

The following represents the typical course structure for the 3-day “I SURVIVED, NOW WHAT?” course: 20.5 contact hours.

Mary uses evidence and solid clinical reasoning in every presentation to demonstrate how easy it is for therapists to integrate the cardiopulmonary system into patients' treatment programs. Her newest course is the 3-day musculoskeletal course:

I SURVIVED, NOW WHAT?

TREATING THE MUSCULOSKELETAL CONSEQUENCES OF MATURING WITH A CHRONIC PEDIATRIC HEALTH CONDITION

Instructor: Mary Massery, PT, DPT, DSc

COURSE DESCRIPTION

Children with complex medical problems are surviving to adulthood. Unfortunately, many reach adulthood with adverse musculoskeletal consequences of survival such as spinal deformities (thoracic kyphosis, scoliosis, tightness), rib cage restrictions (pectus deformities, rib flares, asymmetry, tightness), which in turn, limits shoulder, trunk, and hip/pelvis mobility. Repetitive stresses due to atypical movements/compensations predispose these children to the development of chronic pain conditions. This 3-day course will look specifically at why these limitations tend to occur and what can be done to minimize their development. The goal is to improve therapists' knowledge and confidence in using musculoskeletal techniques that affect both quality, and potentially quantity of life. Participants will spend most of the course in lab. The focus will be on the rib cage, trunk, and spine. The target audience is pediatric PTs and OTs. Adult therapists are encouraged to attend as well as they will be treating this population as adults. Other disciplines are invited to attend as they see the need.

DAY-1 Topics (7.5 Contact Hours)

<u>Lecture:</u> Adverse postural development related to maturing around a chronic childhood health condition
<u>Lecture & lab:</u> I don't have a clue how to evaluate breathing...Well, now you will! Part 1: Ribs and sternal support of posture and respiration
<u>Lecture & lab:</u> Part 2: Core muscles: Assessing mid trunk control: intercostals, abdominals & diaphragm
<u>Lab:</u> Part 3: Assessing breathing patterns. Posture. Relationships.
<u>Lab:</u> Screening functional trunk mobility in stance (ribs, spine, shoulders, fascia)

DAY-2 Topics (7.5 Contact Hours)

<u>Lab:</u> Lateral trunk assessment: Rib cage, quadratus lumborum, shoulders (side-lying)
<u>Lecture & lab:</u> Therapeutic exercises: Increasing trunk mobility
<u>Lab:</u> Trunk soft tissue techniques: quadratus lumborum, intercostals, others
<u>Lecture:</u> Case study “Trent:” restricted rib cage and integument. Cause and consequence
<u>Lab:</u> Rib mobilization techniques
<u>Demonstration:</u> Patient demonstration (if available)

DAY-3 Topics (5.5 Contact Hours)

<u>Lecture</u> : Thoracic spine and fascia
<u>Lab</u> : Spine treatment techniques: Mobs, releases, stretches, soft tissue releases, neuromotor retraining, and home exercise programs
<u>Lab</u> : Dynamic postural control: Neuromotor re-education exercises incorporating newfound mobility into dynamic core stabilization strategies
<u>Lecture</u> : Case study “Kristy:” putting it all together for adults with long term deficits from childhood diseases/traumas
<u>Discussion</u> : Planning ahead to avoid/minimize musculoskeletal consequences in your practice setting

COURSE OBJECTIVES

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

1. Screen for musculoskeletal abnormalities, inadequate core stabilization strategies and compensatory breathing patterns that may contribute to the abnormal development of the rib cage, trunk, and/or spine across the lifespan secondary to pediatric chronic health conditions and/or survival of prematurity.
2. Develop and demonstrate musculoskeletal mobilization and soft tissue techniques to correct or minimize these deformities with a focus on the rib cage and spine.
3. Develop subsequent treatment plans for neuromuscular retraining that is focused on simultaneously optimizing breathing, core stabilization and postural development across the lifespan in order to minimize long term postural impairments that develop secondary to these chronic conditions.