#### **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
- tPA administration and impact on therapeutic
- Management of the severe stroke
- Patients with brief neurological deficits

## · 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
- 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



## **Who Should Attend**

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

## **Live Seminar Schedule**

7:30 Registration/Morning Coffee & Tea 8:00 Program begins

**Lunch** 1 hour (on your own) 3:30 Program ends

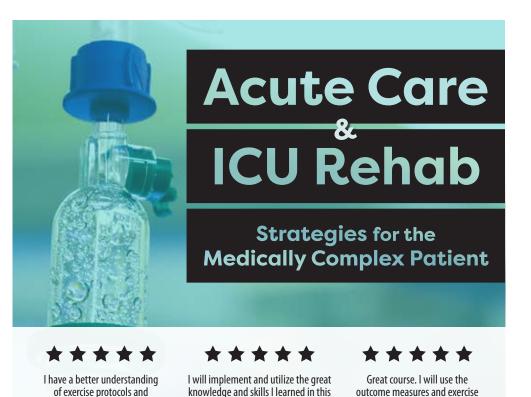
There will be two 15-min breaks (mid-morning & mid-afternoon). Actual lunch and break start times are at the discretion of the speaker. A more detailed schedule is available upon request.

#### **Questions?**











of exercise protocols and

specific exercises for diagnoses.



Early mobilization

seminar on my patients tomorrow!

- B. Conner, PT

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

Sacramento, CA

Monday May 4, 2020 Oakland, CA

Tuesday May 5, 2020 Palo Alto, CA Wednesday May 6, 2020

outcome measures and exercise

progression immediately.

- E. Wormold, PTA



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Discover new treatments for:

- Early mobilization
- Management of lines, wires and
- Respiratory distress
- Intubation/Vent
- dependency
- Billing/

Productivity

Documentation

- Discharge planning
- Caregiver training
- of the second

## Speaker

CINDY BAUER, MSOT, OTR/L, received her Master of Science in Occupational Therapy from Washington University in St. Louis in 1994. Over the past 24 years she has practiced in every clinical setting including home health, outpatient, skilled nursing, inpatient rehabilitation, and acute care hospitals. She has worked with clients from every background and every age group, from pediatrics to geriatrics. Through the years, Cindy has honed her skills in a number of specialty circuits including Trauma, Burns, Spinal Cord Injury, and Brain Injury but has spent the past 10 years primarily serving the high volume acute care populations of ICU, Cardiopulmonary, Orthopedics, and Med-Surg. Cindy's approach is matter-of-fact and function-oriented, combining clinical knowledge with a personalized approach for her client's optimal outcomes. She enjoys serving as an instructor and a mentor in each of her practice settings and has most recently spread her knowledge and experience through professional CEU courses focused on the realms of Acute Care/ICU Rehab, Hand Splinting, and Therapy for Cardiopulmonary Patients.

#### Speaker Disclosures:

Financial: Cindy Bauer has an employment relationship with BJC Healthcare. She receives an honorarium from Performance Health Academy. She receives a speaking honorarium from PESI, Inc.

Non-financial: Cindy Bauer has no relevant non-financial relationship to disclose

Course developed by Dr. Kristen Davin, OTDR/L, ATP, SMS

## **Objectives**

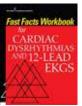
- State the critical elements of analysis and assessment in mobilizing medically fragile patients.
- Develop an appropriate plan of care for patients who present with a critically ill cardiac, neurological or respiratory diagnosis.
- Distinguish the characteristics, similarities of, and differences between, medically fragile and general acute care patients and methods to implement successful therapeutic interventions with each.
- Demonstrate an understanding of the outcome tools available for assessment of the acute or critically ill patient.
- Evaluate strategies for addressing the behaviorally challenging patient and successful methods for patient engagement.
- · Identify methods to effectively document progression throughout the acute care spectrum.



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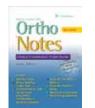
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