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PPROVED PROVIDER #

Certificates of attendance are provided upon successful completion of the course. This course is 15.0 contact hours/1.5 CEUs This course is 18.0 contact hours/1.8 ceus for NY, IL, or DC licensed therapists.

Geriatric Strengthening and Movement **Re-education** for Mobility



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PT, PTA, OT, ATC-continuing education course

		Day One			Day Iwo
7:30	8:00	Registration	8:00	9:00	Movement Analysis (cont.)
B:00	10:00	Geriatric Strengthening-			Overhead squat Test
		Evidence Based	0.00	0.45	Overhead squat test (Lab)
		 Weakness and loss of function 	9:00	9:45	Exercise Prescription
		 Strengthening research 			Remove or decrease the
		 Precautions and contraindications 			movement impairments
0:00	10:15	Break	9:45	10:15	Break
10:15	11:00	Benefits	10:15	11:00	Reprogram Muscle Firing/
		 Optimal exercise parameters 			Movement Patterns.
		 80% 1 RM determination (Lab) 			Corrective Exercise
		 Documentation 			Lengthen Facilitate and
11:00	12:00	Training Movement, Not			Integrate
		Muscles			- Inhibition techniques
		 Exercise equipment 			autogenic inhibition-GTO
		 Trunk extension 			- Sherrington's Law of Reciprocal
		progression (Lab)			Innervation
		- Chop/lift/push/pull			- Pelvis crossed syndrome
		 Overhead/underhand throw 			Inhibit tight muscles and
		- Balance			lengthen before strengthen
		 Stand to sit eccentric 			 Facilitate weak muscles
12:00	1:00	Lunch (On Your Own)			Integrate into function
1:00	1:45	Muscle Physiology and	11:00	11:15	Corrective Exercises (Lab)
		Anatomy review	11:15	12:00	
		 Muscle fiber types 			- Momentum strategy
		 Motor Unit recruitment patterns 			- Force-control strategy
		during exercise			- Transfers (Lab)
		 Proprioceptors 	12:00	12:45	Lunch (On Your Own)
		 Neuromuscular adaptations to 	12:45	1:15	Mobility Training (continued)
		exercise	1:15	1:45	Transfers-Setting Up The
1:45	3:00	Anatomy/Biomechanics of	1.45	2.00	Mobility - Gait Pictures
		LPHC	2:00	2:45	Gait
		 Agonist/Antagonist/reciprocal 			 Key components of normal
:00	3:15	Break			stance phase
3:15	4:45	Reciprocal Inhibition-			Key components of normal
		Synergistic Dominance			swing phase
		 Primemover substitution(Lab) 			Impaired motor control and weakness
		 Facilitation (Lab) 			Upright motor control tests (I ab
4:45	5:30	Functional Strength (LAB)			Key concepts of treatment
		 Functional strength 	2:45	3:15	Gait Ther. Ex. (Lecture/Lab)
5:30	6:00	Movement Analysis			Movement re-education of triple
		 Functional biomechanics 			extension, standing hip flexion
		example of lower chain			stretch/walk, mountain climbers
		kinetics in transfers	3.15	3.30	Summary
			3.13	3.30	HEP for geriatrics
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(Lab)

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About the Educator

John Wilson, PT, DPT, MA, CSCS, earned his Masters degree in Physical Therapy from Loma Linda University in 1998. He has been an exercise physiologist for the past 23 years, earning a Masters degree in Applied Exercise Physiology from San Diego State University in 1993. John completed his Post Professional Clinical Doctorate of Physical Therapy program at Western University of Health Sciences in 2005. Dr. Wilson also is a Certified Strength and Conditioning Specialist through the National Strength and Conditioning Association.

Early in his career John focused on outpatient orthopedics and performance training. He spent two years as a research assistant at The Kasch Exercise Physiology Laboratory conducting performance testing/training of professional athletes (including the NFL Chargers) and exercise prescription of seniors in a community wellness program. Though still active working with athletes, John's emphasis the past decade has focused on orthopedics and neurological movement disorders. Working with geriatrics in the LTC/SNF and outpatient setting has been rewarding. Having completed advanced coursework in neurological rehabilitation and gait, he noted immediate improvement in his orthopedic and sports medicine outcomes. John has been providing geriatric strength training, mobility and movement patterns courses nationally since 2004.

Dr. Wilson has brought his performance approach to the geriatric population. Utilizing dynamic movement analyses, progressive resistive strength training, manual therapy and prescribed corrective exercises in outpatient and skilled nursing settings. He utilizes outcomes research, evidence-based practice and professional experience to ensure efficient and effective outcomes for rehabilitation patients.

Why You Should Attend This Course

Geriatric Strength Training and Movement Re-education for Mobility is a two-day interactive seminar designed to enhance the ability of clinicians to treat older patients with various disease processes in improving mobility, including gait. The medical complexity of the typical geriatric patient can complicate the rehabilitation process. Regardless of diagnoses, a common deficit seen in all geriatric patients is weakness that can be linked to functional decline. Muscular weakness can be successfully treated with specific prescribed exercises. The participant will leave this course with progressive, safe, and a thorough understanding of evidence-based approaches to optimal functional strength building and mobility improvement for geriatrics.

Traditionally, rehabilitation has focused on isolating and training muscles using single planes of motion. Muscles and joints do not work in isolation. We know that functional activities like transfers and gait are triplanar and require acceleration, deceleration, and dynamic stabilization. This course will emphasize training movements, not muscles. Participants will develop an evaluation process and learn tests that allow assessment of kinetic chain movement patterns to detect quality of movement and neuromuscular efficiency. One such test, named the Overhead Squat Test, assesses the closed kinetic chain mobility and stability of patient's ankles, knees, hips, core, thorax and shoulders during a fundamental movement pattern. Mobility and gait also utilize basic fundamental movement patterns that will be assessed/corrected. Based on movement pattern findings and applying neuromuscular physiology, the participant will learn to inhibit and lengthen specific overactive muscles, facilitate under active muscles and prescribe corrective exercises utilizing evidence-based, optimal strength training parameters. Attendance at this course will immediately increase clinical skill in obtaining positive functional outcomes in an efficient manner in all settings of geriatric practice.

Course Objectives

Upon completion of this course, participants will be able to:

- Discuss evidence-based practice including the classic studies regarding geriatric strength training and how they relate to the population we treat.
- Identify and discuss optimal resistance training parameters such as progressive resistive exercises, intensity, frequency, sets, and repetitions.
- Correlate strength (underlying) impairment to functional deficits and converse with therapy team regarding functional strengthening as it relates to goal achievement.
- Describe the scientific and clinical rationale behind the development of an exercise program for the treatment of mobility in the geriatric population.
- Perform functional movement assessments such as the overhead squat test, mobility and gait to identify weaknesses in the kinetic chain.
- Prescribe corrective exercises to treat functional deficits in mobility.
- Properly utilize functional strength tests like bridging, SLR, Trendelenburg, and upright motor control test.
- Recognize how to utilize neuromuscular inhibition and facilitation techniques and how to sequence them in therapy prescriptions for maximum functional outcomes.
- Identify movement training principles and how to activate movement/motor patterns

