

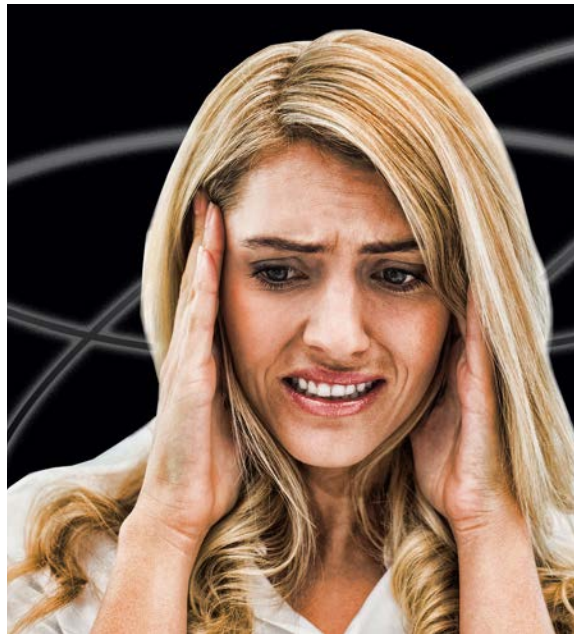
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This course is 15.0 contact hours/15 ccu's/ 1.5 ceu's for therapists licensed on other states
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This course is 18.0 contact hours/1.8 CEU's, for therapists licensed in NY, IL or DC.

Restoring Synergy: Management of Complex Vestibular Dysfunction

Solutions for when challenging symptoms and complications make recovery challenging



An Evidenced-Based Course
 Presented by
Laura Morris, PT, NCS

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Day One

7:30	8:00	Registration
8:00	9:00	Physiologic Basis for Effective Vestibular Rehabilitation <ul style="list-style-type: none"> Review of key components of vestibular anatomy and physiology important to effective diagnosis and management Relationship between anatomical feature, clinical testing and pathology
9:00	10:00	Critical Clinical Examinations (lecture/lab) <ul style="list-style-type: none"> Review critical clinical vestibular evaluation skills, including oculomotor and visuo-vestibular exam Optimizing your skills, techniques and interpretation of each of the clinical tests Clinical implications and limitations of testing Modifications of exam for practice settings (acute, outpatient, home health)
10:00	10:15	Break
10:15	11:00	Critical Clinical Examinations (lecture/lab) continued
11:00	12:00	Understanding Diagnostics and Vestibular Pathology <ul style="list-style-type: none"> Critical findings and implications of key diagnostic tests VNG, Rotational Chair Test, Computerized Dynamic Posturography, VEMP Key clinical features of each of the common vestibular pathologies
12:00	1:00	Lunch (on your own)
1:00	1:30	Understanding Diagnostics and Vestibular Pathology (continued) <ul style="list-style-type: none"> Small group discussion- implications of sample clinical exam/case studies
1:30	3:00	Cervicogenic Contributions to Dizziness (Lecture/Lab) <ul style="list-style-type: none"> Differential diagnosis Identification of key impairments and their implications for management Intervention for cervical proprioception sense and kinesthetic control Progression of cervical interventions
3:00	3:15	Break
3:15	5:15	Update on BPPV Testing and Intervention (Lecture) <ul style="list-style-type: none"> Current intervention options for all types of BPPV <ul style="list-style-type: none"> BPPV pearls and pitfalls Determining when positional vertigo is not BPPV <ul style="list-style-type: none"> Case examples BPPV (Intervention Lab) <ul style="list-style-type: none"> Liberatory/canalith repositioning-all canals Canalithiasis and cupulolithiasis Teaching and prescribing self canalith repositioning maneuvers
5:15	5:30	Question and Answers

Day Two

8:00	9:00	Abnormal Eye movements <ul style="list-style-type: none"> Identification of abnormal eye movements, clinical significance Integrating/applying clinical findings
9:00	10:30	Vestibular intervention- Theory and Practice (lecture/lab) <ul style="list-style-type: none"> Application and progression of gaze stabilization, visuo-vestibular training Postural control, sensory organization training Habituation for motion sensitivity and visual motion intolerance Case examples- small group discussion and presentation
10:30	10:45	Break
10:45	12:00	Management of Challenging Vestibular Disorders <ul style="list-style-type: none"> Pathophysiology, clinical presentation and intervention strategies for Vestibular Migraine Clinical presentation and intervention strategies for Meniere's disease Differentiating Meniere's Disease vs. migraine and management implications
12:00	1:00	Lunch (on your own)
1:00	1:30	Management of Challenging Vestibular Disorders (continued) <ul style="list-style-type: none"> Clinical presentation of fistula (endolymphatic and superior canal dehiscence) Surgical options and clinical course of recovery of Acoustic schwannoma Introduction to the management of facial nerve dysfunction
1:30	2:30	Persistent Postural Perceptual Dizziness (PPPD), psychological Disorders <ul style="list-style-type: none"> Differential diagnosis of PPPD Communication strategies regarding diagnosis and management of PPPD Anxiety and dizziness Intervention strategies Case example
2:30	2:45	Break
2:45	4:00	Clinical Decision Making: Case Examples <ul style="list-style-type: none"> Co-morbidities, complications Documentation challenges- description of eye movements, goal development
4:00	4:30	Questions, wrap up

About the Educator

Laura Morris, PT, NCS is a physical therapist and lecturer with over 25 years of experience in the management of adults with neurologic disorders. Her clinical work focuses on vestibular disorders and mild traumatic brain injury at Elmhurst Memorial Hospital in the Chicago area. She is the Director of Communications for the Academy of Neurologic PT of the APTA. She teaches continuing education in concussion and vestibular rehabilitation both nationally and internationally. Her experience includes inpatient and outpatient care, clinical research and program development, including the launch of the fourth credentialed Neurologic PT Residency Program in Pittsburgh. Clinical practice also included vestibular and concussion rehabilitation in Pittsburgh, Pennsylvania, the Mild Brain Injury Program in Baltimore, Maryland and neurologic private practice in Alexandria, Virginia. She was re-credentialed for her Neurologic Clinical Specialist in 2013. She has been involved in the Academy of Neurologic PT and the Vestibular special interest group, primarily in positions involving website support. In 2005 she received the Award for Clinical Excellence in Neurology by the Neurology Section of the APTA, and in 2015 received the Service Award from the Vestibular Special Interest Group. Her contributions to the literature include book chapters and journal articles in the area of vestibular disorders and mild brain injury rehabilitation.

Why You Should Attend This Course

This two-day advanced course is designed for physical therapists and 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 cervicogenic dizziness, atypical BPPV, Persistent Postural-Perceptual Dizziness (PPPD), Vestibular migraine, Acoustic schwannoma, superior canal dehiscence and concussion. Focus will be placed on case study applications with careful analysis of history, diagnostic clinical findings and classification of dysfunctions to allow 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 of PPPD. 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 intervention strategies for a wide range of diagnoses. Instruction will be provided via lecture, video, lab, detailed demonstrations, small group discussion and case studies. Each participant will receive a comprehensive manual that will include sample documentation.

Course Objectives

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

- Perform canalith repositioning maneuvers to treat canalithiasis and cupulolithiasis for all semicircular canals.
- Recognize positional vertigo that has central etiology.
- 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 its impact on rehabilitation.
- Identify appropriate patients for rehabilitation and appropriate referrals to other medical practitioners.
- Perform a comprehensive oculomotor exam and interpret findings for clinical management of vestibular dysfunction.
- Develop improved management skills for patients with stable peripheral vestibular hypofunction including basic facial rehabilitation, expected outcomes, and treatment progressions.
- Identify the clinical presentation of patients with superior canal dehiscence (fistula) and current management strategies.

Restoring Synergy: Management of Complex Vestibular Dysfunction

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Location of attendance

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