Pediatric Vestibular Therapy:

Young Children Through Adolescents

Inger Brueckner, MS, PT



Faculty

Inger Brueckner, MS, PT has practiced vestibular dysfunction since 1994. She began teaching after completing the Emory University/APTA Vestibular Competency course in 2003. In 2010 she joined the Rocky Mountain Hospital for Children Center for Concussion as the creator and director of PACER (Progressive Acute Concussion Exertional Rehabilitation). She is a member of a multi-disciplinary team focused on providing cutting-edge, effective, safe rehabilitation. Working for Presbyterian/St. Luke's Medical Center in Denver, CO, she has presented research findings at APTA CSM, published journal article, book chapter, developed protocols, and been invited to speak at international, national and local conferences. She is passionate about providing the best care for all patients in a collaborative medical team, sharing lessons learned through continuing education. Disclosure: Financial: Inger Brueckner receives a speaking fee from Education Resources for teaching. Non-Financial: She has no non-financial relationships to disclose.

About this Course

This course will present current understanding of the scope of the vestibular dysfunction problem, best practices, and systematic evaluation and treatments to address vestibular deficits in the school-aged child and adolescent. The course combines lecture, hands-on lab, and case study to accurately and efficiently address dysfunction. This course is updated as new information and guidelines are published. The primary goal is to challenge therapists to re-think movement and stillness in their practice, using a comprehensive understanding of the vestibular system. Principles presented can be applied across the lifespan and with a multitude of disability levels.

Objectives

- Understand how vestibular dysfunction presents and how it affects children and adolescents
- Choose the most relevant, time efficient evaluations specific to functional deficits and be able to take these findings to create and modify a treatment program
- Modify current treatment plans to address vestibular dysfunction including advancing and dosing of the intervention
- Recognize dysfunction that can be addressed and red flags that signal the need to referral to other medical providers
- Educate patients, caregivers and other medical team members about the identified vestibular involvement in the child's functional complaints

Audience

This course is appropriate for PTs, PTAs, OTs OTAs, and health practitioners that work with school-aged children and adolescents AGE 5-18.



Schedule – Day 1

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7:30-8:00 8:00-09:45	Registration/Continental Breakfast Anatomy and physiology of the vestibular system, balance, posture, head righting, gaze stabilization, updates on evidence
9:45-10:15	Development and maturation of vestibular system, age differences, multi-sensory reweighting, postural sway
10:15-10:30 10:30-12:00	Break Epidemiology in children, presentation including school difficulties associated with vestibular dysfunction, pathophysiology, nystagmus, BPPV, migraine related syndromes, otitis media, UVL, BVL, mTBI and trauma, central dysfunction, ototoxicity, association with common disorders: CP, ADHD, cochlear implants, anxiety and visual motion sensitivity
12:00-1:00	Lunch-on your own
1:00-1:20	Treatment principles: adaptation, habituation and substitution, critical periods, difference of adults and children, red flags and cautions
1:20-2:15	Evaluation subjective history, screening, functional observation, VBI testing, movement seeking and avoidance behaviors, ocular motor screening
2:15-2:45	LAB #1: Ocular motor screening and relationship to VR
2:30-2:45	Positional testing for BPPV and modifications for age/ability, treatment with CPT, home program, modified Brandt-Daroff
2:45-3:15	LAB #2: Dix-Hallpike, modified Brandt-Daroff, CRT
3:15-3:30	Break
3:30-3:45	Specific vestibular testing VOR, VOR cx, head thrust, head shaking, imaginary targets, MSQ, DVA
3:45-4:00 4:00-4:15	LAB #3: Vestibular tests Review of lab testing, relating to function, and introduction of exercises with visual emphasis
4:15-5:30	LAB #4: Treatment with ocular motor ex, gaze stability, Brock string, laser pointers, functional activity, body-on-head motion, balance, dual task, throw/catch modifications

Schedule – Day 2

7:30-8:00	Continental Breakfast		
8:00-8:15	Case presentations		
8:15-9:30	Autonomic dizziness, syncope, orthostatic intolerance, POTS, sex differences, anxiety, and nausea		
9:30-9:45	Dynamic movement assessments and objective measures		
9:45-10:00	Balance retraining		
10:00-10:15	Break		
10:15-10:30	Clinical decision making for HEP, dosing, modifications for tolerance, progression of difficulty, giving feedback during VR, diaphragm function, startle posture and clinical take-a-ways, Sensory re-weighting and visual vertigo		
10:30-11:00	LAB#5 Symptom management, relaxation techniques, grounding, manual therapy		
11:00-11:30	School considerations, visual ergonomics, cervical involvement, modification of play and inclusion with head motion, visual vertigo, convergence insufficiency		
11:30-12:00	Lifestyle management, exertion and conditioning, sleep, hydration, screen time		
12:00-1:00	Lunch on your own		
1:00-1:30	Exertion, sleep hygiene, hydration, visual ergonomics, HEP principles		
1:30-2:15	Exercise examples inclusion of core stability, visual focus, balance, discussion of modifications for low vision, decreased control of posture and movement, swings, low cost and minimal equipment options		
2:15-3:00	LAB #6: Group case discussion emphasis on using principles for caseloads and available equipment		
3:00-3:45	Continuation of group presentation and discussion		
3:45-4:00	Resources, Q and A		



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Credits

This course meets the criteria for 14.5 contact hours (1.45 CEUs). ERI is an approved agency by the Physical Therapy Board of **CA**. Application has been made to the **NJ** and **NV** State Board of Physical Therapy Examiners. The **PA** State Board of Physical Therapy accept other state board approvals.

Approved provider by the NY State Board of Physical Therapy for 17.4 contact hours.

Approved provider of continuing education by the American Occupational Therapy Association #3043, for 14.5 contact hours (1.45 CEUs) - Intermediate Level Occupational Therapy Process: assessment, intervention. The assignment of AOTA CEUs does not imply endorsement of specific course content, products or clinical procedures by AOTA.

NBCOT professional development provider – 14.5 PDUs

12 hours of this course qualify towards the discipline-specific hours for the 20-hour requirement for NDTA re-certification. They do NOT qualify towards the 8-hour NDTA Instructor requirement for re-certification.

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Location and Date - 2020

March 6-7	Culver City, CA	Can Do Kids
May 15-16	Middletown, NY	SUNY Orange County Community College
Nov 8-7	Las Vegas, NV	Summerlin Hospital Medical Center

"This course gave so much new information and treatment techniques that I can bring to the school setting right away."

- L. Crask, PT



\$435 fee. Group rate (3 or more) must be mailed/faxed together \$410. Deadline for registration is 3 weeks prior to course. Registration will be accepted after deadline on a space available basis. Cancellation accepted up until 2 weeks before course, minus an administration fee of \$75. NO REFUNDS WITHIN 2 WEEKS OF COURSE.

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Pediatric Vestibular Therapy/Brueckner □March/CA □May/NY □Nov/NV

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