Pediatric Vestibular Therapy:

Young Children Through Adolescents

Inger Brueckner, MS, PT



Faculty

Inger Brueckner, MS, PT has practiced vestibular rehabilitation since 1994. She began teaching after completing the Emory University/APTA Vestibular Competency course in 2003. In 2010 she joined the Rocky Mountain Hospital for Children Center for Concussion as the creator and director of PACER (Progressive Acute Concussion Exertional Rehabilitation). She is a member of a multi-disciplinary team focused on providing cutting-edge, effective, safe rehabilitation. Working for Presbyterian/St. Luke's Medical Center in Denver, CO, she has presented research findings at APTA CSM, published journal article, book chapter, developed protocols, and been invited to speak at international, national, and local conferences. She is passionate about providing the best care for all patients in a collaborative medical team, sharing lessons learned through continuing education.

Disclosure: Financial: Inger Brueckner receives a speaking fee from Education Resources for teaching. Non-Financial: She has no non-financial relationships to disclose.

About this Live Webinar

Have you ever considered the importance of the sensory system that detects movement while rehabilitating children and adolescents? The pediatric patient will experience vestibular dysfunction at similar rates as adults and any change either peripheral or central can greatly impact normal development of movement and postural control. This course will present current understanding of the scope of the vestibular dysfunction problem, best practices, systematic evaluation, and treatments addressing vestibular deficits in the school-aged child and adolescent. The course combines lecture, demonstration, and case study to address dysfunction accurately and efficiently. This course is updated as new information and guidelines are published. The primary goal is to challenge therapists to re-think movement and stability in their practice, using a comprehensive understanding of the vestibular system. Principles presented can be applied across the lifespan and with a multitude of disability levels. Access to videos of demonstrated techniques will be included.

Learning Objectives

- Identify functional impairments or complaints by children and/or their parents that indicate the need for a vestibular screening.
- Recognize at least three vestibular diagnoses in children that affect motor performance and development.
- Relate the functions of the vestibular system to normal skill development in children and adolescents.
- Connect vestibular dysfunction to problems in motor performance and behaviors during child development.
- Choose age-appropriate assessment tool to evaluate a child for vestibular dysfunction.
- Determine an appropriate individualized treatment program for a pediatric patient with vestibular dysfunction.
- Advance an intervention plan to address a child's functional impairment(s).

Audience

This course is appropriate for PTs, PTAs, OTs OTAs, and health practitioners that work with school-aged children and adolescents AGE 5-18.



Schedule – Day 1 8:40 am - 5:00 pm EST (US)

| | • | | |
|-------------------------------------|---|--|--|
| 8:40–9:00 9:00-10:45 | Webinar Registration/Zoom Course Opens Vestibular rehabilitation in pediatrics, indications for screening, anatomy and physiology, reflexes, balance and posture, head righting gaze stabilization, updates in current research | | |
| 10:45-11:15 | Development and maturation of the vestibular system, age differences, multi-sensory reweighting, postural sway | | |
| 11:15-11:30 | Break | | |
| 11:30-12:30 | Epidemiology of dysfunction in children, pathophysiology, nystagmus, BPPV, migraine related syndromes, otitis media, unilateral and bilateral vestibular loss, mTBI/concussion/trauma, ototoxicity, central dysfunction, dysfunction associated with CP, ADHD, post cochlear implants, visual sensitivity | | |
| 12:30-1:00 | Treatment principles: adaptation, habituation and substitution, critical periods, adults vs children, red flags and cautions | | |
| | Lunch Break | | |
| 1:00-1:30 | Lunch Break | | |
| 1:00-1:30 1:30-2:15 | Lunch Break Evaluation in clinical practice: subjective complaints, determination of appropriate testing | | |
| | Evaluation in clinical practice: subjective | | |
| 1:30-2:15 | Evaluation in clinical practice: subjective complaints, determination of appropriate testing Demonstration of ocular motor screening and importance for gaze stability, evaluation with | | |
| 1:30-2:15 2:15-2:45 | Evaluation in clinical practice: subjective complaints, determination of appropriate testing Demonstration of ocular motor screening and importance for gaze stability, evaluation with treatment in mind BPPV in younger patients, positional testing: modifications for case load, canalith repositioning | | |
| 1:30-2:15 2:15-2:45 2:45-3:15 | Evaluation in clinical practice: subjective complaints, determination of appropriate testing Demonstration of ocular motor screening and importance for gaze stability, evaluation with treatment in mind BPPV in younger patients, positional testing: modifications for case load, canalith repositioning technique and modified Brandt-Daroff exercises | | |
| 1:30-2:15 2:15-2:45 2:45-3:15 | Evaluation in clinical practice: subjective complaints, determination of appropriate testing Demonstration of ocular motor screening and importance for gaze stability, evaluation with treatment in mind BPPV in younger patients, positional testing: modifications for case load, canalith repositioning technique and modified Brandt-Daroff exercises Break Demonstration of positional testing and treatment | | |

Schedule – Day 2 8:40 am - 4:30 pm EST (US)

| 8:40-9:00 | Webinar Registration/Zoom Course Opens | | |
|-------------|--|--|--|
| 9:00-9:15 | Case discussion | | |
| 9:15-10:15 | Autonomic dizziness, syncope, orthostatic intolerance, POTS, post-COVID, nausea and anxiety | | |
| 10:15-10:30 | Sex differences in presentations and development | | |
| 10:30-11:15 | Dynamic movement and posture assessments, objective measures and testing principles for balance | | |
| 11:15-11:30 | Break | | |
| 11:30-12:00 | Decision making for HEP, dosing, progression, giving feedback, clinical take-a-ways, diaphragmatic function, startle posture and visual vertigo | | |
| 12:00-12:30 | Symptom relieving techniques, grounding, use of manual therapy | | |
| 12:30-1:00 | School and play considerations, visual ergonomics, modifying environment, timing of activity, patient and care giver education, lifestyle management, and exertion. | | |
| 1:00-1:30 | Lunch Break | | |
| 1:30 2:45 | Exercise examples, inclusion of core stability, balance exercises and modifications for low vision, altered movement and posture control, low cost options for equipment, resources, collaboration among disciplines | | |
| 2:45-4:15 | Break into groups for case discussion and presentation of treatment to class including | | |



4:15-4:30



Pulling it all together

progression and modifications



and catch modifications, using multi-sensory



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This course meets the criteria for 14.5 contact hours 1.45 CEUs, Intermediate Level.



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This course can be used toward your NBCOT renewal requirements for 14.5 units. Approved provider of the FL Board of Occupational Therapy-CE Broker – 17 hrs. This course meets the approval of the TX Board of OT Examiners.

Approved by the FL Physical Therapy Association for 17 continuing education contact hours. Approved by the MD Board of Physical Therapy Examiners. Approved by the MN Board of Physical Therapy. Approved by the NJ Board of Physical Therapy Examiners.

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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.

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Webinar Dates and Times

December 5 and 12, 2025 8:40 am EST • 7:40 am CST • 6:40 am MST • 5:40 am PST (US)

Registration is for both sessions. Zoom log-in instructions and course materials will be emailed/added to your ERI account 5-7 days prior to the first date of the Webinar.



\$389 fee. LIMITED ENROLLMENT Cancellation will be accepted until 14 days prior to the start date of the course, minus a \$75 Administration Fee. There will be NO REFUNDS after this 14-day deadline. We encourage you to register online!

Pediatric Vestibular Therapy Inger Brueckner December 5 and 12, 2025

Course Registration Form

| Name: | | | |
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