, associated trauma, and comorbidities that can lead to prolonged recovery timeframes.

Effectively interview, objectively test, and develop a differential diagnosis leading to a customized novel treatment strategy based on patient goals and resources, best evidence, appropriate outcome measures, and critical analysis of all information gathered.

Consider categories of post concussive disorders when choosing functional inventories, objective tests and measures, and treatment dosing and order to achieve best outcomes.

Provide critical, evidence informed, guidance for return to play, return to learn, return to work, and return to deployment

Understand the roles of the multidisciplinary team, including alternative therapies and devices in facilitating recovery; understand the impact of altered cognition, arousal, sleep, and mood on response to rehabilitation and recovery.

Speak confidently on the leadership role Physical Therapists fill on the multidisciplinary team for patients with PCD.

You have choices - why take *THIS* course:

Physical Therapists are leaders in determining readiness for return to activity after mTBI. This advanced collaborative learning workshop helps ensure clinicians are prepared for that responsibility. We employ evidence-informed practical information necessary for differential diagnoses of acute and post concussive disorders (PCD) using the ICF Model to identify impairments that limit activities and life role participation. Interactive learning, practice of assessment and intervention skills, and case study exercises will equip participants to improve compassionate and effective interventions in their own practice settings and populations. Interfacing with community stakeholders, multidisciplinary health team, and legal implications are all discussed. Special attention will be focused on motion-provoked dizziness, visual motion hypersensitivity, postural maladaptations, and dysautonomia including POTS. Continued support and mentorship are available to participants through electronic means.

Who should take this course: Physical Therapists, Occupational Therapists, Neuropsychologists

Course Schedule

Timing may be adjusted according to the learning needs of the general audience

Day 1

- 8:00 - 8:30 Welcome, introductions and overview of the course
- 8:30-9:30 Evidence Based Highlights – Review of current evidence demonstrating the neurophysiology involved in concussion and mTBI.
- 9:40 – 10:45 Present ICF Model of Post Concussion Disorders. Identification of impairments of body structure and function, personal risk factors and comorbidities that affect recovery and the effects of activity limitations and participation restrictions.
- 11:00 – 12:00 Dizziness – Breaking down the term and performing an astute patient interview to drive the differential diagnosis based on patient symptoms. Using the ICF Model as a basis of conversation, determining how symptoms are categorized into impairments that limit activities and help drive a differential diagnosis.
- 1:00 - 5:00 PT Examination and Intervention – Interactive Lecture/Lab Sessions.
Performance and interpretation of PT examinations and development of interventions based on findings; prioritization of impairments with literature support and case examples for demonstration of principles.
- 1:00 - 2:20 Vestibular system - Includes postural control, gaze stabilization, balance reactions, strategy selection, sensation of motion, and positional vertigo
- 2:30 - 5:00 Visual system – Includes ocular alignment, oculomotor control, visual dependency and visual motion hypersensitivity.

Day 2

- 7:30 – 8:00 Optional Office hours, bring us your questions from Day 1
- 8:00 - 12:00 PT Examination and Intervention – Interactive Lecture/Lab Sessions.
Performance and interpretation of PT examinations and development of interventions based on findings; prioritization of impairments with literature support and case examples for demonstration of principles.
- 8:00 – 9:00 Somatosensory System - Includes cervicogenic headache and dizziness, reduced and hypersensitive somatosensation
- 9:15 – 11:00 Cervical Contributions related to Whiplash Associated Disorders
- 11:15 - 12:00 Central Sensory Processing - Sensory integration and effects on gait speed, multi-tasking and maladaptation patterns
- 1:00 – 1:30 Extra time for content not fully covered and questions
- 1:45 - 2:45 Exertion Training and Exercise Intolerance - Includes exertion training programs, Return to Play, Return to Learn, Return to work, Return to deployment. Participating in accommodation plans: 504, work restrictions, daily schedules, family education
- 3:00 - 4:00 Behavior, Cognition and Sleep – Alternative therapies, Apps and Devices
Questions? How to integrate knowledge into practice