Outline

How vision deficits create unseen therapy roadblocks with...

- Neurological disorders
- o Stroke
- o TBI
- o Parkinson's
- Balance, posture and gait
- ADLs
- Reading, communication and cognition

HANDS-ON Spot vision deficits early to avoid progress plateaus

- Vision anatomy and its impact on
- Understanding your patient's vision complaints and history
- · Comprehensive vision assessment, step-by-step
- Adapt and improve therapy using assessment findings

HANDS-ON Game-changing vision rehab interventions

- Practice proven techniques you can use immediately to:
- o Increase safety during ambulation and transfers
- o Reduce falls
- Reduce dizziness and motion sensitivity
- o Improve posture and gait
- Improve compliance with home exercise programs and prescriptions
- o Improve performance of ADLs
- o Improve reading and communication
- o Increase functional independence o Improve depth perception
- o Eliminate double vision
- o Improve peripheral awareness
- Expand visual fields

How to combine multiple approaches more effectively for better outcomes

- Functional compensation strategies
- Visual accommodations
- Visual field scanning
- Binocular vision exercises
- Optical lenses
- Prism adaptation
- Cataract surgery

Design advanced, innovative plans of care for your patients

- Practice effective strategies for resolving functional deficits caused by:
- o Blindness
- o Macular degeneration
- o Glaucoma
- Diabetic retinopathy
- o Presbyopia
- o Retinitis pigmentosa
- o Double vision
- o Cataracts
- o Visual field cuts

STUDIES

Put knowledge to practice

- Case study 1: Correctly select the root cause of impairment
- Case study 2: Problem solve a complex vision impairment and develop an effective treatment plan
- Case study 3: Navigate pharmacological side effects and comorbidities
- · Case study 4: Adapt a standard plan of care for a legally blind patient
- Case study 5: Overcome barriers to effective strategy implementation

Maximize your reimbursement

- Coding and billing updates for vision rehabilitation
- Justify therapy with the right progress measures
- Avoid denials and audits with these tips



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Innovative Vision Rehab Strategies for PTs, OTs, and SLPs

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Innovative Vision Rehab Strategies for PTs, OTs, and SLPs

Don't Let Vision Limit Your **Patient's Progress**

Are vision issues keeping your patient from progressing? Learn how to get therapy back on track in this hands-on course.

- Master effective solutions for vision-related functional deficits
- · Improve outcomes with balance, reading, posture, gait, ADLs, communication and more
- Build referrals as the go-to resource for vision rehab

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Innovative Vision Rehab Strategies for PTs, OTs, and SLPs

Don't Let Vision Limit Your Patient's Progress

When your patient wins the day, you win the day. And in those moments, you're unstoppable.

But when your patient has vision deficits, even your most tried-and-true therapy protocols can quickly go off the rails, dramatically limiting your effectiveness and halting progress in a variety of frustrating ways:

- Poor performance of tasks/exercises
- Avoidance of ADLs
- Increased functional dependence
- Noncompliance with home programs
- Reading/communication problems
- · Limited hand-eye coordination
- Gait and posture dysfunction
- Frequent falls

Here's the good news. Vision deficits don't have to limit you or your patients ever again.

Join your colleagues at this upcoming seminar and discover a powerful framework for vision rehabilitation that has helped countless therapists and their patients overcome these challenges. Whether your patients are adults with diabetic retinopathy or stroke survivors with vision perception problems, you'll transform your practice with innovative interventions that accelerate progress for outcomes that will earn you referrals.

Speaker _____

ROBERT CONSTANTINE, OTR/L, is an expert in vision rehabilitation,

with over 20 years of experience guiding patients with brain injury, stroke, and developmental delays to functional independence.

He is a member of the Neuro-Optometric Rehabilitation Association, a unique interdisciplinary organization that brings together the tools of optometry, occupational and physical therapy to improve outcomes for patients with neurological diagnoses. In addition, he is the only occupational therapist to be a member of the High Performance Vision Associates, an elite group of sports vision optometrists. As such, Mr. Constantine has participated in sports vision screenings at IMG Academy, Hendricks Motorsports, and on the LPGA tour. He has also developed and marketed drag-racing specific glasses that have been successful in NHRA Sportsman drag racing, as well as having worked with elite NHRA racers, golfers, and sporting clays champions.

Speaker Disclosures:

Financial: Robert Constantine has an employment relationship with Pearl Nelson Center. He receives a speaking honorarium from

Non-financial: Robert Constantine has no relevant non-financial relationship to disclose.

Objectives -

- 1. Identify the latest advances in vision rehab and their implications for PTs, OTs, and SLPs.
- 2. Demonstrate a comprehensive assessment, identifying and differentiating root causes of vision deficits and related functional impairment.
- 3. Demonstrate the most effective interventions available for managing vision deficits, restoring function, and improving safety.
- 4. Outline multidisciplinary strategies that combine multiple interventions for better outcomes.
- 5. Design effective, innovative plans of care for a wide range of vision diagnoses and functional impairments.
- 6. Apply the assessments and interventions discussed in this seminar to a series of interactive case scenarios.

TARGET AUDIENCE

Physical Therapists Physical Therapist Assistants Occupational Therapists

Speech Language Pathologists Athletic Trainers Nurses

Occupational Therapy **Nurse Practitioners** Assistants



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4:00 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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