### **CEUs & State Approvals**

New Mexico PT Board Approved for 16 hours of continuing education. Certificates of attendance with the number of contact hours will be given to each participant at the completion of the course. Please call if you have any questions regarding state approval.

### **Registration Confirmation**

A confirmation letter with specific location information, course times and suggested attire will be emailed once registration is received. **Location changes may occur** so please refer to your confirmation letter for details.

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Comprehensive Movement Training for the Orthopedic Practitioner

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 $2~days{-}16~Hours$ 

Optimal Movement Strategies for Seniors 2 days—15 Hours

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# Functional Movement Strategies for the Legs, Knees & Feet

Understanding Relationships & Optimizing Movement

16 Hours - NM PT Board Approved

### Gordon Browne, Instructor

Physical Therapist & Author 25 + years of Professional Experience



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www.MovementSeminars.com

### **Functional Movement Strategies for the** Legs, Knees & Feet

*Understanding Relationships & Optimizing Movement* 

### **Course Description**

With an emphasis on immediate clinical application to orthopedic knee, lower leg and foot dysfunction, this fun and interactive movement lab introduces ways of making the exercises we use more informative, more functional and much more effective. Discover how poorly organized movement in the hips and pelvis contributes to localized down-chain musculoskeletal pain, how to facilitate better patient motor planning and how movement changes in response to traumatic lower extremity injury. Gain a more dynamic perspective on human movement and be more creative in how you teach exercise, lower extremity alignment and function. Many knee, ankle and foot pain syndromes or repetitive stress injuries are a result of faulty lower extremity mechanics, while faulty mechanics will arise secondary to traumatic injury—both should be treated with an integrated exercise and proprioceptive self-awareness training program. In this course, you will participate in integrated movement exercises that focus on the relationships between feet, knees, hips and pelvis—then analyze the movements for clinical relevance and contrast with a traditional therapeutic movement model. This approach to studying movement (dynamic/alive vs anatomical/cadaveric) makes you a better practitioner by improving your fluency in the universal language of movement—proprioceptive awareness and choice-based motor habit optimization. Come experience a refreshing new perspective, you will never see movement and exercise the same way again!

### **Course Objectives**

By the completion of this course, the participant will be able to:

- **Define** Regional Interdependence & Specificity Principle.
- Identify long-term habitual movement and postural mistakes and correlate to plantar fasciitis, anterio/lateral ankle impingement, achilles tendinosis, anterior knee pain, ACL surgery, TKR, meniscal tear, hamstring strains and more.
- List three primary differences between Static Integration & Dynamic Integration exercise.
- **Define** the difference between Global & Differentiated movement or postural patterns—list two examples of each in the knee, ankle and foot.
- **List** three principles of Optimal Movement and give examples of common knee and lower extremity clinical presentations resulting from sub-optimal movement.
- **Explain** the benefits of informational exercise strategies—use of constraints, change of venue, reciprocating movements, goldilocks principle and link to functional context.

### About the Instructor: Gordon Browne PT

Gordon Browne is a Physical Therapist with 25 + years of clinical experience in outpatient orthopedics and manual therapy. With a lifelong passion for movement, he has modified and medically articulated the clinical use of various integrated movement systems; the Feldenkrais Method®, Yoga, Pilates and Tai Chi. Lecturer for 15+ years and author of two books; "A Manual Therapist's Guide to Movement" and "Outsmarting Low Back Pain".

### **Course Outline**

Lab sessions include experiential movement, partner observations, facilitation techniques, modifications & discussion of clinical relevance.

### Day 1

### 7:45-8:00—Registration

### 8:00-9:45—Introduction to Integrated Movement

- Comparing Dynamic & Static Integration Movement Principles
- Language of Integrated Movement: Global & Differentiated Relationships
- Principles of Optimal Movement: Looking Beyond ROM & Strength

### 10:00-12:00—Lab I: Medial/Lateral Lower Extremity Relationships

- Asleep at the Wheel Syndrome: Repetitive Stress Injuries & Pattern
- Manual Facilitations: Peroneus Longus & Posterior Tibialis Awareness
- Rotational Knee/Foot Alignment & Stabilization: Movement Reciprocity & Pattern Specificity

### 1:00-3:00—Lab II: Anterior/Posterior Lower Extremity Relationships

- Simulating Push-Off: The Gluteal-Hamstring-Gastrocnemius Cascade
- Ankle/Toe Differentiations & Link to Hip Push Off Muscles: Shin Splints
- Knee Hyperextension Control: Manual Facilitations & Positional Progressions

### 3:15-5:30—Lab III: Finding & Maintaining the Tripod Foot

- Kinematic Linkage: Hip Control of Knee Valgus & Foot Pronation
- Hip Abductor/Peroneus Longus Synergy—Hip Adductor/Posterior Tibialis Synergy
- Knee Rotation Control: Manual Facilitations & Awakening the Hamstrings

### Day 2

### 8:00-9:45—Lab IV: Pelvic Force Couple Competence & Balance

- Cross Pelvic Synergies: The Pelvic Force Couple
- Recognizing PFC Bias & Effects Down-Chain
- Alternating 3-Dimensional Hip Movements: Push Off & Landing

### 10:00-12:00—Lab V: Up/Down Stairs & Inclines

- Patellar Tracking & Compression Control
- Knee Valgus Control: The Goldilocks Principle & Introduction of Error
- Proportional Use of Synergists & Fascio-Skeletal Weight-Bearing

### 1:00-3:00—Lab VI: Medial/Lateral Knee & Ankle Stabilization

- Distal Stability & Proximal Mobility: Reversing Origin & Insertion
- Upping the Ante: Increasing Specificity, Complexity, Speed & Demand
- End-Game Rehab for Traumatic Injuries: Ankle/Knee Sprains, Fractures & Surgeries

### 3:15-5:30—Lab VII: Walking, Running, Pivoting & Cutting

- Drills, Progressions, Putting it All Together
- Proportional Use of Synergists: Hamstring, Hip Flexor & Adductor Strains/Tears
- Review, Reinforcement of Course Objectives & Questions

# Functional Movement

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