

Outline

ASSESSMENT TECHNIQUES FOR DIFFERENTIAL DIAGNOSIS

- Position modifications for patients with mobility limitations or in environments with limited space such as home health or acute care
- Clinical decision-making large group activity to apply assessment techniques and interpret findings
- Recognize assessment findings that indicate central, peripheral, and cervicogenic dizziness diagnoses
- Determine a therapy diagnosis based on patient history, onset, symptoms and assessment

MEDICAL DIAGNOSES AND PROGNOSIS: PERIPHERAL & CENTRAL ORIGIN

- Benign Paroxysmal Positional Vertigo
- Vestibular neuronitis, labyrinthitis
- Meniere's disease, endolymphatic hydrops, acoustic neuroma
- Central vertigo: CVA, multiple sclerosis, migraine-associated
- Cervicogenic vertigo
- Post-concussion syndrome
- Sensory integration/Multi-factorial balance dysfunction

EXAM LAB

- Clearing cervical spine: mVAT, Sharp-Purser test
- Oculomotor exam: Smooth pursuit, Saccades, Vergence and visual acuity
- Vestibular exam: Head thrust, Head-Shaking Nystagmus, Hallpike-Dix, Roll Test
- Assessing nystagmus: Horizontal, vertical, torsional
- Motion sensitivity quotient
- Balance assessment: mCTSIB, Dynamic Gait Index, Gait

VESTIBULAR REHABILITATION: DEVELOPING A PATIENT-SPECIFIC TREATMENT PLAN

- Canalith repositioning maneuvers: Epley maneuver, BBQ roll / quick BBQ roll, Cassani, Appiani, Brandt-Daroff Exercises
- Gaze stabilization: Basic and advancements
- Balance progression
- Sensory integration in balance
- Evidence-based Functional Assessment Tools
- Vestibular EDGE recommendations from the Academy of Neurologic Physical Therapy
- Direct each of the 4 areas of treatment for vestibular rehabilitation

Questions? Call customer service at 800-844-8260

Who Should Attend

- Physical Therapists
- Physical Therapist Assistants
- Occupational Therapists
- Occupational Therapy Assistants
- Audiologists
- Athletic Trainers
- Physicians
- Nurses
- Nurse Practitioners

What to Bring

- Portable treatment table, if available
- Yoga Mat

Live Seminar Schedule

7:30 Registration/Morning Coffee & Tea

8:00 Program begins

11:50-1:00 Lunch (*on your own*)

4:00 Program ends

There will be two 15-min breaks (mid-morning & mid-afternoon). Actual lunch and break start times are at the discretion of the speaker. A more detailed schedule is available upon request.



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The Hands-On Guide to Vestibular Rehabilitation

Clinical Decision-Making to Treat
Vertigo, Dizziness & Balance Disorders

Dedham, MA
Monday
September 9, 2019

Wakefield, MA
Tuesday
September 10, 2019

REGISTER NOW: pesirehab.com/express/72363



The Hands-On Guide to Vestibular Rehabilitation

Clinical Decision-Making to Treat
Vertigo, Dizziness & Balance Disorders

- Directed hands-on practice for BPPV assessment and canalith repositioning maneuvers
- Step-by-step instruction for a thorough vestibular evaluation to promote successful clinical decision-making
- The key components of a successful vestibular rehabilitation program – in 4 steps!
- New strategies to differentiate central vertigo, peripheral vertigo, and cervicogenic dizziness
- Clinical pearls for problem-solving the challenging patient
- Take home bonus materials...Useful clinical decision-making diagrams

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A NON-PROFIT ORGANIZATION CONNECTING KNOWLEDGE WITH NEED SINCE 1979

End Years of Vertigo in as Little as One Session

Colleen Sleik PT, DPT, OCS, NCS, began her journey into the specialized care of vestibular rehabilitation patients after evaluating a patient that she felt ill equipped to help. She needed to know more. Recognizing and treating BPPV itself is quite straightforward. However, the care becomes much more complex for patients that are experiencing something that was initially thought to be BPPV or for those who have multiple conditions impacting their overall presentation. Advanced learning is required to understand how the systems function as a whole. This course was developed with these challenging patients in mind.

The course begins with assessment and treatment techniques for BPPV, including a lab component to practice technique, hand positioning, and patient-specific modifications. You will become skilled to better recognize BPPV and subsequently recognize the presentations that do not fit the BPPV pattern. Further assessment and treatment of the non-BPPV diagnoses will also be addressed through functional assessments and treatment progressions.

Participants of this course will walk out with a deeper understanding of assessment, treatment techniques, patient-specific modifications, and differential diagnosis skills for the dizzy patient. Take your skills to a new level when you can pinpoint the areas where therapy can intervene to promote the desired functional gains for patients and the strategies to appropriately progress patients through each of those areas.

Speaker



COLLEEN SLEIK PT, DPT, OCS, NCS, is a licensed physical therapist, specializing in the treatment of patients with vestibular disorders when other forms of medical management have failed. Dr. Sleik founded a private practice in 2010 with the primary focus of treating patients with vestibular conditions. She continues to work as a specialist at Dickenson Rehab Services where more than 90% of her caseload consists of patients with vestibular and balance disorders.

Dr. Sleik graduated from The College of St. Catherine with a Master’s in Physical Therapy. She earned a transitional Doctor of Physical Therapy degree through The University of St. Augustine, Florida, and completed the Competency-Based


Vestibular Rehabilitation course through Emory University in Atlanta, Georgia. In addition to board-certification as an Orthopaedic Clinical Specialist and Neurologic Clinical Specialist, Dr. Sleik is a member of the American Physical Therapy Association, including the Academy of Neurologic Physical Therapists, and the Vestibular Special Interest Group. She began teaching continuing education courses in vestibular rehabilitation with the purpose of improving clinicians’ knowledge in the specialty of vestibular rehabilitation and ultimately improving the quality of patient care. Dr. Sleik’s goal as a clinician is to provide her patients with the best care available for return to daily function with minimal limitations, while also providing the tools for long-term self-management of symptoms.

Speaker Disclosures:

Financial: Colleen Sleik has an employment relationship with Dickinson County Health Care System; and Aegis Therapies, Golden Living Center. She receives a speaking honorarium from PESI, Inc.
Non-financial: Colleen Sleik is a member of the American Physical Therapy Association.

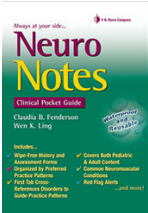
Objectives

- Perform assessment techniques for vestibular patients with proper technique and appropriate patient-specific modifications.
- Analyze findings of a vestibular assessment to determine a therapy diagnosis.
- Recognize key subjective reports to further enhance evaluation and differential diagnosis skills.
- Evaluate findings that assist in differentiation of central, peripheral and cervicogenic dizziness.
- Formulate a plan of care based on findings from assessments to improve functional outcomes.
- Select proper treatment techniques from evidence-based guidelines for vestibular rehabilitation.
- Evaluate prognosis based on accurate diagnostic procedures.
- Develop appropriate goals for patients considering complete medical history and presenting factors that may modify rehab outcomes.



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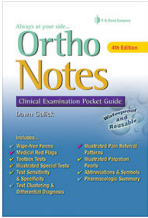


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