

Multidisciplinary Voice, Swallow & Airway Conference 2009

Thursday, April 23, 2009

The use of FEES and Videostroboscopy for evaluating and treating voice and swallow disorders. A comprehensive Hands-on Workshop

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This “beyond the basics” 6 hour-workshop is designed as a collaborative discussion with participants who have had basic courses and/or who are using Fiberoptic Endoscopic Evaluation of Swallowing (FEES)/Videostroboscopy in their practice. Each participant is asked to bring a case study to share for group discussion.

10:30 – 11:00	Registration
11:00 – 12:00	Summary overview; anatomy and physiology of larynx from endoscopy perspective; history of endoscopy, stroboscopy and rationale ASHA Position Statement Clinical decision-making (*) Normal FEES Exam, videostroboscopy and demonstration with description of equipment
12:00 – 2:00	Hands-on/ Work and watch. Box lunch provided Choice to do hands-on with practice models, or equipment from vendors. Participants may choose to devote “hands on time learning” to both procedures or they may primarily focus on one.
12:00 – 2:00	Concurrent Voice Treatment Lab. Don’t Judge a Voice by its “Cover” Rosemary Ostrowski, MM, MS, CCC-SLP Voice therapies to enhance healing/rehabilitation <ul style="list-style-type: none">• Alexander technique• Acupuncture• Massage
2:00 – 2:30	Break
2:30 – 4:30	Concurrent Voice Treatment Lab. Don’t Judge a Voice by its “Cover” (Repeat)
4:30 – 5:30	Panel: Q & A, difficult cases, protocols/rating and creating business plan – Bergin, Gould, Ostrowski

(*) Topics to be covered during lecture

- Scoring abnormal findings
- Interpreting abnormal findings
- Use of therapeutic interventions during FEES/Strobe exam

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- Equipment handling rigid and flexible endoscopes
- Indications for FEES vs. fluoroscopy
- Using FEES/Strobe as biofeedback
- Risk associated with endoscopy
- Implementation of FEES/Strobe in different settings

Following this conference, participants will be able to:

- Demonstrate specialized knowledge by performing and interpreting endoscopic swallowing and voice evaluations;
- Demonstrate effective equipment use and how to configure it for one's own setting for maximum use and savings;
- Demonstrate report -writing skills to better communicate results;
- Demonstrate ability to create business plan, billing and marketing for both procedures;
- Effectively use of Fiberoptic Endoscopic Evaluation of Swallowing (FEES) as an effective evaluation tool and explain and interpret how it correlates with Videofluoroscopic Evaluation of Swallowing;
- Identify and express demographic and risk factors for voice and swallowing disorders;
- Create a business plan for effective partnership with physicians and other allied health professionals and how to engender working relationships with colleagues in one's community.
- List at least three holistic approaches to treatment of voice after workshop.
- Direct experience "hands on" with using flexible and rigid scopes for evaluating voice and swallowing disorders.
- Increase differential diagnostic evaluation of hypopharynx through knowing which scope and which procedures to select when evaluating voice and swallow disorders.

Friday, April 24, 2009

Anatomy and Physiology of Cough and How Does This Relate to Clinical Practice?

7:45 – 8:15	Registration
8:15 – 9:15	Anatomy & Physiology of Cough Reflexes – Stephens
9:15 – 10:15	Involuntary Cough Measurement – Addington
10:15 – 10:30	Break
10:30 – 11:30	Central and Peripheral Mechanisms of Strength Training – Davenport
11:30 – 12:30	Functional Patient Related Outcomes via Strength Training – Sapienza
12:30 – 1:30	Challenging Case Studies: Applying research to practice breathing, cough, swallow and speech – Addington, Stephens, Davenport, Sapienza
1:30 – 2:00	Late lunch (Provided)

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Following this conference, participants will be able to:

- Demonstrate knowledge of the neurology of airway protection.
- List the concepts and mechanisms associated with strength training.
- Learn the functional outcomes associated with expiratory muscle strength training.
- Implement the intervention protocol of expiratory muscle strength training.
- Provide a foundation for understanding the respiratory mechanical effects of expiratory pressure threshold loading.
- Provide a basis for the respiratory muscle metabolic response to expiratory pressure threshold loads.
- Develop an understanding of the relationship between strength training and expiratory muscle force generation capacity.
- Provide a foundation for brain responses to expiratory pressure threshold strength training.

Friday afternoon, April 24, 2009

Hot Topics

1:30 – 2:00

Registration

2:00 – 2:30

How achieve success with voice prosthesis patients – Bergin

2:30 – 3:00

Supracricoid Partial Laryngectomy – Ruiz

3:00 – 3:15

Break

3:15 – 4:15

Home Enteral Nutrition (HEN) – Selby

4:15 – 5:15

Between a rock and a hard place: Avoiding complications from radiation therapy in head and neck cancer – Spunberg

4:45 – 5:15

EMG Biofeedback and alternative therapies – Gould

5:15 – 6:00

Challenging cases and Q/A – Panel. Bergin, Gould, Ruiz, Selby, Spunberg

GALA

Following this conference, participants will be able to:

- Understand the benefit of an integrated, multidisciplinary team approach to the rehabilitation of swallowing and nutrition management.
- Discuss the factors that hinder patients from returning to oral feeding.
- Describe the possible psychological impact of being NPO.
- Understand the role of surface EMG biofeedback in increasing swallow strength and function.
- Identify the anatomical changes following a Supracricoid Laryngectomy Partial Laryngectomy (SCPL) and to explain surgical procedures to improve swallow skills post SCPL.
- Describe benefits of using FEES and MBS when assessing SCPL in order to identify speech and swallowing issues for treatment intervention.
- The learner will be able to make appropriate recommendations to improve swallowing skills of patients s/p SCPL.
- Resolve voice prosthesis problems related to prosthesis placement, measurement, and failure with accuracy and success.

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- Address specific anatomy concerns and resolve peristomal and stomal problems for voicing and device management.
- “Trouble shoot” voice prosthesis problems and follow a management hierarchy guide to resolve the problem area.

Saturday, April 25, 2009

Care of the Professional Voice User

7:30 – 8:00	Registration
8:00 – 9:00	Voice evaluation SLP perspective – Ostrowski
9:00 – 10:00	Medical and surgical perspective –Woo
10:00 – 10:15	Break
10:15 – 11:00	Trends in vocal habilitation – Ostrowski
11:00 – 11:45	Transnasal office procedures – Woo
11:45 – 12:30	Challenging cases and Q/A – Medical, surgical, behavioral and/or combination treatment – Agresti, Ostrowski, Woo

Following this conference, participants will be able to:

- List major perspectives related to preoperative issues in the case of the professional singer
- Have an appreciation of phonosurgical principles and techniques that will return a singer to voice use in the shortest possible time
- Know and list the value of postoperative care in determination of when to return to full singing
- Know how to select and manage patients for office pulsed dye laser treatment of vocal fold polyp, scar, and papilloma.
- Know how to select patients and perform office based injection laryngoplasty
- Appreciate the multidisciplinary role in managing difficult voice cases
- Know the common mistakes made in the diagnosis of voice disorders

12:30 – 1:30 Lunch (on your own)

Saturday afternoon, April 25, 2009

Dysphagia Rehabilitation

1:00 – 1:30	Registration
1:30 – 2:30	Diagnosis and management of esophageal dysphagia – Shaker
2:30 – 3:00	Efficacy and safety of electrical stimulation – is the jury still out? – Biber
3:00 – 4:00	Long term impact of chronic aspiration on lungs – Harding
3:45 – 4:00	Break
4:00 – 4:30	Impact of aging, disease and trauma. How to differentiate impact of disease and/or trauma on swallow function – Murray
4:30 – 5:00	Swallowing rehabilitation: What is the evidence for current therapeutic strategies and how do you know what strategy to choose for given complaint/disorder – Murray

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5:00 – 5:45 Challenging cases – Surgical, medical and behavioral interventions. Biber, Harding, Gould, Shaker, Murray

Following this conference, participants will be able to:

- Explain efficacy and safety of electrical stimulation.
- Explain the role of biofeedback as an evidence based therapeutic strategy.
- Understand the fundamental principles and benefits of NMES
- Learn about the historical and current research in NMES for dysphagia treatment.
- Differentiate signs/symptoms of swallowing changes related to normal aging vs. disease process.
- Create rationale to support their protocol regarding frequency and intensity of treatment for voice, swallowing and airway disorders.
- Learn and demonstrate how to choose best strategies to rehabilitate various swallowing disorders.

NOTE: Concurrent “Hands-on” workshops. Each participant will have an opportunity to schedule time to obtain “Hands-on” experience with videostroboscopy and FEES. Sign up sheets will be available at the registration table.

Sunday, April 26, 2009

Airway

8:00 – 8:30	Registration
8:30 – 9:00	Differential diagnosis of the chronic cough – Stein
9:00 – 10:00	LPR; ENT perspective. What I wish my colleagues would know – Woo
10:00 – 11:00	LPR; pulmonary perspective. What I wish my colleagues would know – Harding
11:00 – 11:15	Break
11:15 – 12:15	LPR: gastroenterology perspective. What I wish my colleagues would know – Shaker
12:15 – 1:00	Asthma and LPR/Sleep apnea – Harding
1:00 – 1:45	Challenging patients: Surgical, medical, behavioral or combined treatment – Harding, Shaker, Stein, and Woo
1:45 pm	Wrap up

Following this conference, participants will be able to:

- Understand the organized anatomic and functional approach to chronic cough and the importance of each of the swallowing: Chest Xray, anatomy (nose, throat, sinuses, larynx, lungs, esophagus, brain), medications which may contribute (ACE inhibitors, beta-blockers). The three leading causes of cough: post-nasal drip, asthma and GERD. Other causes within reach of laryngoscope. A multidisciplinary approach.
- Provide state of the art applicable research updates regarding evidence based consensus, for evaluation and treatment of airway disorders for practicing clinicians.

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- Identify the roles of the speech-language pathologist, otolaryngologist, pulmonologist and gastroenterologist in LPR management.
- Evaluate symptoms and videolaryngoscopic findings common in reflux in patients with obstructive sleep apnea (OSA) and to determine the relationship between laryngeal inflammation and OSA severity.
- Investigate vocal impairment and laryngeal findings in symptomatic patients to determine the prevalence of reflux based on subjective and objective signs of reflux.

Target Audience: Professionals who serve on a voice, swallow and airway diagnostic team.

1) Physicians

- Allergist
- ENT/Otolaryngologist
- Gastroenterologist
- Internal Medicine
- Neurologist
- Psychiatrist
- Pulmonologist
- Radiologist

2) Allied Health Care

- Neuropsychologists
- Nutritionist
- Nurse Practitioner
- Occupational Therapist
- Physical Therapist
- Physician Assistant
- Respiratory Therapist
- Speech Language Therapist
- Voice coaches

Objectives/learner outcomes: Participants will learn to:

1. List medical and behavioral protocols for various swallowing, voice, and airway disorders.
2. Apply/use technological advances through “hands on experience”.
3. List the benefit of instrumentation in the diagnosis and treatment in order to integrate understanding of medical, surgical, and behavioral management philosophies.
4. Assessment of learning will be verified through question and answer discussion with expert panel regarding diagnostic dilemmas.
5. List nuances and specified knowledge necessary to evaluating the professional voice user.
6. Perform, interpret, and trouble shoot instrumentation for evaluation and diagnosis of voice, swallowing, and airway including videostroboscopy, FEES and transnasal Esophogoscopy.

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PROGRAM COMMITTEE / LOCAL FACULTY

- Carolyn Agresti, MD, Otolaryngology
- Cathleen Bergin, Ed.D. CCC-SLP, Speech Language Pathology
- Teresa Biber, MS, CCC-SLP, Speech Language Pathology
- Michael Chidester, MD, Internal Medicine
- Lanee Friedele, MS, CCC-SLP, Speech Language Pathology
- Rebecca L. Gould, MSC, CCC-SLP, BRS-S, Speech Language Pathology
- Claudia P. Jassir, BA-SLP, Speech Language Assistant
- Cesar Ruiz, SLPD, CCC-SLP, Speech Language Pathology
- Julia Selby, PhD, RCSLT, Speech Language Pathology
- Nancy Spence, PhD, CCC-SLP, Speech Language Pathology
- Martin Spencer, MS, CCC-SLP, Speech Language Pathology
- Mark Stein, MD, Allergy, Asthma and Immunology

ACCREDITATION STATEMENTS:

ACCME

This activity has been planned and implemented in accordance with the Essential Areas and policies of the Accreditation Council for Continuing Medical Education through the joint sponsorship of Nova Southeastern University Health Professions Division and the American Correctional Association. Nova Southeastern University Health Professions Division is accredited by the ACCME to provide continuing medical education for physicians.

Nova Southeastern University Health Professions Division designates this educational activity for a maximum of 20 hours towards the AMA Physician's Recognition Award Category 1 Credit(s)™. Physician should only claim credit commensurate with the extent of their participant in the activity.

ADA STATEMENT:

- Check here if ADA (American with Disabilities Act) accommodation is needed.
Please specify: _____
Contact: Claudia Jassir (561) 833-2090 by: 3/24/09

GRIEVANCE POLICY:

Complaints should be submitted in writing to The Department of Continuing Medical Education at Nova Southeastern University Health Professions Division, Terry Bldg., 3200 S. University



Nova Southeastern University-Ft Lauderdale is approved by the Continuing Education Board of the American Speech-Language-Hearing Association (ASHA) to provide continuing education activities in speech-language

pathology and audiology. **See course information for number of ASHA CEUs, instructional level and content area.** ASHA CE Provider approval does not imply endorsement of course content, specific products or clinical procedures.

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Drive – Rm 1522-D, Ft. Lauderdale, Florida 33328.

This program is offered for up to 2.8 CEU's (Intermediate Level, Professional Area)

DISCLOSURE OF COMMERCIAL SUPPORT

This activity is funded through an unrestricted educational grant from:

ATOS
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Registration Fee:

	Before 3/24/2009	After 3/24/2009
Complete Conference Program (Thursday-Sunday)	\$475	\$600
Weekend portion	\$395	\$495
Thursday only	\$175	\$200
Any half-day of 5 (excluding Thursday)	\$125	\$150
*Students (conference only without Thursday)	\$200	\$250

*must show ID at door