Spinning Beyond Basics
An Advanced Vestibular Rehabilitation Course

7:30 8:00 Registration
6:00 10:15 Introduction and Conceptual Framework
• Overview of dizziness statistics
• Review of key components of vestibular anatomy and physiology important to the understanding of clinical testing and treatment
10:15 10:30 Break
10:30 12:00 Understanding Diagnostics and Vestibular Pathology
• Critical findings and implications of key diagnostic tests
  - ENG, Rotary Chair, computerized dynamic posturography, VEMP
• Key clinical features of each of the common vestibular pathologies
12:00 1:00 Lunch (on your own)
1:00 2:15 Critical Clinical Examinations
• Review critical clinical or bedside vestibular revaluations skills (gaze, spontaneous/positional nystagmus, head thrust testing (beyond just horizontal), CT/MSB sensory testing, Frenzel lens examination, vestibular-specific gait test
• Optimizing your skills, techniques and interpretation of each of the clinical tests
• Reliability, validity and limitations of each specific test
2:15 3:45 Identifying and Treating Cervicogenic Dizziness (Lecture/Lab)
• Identifying key history/clinical findings
• Criteria for diagnosing cervical dizziness
• Neck torsion testing
• Vascular and ligamentous stability screening
• Cervicophusal Kinesiathesis re-education
• Key components to rehabilitation techniques
3:45 4:00 Break
4:00 6:00 Update on BPVV testing and treatment (Lecture)
• Most up to date treatment options for all types of BPVV
• Discussion on BPVV “superstitions”
• Determining when positional vertigo is not BPVV
• BPVV (Treatment Lab)
  - Labyranot/canalith reposition for all canals
  - Teaching and prescribing self canalith repositioning maneuvers
6:00 6:15 Question and Answers

Day Two
8:00 9:30 BPVV Lecture/Lab (continued)
• Analyzing eye movements
• Infrared Frenzel lens analysis of eye movements
• Integrating/applying clinical findings and complex clinical cases
9:30 9:45 Break
9:45 11:30 Identifying and Treating Fluctuating Vestibular Disorders
• Pathophysiology, clinical presentations and treatment strategies of migraine and migraine associated dizziness including conservative treatment for visual motion sensitivity
• Clinical presentation and treatment strategies of Menier’s disease
• Differentiating Menier’s versus migraine and the important role of therapy sequential clinical testing
• Clinical presentation of fistula, both endolymphatic and superior canal dehiscence
11:30 12:30 Lunch (on your own)
12:30 1:30 Managing Post-Surgical and Stable Vestibular Lesions (Lecture/Lab)
• Surgical options and clinical course of recovery of Acoustic Neuromas
• Post surgical consulting
• Headache incidence and management
• Application and progression of VOR adaptation exercise routine and vestibular balance/gait retraining protocols
• Introduction to fascial release
• Identifying and Treatment of Central Pathologies
  • MCT test findings
  • Brainstem
  • Central eye motion patterns
  • Balance strategies including facilitating motor recovery strategy
2:15 2:30 Break
2:30 2:45 Strategies for the “Rocking” Patient
• Understanding Mal de Deartharism (MDD)
• Incidence and pathophysiology of MDD
• MDD treatment options and case study application
2:45 3:30 Identifying and Treating Psychological Disorders
• Screening for anxiety and understanding panic attacks
• Incidence and prevalence of psych overlay
• Modifying treatment for anxiety
• Applying relaxation strategies
• Applying vestibular rehabilitation (habituation, adaptation, and balance retraining) to patient’s with psychogenic factors
3:30 3:45 Questions and Answers

Presented by Janene M. Holmberg, PT, DPT, NCS
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About the Educator

Janene M. Holmberg, PT, DPT, NCS received her BS degree in physical therapy from Nova Southeastern University in 1987 and Doctor of Physical Therapy in 2009. Her doctoral project analyzed treatment outcomes/strategies in patients with refractory to care or resistive forms of BPPV. She has vast clinical experience having seen thousands of “dizzy” patients over the past 20 years. She became an APTAs board certified Neurological Clinical Specialist in 1996, with Recertification obtained in 2006. She is currently the Coordinator of Balance Rehabilitation at the Intermountain Hearing and Balance Center in Salt Lake City, Utah. Dr Holmberg serves as auxiliary faculty at Drs Herdman and Condain’s annual Vestibular Compensatory Therapy course and the University of Utah physical therapy program, and is the facial rehabilitation specialist for the Facial Disorers Center of the University of Utah School of Medicine. Her initial clinical work included an emphasis in stroke and brain injury rehabilitation with completion of her certification in NDT (Neuro Development Technique) in 1990. She completed clinical competency in Biofeedback training in 1991. Since 1991, she has passionately special-
ized in Vestibular Rehabilitation with a sub specialty (since 1996) in Facial Rehabilitation. Dr Holmberg is a member of the APTA Neurology Section’s Vestibular Special Inter-
est Group, the Vestibular Association of Utah, and the Acoustic Neurona Society. She has lectured nationally with many clinicians drawn to her many years of vestibular and balance rehabilitation, including numerous national conferences/ conventions. Since 1998, she has taught many courses in Vestibular Rehabilitation both introductory and advanced as well as courses in falls interventions in the elderly. Dr. Holmberg was the key note speaker in the Utah Chapter APTA annual conference and in 2000 and was awarded Physical Therapist of the Year by the Utah Chapter APTA in 2001. In 2009, she was selected from applicants around the country to form a national core group of vestibular therapists to discuss and develop advanced vestibular re-
habilitation concepts for the APTA neurology section. She was guest lecturer at the APTA’s 2011 Combined Sec-
tions Meeting for the Vestibular Special Interest Group. Dr. Holmberg is currently collecting clinical outcome data on the effectiveness of vestibular and facial rehabilitation. Her current clinical practice consists of a broad scope of vestibular and neurological patients for which she draws on her extensive experience to help clinicians learn how to manage the complexities of the dizzy and unsteady patient.

Why You Should Attend This Course

This two-day advanced course is designed for physical or occupational therapists, who have prior experience in vestibular rehabilitation and are seeking to refine their clinical evaluation and treatment skills beyond the basics. Therapists who are comfortable with their fundamental skills will find this course helpful at adding more treatment options to successfully treat the complex dizzy patient. Patient diagnoses discussed will include cervical dizziness, atypical BPPV, psychogenic, chronic subjective dizziness, migraine, acoustic neuroma, superior canal dehiscence, and Mal de Debarquement. Focus will be placed on case study applications with careful analysis of history, face, neuro-contents and classification of dysfunctions to al-
low optimal customized treatment protocols. Clinical skills to be taught will include fistula screening, cervicogenic screening, BPPV treatments beyond the posterior canal (anterior/ horizontal canals), acoustic neuroma management including exposure to facial rehabilitation techniques, migraine screening and treatments, and identification/management/psychological factors. All testing and treatment protocols presented will be evidence-based and clinically relevant to more effectively manage the dizzy patient. Lectures will intersperse the refining of clinical testing protocols with specific treatment strategies for a wide range of diagnoses. Instruction will be provided via lecture, videotapes, lab breakouts, detailed demonstrations and case studies. Each participant will receive a comprehensive manual giving details of all recommended testing and treatment protocols.

Course Objectives

Upon completion of this course participants will be able to:
• Identify signs and symptoms that differentiate the diagnostic groups of BPPV, cervical dysfunction, psychogenic, Meniere’s disease and migraine.
• Perform appropriate examination procedures to distinguish between the diagnostic groups of BPPV, cervical, psychogenic, Meniere’s disease and migraine.
• Design customized exercise protocols for each of the diagnostic groups of BPPV, cervical, psychogenic, Meniere’s disease and migraine.
• Identify psychological problems that can affect the management of vestibular problems and learn how to modify treatment interventions, plans and goals.
• Recognize the role of Migraine as both primary (causing of distinct vertiginous episodes) and secondary (traditional migraines leading to more persistent motion, intolerance) contributor to dizziness and it’s impact on rehabilitation.
• Develop an understanding of the important role of both the medical and rehabilitative aspects managing dizziness and when to refer to another provider.
• Identify a multitude of balance facilitation techniques both for motoric and sensory balance deficits with the dizzy patient.
• Develop skills related to the “fine art” of vestibular rehabilitation which is the accurate interpretation of eye motion as it relates to the patient’s clinical presentation.
• Develop improved management skills for patients with stable vestibular deficits such as status post acoustic neuroma surgery including an introduction to facial rehabilitation, expected outcomes, and treatment progressions.
• Identify the clinical presentation and learn clinical management of patients with superior canal dehiscence (fistula) and current management.
• Recognize the clinical presentation of patients with Mal de Debarquement, current theories of pathophysiology and current recommended management strategies.

Vestibular Rehabilitation Examination & Treatment DVD

• An advanced educational program featuring examination and treatment techniques associated with vestibular rehabilitation.
• Step-by-step discussion of twenty-eight vestibular examination techniques.
• Twenty-three treatment techniques, including BPPV and Ocular-Neural techniques are detailed with expert narration.
• Expert Narration by Barry Morgan, PT.

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