

Registration

Course Registration fee includes:

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

LINK TO REGISTER

https://aptac.memberclicks.net/index.php?option=com_mcform&view=ngforms&id=29317#/

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

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Continuing Education Units

Physical Therapists: The course meets Colorado standards for 1.0 hours of Category I continuing competence activities (C.R.S. § 12-41-114.6)

Physical Therapists: The course meets Colorado standards for 16 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		Early Bird Before 10/10/17	10/11/17 through 11/05/17
APTA Member		\$399	\$475
APTA Student Member (3rd yr)		\$225	\$225
Non-APTA Member		\$475	\$525

3rd year Physical Therapy students are invited to apply to the course at a discounted rate, by providing written evidence of a vestibular background and preparation for the described advanced level of clinical reasoning.

Heather Campbell, PT, DPT, MA has 40 years of experience integrating musculoskeletal and neurologic recovery. Dr. Campbell has served on faculty of first professional and post professional academic programs in Physical Therapy, medicine and dentistry, as well as local, national and international professional continuing education seminars. She is currently affiliate faculty at Regis University. Her particular area of emphasis has long been spine related impairments, specifically cervical spine. For the past decade she has focused 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, oculomotor function, central sensory processing, and exertion tolerance to a multidisciplinary approach to care.

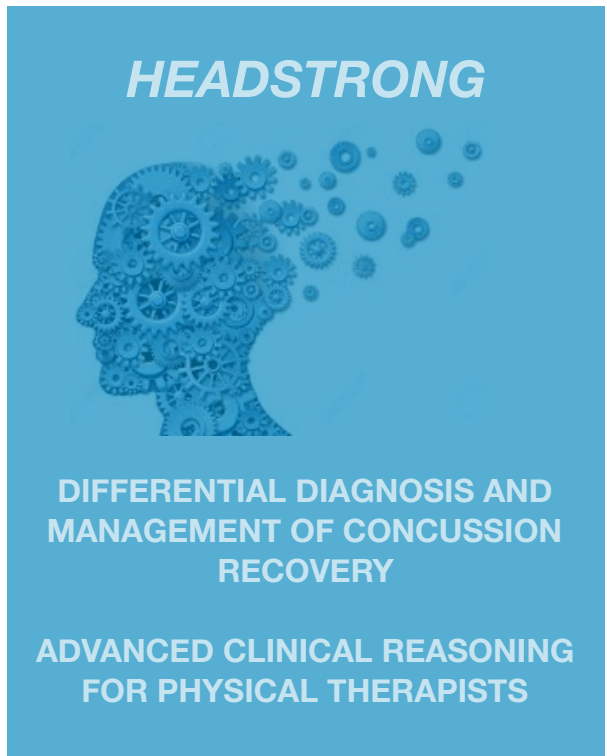
Nicole Miranda, PT, DPT specializes in complex neurological and vestibular rehabilitation as well as rehabilitation following lower extremity limb loss, and works with all ages from pediatrics through geriatrics. Her current passions involve mentoring physical therapists to develop critical thinking 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 Neurology Section of the APTA and has presented many local continuing education courses. She has been an affiliate faculty member and guest lecturer at Regis University since 2005.

Dr. Campbell and Dr. Miranda are developing a comprehensive vestibular and neuromuscular rehabilitation department and program for the Marcus Institute for Brain Health, a multidisciplinary intensive assessment and treatment group serving veterans and retired athletes coping with post concussive disorders at the University of Colorado School of Medicine in Denver.

Sponsored by the Colorado Chapter of APTA.

Course Proceeds will support the Colorado Physical Therapy Practice Act Sunset and legislative efforts to add specific language to include Physical Therapists as primary professionals in determining return to play after concussion.

Cancellation Policy: cancelled registration fees will be credited forward for future APTA programs.



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

November 11-12, 2017

Regis University
3333 Regis Blvd.
Denver, CO 80221

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:

In response to the APTA's efforts to name physical therapists as leaders in determining readiness for return to activity after TBI, this advanced level concussion course aims to help ensure that physical therapists are prepared for that responsibility. Physical Therapist provide unique skills within the multidisciplinary team, including recognition of whether PT or other interventions are more appropriate. We employ evidence-informed practical information necessary for differential diagnoses of acute and post concussive disorders (PCD). We use the ICF Model to identify impairments that limit activities and life roles. Pre-course reading will enhance preparation to maximize individual growth in clinical reasoning skills and reduce course time spent reviewing basic concepts. 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 population. 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.

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 - Breakfast

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