Baby Beats and Breaths:
Therapeutic Interventions for the Premature Infant with Cardiopulmonary Compromise
Holly Schifsky, OTR/L, CNT, NTMTC, CBIS

Faculty
Holly Schifsky has worked in pediatrics for 20 yrs., with 15 yrs. in a level 4 NICU. She is a Certified Neonatal Therapist, Certified Neonatal Touch and Massage Therapist, Certified Brain Injury Therapist, a member of National Association of Neonatal Therapists, and has completed 6-month mentorship in infant/child NDT. She has worked within the NICU and NICU follow-up clinic to maximize patient and family outcomes for the most complex premature and medically-fragile term infants. Holly received her BA in OT from the University of North Dakota. She is a faculty member for the Neonatal Touch and Massage certification. She received the National Association of Neonatal Therapists Clinical Excellence award in 2018 for her clinical expertise and dedication to advancing the therapeutic interventions for NICU infants with cardiopulmonary conditions.

Disclosure - Financial: Holly Schifsky receives an honorarium. Non-Financial: She has no non-financial relationships to disclose.

“Amazing course. The direct application of the course content is invaluable. I cannot wait to bring the information back to my NICU.”
- Katelyn F. OT

About this Course
This course will focus on the cardiopulmonary implications for the premature or medically-complex infant as related to physiological stability, evolving motor control, sensory stability, and transition to oral motor skills that support feeding. It will focus on advancing the critical reasoning skills of the neonatal therapist to support the infant’s ability to obtain foundational motor and sensory skills. These skills include the ability of the infant to cough, produce audible phonation, oral motor skills, swallow skills, trunk facilitation, gestational age appropriate positioning/handling to support the emergence of gross motor skills for postural stability. You will learn movement analysis skills (via lab time and video presentations) to assess breathing patterns, facilitation techniques to support trunk development, positioning strategies to support chest wall development, and feeding techniques to maximize postural control. We will discuss current literature as relevant to this topic and apply a systems theory approach for case study treatment planning.

Objectives
- Discuss anatomical and kinesiological developmental changes for the newborn chest wall
- Discuss effects of prematurity and cardiopulmonary co-morbidities on chest wall development
- Describe chest wall movement assessment and treatment strategies to maximize infant outcomes
- Design developmental positioning and handling interventions to reduce chest wall deformities
- Assess the effects of invasive and non-invasive pulmonary support to the facial and oral structures as related to non-nutritive sucking and oral feeding progression
- Incorporate postural support with positioning and handling of infants for improved chest wall mobility during oral feeding
- Demonstrate integration of a systems approach to individualized care plan for the infant with cardiopulmonary compromise

Audience
Neonatal therapists, PTs, PTAs, OTs, OTAs, and SLPs, with experience working with infants in the Neonatal Intensive Care Unit.

Course Requirements
In order to maximize the learning experience during lab time, each participant needs to bring a wash cloth, infant burp cloth, and a soft body doll. The ideal size would be 10-15”, but any soft body doll will work.
Schedule – Day 1

7:30-8:00  Registration/Continental Breakfast
8:00-9:00  Typical Development of the infant chest wall
- Developmental changes to the anatomical shape and function as related to gross motor development postural control, feeding, and maturation
9:00-10:00 Cardiopulmonary (CP) system of the premature or critically-ill term infant: A therapist’s guide for critical reasoning.
- Unique changes required for the infant to have a successful in-utero to extra-utero transition
- Common congenital heart defects and effects on infant development
- Post-surgical cardiac repair on the developing chest wall
10:00-10:15 Break
10:15-12:00 Critical reasoning to assess breathing patterns for the premature infant.
- Anatomy, risk for pulmonary dysfunction
- Common pulmonary co-morbidities
- Types of pulmonary support: ventilator settings, non-invasive support
12:00-1:00 Lunch (on your own)
1:00-3:00 Assessment of breathing with movement analysis
- Components of adaptive and maladaptive breathing patterns
- VIDEO: analyze/assess breathing patterns for infants in the NICU
3:00-3:15 Break
3:15-4:30 LAB + Lecture: Small Baby Teams: Positioning and Handling of the 22-32 week premature infant with focus on chest wall development
- Rationale for positioning strategies to support trunk development
4:30-5:00 Case Study: Positioning Strategies

Schedule – Day 2

7:30-8:00  Continental Breakfast
8:00-9:00  LAB + Lecture: Musculoskeletal (MS) positioning/handling for the 32-week infant and older
- Facilitated pelvic tuck
- Abdominal activation
- Transition away from developmental positioning devices and back to sleep
9:00-10:30 LAB + Lecture: MS assessment and facilitation for infants 32 weeks and older
- Spinal assessment for maladaptive breathing
- Scapular and pelvic assessment and movement facilitation
10:30-10:45 Break
10:45-12:00 LAB + Lecture: ADLs with consideration for the CP system
- Diapering & Swaddling
- Active prone for transition to Tummy Time
- Oral motor development for prefeeding skills
12:00-1:00 Lunch (on your own)
1:00-2:00 LAB + Lecture: Feeding Interventions
- Anatomical oral/facial assessment post invasive pulmonary support
- Postural support
- Auditory assessment
- Motor behaviors
2:00-3:00 Infants with tracheostomy tubes
- Effects on postural control
- Modification to therapeutic interventions
3:00-3:15 Break
3:15-4:00 Advancing critical reasoning using a systems approach: consideration of scars, fascia limitations, edema, reflux (GERD)
4:00-4:30 Case Study

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Credits
This course meets the criteria for 14.5 contact hours (1.45 CEUs). The AZ, GA, and PA Boards of Physical Therapy accept other state boards' approvals. Application has been made to the NJ Board of Physical Therapy Examiners, and the OH and TN Physical Therapy Associations. This course meets the CO requirements for 14.5 contact hours (1.45 points) – Intermediate Level, CAT 1. TX PT Association accredited provider. Approved provider by the NY State Board of PT for 17.4 contact hours. Application has been made to the FL Physical Therapy Association for 17 continuing education 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.

Approved provider of the FL Board of Occupational Therapy-CE Broker-17 hours. This course meets the approval of the TX Board of OT Examiners.

This course is offered for up to 1.45 ASHA CEUs (Intermediate level, Professional area).

This program has been submitted for approval for 14.5 clock hours of continuing education credit by the TX Speech Language Hearing Association (TSHA).

NBCOT professional development provider-14.5 PDUs.

This course meets the criteria for 14.5 hours towards Neonatal Therapy Certification.

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Locations and Dates - 2020

Jan 24-25 St. Petersburg, FL Johns Hopkins All Children’s Hospital Outpatient Center
Feb 7-8 Phoenix, AZ Phoenix Children’s Hospital
March 27-28 Valhalla, NY Blythedale Children’s Hospital
May 1-2 CO Springs, CO UCHealth Memorial Hospital North
June 13-14 Cincinnati, OH Bethesda North Hospital
Aug 15-16 Atlanta, GA Children’s Healthcare of Atlanta Office Park
Oct 2-3 Memphis, TN Methodist North Hospital
Nov 7-8 Houston, TX Texas Children’s Hospital

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Limited enrollment. We encourage you to register online!

Baby Beats and Breaths/Schifsky

☐ Jan/FL  ☐ Feb/AZ  ☐ March/NY  ☐ May/CO  ☐ June/OH  ☐ Aug/GA  ☐ Oct/TN  ☐ Nov/TX

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