APTA Massachusetts Annual Conference

November 16, 2024

IGNITE YOUR PASSION: FUELING EXCELLENCE IN PHYSICAL THERAPY

APTA Massachusetts
A Chapter of the American Physical Therapy Association

Conference Day - Need to Know!

Continuing Competency Points

For each educational session attended, the attendee will receive approved contact hours for that session.
The attendee may receive up to 5 competency points (contact hours) if they attend the entire day.
Instructions will be given during the day on how to complete a form to obtain a certificate of completion.

Ethics course: All registered members will receive free, virtual access to the ethics course following conference. Non members attendees can purchase this course for $30 and will receive access to the course following the conference.

This course will meet the continuing competency Ethic requirement for MA and is 2 sections for 2 hours credit.

Access will be provided following the conference.

Schedule

Keynote Presentation | 8:00 am

Dr. Adam Rodman

Session 1 | 9:00 - 10:30 am

ChatGPT Meets PT: Tech-Driven Transformation in Physical Therapy
Naseem Chatiwala, PT, DPT, MS, NCS and Durriya Doctor, M.S. Computer Engineering
Foundational Framework for Return to Sport: The Knee
Kyle Mahoney, PT, DPT;Brendan Gates, PT, DPT
Implementation of An Interdisciplinary Pathway for Early Diagnosis of Medically-Complex Infants at Risk for Cerebral Palsy
Erin Donnelly, PT, DPT, LAT, ATC; Darya Merkin, PT, DPT
Integrative Manual Therapy and Beyond Approach to Relax, Release, and Relief - An Integrated Systems Approach For De-facilitation of the Sympathetic Nervous System
Thomas A. Giammatteo, DC, PT, Ph.D., IMTC
Navigating the Clinical Gray Zones: Mentoring for Clinical Reasoning
Jessica Rydingsward, PT, DPT; Rebecca Pham, PT, DPT
The ABCs of MCS: Creating a Mobility Program for Patients on Mechanical Circulatory Support
Kathryn Sople Claire Hart, PT, DPT; Heather Philben, PT, DPT
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Session 2 | 10:40 - 11:40 am

Are you ready to LEARN?: A model for providing care to diverse patient populations
Winston Kennedy, PT, DPT, MPH, PhD; Abigail Lue PT, DPT
Coming Out with Affirmative LGBTQIA+ Physical Therapy Practice Guidelines
Olivia G. Miller, PT, DPT; Joseph Tatta, PT, DPT; other authors: Robert Phillips, PT, DPT, PhD; Lee Ryder, PT, DPT; Aviel Haberman, SPT; Mel Kakimi, SPT
Introduction to Advanced Strain and Counterstrain for the Autonomic Nervous System - An Integrated Systems Approach from Integrative Manual Therapy (IMT)
Thomas A. Giammatteo, DC, PT, Ph.D., IMTC
Physical Therapy as a Catalyst to Address Health Disparities Experienced by Adults with Cerebral Palsy
Mary Gannotti, PT, PhD
Technology enabled healthcare: Improved digital literacy leads to better health equity and quality of life
Aimee E Perron PT, DPT, NCS, CEEAA; Laura Caron Parker OTR/L
The Hips Still Don't Lie: Current Trends in the Care of Athletic Hip and Groin Pain.
Stephen B. Clark, PT, DPT, SCS, MS, ATC, CSCS; Luke Brisbin, PT, DPT, OCS
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Exhibits / Posters | 11:45 am

Lunch / Awards | 12:45 am

Exhibits / Posters | 2:00 am

Session 3 | 2:45 - 3:45 pm

Optimizing Patient Care: How AI Is Transforming Physical Therapy
Neeraj Baheti, PT, DPT, SCS, OCS; Chaitali Ahya, PT, DPT
Perceptions of individuals with disabilities regarding therapeutic alliance with physical therapists: lessons learned from focus group discussions
Amanda Rose Michel, s/PT; Libby Taylor, s/PT; Stacey Maguire, PT. DPT PhD; Winston Kennedy PT, DPT, MPH, PhD; Lauren Kenney, s/PT; Miki Shibuya, s/PT
Putting the Hip in Patellofemoral Pain: Problems with Muscle Activation and Kinematics in Exercise
David M. Selkowitz, PT, PhD, DPT, OCS
Reclaiming Fat: Unpacking and Dismantling Anti-Fatness in Healthcare
Rebecca Pham, PT, DPT, CCS; Katie Taglieri-Noble, PT, DPT, NCS; Stacey Maguire PT, DPT, PhD; Jessica Rydingsward, PT, DPT, CCS, GCS
Somatic Approaches to Chronic Pain: A Trauma-Informed Physical Therapy
Melissa Jean Jarzynski, MSPT, HPCS
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Session 4 | 4:00 - 5:00 pm

Clinical Efficiency: Improving Outcomes and Reducing Burnout through Efficient Practice Patterns
Kevin McEnroy PT, DPT, SCS
Clinical Efficiency: Improving Outcomes and Reducing Burnout through Efficient Practice Patterns
Kevin McEnroy PT, DPT, SCS
Dual-Task Approaches in Physical Therapy: Assessment and Intervention Techniques
Megan Frazier, PT, DPT, MFA, PCS; Tara Maroney, PT, DPT, GCS
Electrical Stimulation for Strengthening: What's the Evidence & Best Practice
David M. Selkowitz, PT, PhD, DPT, OCS
Equine Movement in Physical Therapy: Enhancing Motor Function through Hippotherapy
Melissa Jean Jarzynski, MSPT, HPCS
Integrating Lifestyle Medicine Principles into Outpatient Orthopedic Practice
David Pavao, PT, DPT, OCS, Michelle Fuleky, PT, DPT, OCS, Mara Hochman, PT, DPT, OCS Cam Marcotte, PT, DPT, NCS, OCS
Is it Harassment or the Disease Process?
Rebecca Slocum, PT, DPT, RAC-CTA, CDP; Jennifer Rucci, MA, CCC-SLP
Nutrition Screening and Counseling in Physical Therapy
Lee Marinko, PT, ScD, OCS, FAAOMPT; Carly Golden, SPT; Kelsey Stromberg, SPT
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Course Descriptions

9:00 - 10:30am **Room 101**	**ChatGPT Meets PT: Tech-Driven Transformation in Physical Therapy**

Areas of practice: Innovative Technologies

This workshop will explore the diverse landscape of Generative Artificial Intelligence (Gen AI) and its integration into physical therapy practice. With the capabilities of Generative AI tools (ChatGPT being one of them) increasing and evolving rapidly, this seminar aims to equip physical therapists with the knowledge and skills necessary to leverage Generative AI technologies for enhanced patient care, streamlined operations, and improved marketing strategies.

Participants will get an overview of the multifaceted realm of AI, including machine learning, natural language processing (NLP), Generative AI and computer vision, to understand its potential applications in healthcare. From deciphering human language to automating documentation, Generative AI offers innovative solutions to longstanding challenges in clinical practice.

While the adoption of AI presents opportunities for transformative change, it also poses unique challenges. Regulatory approval, electronic health record (EHR) integration, and clinician training are essential components of successful AI implementation. Through hands-on workshops and interactive discussions, participants will gain practical experience in utilizing Generative AI tools and navigating the complexities of integration. This will in turn help clinicians deliver optimal care to their patients while maximizing operational efficiency.

Key topics covered include:

- Brief overview of Artificial Intelligence and introduction to Generative AI and its relevance to physical therapy
- Deep dive into Generative AI applications in marketing and promotional material creation
- Exploring Gen AI-driven patient education tools
- Demonstrating Gen AI's role in automating documentation

Learning objectives:

1. Understand the basic concepts of Generative AI and its implications for physical therapy practice.

2. Explore effective strategies for utilizing Generative AI in marketing and promotional material creation.
3. Examine the potential of Gen AI in enhancing patient education and automating documentation processes.

Naseem Chatiwala is a board-certified neurological and vestibular specialist and the founder/owner of Rehab Health 360 LLC, a specialized clinic offering premium physical therapy services to clients with neurological deficits. In addition, she is an adjunct faculty member at MGH Institute of Health Professions and the University of Massachusetts, Lowell, and a course developer/instructor for Summit Professional Education. Naseem served as a co-chair of the APTA of MA Neuro SIG and the APTA Concussion CPG-Knowledge Translation Task Force. She is currently the chair of the APTA of MA Annual Conference Committee and a member of the ANPT Practice Committee. She was awarded the Emerson Rehab 2019 Excellence in Education Award, the APTA of MA 2021 Outstanding Achievement in Clinical Practice Award, and is the recipient of the IHP's prestigious 2022 Bette Ann Harris Distinguished Alumni Award.

Durriya Doctor is a seasoned SW professional. Durriya's education background is Mathematics and Computer Engineering and she has worked in the software industry across many verticals. Durriya is very passionate about leveraging SW technologies to improve the health care system from a patient centric view. Durriya currently works at MathWorks and is engaged in MathWorks Generative AI initiative. Durriya is also the President of the Indian Institute of Technology Alumni group for New England (iitagne.org) and has initiated multiple informative series on Generative AI in this professional group.

9:00 - 10:30am Room 103	**Foundational Framework for Return to Sport: The Knee**

Areas of practice: Orthopedic, Manual Therapy, Sports Medicine

This class is designed to equip medical professionals with the tools necessary to optimize the return to play process for patients recovering from orthopedic and sports-related knee injuries. A range of skills and concepts will be covered including objective strength testing through isometric dynamometry, diverse functional performance tests suitable for various patient demographics, as well as the integration of patient reported outcome measures and psychological readiness questionnaires. Developing individualized return to play criteria is the key component of this class.

Learning objectives:

1. Describe the 4 main components of a return to sport test battery
2. Describe the most commonly used orthopedic examination tests for the knee after sports related injury
3. Describe how to perform isometric dynamometry strength assessments for the knee and hip
4. Perform and differentiate between functional performance tests used for return to play clearance after knee injuries in sports
5. Identify patient reported outcome measures used to assess psychological readiness for return to play clearance after knee injuries

Kyle Mahoney is a Sports Residency Trained Doctor of Physical Therapy and Certified Strength and Conditioning Specialist. He is an Adjunct Professor of Physical Therapy at Northeastern University and Lab Instructor Massachusetts General Hospital Institute of Health Professions. In addition, Kyle serves as an advisor to Meloq, a return to sport device company that creates force dynamometers and force plates. His Sports Physical Therapy Residency was completed at the University of Southern California, where he helped to work with the Los Angeles Angels of Anaheim, acted as the Lead Strength Coach and Physical Therapist for East Los Angeles College and USC Club Sports. In addition, he served as the lead physical therapist for the 2019 United States World University Games team. Prior experiences also include internships at Andrews Sports Medicine in Birmingham, Alabama, and EXOS in Phoenix, Arizona, where hundreds of professional athletes in the NFL, NHL, MLB, and NBA receive sports medicine care. Kyle interned from 2011-2015 for the University of Connecticut Connecticut Huskies, including the National Champion Men's Basketball program in 2014.

Brendan Gates is a Doctor of Physical Therapy and Certified Strength and Conditioning Specialist. He is an Adjunct Professor of Physical Therapy at Northeastern University. Following an undergraduate Division I career in lacrosse, Brendan completed his physical therapy program at Duke University where he worked as a sports medicine assistant for the Blue Devils football team. Currently, he practices clinically at Champion Physical Therapy and Performance in Waltham/Needham, MA where he works with athletes ranging from youth to professional, including athletes in the NFL, MLB, NHL and PWHL. He has a special interest in post operative care, especially ACL reconstruction.

9:00 - 10:30am Room 113	**Implementation of An Interdisciplinary Pathway for Early Diagnosis of Medically-Complex Infants at Risk for Cerebral Palsy**

Areas of practice: Pediatrics, Other

Research supports benefits of early diagnosis of cerebral palsy (CP) due to a wealth of emerging interventions in the early stages of development. In complex medical settings, infants often present with early signs and symptoms consistent with a diagnosis of or a high risk for CP. When children with a complex medical history present with signs and symptoms consistent with multiple differential diagnoses, it may be challenging to rule CP in or out during the initial assessment period. It is crucial to provide the diagnosis in a timely manner, then provide accurate, specific intervention in critical times of skill acquisition and neural plasticity.

Designed for pediatricians, nurse practitioners, neonatologists, neurologists, physical therapists, occupational therapists, and others, this course emphasizes the importance of early detection and intervention. This course will discuss application of literature and current evidence for best practice models when selecting assessment tools and working as an interdisciplinary team. Multiple organizations worldwide have adopted protocols to identify children at risk, allowing for more timely, evidence-based and interdisciplinary treatment to maximize outcomes and prevent secondary impairments. We wish to provide one such pathway for a complex medical inpatient setting to recognize, diagnose, and support families for optimal outcomes after discharge. We will discuss components of this pathway including initial consults and clinical assessments, patient care coordination, assessment tools, family discussions, and discharge planning; all of these components can be modified to adapt this pathway to fit an organization's needs. This presentation lays a framework for one specific inpatient setting including recognition and consults, evidence-based assessment tool selection and completion, role delineation from time of recognition to time of diagnosis and report to caregivers, and discharge recommendations to maximize outcomes.

Learning objectives:
1. Understand the Etiology and Risk Factors: Gain a comprehensive understanding of the underlying causes and risk factors associated with cerebral palsy, including prenatal, perinatal, and postnatal influences.
2. Recognize Early Signs and Symptoms: Learn to identify the early clinical signs and neurodevelopmental indicators of CP in medically complex infants through detailed case studies and real-life examples.
3. Diagnostic Tools and Techniques: Explore the latest diagnostic tools, including advanced neuroimaging, standardized assessment scales, and neurodevelopmental screening tools.

4. Interdisciplinary Approach: Develop skills to work effectively within an interdisciplinary team, incorporating input from various specialists to formulate a holistic diagnosis and care plan.
5. Family-Centered Care: Understand the importance of involving families in the diagnostic process and learn strategies to communicate effectively and provide support throughout the early diagnostic journey.
6. Diagnostic Process: Review an example of one diagnostic pathway adopted from the AACPDM framework that has been modified to suit a complex-medical inpatient setting.
7. Reflect on Lessons Learned: Discuss research process and collection of information, barriers within the therapies department, barriers within the broader interdisciplinary team, and future goals for this project within this complex-medical inpatient setting.

Erin Donnelly is a dual-degree healthcare provider educated at Boston University - Doctor of Physical Therapy (2019) and Bachelor of Science in Athletic Training (2017) - with experience ranging from Division 1 collegiate athletics to inpatient pediatrics. She began her career at an outpatient sport-specific physical therapy clinic with a focus on postoperative return-to-play rehabilitation. Erin has spent the last 3 years working at Franciscan Children's Hospital as a Level II staff PT in various service areas including inpatient medical, inpatient rehabilitation, and school-based therapy at the Kennedy Day School. In this complex medical setting, infants often present with early signs and symptoms consistent with a diagnosis of or a high risk for Cerebral Palsy, which sparked a passion project for staff and family education surrounding early diagnosis related to CP and program development for an early diagnosis framework. Erin is also involved in quality improvement regarding therapy-related equipment and its use in the inpatient setting. She finds her greatest joy in showing every child that they “can do hard things.” Erin is a health and fitness enthusiast, running the Boston Marathon in 2021 and hiking her first White Mountains 4,000-footer just this spring!

Darya Merkin graduated in 2010 with a Doctor of Physical Therapy (DPT) degree from the University of Medicine and Dentistry of New Jersey. Darya has been committed to improving the lives of children with complex medical needs in multiple settings since the start of her career. With 12 years of specialized experience in pediatrics, Darya has spent the last 10 years at Franciscan Children's as a level III clinician, where she has worked across multiple service areas, including outpatient, inpatient, and school-based pediatric therapy. This diverse background has equipped Darya with a comprehensive understanding of development from newborn to adulthood, and the changing needs of children in each setting as they grow. Darya is excited to share her expertise and enthusiasm with fellow professionals in this continuing education course, helping others to enhance their skills and provide the best possible care for children with complex medical needs at risk for CP. Darya is particularly passionate about helping children develop the skills they need to engage in activities they love. She is known for her innovative and child-centered approach, often incorporating children’s love of music and dance into treatment sessions. Darya is a craft enthusiast and enjoys Latin dancing.

9:00 - 10:30am Room 104	**Integrative Manual Therapy and Beyond Approach to Relax, Release, and Relief - An Integrated Systems Approach For De-facilitation of the Sympathetic Nervous System**

Areas of practice: Cardiovascular Pulmonary, Geriatrics, Innovative Technologies, Neurology, Orthopedic, Manual Therapy, Sports Medicine, Pain Management, Pediatrics Pelvic Health

A new structural Integrative Manual Therapy approach called Relax, Release, and Relief results in a reduction of the hyper-facilitated pain cycle caused by an unappreciated skin receptor called the Pacinian corpuscle. There is a direct effect from the release of the hyper-facilitated Pacinian corpuscle to increases in range of motion, decreases in acute and chronic pain syndrome, and improved flexibility and gait. Treatment consists of a specific gentle release technique that can be applied in many different fields of physical therapy. The participant will learn the gentle touch techniques for the foot, ankle and lower leg. This is an easy to learn system that can be completed in a one hour session. Come appreciate the motor-sensory pathway of this dermal skin sensor on the path of recovery of chronic pain and improved outcomes.

Learning objectives:

1. PT will be able to understand the concepts of Relax, Release, Relief.
2. PT will be able to apply the gentle RRR techniques to manually relieve tension and pain.
3. PT will be able to perform the soft tissue techniques for defacilitation of Pacinian corpuscle mediated pain.
4. PT will be able to utilize a blunt pointer to relieve tension in the hands and feet of the client.
5. PT will be able to apply these techniques to their own practice.
6. PT will understand the reduction of pain and improvement of range of motion of the lower extremity by the de-facilitation of the hyper facilitated sympathetic nervous system from the point of view of releasing the damage of the Pacinian corpuscle

Thomas A. Giammatteo, DC, PT, Ph.D., IMTC, is a world renowned author, international lecturer, Medical Director of IMT Wellness Center, Co-developer of Integrative Manual Therapy. Co-founder of the Integrative Manual Therapy Association, and the Dean/Owner of the Connecticut School of Integrative Manual Therapy in West Hartford, CT. Major formulator/Owner of IMT Wellness - a Functional Medicine/Nutritional Wellness company. In his 30 year career of lecturing, he has spoken and offered health care solutions for multiple fields of healthcare and well-being

9:00 - 10:30am Room 108/109	**Navigating the Clinical Gray Zones: Mentoring for Clinical Reasoning**

In recent years, there has been a trend towards increased acuity and complexity of patients in the acute care setting. In tandem, access to optimally timed clinical rotations is limited. Consequently, many novice therapists lack the experience to confidently and successfully navigate the intricacies of practice in a hospital setting. In this session, we will discuss five integral domains that foster competency, confidence, and flexibility in the new professional in the acute care setting. These domains include: cognitive flexibility, clinical reasoning, interprofessional practice, patient-practitioner communication, and mentorship. Speakers will use case examples that highlight the medical and social complexity encountered with many acute care patients, and apply the above domains to help novice acute care clinicians navigate these patient scenarios. Presenters will discuss how these foundational concepts can foster clinical reasoning in the “gray zones” to optimize success, safety, and outcomes.

Learning objectives:

1. Identify common barriers and challenges novice acute care physical therapists face when entering the acute care setting
2. Define adaptive expertise and the master adaptive learner
3. Integrate adaptive expertise and 5 domains essential to optimizing successful practice in acute care clinical practice
4. Apply the domains to clinical practice using a case-based approach to foster competent, confident, and flexible clinical care

Jessica Rydingsward, PT, DPT received her DPT in 2011 from MGH Institute of Health Professions and has been a Board-Certified Cardiovascular and Pulmonary Clinical Specialist since 2017. Jess currently serves as an assistant professor of physical therapy at the Massachusetts College of Pharmacy and Health Sciences, teaching cardiopulmonary and acute care content. Prior to this role, she worked full-time at Brigham and Women’s Hospital as an acute care therapist, focusing on treating patients on the cardiology and cardiac surgery teams, with a special interest in treating complex cardiac patients and end-stage heart failure in the ICU. She has previously served as adjunct faculty at both Simmons University and MGH IHP. Jess has presented to both the cardiopulmonary and acute care sections at CSM and participated in panel presentations with the American Society of Parenteral and Enteral Nutritionists’ and the Society for Cardiovascular Anesthesiologists’ annual conferences.

Dr. Rebecca (Becca) Pham, PT, DPT, CCS (she/her/hers) is an Instructor in the Department of Physical Therapy in the School of Health and Rehabilitation Sciences at MGH Institute of Health Professions. Dr. Pham completed a B.S.in Biology and B.A. in Dance at Duke University in 2014 and DPT at MGH Institute in 2017. She began her clinical practice in acute care at Brigham and Women's Hospital, where she remains in a per diem role today. Her clinical interests include critical care and complex medicine, cardiovascular and pulmonary, trauma, vestibular, and neurology. In June 2023, Dr. Pham became a Board-Certified Cardiovascular and Pulmonary Clinical Specialist. She is also deeply passionate about social justice and health equity. She was a co-founder of the Diversity, Equity, and Inclusion (DEI) Committee for Brigham's Rehabilitation Services Department. Dr. Pham's teaching and research areas focus on cardiovascular and pulmonary, acute care, and health equity topics. Outside of her clinical and teaching roles, Dr. Pham maintains her passion for dance as a physical therapist in Boston Ballet's Adaptive Dance program and a dance fitness instructor at Healthworks Fitness.

9:00 - 10:30am **Room 114**	**The ABCs of MCS: Creating a Mobility Program for Patients on Mechanical Circulatory Support**

Areas of practice: Cardiovascular Pulmonary

Over the last decade, advances in critical care medicine have resulted in increased post-ICU survival rates. With these advances in medicine, there has been an increased presence of physical therapy within critical care to optimize these patients' functional status. The growing use of mechanical circulatory support devices has resulted in the increased need for research and education into the safety and feasibility of functional mobility with physical therapy. In the past year, our institution transitioned into a heart transplant center, prompting a comprehensive evaluation of our mobilization practices for patients with MCSD. To enhance support and safety in this aspect of care, a multidisciplinary committee was established, resulting in guidelines for all patients with temporary mechanical circulatory support, including ECMO, IABP and Impella. The policy outlines a systematic strategy for the safe evaluation and mobilization of patients requiring MCSD, covering all possible cannulation and insertion strategies. In our presentation, we will provide an overview of mechanical circulatory support devices, review literature regarding mobility for patients with MCSD, discuss the creation of our institution's protocol, present evidence from our medical center in 2024 regarding all patients on MCSD's highest level of mobility via JH-HLM and any adverse event associated, and advocate for the creation of similar guidelines at other institutions.

Learning objectives:
1. Provide overview of mechanical circulatory support device
2. Literature Review outlining safety and feasibility of physical therapy with patients on MCSD
3. Review creation and implementation of BIDMC's Guidelines for Mobility with MCSD
4. Discuss our data collection of patients with MCSD in 2024
5. Highlight strategies for implementing mobility protocols at other institutions

Kathryn Sople is a Physical Therapist practicing for 12 years, ten of those at BIDMC. She graduated from Villanova University with an undergraduate degree in Biology, minor in psychology and went on to receive her doctorate degree from the MGH Institute of Health Professions. Kathryn is a member of the LVAD/HeartTransplant Selection committee at BIDMC, and specializes in cardiac critical care, acting as a mentor to therapists treating patients in the cardiac ICUs. Kathryn has presented previously to the MA Chapter on Critical Care Oncology in 2023.

Claire Hart graduated from Simmons University with her Doctorate of Physical Therapy in 2018. Since then, she has been an inpatient physical therapist with clinical interests in critical care, cardiopulmonary, and trauma, spending the past 2.5 years practicing in the ICU. She is the co-leader of the therapeutic exercise committee for the inpatient rehabilitation department at BIDMC. In 2022, she presented on the implementation of a therapeutic exercise program in the acute care setting at APTAMA Annual Conference. Additionally, she has served as an adjunct faculty at Simmons University since 2019 within both acute care and musculoskeletal coursework. Claire is the 2024 recipient of the Joan Drevins Commitment to Education Award.

Heather Philben has been practicing as a physical therapist since 2015after graduating from Simmons University. She has been practicing in acute care for the entirety of her career with a special interest in ICU and cardiopulmonary patient populations. Since 2023, she has also been working in outpatient with a focus on patients with cardiopulmonary impairments. Additionally, Heather is adjunct faculty at Simmons University, assisting in their cardiopulmonary coursework.

10:40 - 11:40am Room 108/109	**Are you ready to LEARN?: A model for providing care to diverse patient populations**

Areas of practice: Communication, Professionalism, Self Care, Diversity, Equity and Inclusion

Physical therapists are charged with providing equitable and quality care for largely diverse populations. These include multifaceted and complicated identities that can include race, gender, religion, and disability identity. While strategies to diversify the physical therapy profession to meet the needs of our patients have been considered, there are still barriers. These initiatives require the expertise, time, and financial resources to adequately implement, recruit and support individuals not currently represented in the profession. Diverse patient populations still expect equitable and high quality care, further emphasizing the importance of improving therapist-patient interactions. The LEARN model was first introduced in 1983 by researchers Berlin and Fowkes to address significant demographic changes that were impacting the provision of healthcare in the U.S. In this session we will discuss the five pillars of LEARN (Listen, Explain, Acknowledge, Recommend, and Negotiate) and their theoretical underpinnings within health care provision. We will provide an overview of the research literature regarding therapist-patient interactions to increase awareness of the dynamics of therapist-patient interactions. This session will also include case examples to guide the audience in application of the LEARN model to support physical therapy professionals facilitating positive interactions with patients who have different physical and cognitive abilities and cultural backgrounds.

Learning objectives:
1. Describe the LEARN Model, and the ways in which it can be applied to improve therapist-patient interactions.
2. Explore interactions with diverse patient populations within varying physical therapy settings
3. Understand the benefits of applying the LEARN model to help guide therapist-patient interactions with diverse patient populations
4. Engage in active learning to consider the dynamics of therapist-patient interactions

Winston Kennedy, PT, DPT, MPH, PhD is a physical therapist and public health professional who engages in research that focuses on promoting health and access to health resources for disability communities across the lifespan. His work includes an intersectional perspective that seeks to create and support more equitable access to health while considering individuals identities and lived experience. He also is investigating how to adapt health professional education and practice in order to include and support people with disabilities as both professionals and clients. He is currently an assistant professor at Northeastern University in the Physical Therapy Movement and Rehab Sciences Department and the Department of Public Health and Health Sciences.

Abigail Lue (she/her), PT, DPT is a physical therapist in Boston, Massachusetts who treats in both outpatient and inpatient settings. She received her Bachelor's degrees in kinesiology from Oregon State University and her Doctor of Physical Therapy from Northern Arizona University in Flagstaff, Arizona. Abigail's clinical interests include treating patients with orthopedic and neurological diagnoses, including fostering inclusive spaces for diverse individuals. Outside of the clinic, Abigail enjoys reading, finding local coffee shops, and traveling.

10:40 - 11:40am **Room 114**	**Coming Out with Affirmative LGBTQIA+ Physical Therapy Practice Guidelines**

Areas of practice: Diversity, Equity and Inclusion

Within the framework of the sexual minority stress model, persons who identify as lesbian, gay, bisexual, transgender, queer, intersex, and/or asexual (LGBTQIA+) contend with both general stressors and specific challenges stemming from societal and interpersonal prejudices and stigmas. The accumulation of these stressors often results in adverse health outcomes and identity-related inequities. Affirmative practice stands as a cornerstone in healthcare, emphasizing the validation and support of persons expressed identities. This session introduces a set of evidence-informed practice guidelines tailored to affirm LGBTQIA+ persons within physical therapist practice. By implementing these innovative guidelines, practitioners can address health inequities and enhance the safety and sense of belonging experienced by LGBTQIA+ people throughout their lifespan. The presentation will commence with an exploration of the historical backdrop of the LGBTQIA+ community, followed by an analysis of the social determinants of health that contribute to the disparities within this demographic. Furthermore, the session will delve into the application of trauma-informed care strategies specifically tailored to meet the needs of LGBTQIA+ persons. It will also encapsulate a review of ongoing initiatives in both educational and clinical settings aimed at fostering inclusivity within the LGBTQIA+ community. Participants can anticipate an engaging experience involving active listening, interactive discussions, and opportunities for self-reflection. By the session's conclusion, attendees will be equipped with actionable insights and a renewed commitment to advancing LGBTQIA+ inclusion and belonging within the field of physical therapy.

Learning objectives:

1. Participants will recognize multiple forms of disparities affecting the LGBTQIA+ community and identify steps to address disparities for improved health outcomes.
2. Participants will understand the foundations and history of the LGBTQIA+ community to contextualize community experiences and change over time.
3. Participants will identify actionable steps to improve belonging and safety for LGBTQIA+ people in their Physical Therapy setting.
4. Participants will perform self-reflection and strive for continued education and learning on the LGBTQIA+ community

Olivia G. Miller, PT, DPT (she/her) is a Physical Therapist with an interest in research, improving access to PT, and addressing health disparities. Olivia works for Spaulding Rehabilitation in Pawtucket, Rhode Island, where she sees adults with orthopedic, neurological, and vestibular conditions. She is a member of PT Proud, a Special Interest Group in the Academy of Leadership and Innovation (APTA). As a student, she was a co-founder of the Indiana University DPT program's DEI Coalition. In 2023, Olivia presented 'Holistic Admissions Worked, Now What?' regarding the IU DPT program at the Indiana University LGBTQ+ Healthcare conference. Olivia is an author of a manuscript regarding LGBTQIA+ affirming PT accepted to the PT Journal. She presented 'Coming Out with LGBTQIA+ Physical Therapy Practice Guidelines' at APTA Combined Sections Meeting in Boston, MA on February 15, 2024.

Joe Tatta, PT, DPT, CNS is a leader in integrative pain care, championing the cause for safe and effective chronic pain treatment. He serves as the CEO of the Integrative Pain Science Institute, a groundbreaking health organization dedicated to transforming pain care through evidence-based treatment, pioneering research, professional development, and free consumer education. With a career spanning over 25 years, Dr. Tatta has been unwavering in his support for individuals suffering from pain, while also equipping healthcare professionals and stakeholders to enhance their pain management capabilities. His body of pain science research and professional accomplishments extends to the creation of scalable practice models grounded in health behavior change, integrative and lifestyle medicine, and innovative approaches empowering physical therapists to assume the role of primary healthcare providers. The culmination of his work is PRISM: Pain Recovery and Integrative Systems Model – a cognitive behavioral approach for pain management physical therapy.

Kelsey Stromberg, SPT is a rising third-year graduate student in the combined B.S. in Health Studies/Doctorate of Physical Therapy program at the Sargent College of Health and Rehabilitation Sciences at Boston University. She has interests in orthopedic and neurological rehabilitation. After taking nutrition courses and working with athletes during undergraduate, Kelsey became interested in the importance of utilizing nutrition to enhance performance and recovery.

10:40 - 11:40 am Room 104	**Introduction to Advanced Strain and Counterstrain for the Autonomic Nervous System - An Integrated Systems Approach from Integrative Manual Therapy (IMT)**

Areas of practice: Cardiovascular Pulmonary, Geriatrics, Innovative Technologies, Neurology Orthopedic, Manual Therapy, Sports Medicine, Pain Management, Pediatrics, Pelvic Health

In this course, learn a unique new tool to address posture, neck, and low back pain with Integrative Manual Therapy Advanced Strain and Counterstrain for the Autonomic Nervous System. The majority of people have an episode of spine pain at some time during their life. The autonomic nervous system regulates certain body processes, including muscle spasm. Dysregulation of the autonomic nervous system can affect any body part or process such as posture, balance, gait, and flexibility. By using Integrative Manual Therapy's Advanced Strain and Counterstrain, the physical therapist can reduce the hypertonic state of smooth muscle. This will improve posture, fluidity of gait, and spinal movement. This technique can improve the results, enhance sustainability of treatments, and is easily added to the physical therapist's current treatment session.

Learning objectives:

1. PT will understand anatomy and physiology of the hypothetical model.
2. PT will be able to recognize the hypertonicity of the muscular, soft tissue, and circulatory systems [Arterial, Venous and Lymphatic].
3. PT will be able to apply individual techniques in a two-minute session per muscle group.
4. PT will be able to apply this technique to their own practice.

Thomas A. Giammatteo, DC, PT, Ph.D., IMTC, is a world renowned author, international lecturer, Medical Director of IMT Wellness Center, Co-developer of Integrative Manual Therapy. Co-founder of the Integrative Manual Therapy Association, and the Dean/Owner of the Connecticut School of Integrative Manual Therapy in West Hartford, CT. Major formulator/Owner of IMT Wellness - a Functional Medicine/Nutritional Wellness company. In his 30 year career of lecturing, he has spoken and offered health care solutions for multiple fields of healthcare and well-being.

10:40 - 11:40 am Room 113	**Physical Therapy as a Catalyst to Address Health Disparities Experienced by Adults with Cerebral Palsy**

Areas of practice: Diversity, Equity and Inclusion, Neurology, Orthopedic, Manual Therapy, Sports Medicine, Pain Management, Pediatrics, Public Policy: Advocacy, Payors

Persons with disabilities face many health inequities resulting from stigma, discrimination, poverty, exclusion from education and employment, and barriers faced in the health system itself. Among persons with disability, adults with cerebral palsy (CP) are a particularly vulnerable subgroup. In general, persons with disabilities have twice the risk of developing conditions such as depression, asthma, diabetes, stroke, obesity or poor oral health; while adults with CP have three, four, or five times the risk for these same conditions. More than 60% of adults with CP experience functional decline and 70% experience chronic pain with aging. Yet, adults with CP and musculoskeletal pain are as less likely than adults without CP to use physical therapy. It is time to change that!

Physical therapy can be a catalyst for addressing the health disparities that exist for adults with cerebral palsy. Exercise can mitigate many secondary conditions, and a life span approach is needed. The cardiovascular and musculoskeletal system should be targeted in adolescence, alongside strategies for joint protection. Wellness, mindfulness, and an ongoing fitness plan are critical for young, middle, and older adults with CP. Evidence exists to support the efficacy of a variety of interventions for adults with CP. Changes in spasticity, weakness, and fatigue that occur with aging can be mitigated by targeted therapeutic exercise and energy conservation techniques. Identifying ways to participate in aerobic exercise, group exercise, or any type of adapted fitness can improve social participation, depression, and anxiety. Maintenance therapy may be warranted to manage pain intensity and interference, maintain transfer status, or for overall well being. A variety of interventions will be reviewed along with considerations for adults with CP. Sports, orthopedic, pelvic floor, and neurologic physical therapists have much to offer to close the gap in health outcomes for adults with CP.

Learning objectives:
1. Be able to identify the risks adults with CP face for secondary conditions.
2. Be able to identify the ways exercise and skilled physical therapy can provide preventative care for lifespan wellness
3. Be able to identify the ways exercise and skilled physical therapy can mitigate the symptoms associated with functional decline and chronic pain.

4. Be able to identify institutional, federal, or policy barriers to adults with CP experience when trying to access therapeutic exercise for lifespan wellbeing. Training in physical therapy, medical anthropology and public health. Work includes validation of Spanish translation of the Pediatric Evaluation of Disability Inventory, ethnography of childhood disability, outcomes of adults with cerebral palsy, dosing, and health services research. Interests include dosing for bone health and pain management among adults with cerebral palsy. CP Research Network Co-chair Adult Work Group and Community Registry Adult Surveys on Function and Pain.

Mary Gannotti, PT, PhD

10:40 - 11:40 am **Room 101**	**Technology enabled healthcare: Improved digital literacy leads to better health equity and quality of life**

Areas of practice: Communication, Professionalism, Self Care Diversity, Equity and Inclusion

Identifying ways to support access, availability, and utilization of healthcare services for at-risk populations is critical in providing practical actionable approaches to support aging in place and quality of life. Use of technology is important in efforts to promote health and wellness and ameliorate potentially preventable health-related complications or poor outcomes for the aging population of community-dwelling adults. Asset mapping includes understanding of who is the focus of the journey and what is important to the individual. Emphasis is placed on ensuring the assessment determines if the individual is activated and engaged in self-health management.

Community assets, the collective in-person and digital resources and support features individuals and communities have available, help leverage effective solutions to promote social connections, inclusion, and well-being of its citizens. Outcomes are driven by these assets as well as health status, lifestyle behaviors, and social/environmental factors. Furthermore, evidence indicates poor management of overall wellness impacts health across the lifespan and that environmental factors may have multi-generational impacts. Presenters will emphasize a focus on wellness through community assets and how this approach can positively impact health conditions and aging in place. Valuable interprofessional partnership and transition planning through the comprehensive care continuum will be highlighted.

Learning objectives:
1. Analyze the value of therapy assessments that aid in the identification of a person's values, preferences, and expressed goals matched with digital health literacy abilities
2. Demonstrate the steps and methods necessary to select, locate and access digital community assets for identified individuals
3. Distinguish between the accessibility and limitations of the current digital landscape to support identifying practical solutions for human-centered community assets across age-friendly domains.
4. Illustrate the influence of patient's engagement in use of technology for community asset mapping to achieve improve health across the lifespan

Aimee E. Perron earned her MS in Physical Therapy from Boston University, and DPT from Massachusetts General Hospital Institute of Health Profession. She has spent 27 years as a clinician, instructor and leader in the post-acute care and academic settings with the majority of experience in neurologic and geriatric practice. Aimee currently is an Assistant Professor with Northeastern University and a PT Clinical Director with Powerback Rehabilitation (formally Genesis Rehab Services). Dr. Perron is passionate and committed to clinical excellence using evidence-based and client-centered practices. She serves as a clinical leader and strives to inspire colleagues and students to be strong advocates to ensure patients have access to care they need and are able to achieve meaningful outcomes. Dr. Perron is dedicated to life-long learning and through this commitment; she has achieved American Physical Therapy Association (APTA) board certification Specialist in Neurological PT and is a Certified Expert for the Aging Adult. Dr. Perron has presented nationally, internationally and at previous CSM conferences on a variety of clinical topics related to the post-acute care arena, and geriatric and neurological PT practice. Dr. Perron is actively engaged in the Academies of Neurologic Physical Therapy (ANPT) as member of ANPT Practice Committee, and co-chair of ANPT Telehealth Taskforce. Additionally, Dr. Perron currently is the APTA of MA Southeastern District Chief Assembly Representative and represents the State of Massachusetts at the national level as a Delegate for APTA's House of Delegates.

Laura M. Caron-Parker, OTR/L, FNAP, ECHM, Clinical Director, Powerback Rehab (formerly Genesis Rehab Services) & Rehab To You has 41 years of professional experience, both clinical and operational. Her experience spans the complex continuum of care from hospital to mobile outpatient services focusing on older adults. She joined Powerback Rehab 27 years ago and is a leader of clinical practice, promoting evidence-based and human-centered rehab services at the same time challenging clinicians to explore the ongoing changes within the healthcare ecosystem.

She influences clinical practice in community asset mapping, health literacy, wellness, low vision and dementia and has provided professional presentations on these topics. Her professional speaking engagements include the American Occupational Therapy Associations annual conferences, American Society on Aging annual conference, International Council of Active Aging annual conference, Rutgers University Occupational Therapy Assistant Program just to name a few. Laura has had the unique opportunity to provide private consultation on health literacy for MyndYou, an AI-based (artificial intelligence) virtual care assistant and on OT's use of music for persons with dementia for SingFit, Music Health Technologies. She is a CarFit Instructor, sits on the National AARP Driver Safety Volunteer Advisory Board as well as the CarFit Advisory Council.

10:40 - 11:40 am **Room 103**	**The Hips Still Don't Lie: Current Trends in the Care of Athletic Hip and Groin Pain.**

Areas of practice: Orthopedic, Manual Therapy, Sports Medicine

Athletic hip and groin pain have previously been described with many terms due to the complex and overlapping nature of many pathologies in the area. Recently published agreements and clinical practice guidelines have helped clarify and add to the body of knowledge in this area. This session will examine what can be challenging, and at times complex, injuries to the hip and groin in athletes.

The pelvic region has a complex network of anatomy and muscle attachments that can complicate the understanding of pathologies in this area. This session will review the importance of anatomical attachments and how the substantial and often repetitive forces experienced across these structures may result in the development of pathological conditions in athletes. Presenters will utilize dynamic visuals including Anatomage digital anatomy software, as well as cadaveric images and videos to add to the impact of specific anatomical structures in these complex conditions and diagnoses.

Identification of hip and groin pain is critical to differentiate from other injuries. These injuries may have bone, joint, and/or muscle tissue involved in the pathology, and may require rest and other modalities in the early phases of recovery. This session will cover important pieces of examination and early clinic-based management of pain.

There is then a careful, gradual rehabilitation and strengthening that will require frequent progression (and possible regression at times) to successfully return to sport. This session will review applicable methods for controlling/monitoring load in these athletes as it relates to the complex nature of hip and groin pain. As we discuss rehabilitation and strengthening, possible prevention will be explored.

Learning objectives:

1. Demonstrate a strong understanding of hip and pelvic anatomy along with the effect of structure on function in the athletic population.
2. Describe the Patho mechanics for common injuries related to hip groin pain in the athletic population.
3. Outline the foundation for a good clinical examination of the hip and groin to properly diagnose pathology/
4. Discuss treatment strategies to progress the athlete from early rest to full competition.
5. Demonstrate rehabilitation and strength training practices as they relate to treatment and prevention.

Stephen B. Clark is a clinical faculty member in the sports medicine, musculoskeletal, and anatomy tracks in the PTMRS Department. He also mentors students in PT Projects I (PT5227) and II (PT5229). Stephen holds a DPT degree from Northeastern, a MS in Exercise Science from the University of Toledo, and a MS in Sports Medicine/Athletic Training from the University of Charleston. He is a licensed Physical Therapist, Athletic Trainer, and a Board-Certified Specialist in Sports Physical Therapy. His clinical practice is in the Northeastern University Sports Performance Department, where he serves varsity student-athletes as the Performance Rehabilitation Director. Dr. Clark's research and clinical interests include the interdisciplinary care of student-athletes, epidemiology of sports injuries, managing the injured athlete from initial injury through return to play, and management of athletic hip injuries.

Dr. Luke Brisbin, PT, DPT, OCS earned his DPT from Northeastern University in Boston, MA. He is a board certified Orthopedic Clinical Specialist (OCS), Therapeutic Pain Specialist, and Certified Strength and Conditioning Specialist (CSCS). He is currently an Assistant Clinical Professor in the Department of Physical Therapy, Movement, and Rehabilitation Sciences at Northeastern University, with teaching responsibilities in Functional Anatomy and Musculoskeletal Management lab courses. He also serves the department as Human Anatomy Lab coordinator and primary dissector. His research is focused on scholarship of teaching and learning and utilizing the human anatomy lab throughout the physical therapy curriculum. Luke practices as a physical therapist with Boston Medical Center's outpatient satellite clinic in Hyde Park, working primarily with patients with orthopedic and chronic pain conditions. He is also active within APTA of Massachusetts as South Metro district representative and member of the annual conference committee. Luke also enjoys volunteering with Boston I.C.E storm sled hockey team.

2:45 - 3:45 pm Room 101	**Optimizing Patient Care: How AI Is Transforming Physical Therapy**

Areas of practice: Innovative Technologies

The purpose of this presentation is to explore the emerging intersection of Artificial Intelligence (AI) and physical therapy and to unravel how AI technologies are revolutionizing patient care and clinical practice. By delving into the theoretical frameworks underpinning AI applications in healthcare, the aim is to provide a comprehensive understanding of its potential implications for the field of physical therapy. Through an in-depth examination of AI-driven data analysis, personalized rehabilitation programs, and virtual assessment protocols, participants will gain insights into how AI can optimize treatment outcomes, enhance efficiency, and expand access to care. Furthermore, this presentation will address the ethical considerations and practical challenges associated with the integration of AI into physical therapy practice, equipping attendees with the knowledge and tools to navigate this transformative landscape responsibly and effectively. Ultimately, the goal is to empower physical therapists and healthcare professionals to leverage AI technologies to deliver more personalized, efficient, and impactful care to their patients.

Learning objectives:
1. Understand the theoretical foundations and practical applications of AI in physical therapy practice.
2. Explore the potential implications of AI-driven data analysis, personalized rehabilitation programs, and virtual assessment protocols for optimizing patient outcomes in physical therapy.
3. Identify and navigate ethical considerations and practical challenges associated with the integration of AI into physical therapy practice.

Neeraj Baheti is a Senior PT with UCSF Benioff Children's Hospitals. He strives to be at the forefront of emerging technologies and has followed closely the advancements in AI and its profound impact on healthcare, particularly within the realm of physical therapy. Neeraj's intense focus on the study of human biomechanics has led to a specialized clinical interest in working with soccer, baseball, running, and basketball athletes. In addition to working with United States Olympic athletes, Neeraj has been published in a national journal, has written book chapters, and has edited a physical therapy book. In Spring 2016, Neeraj was awarded the esteemed Kevin Wilk Traveling Fellowship. He has presented at multiple regional, national, and international level conferences. He developed the UCSF Benioff Children's Hospitals Sports PT Residency program and serves as the Program Director. He received his BS degree in Physical Therapy from India.

He was then awarded a scholarship from Oregon State University to pursue a MS degree with an emphasis in Sports Medicine. He then went on to pursue a Doctorate in Physical Therapy from MGH Institute of Health Professions in Boston. Neeraj is also a Certified Orthopedic and Sports Physical Therapy Specialist designated by the APTA.

Chaitali Ahya, PT, DPT: With a distinguished career in healthcare leadership and a track record of delivering exceptional patient care, I bring a unique blend of clinical expertise, strategic thinking, and technological innovation to the table. As a clinician, I have developed individualized treatment plans grounded in evidence-based practices, contributing to improved patient outcomes. As a clinic lead, I spearheaded the transition to telehealth during the COVID-19 pandemic and implemented Lean Six Sigma methodologies to streamline operations, resulting in significant cost savings and enhanced patient satisfaction. My proficiency extends beyond clinical practice to encompass program development, process improvement, and market analysis. As an EMR Superuser, I provide training and ongoing support to the physical medicine team, ensuring efficient utilization of healthcare information systems. I have successfully identified and eliminated operational inefficiencies, set performance standards, and cultivated a results-focused culture. A champion of innovation, I introduced a yoga therapy protocol for chronic back pain, showcasing both my creative thinking and commitment to cost-effective, patient-centric solutions. At the core of my endeavors is a deep-seated passion to transform healthcare with the integration of technology. I am dedicated to contributing to better health outcomes through the strategic use of technology and implementing value-based care to enhance affordability and accessibility.

2:45 - 3:45 pm **Room 114**	**Perceptions of individuals with disabilities regarding therapeutic alliance with physical therapists: lessons learned from focus group discussions**

Areas of practice: Communication, Professionalism, Self Care Diversity, Equity and Inclusion

Therapeutic alliance is an essential yet often overlooked element in successful physical therapy treatment. When a patient trusts their clinician and feels empowered to advocate for their own care in a psychologically safe environment, their self-confidence and intrinsic motivation increase, and healing becomes a collaborative process. Among the many attributes of a successful therapeutic alliance, holding a shared identity between patients and clinicians may strengthen this relationship and consequently improve patient outcomes. Physical therapy is a profession that largely involves the care of individuals with disabilities, but clinicians with disabilities are underrepresented in the field, potentially leading to a lack of shared identity between disabled patients and non-disabled PTs.

This one-hour education session will utilize findings from focus groups of participants that identify as having a disability and have been treated by disabled and/or non-disabled PTs to serve as a framework to explore the concepts of therapeutic alliance and disability as an aspect of one's identity, and to recommend strategies for improving therapeutic alliance between PTs and individuals with disabilities.

Learning objectives:
1. Describe the concepts of therapeutic alliance, disability as an aspect of one's identity, and the ways in which shared identity can strengthen the therapeutic alliance between a patient and clinician
2. Examine the key findings of a focus group study with participants that identify as having a disability and have been treated by disabled and/or non-disabled PTs
3. Utilize patient perceptions of therapeutic alliance with their physical therapists to implement strategies for improving therapeutic alliance for patients with disabilities
4. Discuss the benefits, barriers, and potential solutions for increasing representation of clinicians with disabilities in the physical therapy profession

Amanda Michel is a DPT student at Simmons University with a passion for disabi
lity justice. She received PT and OT services as a child for developmental motor delays, and was later diagnosed with autism and ADHD. Amanda uses her experiences as a patient in the medical system to relate to individuals with disabilities currently seeking care and to advocate on an individual, community and policy level. In addition to being a full-time student, Amanda works as an adaptive sports coach for children with disabilities, and is both a student intern with the APTA of MA DEI Committee and a member of APTA's Disability Justice and Anti-Ableism Catalyst Group. Amanda is currently working on multiple research projects regarding disability equity, including her school capstone, which investigates therapeutic alliance between patients and clinicians with disabilities, and she plans to continue researching disability and therapeutic alliance after graduation.

Libby Taylor is a DPT student at Simmons University currently working on her capstone project investigating the therapeutic alliance between patients and clinicians with disabilities. Her passion for PT was ignited during high school after receiving PT services where she was able to witness fierce patient advocacy and compassion firsthand. Outside of PT school, Libby is a lifetime member of the Girl Scouts instilling values of service and advocacy in her from a young age and she currently spends time volunteering with local troops. In the future, she hopes to remain involved in disability and DEI related qualitative research.

Stacey Maguire, PT. DPT PhD is a physical therapist with over two decades of clinical experience, primarily in the acute hospital setting at Beth Israel Deaconess Medical Center, where she progressed to the role of Inpatient Physical Therapy Team Leader. During this time, she was also the Lead Clinical Mentor for Boston University's PT Neurological Residency Program. Dr. Maguire is also a passionate educator with over 20 years of teaching experience, starting first as an adjunct faculty member at Boston University and later, Simmons University. In 2018 she moved to a full-time position as an Associate Professor in the Simmons University Doctor of Physical Therapy program. She teaches in the Neurological and Cardiopulmonary Frameworks courses as well as Health Promotions and Complex Conditions. Her scholarship centers around finding ways to create diverse and inclusive classrooms where all learners can thrive.

Winston Kennedy PT, DPT, MPH, PhD is a physical therapist and public health professional who engages in research that focuses on promoting health and access to health resources for disability communities across the lifespan. His work includes an intersectional perspective that seeks to create and support more equitable access to health while considering individuals identities and lived experience. He also is investigating how to adapt health professional education and practice in order to include and support people with disabilities as both professionals and clients. He is currently an assistant professor at Northeastern University in the Physical Therapy Movement and Rehab Sciences Department and the Department of Public Health and Health Sciences.

2:45 - 3:45 pm **Room 104**	**Putting the Hip in Patellofemoral Pain: Problems with Muscle Activation and Kinematics in Exercise**

Orthopedic, Manual Therapy, Sports Medicine

Persons with patellofemoral pain (PFP) exhibit abnormal hip musculature activation and hip motion. I will discuss my team's recent research findings regarding these abnormalities and potential interventions.

David M. Selkowitz, PT, PhD, DPT, OCS

2:45 - 3:45 pm Room 108/ 109	**Reclaiming Fat: Unpacking and Dismantling Anti-Fatness in Healthcare**

Areas of practice: Communication, Professionalism, Self Care, Diversity, Equity and Inclusion

Join us in challenging the status quo on the dominant narrative about weight and fat in the current healthcare landscape. In this session, we will discuss the historical roots of body mass index (BMI) and obesity medicine, setting the stage for a critical examination of weight-related myths and their detrimental effects on the holistic health of individuals. We will discuss the biopsychosocial ramifications of weight stigma, and how current health education models perpetuate the myths and bias in clinical practice. We will explore case examples that highlight the negative impacts on provider attitudes, quality of care, and health outcomes. Finally, we will introduce strategies to combat anti-fat bias, including weight-inclusive medicine and specific physical therapy considerations to enhance practice and pave the way for more equitable healthcare for all bodies.

Learning objectives:

1. Understand the historical development of BMI and obesity medicine to comprehend implications for clinical practice.
2. Evaluate the biopsychosocial consequences of experiencing weight stigma and assess the interplay of societal attitudes, psychosocial wellbeing, and physical health outcomes.
3. -Apply evidence-based strategies to combat anti-fat bias in healthcare, incorporating principles of weight-inclusive medicine and inclusive language into the provision of physical therapy care.
4. Analyze complex physical therapy scenarios through a lens of weight stigma and bias, demonstrating proficiency in recognizing and addressing potential barriers to effective care while advocating for patient-centered approaches that prioritize dignity, respect, and inclusivity.

Dr. Rebecca (Becca) Pham, PT, DPT, CCS (she/her/hers) is an Instructor in the Department of Physical Therapy in the School of Health and Rehabilitation Sciences at MGH Institute of Health Professions. Dr. Pham completed a B.S.in Biology and B.A. in Dance at Duke University in 2014 and DPT at MGH Institute in 2017. She began her clinical practice in acute care at Brigham and Women's Hospital, where she remains in a per diem role today. Her clinical interests include critical care and complex medicine, cardiovascular and pulmonary, trauma, vestibular, and neurology.

In June 2023, Dr. Pham became a Board-Certified Cardiovascular and Pulmonary Clinical Specialist. She is also deeply passionate about social justice and health equity. She was a co-founder of the Diversity, Equity, and Inclusion (DEI) Committee for Brigham's Rehabilitation Services Department. Dr. Pham's teaching and research areas focus on cardiovascular and pulmonary, acute care, and health equity topics. Outside of her clinical and teaching roles, Dr. Pham maintains her passion for dance as a physical therapist in Boston Ballet's Adaptive Dance program and a dance fitness instructor at Healthworks Fitness.

Dr. Taglieri-Noble received her DPT in 2010 from Simmons University and has been a Board-Certified Neurologic Physical Therapist since 2014 working in both acute rehab and outpatient neurological settings. She was a co-founder of the Diversity, Equity, and Inclusion (DEI) Committee for Brigham's Rehabilitation Services Department. She currently serves as an assistant professor of physical therapy at the MCPHS University in Worcester, MA, teaching neurologic content.

Stacey Maguire PT, DPT, PhD is a physical therapist with over two decades of clinical experience, primarily in the acute hospital setting at Beth Israel Deaconess Medical Center, where she progressed to the role of Inpatient Physical Therapy Team Leader. During this time, she was also the Lead Clinical Mentor for Boston University's PT Neurological Residency Program. Dr. Maguire is also a passionate educator with over 20 years of teaching experience, starting first as an adjunct faculty member at Boston University and later, Simmons University. In 2018 she moved to a full-time position as an Associate Professor in the Simmons University Doctor of Physical Therapy program. She teaches in the Neurological and Cardiopulmonary Frameworks courses as well as Health Promotions and Complex Conditions. Her scholarship centers around finding ways to create diverse and inclusive classrooms where all learners can thrive.

Jessica Rydingsward, PT, DPT, CCS, GCS is an assistant professor of physical therapy in the School of Physical Therapy at the MCPHS University in Worcester, Massachusetts. She holds an undergraduate degree in biology from Bowdoin College and a clinical doctorate in physical therapy from MGH Institute of Health Professions. Prior to transitioning to academia, Jess worked as an acute care physical therapist at Brigham and Women's Hospital in Boston, Massachusetts, specializing in the care of medically complex patients, including end-stage heart and lung disease. She is a Board-Certified Specialist in Cardiovascular and Pulmonary Physical Therapy and Geriatric Physical Therapy. Her current research interests include developing clinical decision making in the inpatient setting and exercise dosing in the geriatric population.

Winston Kennedy PT, DPT, MPH, PhD is a physical therapist and public health professional who engages in research that focuses on promoting health and access to health resources for disability communities across the lifespan. His work includes an intersectional perspective that seeks to create and support more equitable access to health while considering individuals identities and lived experience. He also is investigating how to adapt health professional education and practice in order to include and support people with disabilities as both professionals and clients. He is currently an assistant professor at Northeastern University in the Physical Therapy Movement and Rehab Sciences Department and the Department of Public Health and Health Sciences.

2:45 - 3:45 pm **Room 103**	**Somatic Approaches to Chronic Pain: A Trauma-Informed Physical Therapy**

Areas of practice: Communication, Professionalism, Self Care Diversity, Equity and Inclusion, Pain Management, Pelvic Health

In the evolving field of physical therapy, the integration of somatic practices offers a revolutionary approach to managing chronic pain, particularly in patients with trauma histories. This comprehensive course, "Somatic Approaches to Chronic Pain: A Trauma-Informed Physical Therapy," is designed to bridge the gap between traditional physical therapy methods and innovative somatic techniques that focus on the interconnection between mind and body. Through an in-depth exploration of both physiological and psychological dimensions of pain, this course aims to equip physical therapists and healthcare professionals with the skills needed to enhance their practice, improve patient outcomes, and foster holistic healing.

Learning objectives:

1. Understand the Interrelationship Between Chronic Pain, Trauma, and Somatic Practices:
2. Learn the key principles of somatic therapy, including the importance of body awareness, mindful movement, and the role of the nervous system in experiencing and managing pain.
3. Acquire skills to effectively integrate somatic exercises and interventions into treatment plans for patients with chronic pain, with a focus on tailoring these interventions to individual needs.
4. Review and discuss current research findings related to the effectiveness of somatic practices and trauma-informed approaches in managing chronic pain

Melissa Jean Jarzynski excels in integrating physical therapy with equine-assisted practices, emphasizing trauma-informed care. As the owner of Happy Trotters, Melissa Jean PT, and Stable Friendships Foundation, and with over 19 years of expertise, Melissa is a board-certified Hippotherapy Clinical Specialist and certified with PATH International and EAGALA. Her pioneering spirit is most evident in her program, "Finding Peace in the Paddock™".This groundbreaking work focuses on the interplay between human and horse heart rates, revealing significant benefits for those dealing with trauma, stress, and chronic pain. Her research in this area, though preliminary, has already begun to illuminate the profound effects of equine-assisted therapy. It's not just about physical healing; Melissa's work highlights the deep emotional and psychological connections that can be fostered between humans and horses, offering a new dimension to trauma-informed care. This unique blend of therapy and equine interaction is a testament to her innovative approach to enhancing holistic well-being.

2:45 - 3:45 pm **Room 113**	**Dual-Task Approaches in Physical Therapy: Assessment and Intervention Techniques**

Areas of practice: Geriatrics, Neurology, Pediatrics

Dual-task assessment and intervention is an emerging area of physical therapy. Understanding the impact of dual-task activities is essential for the translation of clinical improvement into functional gains in all populations.

This presentation will include:

- Introduction and conceptual framework for dual-task assessment and training
- Varied definition of dual-task activities
    - Cognitive-motor
        - Visual
        - Verbal
        - Auditory
        - Attention
        - Memory

    - Motor-motor
- Hierarchy of cognitive dual tasks
- Existing protocols for assessment of dual-task skill, including outcome measures
- Current research supporting dual-task intervention for:
    - General population
    - Older adults with neurologic disorders
    - Pediatric population
- Progressions, regressions and scaffolding of dual-task activities

Learning objective:

1. Define and calculate dual-task cost
2. Distinguish between different types of dual-tasks that exist within current literature
3. Identify tools to assess a patient across the lifespan using dual-task tools
4. Apply best evidence when choosing dual-task interventions for a variety of patient populations

Megan Frazier, PT, DPT, MFA, PCS, is an assistant professor of physical therapy at Springfield College and teaches in the areas of pediatrics and neuroscience. She is enrolled as a PhD candidate at University of Massachusetts - Amherst in the movement neuroscience lab of Dr. Douglas Martini.

Tara Maroney, PT, DPT, GCS, is an associate professor of physical therapy at American International College in Springfield MA and teaches in the areas of neuromuscular patient management, health and wellness and neurologic clinical medicine. She is a board certified geriatric specialist and is completing a Doctor of Health Sciences degree at University of St. Joseph with a dual education and clinical track.

Elizabeth L. Martin, M.A., SLP-CCC

4:00 - 5:00 pm **Room**	**Electrical Stimulation for Strengthening: What's the Evidence and Best Practice**

Areas of practice: Orthopedic, Manual Therapy, Sports Medicine

There is ongoing controversy on the efficacy of electrophysical agents, such as the use of electrical stimulation for various purposes including muscle strengthening and related outcome measures. I will discuss the evidence for using electrical stimulation in various patient populations and appropriate methods of application of parameters

4:00 - 5:00 pm Room 114	**Clinical Efficiency: Improving Outcomes and Reducing Burnout through Efficient Practice Patterns**

Areas of practice: Communication, Professionalism, Self Care

In current physical therapy practice, clinicians are facing a number of challenges. However, the growing waitlists for our services, hiring and staffing shortages as well as alarming numbers of Physical Therapists leaving the profession are creating increasing demands on those left. Burnout is atop every clinic's priorities, while meeting the rising demand for services remains necessary. Despite this, little of our physical therapy education and continuing education focuses on efficiency. In fact, educational offerings, emerging techniques and evidenced based practice often adds complexity for clinicians and results in increased demand on clinicians time, intellectual and emotional resources to better serve our patients.

This course will explore strategies and mental schema that clinician's can employ to improve their efficiency in the clinic. It will also show us that efficiency, when done with intention, will actually improve patient outcomes while also improving our capacity to help more people. The course will borrow concepts from psychology, the world of sport, finance and even gambling and show how we can employ the same strategies used in these disciplines to enhance our own thinking, combat burnout and improve clinical care.

Learning objectives:

1. The learner will be able to articulate why inefficiency in clinical practice can contribute to burnout and poor clinical care.
2. The learner will be able to identify common areas of clinical inefficiency and mental fatigue.
3. The learner will be able to explain ""process oriented thinking"" and how it relates to making efficient clinical decisions.
4. The learner will be able to employ communication strategies that both improve ease of communication and enhance therapeutic alliance.
5. The learner will be able to explain how to use objective measurements appropriately and efficiently to structure plans of care

Kevin McEnroy is a Board Certified Clinical Specialist in Sports Physical Therapy practicing out of Brigham and Women's Hospital in the Foxboro clinic. He attended Stonehill Colllege for his undergraduate education majoring in neuroscience with a minor in biochemistry. He has a diverse work and educational experience prior to attending physical therapy school including work experience in genetic and neuroscience research laboratories. Kevin is passionate about meta-science, golf, football, sport performance training, and hobby gambling. He brings an analytical approach to all of his interests and enjoys leveraging his wide knowledge base to inform his physical therapy practice and everyday life.

4:00 - 5:00 pm Room 101	**Equine Movement in Physical Therapy: Enhancing Motor Function through Hippotherapy**

Areas of practice: Neurology Orthopedic, Manual Therapy, Sports Medicine, Pain Management, Pediatrics, Pelvic Health

Imagine a treatment so powerful that it can achieve up to 5,000 repetitions in just 5 minutes, dramatically outpacing traditional therapeutic methods. This is the reality of hippotherapy, a groundbreaking strategy used exclusively by licensed physical, occupational, and speech therapy practitioners. By harnessing the unique movement of horses, hippotherapy transforms the way we approach rehabilitation.

This versatile intervention is suitable for individuals of any age and with a variety of conditions. Whether you're working with stroke survivors, individuals with multiple sclerosis (MS), or those in need of female pelvic floor therapy, hippotherapy offers a dynamic and effective solution. It promotes core stability, balance, and overall motor function, addressing a wide range of physical challenges.

Melissa Jean Jarzynski excels in integrating physical therapy with equine-assisted practices, emphasizing trauma-informed care. As the owner of Happy Trotters, Melissa Jean PT, and Entrainment Therapy Solutions, and with over 19 years of expertise, Melissa is a board-certified Hippotherapy Clinical Specialist and certified with PATH International and EAGALA. Her pioneering spirit is most evident in her program, "Finding Peace in the Paddock™.

This groundbreaking work focuses on the interplay between human and horse heart rates, revealing significant benefits for those dealing with trauma, stress, and chronic pain. Her research in this area, though preliminary, has already begun to illuminate the profound effects of equine-assisted therapy.

4:00 - 5:00 pm Room 103	**Integrating Lifestyle Medicine Principes into Outpatient Orthopedic Practice**

Areas of practice: Geriatrics, Orthopedic, Manual Therapy, Sports Medicine, Pain Management

This course will present on how 4 of the key pillars of lifestyle medicine – nutrition, sleep, stress and exercise – affect musculoskeletal health, and discuss how screening, education and intervention can be integrated into outpatient physical therapy practice. An example of successful implementation of this principles - from program design through intake and EMR optimization and clinician education - in one outpatient practice will be shared. Integrating lifestyle medicine concepts into outpatient orthopedic care is an opportunity to improve patient outcomes and demonstrate physical therapists practicing at the top of the license.

Learning objectives:
1. Understand how 4 of the key pillars of lifestyle medicine – nutrition, sleep, stress and exercise – affect musculoskeletal health.
2. Define evidence-informed practices for screening, educating, and intervening in each of these 4 lifestyle medicine domains.
3. Identify opportunities & actions for implementation in outpatient practice.

Dr. David Pavao is a Doctor of Physical Therapy who specializes in manual therapy, acute and chronic spine pain, headaches, sports injuries, TMJ, and vertigo. He is a Board-Certified Orthopedic Clinical Specialist and serves as Highbar's Chief Clinical Officer. He is currently an adjunct professor in the Doctor of Physical Therapy program at his alma mater, where he earned the Academic Excellence Award as a student and the Outstanding Alumni Award in 2013. Dave also serves on the Legislative Committee of the Rhode Island American Physical Therapy Association.
Michelle Fuleky, PT, DPT, OCS

Mara Hochman, PT, DPT, OCS is an Orthopedic Clinical Specialist and Doctor of Physical Therapy who specializes in orthopedics as well as spinal and shoulder-related injuries or conditions. She is passionate about helping her patients get back to the activities they love to do while instilling a love of exercise along the way. She completed the Memorial Hermann Orthopedic Residency, where she was also a faculty member, and has earned certification in trigger point dry needling. Mara now serves as an adjunct faculty member for the Highbar Orthopedic Residency program.

Cam Marcotte, PT, DPT, NCS, OCS Holding a Bachelor's of Science in Kinesiology from Louisiana State University and a Doctor of Physical Therapy degree from MCPHS University, Marcotte boasts dual certifications in Neurologic and Orthopaedic Physical Therapy. His diverse expertise includes certifications as a Blood Flow Restriction Rehabilitation provider, an ImPACT Trained Physical Therapist, and proficiency in dry needling.

4:00 - 5:00 pm Room 108/ 109	**Is it Harassment or the Disease Process?**

Areas of practice: Communication, Professionalism, Self Care, Private Practice: business strategies, marketing, cash-based practice

Most states and employers have instituted mandatory sexual harassment training for all management and in many cases all employees. These mandatory courses typically cover harassment by a manager, or by a peer; but in Healthcare, the most common harasser may not be a fellow employee but a patient or visitor. It is not uncommon in healthcare to hear staff brush off sexually inappropriate comments or even physical sexually inappropriate actions due to a patient's age or diagnosis. These seem actions in other settings would be categorized as sexual assault. While not frequently discussed, the EEOC says that employees have a right to be protected from sexual harassment from customers once an employer is aware. This course will discuss the legal liability, the prevalence as identified by recent research, and the impact on employees health and quality of life.

We will review some of the policies for prevention and response that large medical organizations are beginning to implement to protect their employees. Finally, we will consider how these policies and considerations can be implemented in the unique treatment environments of therapists in various treatment settings and practices. This course is not meant to be the final solution, but to open the conversation to a topic that we have ignored or hidden for decades.

Learning objectives:

- Attendees will be able to describe the employer's legal responsibility in a case of sexual harassment of an employee by a patient.
- Attendees will identify 3 prevention strategies that can be implemented in their treatment environment.
- Attendees will have speaking points to take to their companies/practice to begin discussion and implementation of policies and procedures to address harassment of employees by patients/clients

Rebecca Slocum, PT, DPT, RAC-CTA, CDP is a Physical Therapist and Clinical Director with Powerback Rehabilitation. Becky has worked in various acute and post-acute settings for over 20 years. She has held regional roles in operations, compliance, regulation and clinical areas. She has presented at the state and national levels on topics relating to Medicare regulation, Medicare payment, dementia care, and clinical documentation. Becky has a passion for improving patient outcomes and understanding the why behind federal regulation.

Jennifer Rucci MA CCC-SLP currently serves as the Off-Campus Placement Coordinator and Clinical Faculty Member at Southern Connecticut State University. Before joining the university, Jen held the position of Vice President of Clinical Education at Fusion Rehab Services, where she was responsible for overseeing clinical education and operational management of nursing homes in the New England region. She has held the position of StAMP (State Advocate for Medicare Policy) within CSHA for the past 6 years. With over 6 years of experience holding a RAC-CT certification, Jen has primarily specialized in dysphagia, specifically conducting FEES swallowing exams throughout New England. Prior to her current role, Jen has accumulated over 10 years of clinical experience working in various nursing homes in Connecticut.

4:00 - 5:00 pm **Room 113**	**Nutrition Screening and Counseling in Physical Therapy**

Areas of practice: Orthopedic, Manual Therapy, Sports Medicine, Pain Management

To fully appreciate the biopsychosocial model of patient care, a more holistic approach needs to be taken by physical therapists (PTs) incorporating nutrition, as permitted by the Massachusetts Physical Therapy Practice Act(1). Extensive research confirms that nutrition influences aspects of musculoskeletal rehabilitation, such as tissue healing(2), skeletal health(3), muscle recovery(4), and peripheral and central nervous system sensitization(5). Despite nutrition's impact on rehabilitation, a low prevalence of nutrition screening and counseling exists in current PT practice(6,7). Not assessing a patient's nutritional status has thus resulted in a lack of referrals from PTs to registered dietitian nutritionists when appropriate(7,8). Inadequate nutrition screening, counseling, and referral impacts patient outcomes such as recovery length(9), pain severity(9,10), strength(9,11), functional capacity(9), comorbid diet-related chronic disease(s)(12), health-related QOL(13), and healthcare utilization and costs(11,14). Barriers to incorporating nutrition within PT practice include lack of formal nutrition education within DPT curriculums(15,16), lack of accessible nutrition information specific to PTs(6,17), and poor self-beliefs regarding the ability to screen and educate on nutrition(7,18). It is our hope that further exploration of ways to overcome these barriers will lead to improved patient outcomes. PTs and students will benefit from learning about evidence-based nutritional guidelines that are within the scope of PT practice, thus increasing awareness and confidence. By providing these guidelines, the prevalence of incorporating nutrition screening and counseling can be improved within the field.

Learning objectives:

1. Attendees will be able to define the role of nutrition within a physical therapist's scope of practice.
2. Attendees will be introduced to ways to incorporate evidence-based nutrition screening and nutrition counseling strategies in their own practice when managing patients with musculoskeletal-related pain/conditions.
3. Attendees will identify when referral to a registered dietician is appropriate in order to further improve patient-centered care

Dr. Marinko is a Board-Certified Clinical Specialist in Orthopaedic Physical Therapy, Clinical Associate faculty member in the Doctorate of Physical Therapy program, a faculty member in the Orthopaedic PT Residency Program, and the Director of the Fellowship in Orthopaedic Manual Physical Therapy at Boston University. Dr. Marinko is a Fellow of the American Academy of Orthopaedic Manual Physical Therapy. She holds a Doctor of Science in Movement and Rehabilitation Sciences from Boston University. Currently she practices at the Boston University Physical Therapy Center where she specialized in manual therapy, orthopedics, and sports related injuries.

Carly Golden is a rising third-year graduate student in the Doctorate of Physical Therapy program at the Sargent College of Health and Rehabilitation Sciences at Boston University. Her interests include sports injuries and training, pelvic health, and neurological rehabilitation. Carly has a B.S. in Human Nutrition, Foods, and Exercise with a minor in Integrative Health and Wellness from Virginia Tech. Her experience working in dietetics has sparked an interest in the relationship between nutrition and rehabilitation sciences.

Kelsey Stromberg is a rising third-year graduate student in the combined B.S. in Health Studies/Doctorate of Physical Therapy program at the Sargent College of Health and Rehabilitation Sciences at Boston University. She has interests in orthopedic and neurological rehabilitation. After taking nutrition courses and working with athletes during undergraduate, Kelsey became interested in the importance of utilizing nutrition to enhance performance and recovery.

Platform Presentations

9:00 – 9:30am

The Relationship between Psychological Readiness and Instability History in Adolescents after Anterior Shoulder Stabilization

Dylan Roman, PT, DPT

9:30 – 10:00am

Age And Sex Differences In ACL-RSI Subscale Scores Of Emotion, Risk-Appraisal, And Confidence After ACLR

Dylan Roman, PT, DPT

10:00 – 10:30am

Finding Flow: A pilot study investigating the flow state in students and student-athletes

Charles O'Connor SPT, Annika Welch SPT, Zachary Jacobs SPT, Arup Mehta SPT, Jordyn Schneiderman SPT, Madyson Williams SPT, Dr. Justin Beebe PT PhD

10:40 – 11:10am

Interrupting the Ebbinghaus Forgetting Curve through the use an Integrated Cross-Curricular Anatomy Thread

Benjamin Adams PT, DPT, PhD, OCS, Rebecca Pham PT, DPT, CCS, Keshrie Naidoo PT, DPT, EdD

11:10 – 11:40am

Utilizing Injury Surveillance in Military Populations: A First Step for Injury Prevention

Meredith Young PT, DPT, Benjamin Adams PT, DPT, PhD

2:45 – 3:15pm

Advancing APTA Core Values: Integrating Spirituality into Physical Therapy

Pamela Donlan PT, DPT, EdD, Camille Powell, PT, DPT

3:15 – 3:45pm

Improving Therapeutic Alliance with BIPOC Patients experiencing Chronic Pain

Courtney McKenzie PT, DPT

4:00 – 4:30pm

Quantifying Freezing of Gait in Parkinson's Disease with novel technology: a case study

Valerie Gibson, PT, DPT, Lisa Donahue, PT, MPT, NCS

4:30 – 5:00pm

Enabling Clinicians to Use AI Safely

Jacob Michalski, PT, DPT, Emily Lewandowski

Posters

Full Squeeze Ahead! What happens now that my chest is never going to close?
Jordan Goodman PT, DPT, CCS

Comparing student scores on the 10 meter walk test with those of inertial measurement units: What can we learn?
Megan Frazier, Tara Maroney, Madison Bis, SPT, Gavin McConnell, SPT

Management of long thoracic nerve palsy in a pickleball instructor due to parsonage turner syndrome
Frederick M Maurin Jr, PT, DPT, OCS, Christopher Keating, PT, DPT, OCS, Cert. MDT, FAAOMPT

Walking Program for Stroke/Neurology Patients: A Process Improvement Project
Owen Blackwell, PT, DPT

Effect of Exercise in an Older Adult Population: a Comparison of Two Community Based Senior Exercise Programs
Erin Craig, PT/s Carissa Chu, PT/s, Olivia Demers, PT/s, Danielle Fernandes, PT/s, Erin Reardon, PT/s, Jessica Rydingsward, PT, DPT, CCS, GCS, Olivia Demers, PT/s, Danielle Fernandes, PT/s, Erin Reardon, PT/s

Managing Kinesiophobia in a Basketball Athlete through Student-Organized Pro bono Clinic: A Case Study
Yingnan Sun, Yuxuan Wang, PT, DPT, OCS, Nan Yang, PT, DPT

The impact of Trikafta on airway clearance technique utilization in individuals with Cystic Fibrosis
Nina Testa, SPT, Jenna Powers, DPT, Justin Bebee, DPT, Sydney Shumway, SPT, Brandon Santos, SPT, Izabella Warren, SPT, Isabella Loffredao, SPT, Lauren Whitman, SPT, Ana Gallotto PT, DPT

Enhancing Conservative Care for Glenohumeral Osteoarthritis: Insights from a Survey of Physical Therapists
Alex Weimer PT/s, Kristina Osorio PT/s, Caylyn Rodriguez PT/s, Michael Sohn PT/s, Catherine Schmidt PT, DPT, MS, PhD

Does Mindful Coloring Decrease Test-Taking Anxiety in DPT Students? A Pilot Study
Susan Mercik-Davis, PT, MS, DPT, Tracie Klekotka, PT DPT, MPH, CLT-LANA, Anthony Boele SPT, Yasmeen Guerrier SPT, Caroline Porter SPT, and Sydney Washburn SPT

Posters

Student Readiness for Clinical Education Experiences Based on the Student Perspective
Lauren Arcibal, PT, DPT, GCS, Tracie Klekotka, PT, DPT, MPH, CLT-LANA, Nicholas Gott, SPT, Clark Marchand, SPT, Zachary Martin, SPT, Kyle Paynter, SPT, Jordan Wing, SPT Sandra Sego, PhD

The Effects of Instrument-Assisted Soft Tissue Mobilization on a Patient with Calf Muscle Strain: A Case Report
Matthew Natanson PT, DPT, OCS, CMPT Clare E. Safran-Norton PT, PhD

Cycle Syncing: Does Cycle Syncing Actually Affect Exercise Performance?
Jolie Diskin, SPT, Katherine Smith, SPT

Telehealth Rehabilitation of a Chronic Non-union Greater Tuberosity Fracture after Fall - a Case Study
Yuxuan Wang, PT, DPT, OCS, Yingnan Sun

Balancing precision and perception: Management of a complex case of chronic heel pain
Anna Rubakhina PT, DPT, OCS, Lee Marinko, BSPT, ScD

The Impact of Social Determinants of Health on Physical Therapy Discharge Planning in a Patient with Orthostatic and Exertional Hypotension: An Acute Care Case Report
Alison Squadrito PT, DPT, GCS, Lauren Andrews PT, DPT, GCS

Does educational disruption related to Covid-19 impact Student Self-Assessment on the CPI?
Whitney Osborn, PT, DPT, PhD; Justin Beebe, PT, PhD, Carolyn Rodgers, PhD, MPH, MHS, MCHESR, NASM-YES, GPTS, Renae Gorman, PT, DPT, EdD, Dolores Wolongevicz, PhD, RD, LDN