Patients often present challenging symptoms with chronic pain, which may not show typical dermatomal or myotomal patterns. The symptoms may be remote from the apparent area of injury, including referred pain, stiffness, muscle weakness and abnormal sensations. Many of these clients are experiencing myofascial dysfunction. Myofascial restrictions do not appear on standard x-rays, MRIs, or examinations. It is best diagnosed by the skill of a manual therapy practitioner, using motion testing and posture analysis. Myofascial restrictions can influence functional movement patterns. Myofascial dysfunction may become symptomatic from months to years post-injury. It may occur at the point when the body has maximized its adaptive potential and loses the ability to compensate for abnormal tissue tension. Standard treatment protocols using medication, exercise and modalities may fail to address the problem effectively. Manual release of these abnormal tension barriers is essential to manage painful restrictions and to restore motion. Learn how to differentiate between myofascial conditions such as myofascial pain syndrome and fibromyalgia, identify motion restrictions through hands on motion testing and palpation and how to apply MFR to improve tissue mobility, circulation, and posture, and decrease painful restrictions. Make an impact to achieve improved functional outcomes across the lifespan.

LEARNING OUTCOMES

1. Describe the anatomy and function of the fascial system.
2. Perform a myofascial evaluation with motion testing of the skin and muscles to identify motion barriers.
3. Discuss indications and contraindications for myofascial release.
4. Define myofascial pain syndrome and fibromyalgia and discuss the differences between them.
5. Apply myofascial skin glide, skin rolling, crosshand releases, laminar releases, muscle play, circular friction, z-friction, elbowing, knuckling, distraction, respiratory diaphragm release, and psoas release to improve functional mobility.
6. Discuss the evidence-based research regarding the impact of the fascial system and efficacy of myofascial release.

SCHEDULE

7:30- 8:00am Registration
8:00-9:00   Anatomy and Function of Fascia in Normal and Pathological Conditions
9:00-9:10   Break
9:15-9:30   Motion assessment
9:30-10:00  Principles and Procedures of Myofascial Release
10:00-11:30 Motion palpation, assessment of fascial restriction, skin glide, laminar release, crosshand release and skin rolling, demonstration and lab.
11:30-12:15 Lunch
12:15-1:15  Circular friction and muscle play demonstration and practice, elbowing, knuckling, circular finger and thumb releases
1:15-1:30   Break
1:30-2:30   Respiratory Diaphragm Release, Iliopsoas Release
2:30-3:00   Longitudinal stroking and Z-Friction Release
3:00-3:30  Discussion of research evidence for clinical problem solving

LIVE courses: Teaching techniques include lecture, demonstration, discussion, lab practice, and question and answer periods. Total 375 minutes of learning time. Students should bring lab clothes to wear for practice, such as halter tops and shorts. Bring massage lotion. It is strongly recommended students bring a massage table or mat to practice on since this course emphasizes hands-on lab.

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INTEGRATED NEUROMUSCULAR RE-EDUCATION:
MUSCLE ENERGY THERAPY AND POSITIONAL RELEASE

By Theresa A. Schmidt, DPT,MS,OCS,LMT,CEAS

COURSE DESCRIPTION

Integrated Neuromuscular Re-Education is a hands-on approach to correction of neuromuscular imbalance (somatic dysfunction), using muscle energy/PNF and Strain-counterstrain/ positional release. INMR improves mobility, tone and elasticity, relieves pain, improves strength, and optimizes performance. Identify and treat abnormal neuromuscular tension, painful trigger points, motion restriction and strength deficits using gentle techniques. INMR approach uses a synthesis of active and passive approaches to facilitate changes in the structure and function of the myofascial and neuromuscular reflex systems. Apply what you learn immediately upon return to clinic. A review of the current evidence-based literature illustrates the efficacy of these interventions. This course includes lecture, discussion and emphasis on hands-on lab practice. Learn to reduce painful trigger points and improve functional mobility with these gentle interventions.

LEARNING OUTCOMES

Participants will be able to:
1. Discuss the theoretical basis and evidence-based research for positional release/ counterstrain (PRT) and muscle energy therapy. (MET/PNF)
2. Describe basic neuromuscular reflexes, the function of the muscle spindle, Golgi tendon organs and proprioceptors.
3. Assess the musculoskeletal system using palpation to identify trigger points (TPs).
4. Identify positions that reduce the pain and sensitivity of TPs to allow spontaneous release of abnormal neuromuscular tone.
5. Apply principles of MET/PNF to position a joint to effectively stretch a muscular restriction to correct abnormal tension.
6. Include positional release and muscle energy in a rehab program to improve flexibility, strength, and to reduce spasm and pain for a variety of clinical conditions.

SCHEDULE

7:30- 8:00  Registration and Snack
8:00-8:30  Neuroanatomy and neurophysiological basis of muscle tone, tension, and spasm
           The muscle spindle and GTO reflexes, normal and abnormal tension patterns
8:30-9:00  Jones’ Theory of Strain/ Counterstrain and Positional Release
9:00-9:10  Break
9:10-9:30  Scanning assessment for tender trigger points
9:30-11:30  Positional Release technique demonstration and lab
11:30-12:00 Lunch
12:15-12:45 Theoretical Basis of Muscle Energy Therapy/ Proprioceptive Neuromuscular Facilitation
12:45-2:00  MET/PNF for the extremities: demonstration and lab
2:00-2:10  Break
2:10-3:15  MET for the spine and pelvis: demonstration and lab
3:15-3:30 Integration of techniques into a treatment program, clinical problem solving and discussion
(Schedule may be adjusted at the discretion of the instructor, total 6.5 contact hours)

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GERIATRIC BALANCE AND FALL PREVENTION
BY THERESA A. SCHMIDT, DPT, MS, OCS, LMT, CEAS

COURSE DESCRIPTION

Falls are the most common cause of injuries and injury death among older adults. Explore the epidemiology of falls and review evidence-based research on fall risk factors and fall prevention. Learn the physiological aspects of balance and how the aging process alters balance strategies. Learn evidence-based, reliable examination and documentation tools for assessing balance deficits. Design a program including exercise and functional activities to promote functional balance and reduce falls. Stop the fall before it is too late. Learn what you can do to make a difference, and apply what you learn in this seminar immediately.

LEARNING OUTCOMES

Upon completion of this program, participants will be able to:

1. Describe the physiological components of balance, epidemiology and outcomes of falls in the older adult
2. Describe balance strategies and how to maximize safety of the older adult at risk of falls
4. Design interventions to reduce the risk of falls in elderly populations based on current evidence.

SCHEDULE

8AM-1130AM

Balance definitions, systems, and strategies

The aging process & epidemiology of falls

Neuromuscular and medical challenges of aging

Risk factors in aging, meds, medical, degenerative processes

Examination: screening for balance

Balance Tests: Vertebral artery, Single Leg Stance Test, Get Up and Go, Timed Up and Go, Five Times Sit To Stand, Functional Reach Test, ABC scale, Falls Efficacy, (lab)
Discussion of normative values for balance tests

Berg Balance Scale, (lab)

**12:30-3:30pm**

Besttest, MiniBestest, Brief Bestest, (lab)

6MWT, Figure 8, MGES, Tinetti, (lab) Gait Assessment Rating Score, Dynamic Gait Index, (lab)

Literature Review on Interventions to Promote Balance and Prevent Falls

Tai chi balance demo and lab

ABC Active Balance Clinic

Evidence based outcomes, reliability and validity studies on balance tools and interventions

Effect of interventions on fall reduction, rates and risk

AGS panel recommendations, conclusion

*DVD PROGRAM COMING SOON!*
4. Apply crosshand releases, compression, distraction, and transverse plane release techniques to the spine and extremities.
5. Assess cranial bone mobility using craniosacral rhythm palpation of frontal, parietal, temporal, occipital, sacrum, and mandibular bones.

**SCHEDULE**

<table>
<thead>
<tr>
<th>Time</th>
<th>Activity</th>
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<tbody>
<tr>
<td>7:30-8:00</td>
<td>Registration and Snack</td>
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<tr>
<td>8:00-8:30</td>
<td>Review of anatomy and function of fascia, indications and contraindications for MFR</td>
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<tr>
<td>8:30-9:30</td>
<td>Distraction Techniques: Arm, leg pull, cervical traction circumduction demo and lab</td>
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<tr>
<td>9:30-9:40</td>
<td>Break</td>
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<tr>
<td>9:40-10:45</td>
<td>Transverse Plane Releases demo and lab</td>
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<tr>
<td>10:45-11:45</td>
<td>Integrating compression and distraction techniques of extremities and trunk, demo and lab</td>
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<tr>
<td>11:45-12:30</td>
<td>Lunch (on your own)</td>
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<tr>
<td>12:30-1:00</td>
<td>Craniosacral therapy assessment/lab</td>
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<tr>
<td>1:00-1:30</td>
<td>Craniosacral anatomy: frontal, parietal, temporal, occipital, sacrum, and mandibular bones</td>
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<tr>
<td>1:30-2:45</td>
<td>Craniosacral therapy of the frontal, parietal, temporal, occipital, sacrum, and mandibular bones demo and lab</td>
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<td>2:45-2:55</td>
<td>Break</td>
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<tr>
<td>2:55-3:25</td>
<td>General and local listening assessment of balance shift related to fascial restriction</td>
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<tr>
<td>3:25-4:00</td>
<td>Integration of techniques into a treatment program, review of evidence-based research</td>
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**ORTHOPEDIC MANUAL THERAPY: LUMBAR SPINE**

**Theresa A. Schmidt, DPT, MS, OCS, LMT, CEAS**

**COURSE DESCRIPTION**

Most Americans will suffer from a back problem at some point in their lives. Learn to address this issue which contributes to loss of work, pain, and disability. Perform a lumbar spinal examination including posture analysis, motion testing, selective tissue tension tests, strength assessment, neurological testing and functional outcome measures. Identify common lumbar diagnoses. Incorporate manual therapy into a program to restore mobility and function for people suffering from common back injuries using myofascial release, (MFR), joint mobilization, and integrated neuromuscular re-education: (INMR) muscle energy (MET) and positional release/counterstrain (PRT). Discuss exercise program design using Functional Precision Exercise to improve mobility, strength and function. Design programs for effective clinical interventions for a variety of lumbar spinal disorders, based on current research evidence.

**LEARNING OUTCOMES**

Upon completion of this course, participants will be able to:

1. Perform an examination of the lumbar spine, including postural analysis, soft tissue palpation analysis, motion testing, strength, neuromusculoskeletal testing, and functional outcome measures.
2. Discuss signs and symptoms of lumbar spinal disorders including sprain, strain, disc disease, facet joint dysfunction, myofascial pain syndrome, and postural derangement.

3. Apply selected interventions including: manual therapy, basic joint mobilization, myofascial release, and integrated neuromuscular re-education: muscle energy and positional release/counterstrain for correction of lumbar spinal impairments.

4. Design a home exercise program for improving flexibility, strength and/or stability of the lumbar spine.

5. Discuss evidence-based research for rehabilitation of low back pain.

**COURSE SCHEDULE DAY 1**

8:00-9:00 Review of anatomy and biomechanics of the lumbar spine.
9:00-10:00 Common lumbar diagnostic categories
10:00-10:10 Break
10:10-11:10 Lumbar spine examination lecture and lab
11:10-11:30 Integrated neuromuscular re-education concepts
11:30-12:30 Lunch
12:30-1:45 Positional release/counterstrain with lab (PRT)
1:45-2:00 Break
2:00-3:15 Myofascial release with lab (MFR)
3:15-4:15 Clinical Reasoning Strategies with lab for application of PRT and MFR
4:15-4:30 Discussion of class questions and conclusion

**COURSE SCHEDULE DAY 2**

8:00-9:00 Lumbar joint biomechanics and basic joint mobilization concepts
9:00-10:00 Basic non-force joint mobilization techniques with lab (Lab may be modified to allow time for practical applications.)
10:00-10:15 Break
10:15-11:30 Muscle Energy Therapy (MET)
11:30-12:30 Lunch
12:30-1:45 MET lab
1:45-2:00 Break
2:00-3:00 Precision Exercise concepts
3:00-3:30 Exercise lab (Lab may be modified to allow time for practical applications.)
3:30-4:15 Clinical Reasoning Strategies with lab including MET and Precision Exercise
4:15-4:30 Discussion of evidence (presented throughout the seminar)

***MUSCLE ENERGY TECHNIQUES FOR THE LUMBAR SPINE, SACROILIAC JOINT AND PELVIS***

**BY THERESA A. SCHMIDT, DPT,MS,OCS,LMT,CEAS**

**COURSE DESCRIPTION**

Muscle Energy Technique (MET) is an evidence-based manual therapy intervention for correcting somatic dysfunctions which contribute to pain and disability. MET restores proper biomechanics and functional movement for lumbosacral and pelvic joint dysfunctions. MET is gentle enough to apply without forceful manipulation. Use precise muscle contractions and positions to normalize muscle tension and restore functional movement and symmetrical posture in joints with faulty biomechanics. MET may be incorporated clinically with soft tissue techniques and home exercise programs to
manage joint pain and improve functional mobility for lumbosacral and pelvic dysfunctions. Teaching methods include powerpoint lecture, live demonstration and lab practice, and discussion.

LEARNING OUTCOMES

1. Discuss the role of proprioceptive reflexes and the muscle spindle in mediating neuromotor facilitation and inhibition.

2. Define common types of somatic dysfunction diagnoses for the lumbosacral spine and pelvis.

3. Perform a structural examination to identify somatic dysfunction using palpation and specific joint mobility examination of the lumbosacral spine and pelvis.

4. Describe current research on the efficacy of muscle energy examination and treatment tools.

5. Apply MET intervention and manual therapy as part of a plan of care to correct somatic dysfunction of the lumbosacral spine and pelvis.

SCHEDULE* DAY 1

8am-11:30am Introduction to Muscle Energy (MET) principles: history and definition of MET, types of MET, indications and contraindications for MET intervention.

Basic MET concepts: Mitchell/Greenman/DiGiovanna, PNF, PIR, AIS, ART.

Structural diagnosis and motion barrier testing concepts

Somatic dysfunction categories for the lumbosacral (L-S) spine and pelvis

11:30-12:15pm Lunch

12:15pm-3:30pm Examination and identification of selected L-S somatic dysfunctions

DAY 2

8am-11:30am MET interventions for the L-S spine: tests and techniques to identify and correct neutral and non-neutral dysfunctions.

11:30am-12:15pm Lunch

12:15pm-3:30pm MET interventions for the sacrum and pelvis

Examination using standing and sitting flexion tests, stork test, side-bending, supine, prone, SI rocking, SI spring tests, SI gapping and leg length tests.

Sacral shear and torsion identification and correction

Integration of Manual Therapies and home programs with MET (exercise and myofascial work)

Functional outcomes measurements and documentation, current evidence
WEBINARS and AUDIOTAPED SHORT SEMINARS (90-120 minutes)  
Audiovisual presentations with Powerpoint slides and MP3 audiofiles

CHRONIC PAIN: MANAGING FIBROMYALGIA AND MYOFASCIAL PAIN

BY THERESA A. SCHMIDT, DPT,MS,OCS,LMT,CEAS

Course Description

Are you comfortable with treating patients who have chronic pain? Patients with chronic pain present considerable challenges in examination and in selection of effective therapeutic interventions. Many have been to numerous practitioners seeking results unsuccessfully, despite taking many drugs and trying a variety of therapies. Some have been misdiagnosed. This course clearly describes the differential diagnosis of two main categories of chronic pain conditions: fibromyalgia syndrome (FMS) and myofascial pain syndrome (MPS). Participants will learn to recognize these syndromes and the co-morbid conditions commonly associated with them. Research evidence will be presented to describe the clinical tests contributing to appropriate diagnosis of FMS or MPS. Effective interventions to reduce the symptoms of FMS and MPS will be discussed, based on current evidence. This information is a must for any practitioner who treats patients suffering with FMS or MPS.

Learning Outcomes

Upon completion of this program, participants will be able to:

1. Identify two main categories of chronic pain identified by American College of Rheumatology
2. Describe signs and symptoms of fibromyalgia and myofascial pain syndrome
3. Compare and contrast the differential diagnoses of fibromyalgia and myofascial pain syndrome
4. Define trigger points and give examples of types of trigger points
5. Discuss evidence-based research describing effective interventions for promoting functional outcomes for people with fibromyalgia and myofascial pain syndrome

GERIATRIC MASSAGE: It Really Makes a Difference!

BY THERESA A. SCHMIDT, DPT,MS,OCS,LMT,CEAS

COURSE DESCRIPTION

There is an increasing need for skilled hands-on care to address the challenges of our aging population. Therapeutic massage has proven to be beneficial in managing the symptoms of medical conditions associated with aging, and improving quality of life in the golden years. Therapeutic massage is an essential component of a treatment plan for seniors, with proven efficacy in the evidence-based literature for improving functional outcomes. Intervention approaches for specific problems of the elderly (such as circulatory deficits, diabetes, cancer, osteoporosis, arthritis, dementia, balance issues, and chronic pain) are
discussed. Evidence reveals how therapeutic massage may be readily implemented as part of a treatment program to achieve better functional outcomes in elderly patients.

**LEARNING OUTCOMES**

Upon completion of this program, participants will be able to:

1. Describe the effects of aging on physiology, psychology and function in the elderly
2. Discuss the efficacy of medical massage therapy in addressing select medical problems in the elderly, based on current evidence
3. Describe modifications of massage interventions for addressing common medical conditions in the elderly.
4. Explain the benefits of therapeutic massage interventions in promoting improved mobility, reduced pain, and positive functional outcomes in the elderly.

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**MAXIMIZING FITNESS WITH MYOFASCIAL RELEASE**

Explore how myofascial release can contribute to functional performance by increasing flexibility, reducing pain, and improving quality of life in this brief introduction. Fascia is a network of connective tissue surrounding all structures in the body. Abnormal tension in the fascia from stress, injury or disease contributes to a multitude of pain problems, including fibromyalgia and myofascial pain syndrome. Its role in mobility, biomechanics and human performance is being recognized by researchers around the world. The latest evidence will be discussed to confirm the benefits of myofascial work. This course includes photos of a variety of myofascial techniques to illustrate how this gentle stretching technology can transform mobility.

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**POSITIONAL RELEASE: Reflex Release For Painful Trigger Points And Muscle Tension**

So many people suffer with painful muscle trigger points as the result of stress, tension, and injury. In this short audio program, we discuss what trigger points are, and the neurophysiological reflexes related to trigger points and muscle tension. The use of the reflexes to relax and release abnormal muscle tension is described. Specific positions are used to reduce abnormal tension pain associated with trigger points. Research review indicates the efficacy of using gentle positioning to improve flexibility, strength, reduce pain and improve performance.

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**FLEX-ABILITY: MUSCLE ENERGY/ PNF STRETCHING**

With the time spent working and using technology, who has time to stretch these days? As people become less active and time marches on, the body tends to stiffen, resulting in reduced flexibility, painful movements and limited functional performance. Specialized stretching techniques make it easy to restore mobility and function using muscle energy/PNF. This program reviews how flexibility is measured, muscle reflexes, and types of muscle contractions used to trick the body into allowing greater degrees of range of motion using neuromotor reflexes. Using reciprocal inhibition, post-isometric relaxation and other reflexes can facilitate the stretching process and improve flexibility.
Examples of muscle energy stretches are illustrated with guidelines for clinical use to improve range of motion.

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POST-REHAB FOR COMMON ORTHOPEDIC INJURIES
POST-REHAB FOR LOW BACK PAIN
MANUAL THERAPY FOR TENSION HEADACHES
MYOFASCIAL RELEASE FOR THE CERVICAL SPINE
DIS-ENGAGE DIS-STRESS: RESOURCES TO MANAGE THE EFFECT OF STRESS ON YOUR LIFE
OSTEOPOROSIS PREVENTION AND TREATMENT

FACULTY BIOGRAPHY
Theresa A. Schmidt, DPT, MS, OCS, LMT, CEAS, is the founder of Educise Resources Inc., & Flex Physical Therapy, a private practice in Long Island, NY. She is a physical therapist Board-certified in Orthopedic Physical Therapy since 1994. Dr. Schmidt graduated Long Island University’s Physical Therapy MS Program with Highest Honors. She served as Chair of the PTA Program and faculty of the Masters Program at Touro College Physical Therapy Programs in New York, NY, and taught at Nassau Community College and CUNY Queens College. Dr. Schmidt is a licensed massage therapist, certified ergonomic assessment specialist, hypnotherapist and fitness trainer. Her focus is functional manual therapy and precision exercise, including Myofascial and Craniosacral Therapy, Muscle Energy, PNF, Strain/Counterstrain, Joint Mobilization, Visceral Manipulation, Functional Technique, Neuromuscular Re-education, acupressure, wholistic therapy, Integrated Energy Therapy, IIST, Body MATH, and therapeutic touch. She presented internationally for Fascia Research Congress, NASA Inomedic, APTA, AOTA/IA AMTA/NY, IDEA, ACE, Cross Country Education, MotivationsCEU, HomeCEUconnection, Allied Health Ed, and private hospitals and clinics. Dr. Schmidt earned her Doctorate of Physical Therapy degree from University of New England. For personal health consultations and therapy, tutorials, live presentations, webinars and home study programs, visit www.educise.com.

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