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ABOUT ECMC

The ECMC Corporation includes an advanced academic medical center (ECMC) with 550 inpatient beds, on-and-off campus health centers, more than 30 outpatient specialty care clinics and Terrace View, a 390-bed long term care facility. ECMC is a regional center for trauma, burn care, transplantation and CARF-accredited rehabilitation and is a major teaching facility for the University at Buffalo. Most ECMC physicians, dentists and pharmacists are dedicated faculty members of the university and/or members of a private practice plan. More Western New York residents are choosing ECMC for exceptional patient care & patient experiences—the difference between healthcare and true care™.



ECMC DEPARTMENT OF REHABILITATION SERVICES

presents:

REHAB SYMPOSIUM 2017

*A Multidisciplinary Approach
for
Outpatient Rehab and
Community Reintegration*

*Saturday
March 11, 2017*



SYMPOSIUM DETAILS

Conference Description:

Therapists working in outpatient rehabilitation settings are challenged by the medical complexities of their patients and the responsibility of finding creative ways to improve patient outcomes. This conference is designed to provide knowledge of best practices, current trends and contemporary topics pertaining to the management of our outpatient community.

Target Audience:

- Physical Therapists,
- Physical Therapy Assistants
- Occupational Therapists
- Occupational Therapy Assistants
- Speech Language Pathologists
- Therapy Students

Continuing Education Credit:

ECMC is recognized by the NYS Education Department's State Board for Physical Therapy as an approved provider for physical therapy continuing education. This seminar is awarded 7.2 contact hours.

ECMC is recognized by the NYS Education Department's State Board for Occupational Therapy and Speech Language Pathology as an approved provider for occupational therapy and speech language pathology continuing education. This seminar is awarded 6.0 contact hours.

Location of Symposium within ECMC:

Smith Auditorium, 3rd floor of the hospital.

CONTACT INFORMATION

For more information regarding the conference, contact Kevin Jenney at 716-898-4996 or at kjenney@ecmc.edu

SCHEDULE

7:00	Registration, Breakfast and Vendor Fair
8:00	Rehab Considerations for patients with Post-Concussive Syndrome <i>Susan Bennett, PT, DPT, EdD, NCS, MSCS</i> <i>Lacey Bromley PT, DPT, NCS, MSCS, VRS</i> <i>Jacob McPherson, PT, DPT, NCS, VRS</i>
9:30	Questions and Break
10:00	Breakout Session 1 A. Cervicogenic Dizziness (limit 50) <i>Ron Schenk PT, PhD, OCS, FAAOMPT, Dip. MDT</i> B. Vision Therapy part 1 <i>Richard O'Connor, OD</i> C. Collaboration with Chiropractic <i>Steven Grande, DC</i> D. FEES (Fiberoptic Endoscopic Eval Swallowing) <i>Nicolas Vesce, SLP</i> E. Upper Extremity Prosthetics & Orthotics <i>Christopher Berger, CPO</i>
11:00	Breakout Session 2 A. Cervicogenic Dizziness (limit 50) <i>Ron Schenk PT, PhD, OCS, FAAOMPT, Dip. MDT</i> B. Vision Therapy part 2 <i>Richard O'Connor, OD</i> C. EMG Interpretation for Therapists <i>Amrit Singh, MD, FAAPMR, FRCPC</i> D. Chest X-ray Interpretation for SLP <i>John Marshall, MD</i> E. Lower Extremity Prosthetics & Orthotics <i>Christopher Berger, CPO</i>
12:00	Lunch and Vendor Fair
1:00	Breakout Session 3 A. Pelvic Floor Physical Therapy <i>Sarah Capodagli, PT</i> B. Driver Evaluation and Training (limit 30) <i>Maria McLaughlin, OTR</i> C. Functional Electric Stim for Unilateral Neglect <i>Jessica Bauer, OTR</i> D. Unusual Swallowing Cases <i>ECMC SLP staff</i> E. Prosthetics & Orthotics Hands On Lab (limit 50) <i>East Coast and ECMC staff</i>
2:00	Psychological Issues for Community Reintegration <i>Lisa Keenan, PhD, Clinical Psychologist</i>
3:00	Post-Test and Conclusion

REGISTRATION

REGISTRATION DEADLINE: March 3, 2016

Registration Fee: includes lunch and program materials

- Registration: \$150.
- Early Registration (before Feb. 17th): \$99.
- Student Rate (must bring student ID): \$45.

Name _____

Address _____

City _____ State _____ Zip _____

Email _____

Telephone _____

Employer _____

Position _____

Preferred breakout session 1 [A/B/C/D/E] _____

Preferred breakout session 2 [A/B/C/D/E] _____

Preferred breakout session 3 [A/B/C/D/E] _____

**We will do our best to accommodate your requests

Indicate any dietary restrictions _____

CASH

CHECK (payable to ECMC Foundation)

If you prefer to call in your credit card details, please call ECMC Foundation at 716-898-5800.



CARD # _____ EXP DATE _____

CVB # _____ SIGNATURE _____

NAME ON CARD (if different from above) _____

BILLING ADDRESS FOR CARD (if different from above) _____ ZIP _____

Please mail your completed registration form to the address below:

ECMC Foundation/Rehab Symposium
462 Grider Street, G-1
Buffalo, NY 14215

Should you need to cancel, please email Kevin Jenney by 3/3/17 to receive a refund. No refunds will be issued after 3/3/17.

Space is limited, please register early