

# Maximizing Cardiovascular and Pulmonary Function in Patients to Decrease Readmissions and Reach Optimal Outcomes

If You Can't Breathe Nothing Else Matters

Donna Frownfelter DPT, CCS, RRT, FCCP

## Faculty

**Donna Frownfelter, DPT, CCS, RRT, FCCP** is an internationally known consultant, teacher, practitioner and author best known for the widely used text, coauthored with Elizabeth Dean PhD, PT, *Principles and Practice of Cardiopulmonary Physical Therapy* 5<sup>th</sup> edition. Dr. Frownfelter co-authored *Cardiovascular and Pulmonary Patterns, Guide to PT Practice* with Dr. Marilyn Moffat, 2007. Dr. Frownfelter's experience ranges from NICU, to medical/surgical critical care in large medical centers, to skilled nursing and home care. She has worked with the school systems to integrate and educate children with asthma and children who are ventilator assisted in the classroom and participation in the community. She is currently involved with patient groups through the Respiratory Health Association of Metropolitan Chicago to promote Mindful Breathing and Self Care. She has taught CVP Physical Therapy for over 35 years at Northwestern University Physical Therapy and Human Movement Sciences and is currently full-time faculty at Rosalind Franklin University of Medicine and Science, the College of Health Professions, Physical Therapy Department. She is also the Program Director for Rosalind Franklin University's online Transition Doctor of Physical Therapy Program.

*Disclosure: Financial: Donna Frownfelter receives a speaking fee from Education Resources as well as royalties from Mosby Publishers. Non-Financial: She has no non financial relationships to disclose.*

## About this Course

Every patient you treat is a cardiovascular and pulmonary patient. No matter what the setting you practice in from Acute Care to Skilled Nursing, Long Term Acute Care, to Home Care or Outpatient Therapy or school settings, your therapy outcomes will be limited by primary and secondary cardiovascular and pulmonary impairments. Using best practices to examine and evaluate clients and provide optimal interventions safely will maximize functional outcomes and help prevent re-hospitalizations which is of primary concern and focus in the current health care arena.

## Objectives

- ① Describe and monitor normal and abnormal cardiopulmonary functional variety of practice settings.
- ① **Interpret** the results of monitoring and apply to PT, OT, RT & SLP interventions, progression of therapy and re-evaluation.
- ① Identify and incorporate **ventilator strategies** in therapeutic exercise by modifying breathing patterns to facilitate speech and movement optimal function.
- ① Identify **red flags** to raise concern for issues which might prevent success with discharge from various settings and address solutions to optimize transitions to lower levels of care or self care.
- ① Interact with the inter-professional team across the continuum of care to provide optimal therapy and coordination to **decrease re-hospitalization**.

## Audience

Physical Therapists, Physical Therapist Assistants, Occupational Therapists, Occupational Therapy Assistants working with school age through adult clients with cardiovascular and/or pulmonary impairments

Help your patients achieve better outcomes.

## Schedule – Day 1

8:00-8:30	Registration/Continental Breakfast
8:30-9:00	Overview of course, Interaction with participants to assess special needs and wants.
9:00-10:30	Clinical Applications of Cardiovascular and Pulmonary (CVP) Anatomy and Physiology
10:30-10:45	Break
10:45-12:00	Pathophysiology of Primary and Secondary CVP Impairments
12:00-1:00	Lunch (on your own)
1:00-2:45	Examination and Evaluation of Patients Applications to PT, OT & SLP
2:45-3:00	Break
3:00-4:30	Intervention: Mindful Breathing, Ventilatory Strategies Lecture/Lab

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We invite you to share your ideas with us, post a clinical challenge you are currently facing, or share a great therapy tip with your colleagues. Please visit us on Facebook, LinkedIn and our blog.



## Schedule – Day 2

8:00-8:30	Continental Breakfast
8:30-10:30	Airway Clearance Interventions to facilitate speech and movement
10:30-10:45	Break
10:45-12:00	Treatment Progressions, Case Studies
12:00-1:00	Lunch (on your own)
1:00-2:30	Respiratory Support Equipment, i.e. Oxygen, Titration with exercise, Oximeters, Respiratory Muscle Trainer, Body Jackets, Wheelchair Supports for optimal Ventilation
2:30-2:45	Break
2:45-3:30	Reasons for re-hospitalization of CVP patients
3:30-4:30	Empowering Patients and family/ significant others for Self-Advocacy Self Management and Self Care

"With the penalties assigned to the acute care hospitals regarding rapid readmission, the focus has been on COPD, CAF, and AMI. Ms. Frownfelter has proven herself a leader in this field ... I found her material to the point yet very descriptive. I enjoyed her hands-on format and delivery. I look forward to making an immediate impact on my working environment(s) when I return on Monday."

-Stephen Leonard, PT

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## Credits

This course meets the criteria for 13 contact hours (1.3 CEUs).

Application has been made to the **OH** Physical Therapy Association. The **KS** and **MO** Boards of Physical Therapy accept other Board's approval.

Approved provider by the **NY** State Board of Physical Therapy for 15.6 contact hours.



Approved provider of continuing education by the American Occupational Therapy Association #3043 for 13 Contact Hours (1.3 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 - 13 PDUs.



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This course is offered for up to 1.3 ASHA CEUs (Intermediate level, Professional area)

## Locations and Dates - 2019

September 27-28, 2019

Kansas City, MO

Truman Medical Center  
Lakewood

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Limited enrollment. We encourage you to register online!

### **Maximizing Cardiovascular and Pulmonary Function in Patients /Donna Frownfelter**

☐ Sept/OH

#### **Course Registration Form**

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Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Needed in the event of an emergency scheduling change

Email: \_\_\_\_\_

Please clearly print your email address for course confirmation

Employer: \_\_\_\_\_

Discipline: \_\_\_\_\_ Specialty: \_\_\_\_\_

How did you learn of this course \_\_\_\_\_

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