



## **APTA South Carolina 2024 Annual Conference**

March 22<sup>nd</sup> – 23<sup>rd</sup>, 2024

Midlands Technical College – Columbia, SC

### **Course Descriptions**

#### **Friday March 22<sup>nd</sup>, 2024 – 12:00 – 2:00 pm**

##### **Course Title: Reshaping the way you treat plagiocephaly, a well rounded approach**

**Speaker:** Amber Gadow PT, DPT, PCS, CPST and Lindsey Griffin, CO

**Description:** This course seeks to introduce the world of plagiocephaly to therapists not yet familiar with it and dive a little deeper into classifications of head shapes, how to visually assess a patient and different severity scales available. Presented by a Physical Therapist and Orthotist, you will learn all aspects of plagiocephaly treatment and how therapy and orthotic intervention, along with scanning technologies can assist you in your treatment and assessment of positional plagiocephaly. We will cover a multidisciplinary approach on how to work together to make sure you patients have a “well rounded” treatment approach.

##### **Course Title: An integrated Movement System Model for Older Adults**

**Speaker:** Kenneth Miller, PT, DPT, MA and Michelle M. Lusardi DPT, PhD, FAPTA

**Description:** Few theoretical models of physical therapy care have specifically considered the complexities of aging that influence movement efficacy and function. After a thorough literature review, the APTA Geriatrics Movement System Task Force concluded that the complexities experienced by older adults would be better managed with incorporation of the Geriatric 5Ms (multicomplexity, mobility, mentation, medications, and what matters most) into the examination and evaluation of older adults. In addition, the team identified essential functional tasks that should be included as part of movement analysis targeting ICF levels of activity and participation to best reflect older adults’ desire to be independent as long as possible. Observation of movement facilitates hypotheses about underlying contributors to movement dysfunction, informs further examination using tests and measures to confirm the hypotheses, and potentially codifies specific movement system diagnostic labels for interventions to maximize functional outcomes. This presentation outlines development of the model and provides examples of how it can direct clinical decision making.

## **Course Title: Common Orthopedic Impairments for Neurologic Populations**

**Speaker:** Gretchen Seif PT, DPT, OCS, FAAOMPT, Victoria Wilson, PT, DPT, NCS, and Sara Virella Kraft PT, DPT

**Description:** This course provides an overview of the principles of examination and treatment of common orthopedic shoulder conditions in patients with primary neurological diagnoses. Learners will practice examination, evaluation, clinical reasoning, and intervention orthopedic components of patients with neurological diseases and associated areas of the musculoskeletal system. Emphasis is placed on examination and interventions that affect movement and function. In these populations. Rehabilitation and therapeutic intervention techniques are practiced and integrated with case studies.

### **Friday March 22nd, 2024 – 2:30 – 3:30 pm**

## **Course Title: Do You Know What We're Doing? Applying Therapeutic Exercise Concepts**

**Speaker:** Curt Kindel PT, PhD, OCS

**Description:** After numerous discussions with PT clinicians, many state that they wish they could review basic conceptual ideas and apply it to the clinical experience that they have gained. This session is intended to do this. Concepts such as exercise specificity, length-tension relationship, and joint moments in relationship to center of gravity will be applied to exercise prescriptions and common interventions. How can exercises be manipulated to target certain musculature? How does joint position affect muscle activation? These and other questions will be addressed throughout this educational session.

## **Course Title: Implementing Keep Your Move In The Tube in the Acute Care Setting**

**Speaker:** Kristy Bennett, OTD, OTR/L, Margaret Toney, OTR/L, Keira Everatt, DPT, NCS

**Description:** This presentation will first dissect the up and coming Keep Your Move in the Tube protocol. Understanding this protocol is crucial to be able to understand the ease and setbacks of implementing this protocol within the acute care setting. In addition, we will dive into the clinical pathway that Lexington Medical Center has developed in order to standardize care to reduce length of stay, promote independence, and decrease admission to rehab following an acute care stay. This protocol allows for freedom of movement and allows for increased independence in mobility, ADLs, and IADLs. While this protocol seems basic to most rehab professionals, it can be challenging to implement this program to those that are used to traditional sternal precautions. The barriers include educating the physicians, educating the staff,

standardizing care, reducing miscommunication and education that is provided to patients, and eliminating "sternal precautions" from the staff's vocabulary. The development of a clinical pathway has been an area for Lexington Medical Center to determine the gaps in care, standard care following an open-heart surgery, and reduce length of stay for heart patients.

**Course Title: Chronic pain in stroke – We can't stop with function**

**Speaker:** Gretchen Seif PT, DPT, OCS, FAAOMPT, Victoria Wilson, PT, DPT, NCS, and Sara Virella Kraft PT, DPT

**Description:** Chronic pain is defined as pain that lasts longer than 3 months. 40-65% of patients with stroke have chronic pain. The pain they experience is typically classified as moderate to severe and most typically the pain is localized to the shoulder, and head and less frequently includes central poststroke pain. Chronic pain in this patient population can affect both function and quality of life which can lead to depression, anxiety, and other sequela. This session will utilize current pain neuroscience education and cases to provide an understanding of pain and its manifestation in the stroke population. We will use case studies to look at the hemiparetic shoulder specifically to determine the most effective evaluative tools to determine the causes of pain in this population. We will then look at best evidence in the pain sciences and orthopedic literature and determine how to best apply that evidence to this population. We will debunk the common perception that function is the only concern of the stroke patient and plan to emphasize the importance of the holistic approach to these patients.

**Friday March 22nd, 2024 – 2:30 – 4:30 pm**

**Course Title: Is your pediatric patient appropriate for functional electrical stimulation? You might be shocked!**

**Speaker:** Amber Gadow PT, DPT, PCS, CPST and Lindsay Griffin, CO

**Description:** This course seeks to introduce FES (specifically for the use of restoring dorsiflexor function in gait) to those who are not familiar with it, as well as bringing current users up to speed with what is available. We will discuss indications, how to determine what patients are appropriate and when is the best time to get started and also how to find funding. We will discuss the different types of FES available on the market, and tips on how to develop your own program.

## **Friday March 22nd, 2024 – 3:45 – 4:45 pm**

### **5x5 Presentations**

Bicondylar Tibial Plateau Fracture: Importance of Post-Operative Prognostic Education and Timely Physical Therapy Referral

**Presenter:** Chance Cauble

Ultrasound screening for patellar tendinopathy in college athletes: A quasi-experimental cohort study

**Presenters:** Matthew de Ruig, PT, DPT, DHSc, OCS, CMTPT & Vanessa Rettinger, Ph.D., ATC, NSCA-CPT

Self-Reported Health Status Provides Better Categorization of Fallers Than Functional Outcome Measures in Older Adults

**Presenter:** Garrett Hainline, PT, DPT

Co-authors (not presenting) Elizabeth Regan; Christine Pellegrini; Stacy Fritz

Intramuscular electrical stimulation to hip abductors for motor recruitment in chronic stroke

**Presenters:** Sara Coffey, PT, DPT, NCS and Victoria Harris, PT, DPT, NCS

Determining the Relationship between Patient-Reported and Objective Physical Function in Adults with Cancer

**Presenter:** Avery Maddox, SPT and John Scott, SPT

Co-authors (not presenting) Shana E Harrington PT, PhD, Ciaran Fairman PhD, Alex Brooks

Double Crush Syndrome: A Case Report

**Presenter:** Rachel Smith, , PT, DPT

Effect of pain perception on activity and participation in children with chronic, incurable pain. A systematic review

**Presenter:** Kylee Boggs, SPT and Janet Tankersley, PT, DPT, PhD, PCS

**Saturday March 23<sup>rd</sup>, 2024 – 8:00 – 9:00 am**

**Course Title: Inpatient Chronic Pediatric Pain: The RESET Approach**

**Speaker:** Ryan Maddrey, PT, DPT, TPS and Kristine Knowles, OTR/L, TPS

**Description:** Ryan and Kristine serve as the lead PT and OT for the Restorative Self-Management Training and Functional Rehabilitation of RESET program that serves an inpatient approach to chronic pediatric pain. This program involves a team of medical doctors, neuropsychologist, nursing, physical therapy, occupation therapy, recreational therapy, speech therapy, and many other adjunct therapies. This presentation is to discuss the day to day operations, research and effort that it takes to develop an inpatient program designed to minimize the healthcare needs after discharge of the pediatric population with chronic pain.

**Course Title: Developing a Specialty Outpatient Practice in a Generalist World**

**Speaker:** Andrew Imbeau, MBA and Nancy K. Imbeau, PT, DPT, OCS, MTC

**Description:** PTs often choose the profession of physical therapy for a specific reason. Oftentimes that reason is related to something they witnessed or experienced themselves at one time or another as a youth or young adult – an injury, a mobility problem, a chronic pain problem, a participation in life problem - that ignites a fire in them to pursue a career of serving and helping others with similar problems. Regardless of the reason, if most PTs go to graduate school because of that experience, there's often an underlying desire to specialize in an area that relates back to that specific experience. But in outpatient care in particular, PTs tend to be thrust into a career that is dictated by the patients who get put on their schedule. Depending on the amount of autonomy available to clinicians, especially early in their careers, a PT may not end up feeling fulfilled if they're unable to see at least some of the patient population subset that stokes their fiery passion for the field. This presentation will provide a real-life example of how one can develop or enhance a specialty practice inside of a generalist practitioner space, regardless of who a provider works for. Our focus will center around the idea that building on knowledge base and reputation, as well as community and relationships, can lead to greater support from employers in assisting with the continued development of a specialty practice area over time.

**Course Title: It's All in the Delivery: Competent and Compassionate Management of Musculoskeletal Concerns in the Pregnant Patient**

**Speaker:** Kristen Vick PT, DPT, WCS

**Description:** An estimated 50-70% of persons will experience musculoskeletal complaints while pregnant. While clinicians are trained to manage musculoskeletal complaints of their clients, they may not always feel comfortable screening the pregnant client and modifying

interventions to provide high quality care for this population. The purpose of this session is to provide an overview of the common musculoskeletal concerns that may lead a pregnant client to seek PT services. Through lecture and case-based presentation learners will receive a foundation in screening, differential diagnosis, and appropriate intervention including patient education presented by a pelvic health therapist.

While the interest in pelvic health and access to clinicians trained in advanced pelvic health treatment is increasing, patients often travel great distances to see a pelvic health clinician. When a person is pregnant, they are likely to experience musculoskeletal pain and may seek PT services from a nearby clinician. Pregnant persons benefit from competent, compassionate care to address the common musculoskeletal concerns that they may be experiencing.

### **Course Title: Student Track: Research, Residency, Outside the Box Panel Discussion.**

#### **Panelist:**

- Dr. Sara Kraft PT, DPT, NCS and Dr. Victoria Wilson PT, DPT, NCS (Benefits of Residencies)
- Dr. Sheri P. Silfies, PT, PhD (Research and Advanced Educational Options)
- Dr. Elliot Cleveland, PT, DPT (outside of the box PT careers)

This student focus panel discussion will feature representatives to speak on research and advance education options, residency benefits, and outside of the box PT careers.

### **Saturday March 23<sup>rd</sup>, 2024 – 11:30 – 12:30 pm**

#### **Course Title: Lisa Saladin Lecture Series**

**Speaker:** Barney Keitt, PTA, MHA

### **Saturday March 23<sup>rd</sup>, 2024 – 1:30 – 3:30 pm**

#### **Course Title: Neuro-Optometry: Vision and Mild Brain Injury**

**Speaker:** Katie Davis, OD, FCOVD

Description: Visual problems are often overlooked during initial treatment of a brain injury and a regular eye exam often does not reveal the extent that the visual process has been affected. This course will review the neurology of functional vision and how those skills can be affected by mild traumatic brain injury (mTBI). We will discuss neuro-optometric treatments for mTBI and review principles that can be applied in non-optometric treatment facilities.

## **Course Title: Mattresses & Pillow . . . How to Best Educate on Sleep Hygiene**

**Speaker:** Trudy Messer, PT, OCS, RYT-200, CKTP, CFMT

**Description:** Sleep is essential for healing the body and treating pain and inflammation of our systems. Sleep is the chief nourisher of life's feast! (Shakespeare) Current best practice for physical therapists requires practical knowledge and appropriate intervention skills related to the effect of sleep on health and recovery. The APTA House of Delegates adopted Sleep Health as part of the Physical Therapy Scope of Practice in 2015 and 202. As a physical therapist, do you feel your current knowledge and skills are sufficient to screen sleep disorders and promote sleep health? This course will prepare the clinician to better assess and categorize sleep disorders and effectively choose best-practice interventions.

## **Course Title: Direct Access: Panel Discussion**

**Description:** Join colleagues in a discussion about the state of Direct Access in SC. Learn how individuals are incorporating Direct Access into their practice.

## **Course Title: Student Track: Job application/Interview Tips panel (1:30 – 2:30)**

**Panelist: Representatives from a variety of clinical settings**

This student focus panel discussion will feature representatives who review applications and resumes and interview candidates for job openings on a regular basis. Panelist will provide tips and tricks to help you stand out during the job application process.

**Saturday March 23<sup>rd</sup>, 2024 – 2:45 – 4:45 pm**

### **Student Track: Mock House of Delegates**

Students will participate in a Mock House of Delegates. Students will learn how the APTA uses the House of Delegates to set forth motions and make decisions on issues for the association and the profession of physical therapy.

**Saturday March 23<sup>rd</sup>, 2024 – 4:00 – 5:00 pm**

## **Course Title: Pedals Possible: Advocating for adaptive cycling opportunities for children with disabilities**

**Speaker:** Julia Schroeder Brennan PT, DPT, PCS and Jessica Nicole (Nikki) Wade PT, DPT

**Description:** Pediatric physical therapists can use adaptive cycling as a treatment intervention to engage children with disabilities in moderate to vigorous physical activity. This intervention encourages participation with peers in the natural environment. Presenters will outline pediatric

populations and settings that are most appropriate for adaptive cycling interventions along with relevant protocols and procedures to implement. Presenters will then highlight "Pedals Possible" a project conducted in the spring and fall semesters of 2023 by Lancaster County School District (LCSD) in collaboration with community partners and the Medical University of South Carolina (MUSC) College of Health Professions. Details surrounding the execution of this program as well as preliminary findings will be discussed. Physical therapists from LCSD will be present to briefly speak to their personal experience as a part of this study, answer questions, and discuss the facilitators and barriers to beginning this program in their school district. LCSD PTs and the MUSC study coordinator will strategize with learners about applying adaptive cycling into their own clinical practice settings.

### **Course Title: Sustainable experiential learning in a variety of practice areas within the DPT curriculum**

**Speaker:** Gretchen Seif PT, DPT, OCS, FAAOMPT, Eric Monsch, PT, DPT, NCS, Ashley Bondurant, PT, DPT, M. Ed, and Sara Virella Kraft, PT, DPT

**Description:** While there are many different experiential learning methods, some commonalities exist among the components of each. Experiential learning can effectively replace a portion of in-class laboratory time in entry-level PT education programs. Several experiential learning methods are used in PT education, including simulation, integrated clinical experiences (ICE), service learning, community patient resource groups, and professional clinical education practice opportunities. Students benefit from practicing hands-on skills in a safe, nonjudgmental environment. Students can still experience the consequences of poor decisions but have multiple opportunities to master the skill without fearing negative outcomes. Experiential learning can be integrated into any PT curriculum if faculty are committed and flexible. Experiential learning may be beneficial in specialty practice areas with fewer student opportunities to practice skills. The practice of reflection upon experiences commonly performed in conjunction with experiential learning will help prepare students for the reflective practice essential to transition from novice to expert practitioner. This session will detail various settings including acute care, outpatient orthopedic, neurologic, and pediatric settings. These will also include the introduction of the experiential learning in the faculty-supported student-run pro-bono clinic.

### **Course Title: Adult Degenerative is NOT your teen scoliosis**

**Speaker:** Marissa Muccio, PT; Jennifer Warren, PT, DPT

**Description:** There is a recently described threefold increase in the prevalence and treatment of adult spinal deformity. With the aging population, this increase is expected to continue to rise. Understanding the degenerative anatomical, physiological, and 3-dimensional biomechanical factors in adult scoliosis can increase the specificity and timeliness of non-operative treatments. This session will summarize the current adult degenerative scoliosis physical therapy treatments; discuss the 3-dimensional specific strategies and provide learners with several take home strategies to integrate into their clinical practice when treating adults with degenerative scoliosis



## **Course Title: Implementing Telerehabilitation to Close the Gaps Across Physical Therapy Continuum**

**Speaker:** Marlon S. Libunao, PT, DPT, DHSc

**Description:** Advances in telerehabilitation in the management of total joint arthroplasty have been known to improve patients' adherence to an exercise regimen, aided in the promotion of increased frequency of exercise performance, and enhanced clinical outcomes. Implementing a physical therapist-led telehealth care navigation following arthroplasty in conjunction with home health services effectively monitored the patient remotely, avoided readmission, and allowed provisions for medication adjustments and wound checks. Telerehabilitation is a practical strategy and has shown to be as effective as traditional physical therapy following joint arthroplasty for patients with limited ability to attend face-to-face outpatient rehabilitation. Patients who underwent joint arthroplasty required inpatient rehabilitation, most often followed by home health physical therapy and outpatient rehabilitation. Gaps in therapy services between clinical settings could potentially hinder the patient's progress. The increased insurance coverage limitations, exorbitant costs, and complex insurance preauthorization requirements created delays in physical therapy evaluation and treatment, significantly hindering the patient's progress or prolonged functional recovery. The promotion of education, awareness, and review of evidence regarding the effective use of telerehabilitation must occur for a wider acceptance of telerehabilitation in South Carolina.