1. Ensuring Our Future in Patient Care: Expertise in Assessment: This presentation will discuss recent changes and the evolution of the healthcare system in the United States. Current trends for hand therapy reimbursement and future payment models will be explored. A case will be made for direct referral of non-surgical hand therapy cases to the hand therapist. This will require hand therapists to develop expertise in assessment and management of upper extremity disorders. The need for triaging with other medical providers to insure the proper routing of patients that is cost effective and outcome based will also be discussed.

2. Is It CID, CIND, or TFCC? Getting Your Hands around Wrist Physical Exam: Our understanding of wrist instability has grown exponentially over the last decade. This increased understanding related to changes in the normal biomechanical function (pathomechanics) of the wrist joint, requires reassessment of hand therapy interventions. Traditional therapy programs can be enhanced by advanced orthotic techniques that allow stabilization of the carpus while permitting increased function. The pathomechanics of carpal instability from the radial to the ulnar side of the wrist will be examined. Suggestions for orthotic management of wrist instability will be provided. Mid carpal instability patterns and stabilization techniques will also be examined.

3. Saving Wrist Function: Salvage Procedures: This presentation will review common procedures employed to relieve pain and restore function in wrist conditions not amenable to or that have failed primary repair.

4. Cadaveric Dissection: Wrist: Dissection of the wrist will be performed with attention to the ligamentous anatomy, tendon arrangements, and reconstruction/repair techniques employed in treating wrist disorders.

5. Wrists That Aren’t Stable: For many years the static linkage or ring theory served as an understanding of carpal kinematics. Information regarding dynamic stabilization through proprioception and kinesthetic awareness has become an emerging area of research. This presentation will explore the data supporting these concepts and their application to wrist rehabilitation and implications for future rehabilitative approaches.

6. Panel Discussion and Questions: Panel discussion and audience questions.

7. Differentiating Difficult Diagnoses: Are You Choosing the Best Assessment?: Differential diagnosis is “the determination of which of two or more diseases with similar symptoms is the one from which the patient is suffering, by a systematic comparison and contrasting of the clinical findings” (Stedman’s Medical Dictionary for the Health Professions and Nursing, 2011). When clients come to therapy with vague diagnoses such as “pain in limb” or with apparently erroneous diagnoses, it is often left up to the therapist to determine the source of the symptoms. Without a clear understanding of the source of the symptoms, treatment will be haphazard and often ineffective. In this session, evidence-based processes to differentiate the source of a client’s specific complaints will be discussed.

Register Online: https://bit.ly/ce13281
8. **Thumbs That Lose Balance:** Pain can happen in youthful, as well as aging, thumbs. This presentation will explore the various causes of thumb pain and how a “thumb out of balance” may be a reason for a patient to have recurrent visits in your clinic. The cause of each person’s thumb pain requires careful assessment with individualized and innovative therapy. This presentation will improve biomechanical understanding of the kinematics of the thumb, what may cause pain and poor motor patterns, and how to facilitate proper thumb kinematics and functional motor patterns.

9. **CMC Pitfalls and Preferences:** This presentation will describe options for evidence based treatment of basilar joint pain. It will summarize expected outcomes for therapists as well as perceived patient satisfaction.

10. **Cadaveric Dissection: Thumb:** Anatomic structures of the thumb will be dissected. Common pathologic conditions and treatment of these structures will be presented.

11. **Differentiating Shoulder Diagnoses:** This presentation will describe options for evidence based evaluation of the shoulder. It will include critical appraisals of shoulder examinations while identifying tests that are best suited to diagnosis specific shoulder pathologies. Physical examination special tests with the best clinical utility statistics to assist the diagnostic process will be presented. Current research will be cited to provide tools for evidence based management of shoulder dysfunction.

12. **Shoulders That Impinge, Tear, and Freeze:** This presentation will cover anatomy, biomechanics, and the unique characteristics of the shoulder. Common pathologies will be discussed, including the continuum of shoulder impingements advancing to rotator cuff tears, frozen shoulder, and biceps tendinitis. The audience will learn evidence based treatment approaches appropriate for each pathology.

13. **Stiff Fingers and Stuck Tendons:** The revolving door of hand therapy wouldn’t be complete without the patients who show up weeks after surgery, those who don’t do their exercises, and those who we just don’t get moving early enough. This presentation will review careful evaluation and creative interventions to get fingers moving again.

14. **Persistent Edema and Lymphedema:** This presentation will provide an overview of evaluation and evidenced based treatment techniques for management of persistent edema and lymphedema.

15. **Outside The Revolving Door: Acupuncture, Yoga, and Chiropractic:** Panel Discussion and Questions

**LEARNING OUTCOMES:**

- Describe current health care models
- Explain the impact of the ACA on current hand therapy practice
- Describe why it is necessary to develop expertise in musculoskeletal assessment (wrist and hand assessment will be used to illustrate this point)
- Outline the underlying pathomechanics of the unstable wrist
- Define CID, CIND, and TFCC pathologies
- Summarize the relevant clinical testing necessary to assess common and uncommon wrist pathologies
- Identify the indications available for pain relief of wrist disorders
- Determine the indications for functional restoration of wrist disorders
- Describe the types of procedures available for pain relief of wrist disorders
- Identify procedures available for functional restoration of wrist disorders
- Differentiate the ligamentous anatomy of the wrist
- Define the relative relationships of soft tissues including tendons and nerves
- Identify the alterations that occur during wrist procedures designed to treat common wrist disorders
- Describe joint reactions to proprioceptive and kinesthetic input
- Articulate emerging concepts of proprioceptive and kinesthetic rehabilitation techniques and the relevance to wrist rehabilitation

• Summarize advanced techniques such as isolated strengthening of wrist motors and the application of dart throwers motion activities
• Explain the role of special testing in the process of differential diagnosis
• Select special tests based on the sensitivity and specificity of those tests and likelihood ratios
• Interpret special test results based on sensitivity and specificity, positive and negative predictive values, and likelihood ratios
• Calculate sensitivity, specificity, PPV, NPV and likelihood ratios, given data
• Determine how a receiver operating characteristic curve is used to define a cut-off value for a diagnostic test
• Identify normal and abnormal kinematics of the carpometacarpal thumb joint
• Explain the many forces linked to the thumb that require balance for optimal functional use
• Describe the multiple options available for treatment of basilar joint pain and the evidence behind each
• Summarize expectations of outcomes both from an objective perspective as well as a patient satisfaction perspective
• Describe evidence-supported diagnostic special tests of the shoulder
• Explain algorithms to expedite shoulder evaluation
• Identify the best tests to diagnose red flag conditions of the shoulder
• Compare and contrast different tests for differential diagnosis
• Identify current and best physical performance measures of function
• Describe predictive values and clinical utility statistics to improve assessment skills
• Describe the anatomy of the shoulder, especially as it relates to the rotator cuff
• Describe normal biomechanics of the shoulder and pathological changes
• Explain the histopathology and underlying structural changes associated with common shoulder pathologies
• Describe evidence-based treatment approaches for each pathology
• Identify high-risk anatomical areas and joint positions that can lead to stiffness and adhesions
• Determine optimal assessment strategies for accurate diagnosis and measurement of outcomes
• Create interventions to maximize tendon glide and increase range of motion
• Report the difference between persistent edema and lymphedema
• Identify three treatment techniques for persistent edema
• Describe two treatment approaches for lymphedema

**FACULTY:**
- Beverly Bass, OTD, OTR/L, CLT
- Jeanine Beasley, EdD, OTR, CHT, FAOTA
- Paul J. Bonzani, MHS, OTR/L, CHT
- Michael Borst, OTD, OTR, CHT
- John Burns, DPT, MSOM, Dipl-Ac
- Jennifer Jones King, OTR/L, CHT
- Rebecca Neiduski, PhD, OTR/L, CHT
- Virginia O’Brien, OTD, OTR/L, CHT
- Katy O’Leary, MPT, RYT
- Neil Salyapongse, MD
- Bhagwant Sindhu, PhD, OTR/L
- Greg P. Watchmaker, MD

**LEVEL:** Introductory - Advanced

**AUDIENCE:** OTs, PTs, OTAs, PTAs, and Certified Hand Therapists

FOCUS:
  Domain of OT: Client Factors and Performance Skills
  Occupational Therapy Process: Evaluation, Intervention, and Outcomes

COURSE #: 12439

STANDARD PRICE: $495
CEU’s / CLOCK HOURS: 1.15 CEU’s (11.5 Clock Hours)

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