### **Outline**

#### PHYSIOLOGICAL CHANGES IN ACUTE CARE

- Effects of immobility on organ systems
- Respiratory
- Cardiac
- Digestive
- Musculoskeletal
- Early and aggressive mobilization and intervention

#### **ENSURE SAFE AND SUCCESSFUL TRANSFERS** AND MOBILITY FOR ANY PATIENT

- Decision-making process
- · Weight-bearing restriction mobilization
- Specific mobility restrictions
- Pulmonary embolism
- Deep vein thrombosis
- Mobilization management
- Chest tubes - Arterial lines
- IV management

#### ICU/IMC SPECIFIC MANAGEMENT

- Fecal management systems
- Various catheter types

#### **ADVANCED TREATMENT INTERVENTIONS FOR IMPROVED OUTCOMES**

- Orthopedic interventions
- Orthopedically complex patient
- Cutting-edge interventions
- Transitioning to same day ortho discharge
- Shorter length of stay with improved outcomes
- Transfer considerations
- Alternative techniques for NWB
- Transfers for all WB restrictions
- · Burn injury across the lifespan
- Types and degree of burn injury - Burn management and surgical interventions
- Current trends in therapeutic burn intervention
- Cardiac diagnoses
- Cardiac surgery and appropriate therapeutic progression
- Sternal precautions
- Implementation of strength training
- · Neurological emergencies and trends in intervention
- tPA administration and impact on therapeutic intervention
- Management of the severe stroke
- Patients with brief neurological deficits

## Who Should Attend

- Occupational Therapists
- Occupational Therapy Assistants
- Physical Therapists
- Physical Therapist Assistants
- Nurses
- Nurse Practitioners

- · Respiratory compromised patient
- High-flow oxygen management
- COPD
- Fresh take on energy conservation techniques

#### INTERVENTIONS FOR PATIENTS WITH COGNITIVE/PSYCHIATRIC DIAGNOSES

- · Addressing the behaviorally challenging patient
- TBI
- Dementia
- Aggression
- · Motivation of the chronically-refusing patient Major depression and its impact on therapeutic
- intervention

#### **OUTCOME EXPECTATIONS AND GOAL** CONSIDERATIONS

- Short-term vs. long-term goal implementation
- Timing of PT/OTR reassessments
- Predicting the future
- Appropriate goal development

#### **CREATE AN EFFECTIVE AND SUCCESSFUL DISCHARGE PLAN**

- Importance of an interdisciplinary approach
- Pros/cons of sub-acute, home health, and other discharge destinations

#### CARING FOR THE CAREGIVER

- Client-centered practice and inclusion of the patient's support system
- · Manage the challenging family/caregiver

#### **BILLING AND DOCUMENTATION**

- Effective and successful documentation during acute and post-acute stay
- · Document progression in patients with limited function
- · Understand G codes, payment, and billing

#### **ACHIEVE PRODUCTIVITY**

- · History of productivity requirements and their
- Current trends in productivity expectations

#### **Questions?**

Call customer service at

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#### **Live Seminar Schedule**

7:30: Registration/Morning Coffee & Tea

8:00: Program begins

**Lunch:** 1 hour (on your own)

**3:30:** Program ends

There will be two 15-min breaks (mid-morning & mid-afternoon) Actual lunch and break start times are at the discretion of the speaker. A more detailed schedule is available upon request.

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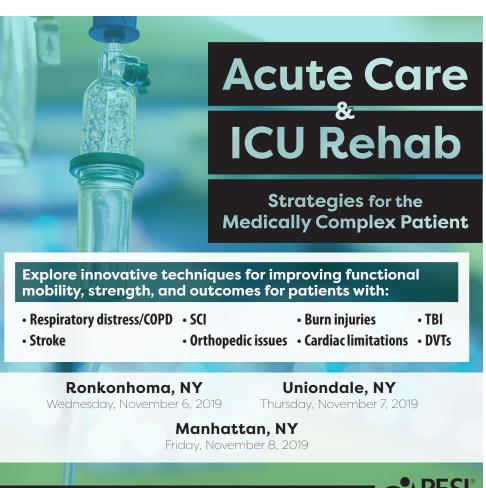
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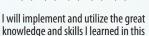




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- B. Conner, PT

Great course. I will use the outcome measures and exercise progression immediately.

- E. Wormold, PTA

# Discover new treatments for:

- Early mobilization
- Management of lines, wires and tubes
- Respiratory distress
- Intubation/vent dependency
- Discharge planning
- Caregiver training
- Productivity
- Billing/documentation

Ronkonhoma, NY Wednesday, November 6, 2019 Uniondale, NY

Thursday, November 7, 2019

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Discover new treatments for:

- Early mobilization
- · Management of lines, wires and tubes
- Respiratory distress

Speaker

Speaker Disclosures:

**Objectives** 

critically ill patient.

for patient engagement.

neurological or respiratory diagnosis.

- · Discharge planning
- Intubation/Vent dependency

Productivity

Documentation

· Billing/

- Caregiver training

TRISHA FARMER, COTA/L, a nationally renowned speaker and educator, holds

extensive experience in all aspects of acute care, including neurology, complex trauma,

orthopedics and a multitude of diagnoses involving medically complex and clinically

a nationally recognized stroke center and regional burn center, where she routinely

develops innovative and evidence-based treatment plans for patient's experiencing

a wide variety of diagnoses. In addition to her clinical expertise, Trisha serves as a

positioning. In her spare time, Trisha works closely with volunteer and non-profit

receives an honorarium from Performance Health Academy. Ms. Farmer receives a speaking honorarium from PESI, Inc.

organizations with a focus on veterans and suicide awareness.

Non-financial: Trisha Farmer has no relevant non-financial relationship to disclose

fragile patients. Clinically, she is employed within a Level I Trauma Center, which holds

continuing education instructor for multiple organizations, specializing in the provision

of continuing education in the field of acute care therapy as well as wheelchair seating/

Financial: Trisha Farmer has an employment relationship with Memorial Medical Center; and Saint Louis University Hospital. She

ive duty military personnel. Limited seats available; advance online registration required.

• State the critical elements of analysis and assessment in mobilizing medically fragile patients.

• Distinguish the characteristics, similarities of, and differences between, medically fragile and

• Demonstrate an understanding of the outcome tools available for assessment of the acute or

• Evaluate strategies for addressing the behaviorally challenging patient and successful methods

• Identify methods to effectively document progression throughout the acute care spectrum.

general acute care patients and methods to implement successful therapeutic interventions with

· Develop an appropriate plan of care for patients who present with a critically ill cardiac,

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#### Ortho Notes: Clinical Examination Pocket Guide, 4th Edition

By Dawn Gulick, Ph.D., PT, ATC, CSCS

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### Course Developer - Dr. Kirsten Davin, OTDR/L, ATP, SMS - says:



Trisha's immense knowledge in trauma and the acute care setting provides the attendee with an amazing **CEU** experience! This course is a must see for anyone who works with medically complex patients!



#### **Live Seminar Continuing Education Credit Information**

Credits listed below are for full attendance at the live event only. After attendance has been verified, pre-registered attendees will receive an email. from PESI Customer Service with the subject line, "Evaluation and Certificate" within one week. This email will contain a link to complete the seminar evaluation and allow attendees to print, email or download a certificate of completion if in full attendance. For those in partial attendance (arrived late or left early), a letter of attendance is available through that link and an adjusted certificate of completion reflecting partial credit will be issued within 30 days (if your board allows). Please see "LIVE SEMINAR SCHEDULE" on this brochure for full attendance start and end times. NOTE: Boards do not allow credit for breaks or lunch.

If your profession is not listed, please contact your licensing board to determine your continuing education requirements and check for reciprocal approval. For other credit inquiries not specified below, or questions on home study credit availability, please contact cepesi@pesi.com or 800-844-8260 before the event.

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# **How to Register**

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We would be happy to accommodate your ADA needs; please call at least two weeks prior to the seminar date

#### WALK-INS

Walk-ins are welcome but admission cannot be guaranteed. Call M-F 7:00-6:00 Central Time for space availability if registering within one week

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