Babies' Bodies and Brains:

Multi-System Assessment and Treatment of the Premature/Medically Complex Infant for the Rehabilitation Professional



life-changing learning for therapists by therapists

Holly Schifsky, OTR/L, CNT, NTMTC, CBIS

Faculty

Holly Schifsky has worked in pediatrics for the past 26 years with the past 16 vears in a level IV NICU. She is a Certified Neonatal Therapist, Certified Neonatal Touch and Massage Therapist, Certified Brain Injury therapist, a member of National Association of Neonatal Therapists, and has completed 6-month mentorship in infant/child NDT. She has worked within the NICU and NICU follow-up clinic to maximize patient and family outcomes for the most complex premature and medically-fragile term infants. Holly received her BS in OT from the University of North Dakota. She is a faculty member for the Neonatal Touch and Massage certification; and Manuel Edema Mobilization training. She is the recipient of the National Association of Neonatal Therapists Clinical Excellence award in 2018, due to her clinical expertise and dedication to advancing the therapeutic interventions for NICU infants with cardiopulmonary conditions.

Disclosure - Financial: Holly Schifsky receives an honorarium from ERI.

Non-Financial: She has no non-financial relationships to disclose.

Course Requirements

In order to maximize the learning experience during lab time, each participant needs to bring a soft body doll. The ideal size would be 10-15", but any soft body doll will work.

About this In-Person Course:

This intermediate-advanced course will provide a systems-based approach to assess the premature/medically complex infant in the NICU/PICU setting. This course will focus on understanding the co-morbidities associated with prematurity and medically complex infants and increase critical reasoning skills for the clinician to create treatment plans to advance motor and feeding skills for the infant. It will build on information provided during the "Baby Beats and Breaths" course but can be a stand-alone course for advanced clinicians working with medically complex infants. This course will provide the clinician with hands-on treatment techniques for positioning/handling infants in the Small Baby unit (infants under 32 weeks gestation), oral motor interventions to support pre-feeding/feeding development, edema management including lymphatic facilitation, post-surgical considerations for infants, trunk facilitation to support cough development, extremity facilitation to support ribcage development, pelvic floor activation for stooling, abdominal facilitation for infants with GI complications, scar assessment/treatment, and feeding techniques for infants with multi-system co-morbidities.

Learning Objectives:

- Identify three anatomical and kinesiological developmental changes for the premature and newborn thoracic and abdominal cavity as related to motor development for oral feeding and postural control
- Apply at least two positioning/handling interventions for small babies, with focus on interventions for infants 28 weeks and younger
- Identify three neurological and gastrointestinal co-morbidities of prematurity (including anatomical changes post-surgical interventions for necrotizing enterocolitis) and the effects those co-morbidities have on feeding/motor development for the infant
- Differentiate the lymphatic system of the premature infant from that of the full-term infant and how those differences affect feeding skills
- Assess infant edema within face, extremities, and trunk using objective measurements
- Apply two treatment strategies with positioning, handling and manual edema mobilization using the provided case study
- Integrate a systems approach to a current individualized care plan for a premature and/or medically complex infant.

Audience:

This course is recommended for intermediate to advanced neonatal therapists, PTs, PTAs, OTs, OTAs, and SLPs, working with infants in the Neonatal Intensive Care Unit.

Help your patients achieve better outcomes.



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	Schodula - Day 2 8:40 am to 5:20 nm EST (US)
Schedule – Day 1 8:40 am to 5:30 pm EST (US)	Schedule – Day 2 8:40 am to 5:30 pm EST (US)
8:40-9:00 Webinar Registration/Zoom Course Opens	8:40-9:00 Webinar Registration/Zoom Course Opens 9:00-10:00 Updates in Literature: includes resources and references for
9:00-10:00 Updates in Literature: Includes resources and references for in-	individualized learning
dividualized learning	10:00-11:30 Neurological system: Lecture on neurological development of
 10:00-11:00 Typical Development of the Premature Infant Anatomy and kinesiology of the trunk, extremities, oral 	the premature infant, effects of intraventricular hemorrhage, periventricular leukomalacia, surgical intervention with shunts,
• Anatomy and knesiology of the trunk, extremities, orai cavity	hydrocephalus
11:00-11:15 Break	 Use of NIRS perfusion monitoring for neuroprotection
11:15-12:00 Co-morbidities of Prematurity	Risk of seizuresNeurodevelopmental outcomes
 Development of organ systems and effects of co-morbidi- 	11:30-11:45 Break
ties; including necrotizing enterocolitis, intraventricular	11:45-1:00 LAB Neuro-interventions
hemorrhage, periventricular leukomalacia, renal anomalies,	• Symmetrical and asymmetrical movement
bronchopulmonary dysplasia, congenital heart defects, air- way anomalies/injuries	 Closed chain input for motor learning with infants
12:00-1:00 Small Baby Unit: Neonatal Therapy Interventions	 Oral motor interventions: Techniques to reduce gagging/retching
 Identifying risk groups: infants 22-25 weeks; 26-29 weeks; 	 Lingual elevation
and 30-32 weeks	o Lip seal
 Education on development of skin, clinical practices to pro- 	 Pharyngeal lift 1:00-1:30 Lunch
tect skin, positioning/handling to protect skin, humidifica-	1:30-2:30 Cardiopulmonary System of the Premature or Critically III Term
tion. • Protecting sleep, neurodevelopmental protection in the	Infant: anatomical differences, congenital heart defects, and
• Flotecting sleep, neurodevelopmental protection in the NICU, environmental modifications	 vascularization. A therapist's guide for critical reasoning. Cardiopulmonary system and the unique changes required
 Pulmonary interventions to reduce lung injury in fragile in- 	for the infant to have a successful in-utero to extra-utero
fants	transition Common congenital heart defects and effects on infant de-
1:00-1:30 Lunch	velopment
1:30-3:15 LAB: Small Baby Unit (DEMO and VIDEO)	 Perfusion considerations related to risk of NEC, IVH, and
Two-person caresDiapering small infants	ventilation-perfusion ratio 2:30-3:30 Lymphatic System: Lymphatic system development, assessment
 Drapering small marks Positioning/handling with standard cares 	and interventions.
 Positioning/handling for atelectasis, micro-turns verse full 	 Maturation of system per gestational age, and genetic con- ditions related to lymphedema.
movement	 Chylothorax and implications on feeding/development
 Stand pivot transfer for Kangaroo care 	 Assessing edema as acute or chronic, identifying when to
Critical Lab values Orde Course	intervene with edema management, and understanding pharmacological interventions for fluid management.
Oral CaresOral motor interventions	 Complex edema consideration for anasarca, superior vena
 Facial assessment with pulmonary equipment 	cava syndrome, vascular anomalies, line occlusion, post- surgical recovery
3:15-3:30 Break	3:30-3:45 Break
3:30-4:30 Necrotizing Enterocolitis (NEC): multi-system effects of NEC,	3:45-4:45 LAB + Lecture: Edema Management
progression of enteral feeding, surgical interventions, risk for	 Superficial lymphatic facilitation with manual edema mobi- lization techniques; utilizing a clear-flow-clear technique
Short-Gut syndrome, oral feeding and motor considerations.	with activation of movement
 Classifications of NEC, medical interventions, antibiotics use, use of perfusion monitoring (NIRS), and implications 	 Diaphragm facilitation, lower extremity clearance Pectoralis/diaphragm facilitation for upper extremity
on development (oral feeding, GI motility, and abdominal	clearance
activation).	 Facial region clearance with oral motor interventions
 Neonatal therapist clinical algorithm to advance cares 	 Positioning and handling strategies to maximize lymphatic activation, neutral warmth for fluid viscosity reduction
Neurodevelopmental outcomes	 Additional treatments for specific edema
4:30-5:15 LAB + Lecture: GI Considerations	 Kinesiotaping Pressure garments
 Scar assessment and treatment Abdominal sensory and motor assessment/treatment 	4:45-5:15 Case Analysis with multi-system assessment and treatment
 GI facilitation techniques 	discussion
 Pelvic floor activation for stooling 	5:15-5:30 Goal writing and outcomes for interventions Additional Considerations for Infants with Tracheostomy Tubes
 Oral motor facilitation for endurance 	Self-care: Bathing, dressing
 Oral feeding progression and strategies 	 Community mobility: equipment considerations
Nutritional considerations	Family trainingDevelopmental play tasks at home
5:15-5:30 CASE ANALYSIS	



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Approved by the **FL** Physical Therapy Association for 18 continuing education contact hours. This course has been approved by the **MD** State Board of Physical Therapy Examiners.

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This course meets the criteria for 15 hours that can be applied toward the Neonatal Therapy National Certification.

12 hours of this course qualify towards the discipline-specific hours for the 20-hour requirement for NDTA re-certification. They do NOT qualify towards the 8-hour NDTA Instructor requirement for re-certification. Education Resources Inc. 266 Main St, Medfield, MA 02052. Please contact us with any special needs requests: info@educationresourcesinc.com or 508-359-6533.

Live Webinar

March 25 and 26, 2023

8:40 am EST • 7:40 am CST • 6:40 am MST • 5:40 am PST (US) Registration is for both sessions. Log-in instructions and course materials will be

emailed/added to your ERI account 5-7 days prior to the first date of the course.

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