Student Organization Aims to Unite PT and PTA Students Across the State
The Wisconsin Physical Therapy Student Network (WPTSN) is an organization comprised of SPTs and SPTAs in Wisconsin. There are many goals for the WPTSN. The first is to increase communication and participation of PT and PTA students in the WPTA across the state. This is accomplished through events at conferences, the WPTA Student Facebook Page, and additional networking opportunities. The WPTSN also aims to facilitate opportunities for students to participate in advocacy. Student participation and experience with advocacy fosters important professional and leadership skills, which will be greatly beneficial as practicing professionals. Additionally, the WPTSN encourages engagement and membership in the WPTA and APTA.

Currently there are four committees that WPTSN members can choose to get involved in, which are WPTSN Superstars, Networking, Student Advocacy, and National Student Conclave Assistance. The WPTSN Superstars is a student recognition program that allows students to be nominated as a “Superstar” for going above and beyond. This program is a great opportunity to acknowledge those who are outstanding leaders and role models in their programs as well as in the WPTA. The Networking committee is working on bringing together students and professionals to converse about the physical therapy profession, and to build personal and professional relationships. The Student Advocacy group works to increase awareness about needs in the profession of physical therapy and why it is such an integral part of the healthcare system. As the National Student Conclave (NSC) is in Wisconsin in 2014, the NSC Assistance committee is working on making this a truly memorable event for all students.

The WPTSN is open to ANY PT/PTA student, so if you know of a motivated student looking to get more involved, please shoulder tap them to become a WPTSN Member. More information can be found on the WPTA Student Facebook Page.

Submitted by Lauren Vermillion, SPT, UW-Milwaukee, WPTSN Member

President’s Message
Kip Schick, PT, DPT, MBA
WPTA – Serving Members and Leading the Way
As with any state chapter, the WPTA has several areas of focus, including:
• Protecting and expanding (when appropriate) our practice act
• Achieving the goals and objectives outlined in the WPTA Strategic Plan
• Offering high quality continuing education programs at the district and state levels
• Providing opportunities for member networking

• Working collaboratively with members and external stakeholders on areas of strategic importance such as clinical practice, payment, public policy, workforce needs, health and wellness, etc.
• Supporting members and our communities in ways that promote physical therapy

Over its 85+ year history, the WPTA has a strong track record of advocating for protection and expansion of the Wisconsin Physical Therapy Practice Act. In the past year the WPTA has played an active role in several key areas related to statutory practice protections, including trigger point dry needling and X-ray ordering.

Last year the WPTA made significant changes to its overall strategic plan by condensing the number of goals from five to two in order to ensure more focus on key areas of the Association. The two primary goals are:

1. WPTA members will demonstrate value that is recognized by consumers, payers, policy makers, and providers to enhance the client experience, improve societal health, and decrease the overall cost of health care.
2. WPTA members will be engaged in setting and achieving the initiatives of the Association.

Submit an article for future WPTC issues! Contact Location@wpt.org

Check Out Interview with WPTA Treasurer Steve Johnson – page 6
Statement of Purpose
PT Connections is a quarterly newsletter published by the Wisconsin Physical Therapy Association. It provides information on local, state and national issues affecting PTs and PTAs in the State of Wisconsin. It’s three functions include disseminating information, soliciting involvement and educating members on current issues.

All articles should be submitted for review to: WPTA, 3510 East Washington Avenue, Madison, WI 53704 or to wpta@wpta.org.

The WPTA welcomes your feedback. All letters to the editor must be signed, and include a phone number and address. Names will be withheld upon request. Letters to the editor and responses do not necessarily reflect the opinions or official policies of the WPTA or its Board of Directors. All materials submitted are subject to editorial review for inclusion and editing.

Advertisements
Ads are accepted for employment opportunities, product promotion and course listings. Ad inclusion does not imply endorsement by the WPTA or its Board of Directors.

Camera Ready Ad Rates:
Full Page – $250 1/4 Page – $100
1/2 Page – $175 Cont. Ed Listings – $35

There is an extra charge for typesetting. Please call WPTA office at 608/221-9191 for details.

Next Issue – July 2014
Editorial submission deadline is May 15. Ad submission deadline is June 1.

Non-member subscriptions are available for $100/year.
All members are invited to our annual strategic planning session on Friday, May 2 in Madison. All attendees (including the Board of Directors as well as committee, taskforce, and SIG chairs) will plan and update our efforts towards meeting the goals and objectives for our Association.

The WPTA continues to support high quality education programs at the district and state levels. The upcoming WPTA Spring Conference is a great example where members can attend two days of programming and receive up to 14 hours of continuing education credit with PT, PTA, and student members paying $275, $200, and $125, respectively. At the physical therapist rate that’s less than $20 per hour of CEU credit! At the district level, many opportunities exist throughout the year to get CEUs at a cost that is affordable and also close to work and home.

Several member networking opportunities exist over the course of the year. From local “get together” to a night out at Miller Park or various events at one of our state conferences, bringing members together to discuss practice, get new ideas, and of course have fun, are great ways to connect with your peers.

The WPTA has a strong track record of collaborating with various stakeholders on a wide range of issues. Since the start of 2013, the WPTA has met with many groups, including the Physical Therapy Examining Board, the Occupational Therapy Affiliated Credentialing Board, the Wisconsin Medical Society, the Wisconsin Chiropractic Association, the Wisconsin Hospital Association, National Government Services, the Department of Human Services (Medicaid), the Alliance for Healthcare Insurers, the Wisconsin Speech and Hearing Association, the Wisconsin Association of School Boards, and many more!

In regards to supporting our members and our communities, the WPTA is proud to be a partner with Healthiest Wisconsin 2020, which plans and designs community health improvement “to benefit the health of everyone in Wisconsin and the communities in which we live, play, work, and learn.” Recently the WPTA submitted a grant application and received $10,000 from the APTA to fund the “Wisconsin Strong” program whose primary objective is to help individuals 55 years and older living in six selected communities in Wisconsin to maintain muscle mass, strength and balance as they age. Numerous other examples exist with respect to supporting members and our communities through the promotion of physical therapy.

I am deeply thankful to our WPTA staff, the Board of Directors, committee chairs, taskforce leaders, SIG chairs, member volunteers, and our lobbyists for their energy and effort to advance physical therapy practice across Wisconsin. Together we accomplish meaningful results that would not be possible by going it alone. I look forward to seeing everyone at Spring Conference...enjoy the warm weather - the snow will melt eventually!

Regards,
Kip

President’s Message [cont.]

Calendar of Events

2014

April 6-8 – Federal Advocacy Forum, Washington DC
April 10-11 – WPTA Spring Conference, Kalahari Resort, Wisconsin Dells
May 2-3 – Strategic Planning/Board of Directors Meeting, Madison
May 17-18 – World Health Professions Regulation Conference, Geneva, Switzerland
May 20 – WC District Board Meeting, La Crosse
June 11-14 – APTA NEXT Conference & Exposition, Charlotte, NC
July 26 – WPTA Board of Directors Meeting, Madison
September 13-15 – APTA State Policy and Payment Forum, Seattle, WA
October 23-24 – WPTA Fall Conference, Marriott, Madison
October 30-November 2 – APTA National Student Conclave, Milwaukee
Committee News

Academic Liaison

Announcements:
• Congratulations to Karen Lovely, SPT who was selected to serve as the new Wisconsin Student Core Ambassador Elect.
• Congratulations to Sarah Hobbs, SPT who is the recipient of the new Emerging Student Leader Award.
• Congratulations to Nicki Ruegsegger, SPT and Billy Sheehan, SPT who were recipients of the new Federal Advocacy Forum Scholarship.

Here’s an update on new programs and opportunities for students:
Graduating PT/PTA student scholarship (first year WPTA/APTA membership dues).
• Students apply in the spring by developing an idea they would then implement the next year to increase student involvement within the WPTA.
• Application timeframe and requirements will be announced in March.

Newly established Wisconsin Physical Therapy Student Network (WPTSN).
• The development of the WPTSN is a big step towards creating a formal Student Special Interest Group (SSIG) in the not too distant future.
• WPTSN membership is open to ANY PT/PTA student.
• The membership will fulfill the following three duties:
  • Contribute an article to the Student Scoop or post to the WPTA Facebook Page.
  • Nominate at least one WPTSN Superstar each month.
  • Be involved in one of the WPTSN committees.
• Current committees of the WPTSN are:
  • WPTSN Superstars – a new recognition program.
  • Student Advocacy – working with WPTA BOD to inform students of current legislative efforts.
  • Networking – currently working on PT Pub Night.
  • National Student Conclave (NSC) Assistance – currently working on coordinating a student social at the NSC.

Other student initiatives/opportunities to network and stay informed:
• Look for the WPTA Student Scoop (student newsletter).
• “Like” the WPTA Student Facebook Page.
• Join the WPTSN Facebook Group.

Upcoming events:
• WPTA Spring Conference April 10-11.
• Federal Advocacy Forum April 6-8.
• National Student Conclave in Milwaukee October 30 – November 1.

• WPTA Fall Conference in Madison, October 23-24. Here are a few highlights:
  • Student only course.
  • Student Meet and Greet with possible round table discussion regarding residency programs.
  • Mentorship program.

Rob Hofschulte, SPT is Wisconsin’s current Student Core Ambassador. Please feel free to contact him at robert.hofschulte@mu.edu or Erik Gregersen, PT, DPT the WTPA Academic Liaison Committee Chair, if you have questions on how to get more involved.

Submitted by Erik Gregersen, PT, DPT, Chair

Membership

Save Big with Career Starter Dues!

New in 2014 is a limited-time pilot opportunity for eligible members two to four years post graduation to save 40%, 30%, and 20% on national and state dues. The APTA’s pilot program for these savings begins with April 2014 membership renewals. To qualify, eligible members must have been an APTA student member at graduation and maintain continuous APTA membership post-graduation.

As always, if student members renew their membership in the first year post graduation, they save 50% on their national and state dues. The pilot further extends the savings as follows: second year post graduation = 40% off dues, third year post graduation = 30% off dues, fourth year post graduation = 20% off dues. Therefore, it would not be until the fifth year out of school that these members would start paying full dues.

This is a great opportunity for eligible members. Based on initial pilot results, the APTA Board of Directors may opt to extend the pilot for a subsequent year(s) to gather more data, consider a formal process for bylaw amendment, or suspend the pilot. So, if you are a student or graduated within the past four years, first of all thank you for being a member. But secondly, please take advantage of this excellent opportunity. Once your membership lapses, you are no longer eligible for these fantastic discounts. If you work with students or recent graduates, please inform them of this new opportunity. This is a great way to encourage our recent graduates to continue to be members of our wonderful organization.

For more details, please visit www.apta.org/CareerStarterDues. As always, you can contact me with questions at deborahkind@hotmail.com or 920/639-1931.

Submitted by Deb Urben, PT, Chair
Committee News [cont.]

Public Relations

Thanks to the WPTA eNews distributed February 14, the number of Wisconsin PT clinics consumers can choose from the WPTA website has increased 31%, to 188 on the Find a PT Clinic page as of March 20. This is still only a sampling of member providers out there, so please challenge your member friends by asking them, “IS YOUR PRACTICE SETTING REPRESENTED ON THE WPTA WEBSITE?”

The Public Relations Committee is looking for members to partner with that are sponsoring fun runs, wellness events, or other community activities that would benefit consumers. The Move Forward PT tent and various promotional materials are available. We have some funds available to co-sponsor events with your organization, so please contact the WPTA office for more information.

Submitted by Diane Slaughter, PT, MS, ATC, Chair

WPTA 2014 SPRING CONFERENCE

April 10 - 11
Kalahari Resort - Wisconsin Dells, WI

CLINICAL EDUCATION WORKSHOPS

APTA Clinical Instructor Education & Credentialing Program
The program (two days) addresses issues of planning and preparing for physical therapy students during their clinical experiences, developing learning experiences, and supporting ongoing learning through questioning and effective feedback. Skills of student evaluation are discussed, as well as the identification and management of students with exceptional situations. It includes information regarding student supervisory guidelines as well as legal regulatory and ADA issues. An “Assessment Center” provides each participant with the opportunity to apply information from the program in simulated situations. 15 contact hours

APTA Advanced Clinical Instructor Education & Credentialing Program
The focus of this course is best clinical practice and best clinical teaching. This course is open only to physical therapists, who have taken the original CI Education and Credentialing Program workshop. It includes two days of programming along with some online preparatory work to be applied in class. 16.75 contact hours

Annual Wisconsin Clinical Education SIG (CESIG) Conference
This one-day conference is held each year for anyone interested in topics related to clinical education. 7 contact hours.

<table>
<thead>
<tr>
<th>DATE/LOCATION</th>
<th>WORKSHOP/CONFERENCE</th>
<th>CONTACT</th>
</tr>
</thead>
<tbody>
<tr>
<td>April 24 &amp; 25, 2014 (Thursday &amp; Friday)</td>
<td>APTA CI Credentialing UW - La Crosse</td>
<td>Brenda Landrum Email: <a href="mailto:blandrum@uwax.edu">blandrum@uwax.edu</a> <a href="http://www.uwfax.edu/pt/clinical_ed_resources.htm">http://www.uwfax.edu/pt/clinical_ed_resources.htm</a></td>
</tr>
<tr>
<td>May 12 &amp; 13, 2014 (Monday &amp; Tuesday)</td>
<td>APTA CI Credentialing UW-Madison</td>
<td>Pat Mecum Email: <a href="mailto:mecum@pt.wisc.edu">mecum@pt.wisc.edu</a> <a href="http://ortho.wisc.edu/Program/DoctoralPhysicalTherapy/ClinicalEducation.aspx">http://ortho.wisc.edu/Program/DoctoralPhysicalTherapy/ClinicalEducation.aspx</a></td>
</tr>
<tr>
<td>May 30, 2014 (Friday)</td>
<td>Annual CE SIG Conference Carroll University</td>
<td>Kathy Shields Email: <a href="mailto:shieldsk@carrollu.edu">shieldsk@carrollu.edu</a></td>
</tr>
<tr>
<td>September 2014 (date TBD)</td>
<td>APTA Advanced CI Credentialing UW-La Crosse</td>
<td>Lois Harrison, PT, DPT Phone: 262/243-4468 Email: <a href="mailto:Lois.Harrison@uw.edu">Lois.Harrison@uw.edu</a></td>
</tr>
<tr>
<td>November 2014 (date TBD)</td>
<td>APTA CI Credentialing Concordia University</td>
<td>Diane S. Slaughter, MS, PT, ATC Phone: 414/288-3097 Email: <a href="mailto:diane.slaughter@marquette.edu">diane.slaughter@marquette.edu</a></td>
</tr>
<tr>
<td>March 9 &amp; 10, 2015</td>
<td>APTA CI &amp; Advanced CI Credentialing MarquetteUniversity</td>
<td><a href="mailto:lori.keisic@aurora.org">lori.keisic@aurora.org</a></td>
</tr>
</tbody>
</table>

Schedule provided by WPTA’s Clinical Education SIG: lori.keisic@aurora.org
Get to Know a Board Member

In this ongoing feature WPTA board members are interviewed to learn more about them, personally and professionally. This issue’s member is Board Treasurer Steve Johnson, DPT.

What inspired you to go into the Physical Therapy profession?
When I was in high school my niece had some developmental difficulties and I had a chance to see first-hand how physical therapists worked with her and the positive results. This was at an influential time for me when I was trying to decide what I wanted to do for a career.

Please share a synopsis of your PT career, including your formal education.
After completing my bachelor’s degree in psychology at UW-Oshkosh, I was interested in a master’s level PT program. I was fortunate to be accepted at Slippery Rock University in Western Pennsylvania in the fall of 1995. Slippery Rock then received provisional approval to convert its program to an entry level doctorate. So inadvertently I became part of the third DPT program in the country. Following graduation in 1998 I worked in western Pennsylvania at a small community hospital in a variety of settings, including outpatient, wound care, acute care, home health, and short term rehabilitation. I returned to Wisconsin in 2001 and worked at various levels of management in long term care until 2007, when I had the opportunity of a lifetime to start Achieve Therapy Solutions with my wife Julia Johnson, SLP, Steve and Stefanie McCoy, PTs and Dorothy Purtell, OT, MHA.

What is one of the most rewarding experiences you’ve had in a leadership role in the WPTA?
For me the most rewarding experience in my leadership role with WPTA is the exposure to such great people that have guided my development as a leader and as a professional. My first year as Treasurer and guiding the completion of that first annual budget was personally a very rewarding experience, but the friends that I have made have been even greater.

If you’d like, please share a favorite family memory.
Probably my favorite family memories surround going to my Grandmother’s or Uncle’s home on Christmas Eve. We always had a lot of fun and laughs and those are some of my fondest memories.

Do you have a favorite book? What types of books do you prefer?
Those that already know me realize this is nearly an impossible task! I enjoy reading popular fiction, early American classics, non-fiction related to American history and its pivotal leaders, and business books. If forced to select some favorites I would say: The Call of the Wild by Jack London, Good to Great by Jim Collins, Born to Run by Christopher McDougall, The Man Who Saved the Union: Ulysses Grant in War and Peace by H.W. Brands, and The Gold Coast by Nelson DeMille.

What’s one of your favorite movies?
Wow I thought the last question was tough… Again for those who know me selecting just one movie is nearly impossible. A recent movie I really liked was Argo. Some other favorites include the House of Cards miniseries on Netflix, North by Northwest with Cary Grant, Road to Perdition, and The Shawshank Redemption.

If you could learn to do anything, what would it be?
I would love to be able to fly an airplane, or someday if Virgin Galactic is successful (and affordable) I would love to travel to space.

If you could witness any event past, present or future, what would it be?
If I had to choose one event, it would be the Constitutional Convention and seeing how the Founding Fathers negotiated the unifying of the states.

If you could have a super power, what would it be?
Being such a terrible swimmer in triathlons I have always been a bit envious of Aquaman.
Southwest
The Southwest District held its annual Continuing Education Workshop Day on March 1 at the UW-Madison DPT school. This event was offered in conjunction with the Phi Theta, UW-Madison’s PT student program, as a fundraiser. Topics offered this year included: “Bike Fitting 101” by Becky Thomas, PT, CMTPT; “The ACL dilemma: the HOWs and WHENs: HOW do we prevent and WHEN do we return to sport?” by Jill Thein-Nissenbaum, PT, DSc, SCS, ATC; “CervicoThoracic Spine and Rib with Lab” by Joe Tupta, PT, OCS and Jennifer Doster, DPT, CSCS; and “Neuro-Developmental Treatment” by Monica Diamond, MS, PT, C/NDT.

The next District business meeting is scheduled for April 28 in Madison, location TBA. A one hour CE presentation following the business meeting will be given by Carl Fernandez, PT. He will be speaking on the GivMohr Sling.

Our executive committee has added a student representative position to encourage student involvement in the WPTA. Thus far several DPT students have gotten involved, but we would like to also see more PTA and DPT student involvement. If interested, contact District Chair Jim Cumming, PT, OCS at jcumming@uwalumni.com. The participation by students on our executive committee has already demonstrated success. We had a record number of student volunteers represented at our District events such as our PR expo booths and social events.

West Central
Now that the winter is coming to an end the West Central District would like to thank our continuing education instructors from the last couple of month. The most recent speakers have been Patrick Grabowski, PT, PhD on “Chronic pain”, Sara Winters, PA-C on “Lab values”, and Erin Hussey, DPT, John Greany, PT, PhD and Gwyneth Straker, PT on “Movement disorders and community based health and wellness exercise programs”. Also for those of you interested in the District business, the District board meeting will be held in May; everyone is welcome, place and time TBD. We are always looking for topics, courses that you have seen, or individuals that may be interested and able to teach at one of our courses. If you have a great idea, please contact Jack Knudson-Stuhr, PTA at jaknudso@gundersenhealth.org or Mary Kerrigan, PT, DPT, CWS, NCS at maryakerrigan@gmail.com.

I also wish to congratulate the newly elected leaders of the District; Treasurer and Education Chair Mary Kerrigan DPT; Vice Chair, Barb Helgeson, DPT, CSCS; Public Relation, Kurt Van Auken, SPTA, and District Chair, Jack Knudson-Stuhr, PTA. We are currently looking for a person that wishes to assist with our secretary position. If you or someone you know would be interested, please contact one of the District leaders.

We also wish to congratulate Gwyneth Straker, PT for her work obtaining a Health and Wellness grant for “Community partnerships: Making Wisconsin Seniors Strong.” Along with the grant and a donation from the PT Foundation, the District will also be donating monies toward this program.

Submitted by Jack Knudson-Stuhr, PTA, Chair

Northeast
The Northeast District was excited to kick off the Ortho Manual PT Professional Development Program earlier this year with the goal being to teach evidence based manual therapy and engage new PT professionals. Phil Schaible, PT, DPT, OCS, FAAOMPT, Bob Brady, PT, DPT, OCS, FAAOMPT, and Joe Kucksdorf, PT, DPT instructed the first course to 30 individuals in January. Over 25 physical therapists from around Wisconsin have volunteered to mentor students outside of the classroom. The next course on the lumbar spine and pelvis is scheduled for April 12-13 at Bellin Health Family Medical and Wellness Center-Bellevue. A cervical and thoracic course will be taught the weekend of November 8-9, with the location to be determined.

Once again the District will have a booth up for the Bellin Run on Friday June 13 at the annual Health and Fitness Expo in Astor Park. If you plan on attending, please stop by our booth. Please e-mail us at nedistrictwpta@gmail.com if you are interested in volunteering for this event.

Continued on next page
We are also looking for four physical therapists and/or physical therapist assistants to volunteer within our District to lead the Wisconsin Strong project. The project's focus is to have volunteers lead exercise classes for 11 weeks to help men and women 55 years and older maintain muscle mass, strength, and balance as they age. The volunteers will need to attend the StrongWomen Training Program offered during the WPTA Spring Conference on April 10. If you are interested in volunteering for the program, please contact Janine Boldra, PT, Health & Wellness Chair for the District at nedistrictwpta@gmail.com. We look forward to seeing you at the WPTA Spring Conference!

Submitted by Bridget Kratz, PT, DPT, NED Secretary/Treasurer

North Central
The North Central District held its meeting in February using videoconferencing at numerous sites throughout the district, which was open to all member and nonmember PTs, PTAs, and students. Please spread the word that nonmembers are welcome! We have a CE presentation at each meeting. All meeting minutes are available on the WPTA website, which includes a listing of cities with videoconference sites.

Brett Roberts, PT presented trigger point dry needling and demonstrated several techniques, for one CE contact hour. The presentation, demonstration, and Q&A were very informative. Thanks Brett!

Mark your calendars for future District sponsored courses. An Advanced Vestibular Course by Shari Berry, PT will be on October 4 in Minocqua, at The Waters from 8:00 am to 5:00 pm (time may be subject to change). Also there will be an ethics course on Moral Courage by Gwyneth Straker, PT on September 9 from 4:00 pm to 8:00 pm (location TBD). Please inform the CE Committee with any requests or comments you have about future topics.

Need a scholarship for mission/service work? The District may offer up to three scholarships a year of up to $500 each, to a PT/PTA/student whose home address is in the NCD. The scholarship is to be used for PT mission/service work abroad. A person can only receive the scholarship once every 5 years. If interested, contact one of the District board members.

The next District meeting will be via videoconferencing on May 20. The meeting will start at 5:30. Again, please let nonmembers know they are welcome!

If you have questions, please contact District Chair Stephanie Olson, PT at Stephanie.Olson@ministryhealth.org (715/346-5192) or District Secretary Dave Smith, PT at smith.david@marshfieldclinic.org (715/389-7501).

Submitted by Dave Smith, PT, District Secretary

UW Sports Physical Therapy Residency Program receives credentialing from the ABPTRFE

Dan Enz, PT, ACT, SCS with the UW Sports Physical Therapy Residency Program in Madison was informed by the American Board of Physical Therapy Residence and Fellowship Education that the Program successfully achieved credentialing as a sports residence program as of December 31, 2013. The Program was recognized during the Residency/Fellowship Career Development Reception at the 2014 Combined Sections Meeting in Las Vegas.

A credentialed residency or fellowship program promotes standards of quality and consistency in the teaching and practice of physical therapy. Through their voluntarily participation and adherence to the requirements of the credentialing process, these programs confirm to potential residents or fellows their commitment to providing quality learning experiences by meeting established criteria.

Additionally, completion of the credentialing process is an affirmation to the public at large of the Program’s commitment to the protection of the consumer of physical therapy.

Submitted by Brad Thuringer, PTA, Founder, Shoes4Kids

APTA and Shoes4Kids provide shoes for North Carolina’s under-served kids

North Carolina, home of the Tar Heels and Blue Devils, is a state with more than just collegiate basketball rivalries. North Carolina, sadly, also has more than 603,000 under-served children. In 2012, there were over 49,000 children living in poverty in Charlotte, NC.

APTA and Shoes4Kids are working diligently to keep the issue of under-served kids and their health a top priority during APTA’s conference.

Your participation last year helped put shoes on over 1,200 under-served, under-privileged kids in Salt Lake City, UT. Today, I ask that we share our strength by making sure kids in Charlotte have a clean pair of socks, and a well fit and comfortable pair of athletic shoes.

Together, we can expand our reach and touch more kids.

For more information, contact Brad Thuringer, PTA, at 800/657-4344 Ext. 325 or brad.thuringer@lakeareatech.edu.

Submitted by Brad Thuringer, PTA, Founder, Shoes4Kids
JOIN Payers & Providers attending the Spring Conference
Payer-Provider Forum Managing Physical Therapy
Services in a Value-Based System, Thursday April 10 from
8 am - Noon. Presentations Include:
• Evolving Physical Therapy to Manage Healthcare
  Costs by Lynn Steffes, PT, DPT, WPTA Payment
  Specialist
• Physical Therapy Early Intervention Research by Dave
  Elton, DC, Optum – United Healthcare
• Moving Physical Therapy from Volume to Value by
  Jeff Hatheway, PT, DPT
• Physical Therapy Classification & Payment System:
  National Proposal of Physical Therapy Delivery &
  Payment by Carmen Elliott
• Dry Needling Coverage

Newest transition for you in your practice setting: ICD-10
Transitional Planning. All practice settings/payers will
be required to transition to ICD-10 diagnostic coding by
October 1, 2014! (Worker’s Compensation Payers are not
under the mandate but are looking to transition as well.)

WHY? ICD-10 offers:
• A greater range of codes than ICD-9. ICD 10-CM offers
  approx 68,000 codes vs. ICD-9 at 13,000.
• The international standard and is essential to the US
  have comparative data for research etc.
• Combination codes for conditions and common
  symptoms or manifestations
• Combination codes for poisonings and external causes
• Added laterality
• Added extensions for episode of care: Acute, Subsequent, Sequela
• Expanded codes (injury, diabetes, alcohol/substance
  abuse, postoperative complications)
• Greater specificity to identify disease etiology,
  anatomic site, and severity. See http://www.apta.org/
  Payment/Coding/ICD10/ for more information.

HOW? APTA advises the following begin immediately:
• “Identification of where diagnosis codes are used
today: paperwork, electronic systems, and other
processes, such as submitting reimbursement
claims, identifying patient eligibility, getting prior
authorization from a payer, reporting quality data,
and more, will need to be updated to reflect new ICD-
10 diagnosis codes.
• Documentation: The ICD-10 code set provides greater
  specificity for patient diagnosis, so it will be critical to
  assess current documentation and how it will support
coding for ICD-10.
• Vendor Updates: If practices are using electronic
  systems for billing, they will need to have their
  systems updated by vendors.
• Staff Training: All staff that work with the current

ICD-9 system must be trained on the ICD-10, such as
clinicians, front desk staff, and coding/billing staff.”

Documentation will require updating as follows:
1. Do your current documentation /documentation
   forms and/or templates capture the parameters of
   ICD-10?
   • Laterality
   • Cause of Injury, Disease
   • Location
   • Point in the healing process (7th Digit coding A=
     Acute, D=Subsequent, S= Sequela)
   • Do you report the important co-morbidities
2. Correct coding relies on your clinicians’ supportive
documentation on all forms
   • Intake Forms including referrals
   • Evaluations
   • G-Coding/PQRS Coding
   • Billing forms/Super Bills

The WPTA will be hosting a webinar for WPTA members on
coding and several on-site seminars are available throughout the
state. Please watch for details coming soon.

For Claims-Based Reporting and Functional Reporting-
G-Coding Updates visit: http://www.apta.org//Payment/
Medicare/CodingBilling/FunctionalLimitation/

A few nuances have been introduced that are challenging
providers.
1. Therapists are strongly encouraged to document
   G-codes for all discharges, including unanticipated
discharges. The Medicare benefit policy manual
requires a discharge note (or discharge summary)
for each episode of outpatient treatment. Medicare
provides the following additional information: “The
discharge note shall be a progress report written by a
clinician, and shall cover the reporting period from the
last progress report to the date of discharge. In the case
of a discharge unanticipated in the plan or previous
progress report, the clinician may base any judgments
required to write the report on the treatment notes and
verbal reports of the assistant or qualified personnel.”

2. In the case of an unanticipated discharge where a
   G-code was not assigned:
   • An episode will be discharged by Medicare when
     it has been 60 or more calendar days since the last
     recorded date of service at a facility or practice.
     Claims submitted within 60 days of a prior episode
     will be denied unless the prior G-code is discharged.
   • If patient returns before 60 days:
     • Continue reporting on original primary
       limitation
     • Discharge original primary and report on
       subsequent

Continued on the next page
Global Health Service Learning Trip to Belize

DPT students improve accessibility to rehab clinic and educate children in Belize

Not only is it important for the field of physical therapy to address health care needs of those in our community, but it is also imperative that physical therapists fulfill their social responsibilities by contributing to global health care needs as well.

I and five of my peers, as well as a faculty member, an adjunct instructor from the UW-Madison, had the opportunity to contribute to global health by traveling to Belize as a service learning project. As part of our curriculum, all DPT students are required to participate in a service learning project. The goal of the projects is for the students to use our knowledge and skills as future physical therapists to contribute to the community in ways outside of clinical practice.

While most service projects work with local organizations in need, three student groups have chosen to do work internationally for their projects, in Belize, Ecuador, and Uganda. The global health trip to Belize spanned eleven days and focused on projects including: improving the accessibility of the regions only rehabilitation clinic by constructing ramps and building handrails, educating local 9-11 year olds on disability awareness, and creating culturally sensitive home exercise programs.

We gave a disability awareness presentation, which we and prior UW-Madison DPT students created, to 487 students across 21 schools. In order to better educate the children on what it means to be disabled or how to help someone who is disabled, we led the children in activities that included making play dough tortillas with one hand, painting with their feet, and playing fútball on crutches or from a wheelchair. The children enjoyed participating in the activities and gained a new understanding of what it means to be disabled.

Although our time in Belize was short, we believe we left a sustainable impact on the communities where we worked, and in return our group has come home with an appreciation of another culture and a more versed background to make us better physical therapists and better individuals.

Submitted by Christa Wille, SPT, Belize Global Health Trip Member

Have you visited the WPTA Career Center lately?

www.wpta.org/classifieds

Reimbursement [cont.]

3. Two plans of care (POC) can exist concurrently for a beneficiary being seen with two different diagnoses by two different referring physicians.

4. Two plans can be combined into a single POC if one of the two referring physicians is willing to certify the POC therapist must decide if the initial primary limitation (carry, moving and handling objects) is still the primary limitation OR there is a new primary limitation associated with the new diagnosis.

PQRS Reporting for PT’s in Private Practice Settings


WI Worker’s Compensation

WPTA continues to attend and advocate for the continuation of the current WI payment structure for WI Injured workers. Please see the WPTA website for the WPTA testimony offered by Brett Roberts, PT on our behalf!

The Labor Committee of the Wisconsin Assembly has made a decision NOT to vote on the current “Agreed Upon” Proposal for WI Worker’s Compensation. Therefore no changes will be in place for the upcoming year.

Submitted by Lynn Steffes, PT, DPT, WPTA Reimbursement Specialist
Chippewa Valley Technical College

The Physical Therapist Assistant Program at CVTC is located in Eau Claire, WI. It is a newer program, with the first class graduating in 2009. The program has been directed by Alissa Amundson, PT, MSPT, since the Program’s inception in 2007. Wendy Raddenbach, PT, BS is the other full-time faculty member.

The program has 4 PTAs who serve as adjunct faculty, teaching various lab courses. Krissia Reeves, PTA, BS, and Kris Greener, PTA have each taught in several capacities including Patient Interventions labs, Therapeutic Exercise labs, and Musculoskeletal Rehab labs. They both come to the program with many years of clinical experience in multiple settings. Kari Jo Olson, PTA is a graduate of the Program, and has assisted with Neuro Rehab labs. Brittany Konsela, PTA is also a graduate of the program and will be assisting with Neuro Rehab labs for the first time this coming fall. We welcome her to our faculty roster!

The PTA Program at CVTC recently underwent a reaccreditation self-study and site visit with the Commission on Accreditation in Physical Therapy Education, and is awaiting a decision at their April meeting regarding accreditation status. Twenty-four students are admitted to the 2-year, 5 semester program each fall. Our students come from many different backgrounds and range in age from 20-60 years old. Students come to CVTC from many different communities, some of them travelling over 1 ½ hours each way to school! Our students generally have many other responsibilities in addition to attending school.

Students focus on didactic learning in their first three semesters of the program and attend their first clinical in semester 4. The Program has made a change beginning in Fall 2014 where students will attend clinical at various locations for 1 day/week for the full 16 week semester. Students then have their second clinical full-time for 5 weeks at the beginning of semester 5, and their third and final clinical for the final 8 weeks of semester 5. Students may travel up to 100 miles for clinical placements.

To begin the Program, students have to meet an ACT or COMPASS test score requirement, and complete Algebra, Chemistry and Biology with a grade of “C” or higher. Students also must successfully complete a Nursing Assistant course prior to program admission. To become a clinical site, please contact Wendy Raddenbach, PT at wraddenbach@cvtc.edu. For more information visit www.cvtc.edu.

Submitted by Alissa Amundson, PT

Concordia University Wisconsin

Concordia University Wisconsin (CUW) was founded in 1881 with the mission to prepare individuals for the ministry in the Lutheran Church-Missouri Synod. When CUW became a four year college in 1978, the University broadened its mission to include the preparation of individuals for various professions, especially professions dedicated to service, including healthcare professions. CUW is located in Mequon on 192 acres of land overlooking Lake Michigan.

The inauguration of Master of Physical Therapy (MPT) class entered in August, 1994. Initial accreditation was granted by CAPTE to the physical therapy program in 1996. During the academic year 2000-2001, the Director led the faculty and the Physical Therapy Program advisory board in discussions which resulted in the decision to convert the MPT program to a Doctor of Physical Therapy (DPT) program. The first DPT class was accepted in the fall of 2002 and graduated in May, 2005. Currently, the DPT program is housed in the School of Health Professions. Our mission statement is: “Concordia University Wisconsin Program in Physical Therapy is committed to developing health care professionals who have a sound foundation in Movement Science and are prepared for safe, autonomous, and ethical practice as physical therapists within a changing health care environment. The Program seeks to foster personal growth in mind, body, and spirit for Christian service to the community.”

The CUW program is a 4+3 program. Applicants must complete a bachelor’s degree before starting the program and have maintained a 3.0 overall GPA and 3.0 prerequisite science course GPA in their undergraduate studies to be considered for admission to the program. Currently CUW accepts 26 students for each DPT cohort.

Clinical education experiences are integrated throughout each year of the program with increasing clinical responsibilities and skills expected of students as they progress through the program. All students complete two 3 week full time experiences, one 10 week full time experience and two 9 week terminal level full time experiences. Additional patient experiences are provided throughout the curriculum within clinical courses, through pro bono experiences and an offsite community clinic. Students are required to complete one pediatric, one neurological, one acute care and one outpatient orthopedic clinical experience. At least one of the experiences must be in a setting that serves clients who come from a different background than the student. Students play an active role in choosing their clinical sites for each experience, with the exception of the first 3 week experience, which is assigned by the Director of Clinical Education.

Further information about the DPT program can be found at www.cuw.edu/Programs/dpt

Submitted by Bob Barnhart, PT, ScDPT, PCS Professor and Director Physical Therapy Program
Life-long exercise intervention in people with Parkinson Disease and related disorders

Physical therapists, organized by Teresa Steffen, PT, PhD have offered individualized group-based exercise programs for people with Parkinson Disease (PD) in the state of Wisconsin since 2003. Currently there are 16 such exercise programs led by physical therapists; Wisconsin is the only state that has this type of programming. These program classes are used for remediating the symptoms of PD and have focused on balance and gait. Recent evidence suggests two additional concepts that challenge existing program plans need to be considered in interventions for people with PD.

Cardiovascular Training

Persons with PD continue to have needs for initiating and maintaining vigorous stimulation of their cardiopulmonary system. This is an area in which physical therapists are optimally trained for developing and monitoring an exercise program that is geared for a “lifetime” of enhanced living despite disease diagnosis.

A vigorous cardiovascular program is one in which the client’s heart rate is raised and sustained to 70-80% of his/her heart rate (HR) maximum by using the familiar American Heart Association formula of (220-age) x (.70-.80). For example, a client who is 60 years old (220-60)=160 x (.70-80) has a target heart rate of 112-128. By comparison, the target heart rate of an 88-year-old would be 92-105. A neurologist treating clients with PD reports that PD drugs do NOT affect this formula.

In established program classes, clients walk backwards on the treadmill for 10 minutes—a challenge for balance but not for endurance. Forward treadmill programs now add the challenge of increasing workload by increasing time and speed without hand hold or alternating hand hold. A 67 year old male client in one program has increased forward walking speed to 4.1 mph with no hand hold. His target heart rate is 107-122; he averages 114 (75%).

As a profession we need to continue to understand why this increase in heart rate assists the client. How long and how often this should be done is unknown. The workload of treadmill walking can be increased by increasing time spent walking, increasing the number of times/week, and/or by adding dual tasks such as walking while talking, moving the head while walking, watching TV, and many other activities.

Considerations of cardiovascular health suggest that physical therapists may be focused on the treadmill (gait endurance). The bike (better range for the ankle and knees) or the elliptical (arm and lower extremity reciprocal motion) should also be considered. Heart rate can be progressively increased on any of these pieces of equipment. Using home aerobic equipment (bike) on the opposite days may increase the number of times/week of aerobic exercise.

In addition to walking, strength and balance specific training are included in the exercise programs. Clients come into the exercise area and work on leg press, back extension, rhomboid and trapezius equipment, as well as perform floor mat work. For example, a current 88 year old client does 160 pound lift on both the leg press and back extension and 20 pound lift on the rhomboid exercise machine with 30 total reps on each piece of equipment. The goal of floor activities is hip extension (in prone), back extension, crawling, and kneeling. Upright balance exercises are done in standing.

Emotional Training or Coaching

Clients should be empowered to direct both their own and the group program so that anyone/everyone participating in a class could “direct it”, even if the instructor was not there for a session. The ability of clients to direct a class encourages them to continue exercises when they travel and at home.

Often clients see a PT because they have “a problem”. Remember, you are not there to only address pain. Doing so ignores the huge psychological burden of this disease. Clients with PD can be quite convincing. They may complain that “my legs hurt,” or “my back hurts”, or “my groin hurts,” or that “too much exercise makes my PD worse”. They might fear falling and therefore decide to limit exercise. Meanwhile, due to a desire to limit movement, some clients may become over-dependent on caregivers. To make matters worse, some physicians and family members are not always supportive because they do not always believe in exercise. These challenges are often more psychological than physical. Research does not support limiting exercise. We must work to counter these clients’ psychological attitude. An article was published in the February 2014 edition of the PT Journal about a client living at home with mixed Cortico-basal Degeneration and Progressive Supranuclear Palsy. He was able to maintain his level of independence related to his participation in the class for 10 years. You can achieve this same success with your clients.

As physical therapists treating clients with PD and related diseases, we must encourage both PT individualized treatment and long-term group classes. Group class for people with PD has improved gait outcomes over home and individual treatment. It is important to understand the holistic nature of this approach. That is, the therapist should not merely think about the current “episode,” but how it all fits into the person’s life. Keep your clients close to you (reassess every 6 months). Share everything with them that is in your physical therapy head. Use heart rate monitors. Be kind…but progressive! Tease clients, asking them what they think food tastes like in an institution. This sobering question is often enough to keep them moving. A 90 year old client stated that she does not exercise for herself but for those who help her. The more she does the less they have to help.

As a PT I would not claim that these strategies will solve all movement problems of people with Parkinson’s disease. How can we as physical therapists convince our clients to incorporate these ideas into their lives? How do we encourage our clients’ physicians and other professional colleagues to help with this effort?

To access more information: program locations, additional exercises, and many articles on Parkinson disease go to www.exercisepd.com or contact Dr. Steffen at terrysteffen123@gmail.com.

Submitted by Teresa Steffen, PT, PhD, and PT colleagues
Welcome to These New Members!

PTs
Adam Franzen
Nancy Fugate
Lindsey Laux
Ceilia Maccani
Molly Muller
Asha Pumphrey
Kristen Schulz
Kirsten von Zychlin
Megan Zingelman
David Conway
Katlin Genthe
Minhwan Kim
Megan McKinney
Joseph Tepp
Abigail Ashenden
Christopher Mckenzie
Jill O’Brien
Jennifer Paulsen-Keller
Daniel Schumann
Kimberly Stepien
Bridgett Comee
Jennifer Lavin
Karen Nague
Brad Sarder
Peggy Houglum
Mark Wilson

Nicole Dettmering
Tyler Douglass
Alexander Drake
Jacqueline Farley
Emily Fax
David Feather
Meghan Gannon
Alesha Garland
Mark Gore
Paul Grosshuesch
Alexandra Gust
Codi Halbur
Katherine Harlan
Holly Hatch
Nicole Hertel
Nathaniel Hoover
Andrew Huxford
Robert Jacch
Gino John
Kristy Johnson
Mith Kanan
Kayla Kaschinske
Sarah Kearney
Stephanie Klass
Kyle Klinzing
Hilary Korb
Agnieszka Kowalska
Elizabeth Kremer
Steven Kubsiak
Krista Lamb
Marissa Mader
Erin Mahoney
Casey McMahon
Rebecca Menelle
Jacob Meyer
Emily Miller
Nikolai Miskov
Erin Nachreiner-Mackesey
Jaime Neidenbach
Brianne Neils
Derrick Nillissen
Ryan Olson
Chloe Parizek
Ashley Pasewald
Grace Pathode
Rachel Paulson
Abigail Pellett
Dane Perlick
Michael Pietrantonio
Isaac Pratzel
Christopher Pynenberg
Jenny Renz
Luis Reppert
Lindsay Roberts
Marguerite Rosandick
Victoria Ruffing
Sabrina Sanabria
Caroline Schlais
Marissa Schleis
Jeff Schleusner
Jenna Schmitz
Lauren Schultz
Nicholas Schultz
Lauren Schweitzer
Jessica Segura
Chelsey Sipe
Cassandra Skibbie
Rochelle Smith
Stephanie Speel
Kelly Sweeney
Kathryn Teofilo
Courtney Van Zeeland
Eric Walz
Nicole Waner
Tyler Waskosky
Lindsey Weisensel
Danielle Westby
Erica Wilczek
Morgan Zuleger
Jennifer Lee
Jonna Bier
Destiny Burkett
Kathryn Claus
Carl DeLuca
Marina Dewhurst
Stephanie Dintzner
Kelsey Figg
Heike Fleuchaus
Mindy Hoffman
Ericka Morris
Michelle Narveson
Rhianna Nichols
Brittany Novotny
Nicki Ruegsegger
Laura Sandry
Kayla Sharp
Lindsey Solchenberger
Kurt Van Auken
Brianne VanDyke

PTas = 186
Students = 752
Total Membership = 2500
Cardiopulmonary Residency Program

This one year Clinical Residency Program is designed to develop clinical specialists in Cardiovascular and Pulmonary rehab with the goal of providing the highest evidence-based care for the cardiopulmonary patient throughout a full spectrum of care settings and acuity. We are currently recruiting for 2 residency positions.

Madison VA Cardiopulmonary Residents will gain clinical experience and interact as an integral member of a multi-disciplinary team for the adult cardiopulmonary patient. Residents will be mentored by expert clinicians at the Williams S. Middleton VA Hospital. Residents will manage a varied cardiopulmonary caseload with an emphasis in heart & lung transplantation across both the inpatient and outpatient settings. Teaching Assistant opportunities within the University of Wisconsin Madison – DPT program’s Cardiopulmonary Curriculum will be provided. Didactic training will be provided through the William S. Middleton VA Hospital, University of Wisconsin Hospital and Clinics and the University of Wisconsin School of Medicine and Public Health. Opportunities to participate in cardiopulmonary research to advance professional practice will be offered. Upon completion of the program, residents will be prepared to take the American Board of Physical Therapy Specialists exam in Cardiopulmonary Physical Therapy.

The Madison VAMC Residency Program will begin on Sunday, August 10, 2014. Residents will be employed full-time by the William S. Middleton VA Hospital and are therefore required to be citizens of the United States. The residency program has applied for credentialing through APTA as of January 2014.

Applications are due by Wednesday, April 30th, 2014. Interviews will be conducted in May with a final decision made by May 30, 2014. Candidates can apply as students, but need to be graduated and fully licensed by Sunday, August 10th, 2014.

To apply candidates will need to complete the required Application for Health Professions Trainee (form 10-2850d) available at: http://www.va.gov/oaa/app-forms.asp

Form 10-2850d along with a one page essay regarding personal interest and experience or background in cardiopulmonary physical therapy should be submitted to the Madison VA Residency Specialist.

For application submission or questions, contact:

James Carlson,
MPT, CCS

608-256-1901
Ext. 11107

James.Carlson1@va.gov

Equal Opportunity Employer
Random Drug Screens
DSI Work Solutions National Conference
Minneapolis, MN • September 19 - 20, 2014

Employers, Medical Professionals & Case Managers:
Combining Efforts to Reduce
Work Injury & Disability

Featuring the successful work injury TEAM

- Major national companies: Georgia Pacific; Sypris Technologies, Weather Shield
- Medical/Case management: Sanford Health, SD; Bone and Joint Center, WI; Alaris Group, MN
- Legal Updates: ADAAA updates, Hiring and Placement Policies
- Therapist specialists: Susan Isernhagen, PT, Dennis Isernhagen PT, Nancy Bellendorf OT, Scott Ege, PT, Curt DeWeese PT, Ginnie Halling PT, Andy Wood PT, Kim Smith PT
- Safety Directors; Human Resource Managers; Medical Case Managers
- Employee Health and Wellness

Specific Topics:

- Improving Communication and Return to Work Outcomes
- Positive Outcomes Achieved in Industrial Settings
- Best practices: Physician Decision Making in Return to Work
- Ergonomics: 5 Essentials Necessary for Success
- Developing Effective and Legally Compliant Policies in Hiring and Return to Work
- Synergy: Bringing Key Players Together in the RTW Process
- And more!

DSI Work Solutions, Inc.
1143 Fairway St. Ste. 104 • Bowling Green, KY 42103
270-245-1000 • www.dsiworksolutions.com
Ginnie Halling PT: ghalling@dsiworksolutions.com
Curt DeWeese PT: cdeweese@dsiworksolutions.com

For more information check the website, call or email us. Ask about receiving our free newsletter!
**The Department of Physical Therapy Presents**

**Continuing Education Courses for 2014***

**April 5**  Thoracic Manipulation with Kenneth A. Olson PT, DHSc, OCS, FAAOMPT

**May 1-3** Finding the Driver in Pelvic Pain: Musculoskeletal Factors in Pelvic Floor Dysfunction with Elizabeth Hampton, PT, WCS, BCB-PMD.

**May 20, June 10, 17 and 24**  PHTH 7549 Differential Diagnosis with William G. Boissonnault, PT, DHSc, FAAOMPT, FAPTA

**June 7**  Neurologic Outcomes Assessment: Beyond the Basics.

**June 18-21** Treatment of Bowel, Bladder and Pelvic Floor Disorders: Anatomical, Physiological, and Behavioral Foundations for Clinical Practice – The 10th annual offering of this flagship course

**July 25**  Ethics and Jurisprudence as part of our annual alumni reunion weekend. All welcome and Huge Discounts for Alumni

**October 16-18** Behavioral and Rehabilitation Treatment of Bowel Disorders with Jeannette Tries Ph.D., OTR, BCB-PMD

**January 23-24, 2015**  Physical Rehabilitation of the Shoulder/Elbow/Forearm: Integrating Structure, Function and Treatment with Donald A. Neumann, PT, PhD, FAPTA and Andrew Starsky, BSEE, MPT, PhD

**Online Ethics and Jurisprudence** – Anytime – Two courses to choose from

*Please check website regularly for additional offerings.

[www.marquette.edu/chs](http://www.marquette.edu/chs) – click on continuing education.