PUTTING KNOWLEDGE into ACTION

SBU’s Physical Therapy Center Faculty Practice and Judy Taylor Physical Therapy Garden allow PT students to offer expertise, hope to area patients

Physical Therapy with the Stars: Q&A with Priscilla Paoli ’17

Graduation Recap
About the Department of Physical Therapy at Southwest Baptist University

First accredited as a bachelor’s program in 1993, the department of physical therapy is dedicated to providing society with physical therapists who engage in the art and science of physical therapy with a Christian worldview. Situated in its own 40,000-square-foot facility near the main campus of SBU in the Warren B. Davis Family Physical Therapy Center in Bolivar, Mo., the department of physical therapy has become a premier Christian, entry-level doctorate program with a healing mission, training clinician generalists who are prepared to provide physical therapy services for a diverse population in an evolving society and health care environment. With opportunities to learn and serve, students participate in a dynamic 33-month program, learning from leading and diversely specialized professors before venturing into an in-depth clinical rotation across the country. Through its Global Health Outreach, the program provides medical care for communities across the world with short-term mission opportunities for students, professors and PT professionals.
Dear SBU Physical Therapy Community,

It is with great honor that I write another opening statement for “A Healing Mission” setting the metaphorical tone of things to come. You will soon read and learn about the impact that change has had on one of our valued professors at Southwest Baptist University, Dr. Ronda Credille. You will see how that change has impacted not only her but those around her, including our physical therapy family. Of course, as physical therapy professionals we are agents within the working sphere of change for our patients and clients. Their lives are disrupted for many different reasons, and it is our caring and empathetic role to help them manage the change that pain, dysfunction and disability may have on their lives. Biblically, we understand that there is a given time for all change (Ecclesiastes 3:1), and we know that we are to be strong and courageous in the face of change (Deuteronomy 31:6).

Change is something I speak on during my administration course for SBU DPT students each January during the midst of the cold and snowy season in rural Missouri. I state that “change is a constant.” Indeed, here in Missouri, the old saying goes, if you don’t like the weather, hang on as it will shortly change. We have four distinct seasons, each with new changes. Brutal cold and ice gives way to rain showers and flowers. Soon those flowers are roasted under unrelenting heat and oppressive humidity. Finally, in full brilliant display, the heat and humidity yields to reveal the cools of God’s artistic impressions with the fall foliage across the Ozark mountain faces.

As we are faced with turbulent times of change in healthcare, my message for you is twofold. First, as Socrates encouraged, don’t waste your energies on the things that will soon pass, but rather, work to build the new. Be the agent of positive change! Second, as we are told in Hebrews 13:8, the love that Jesus Christ has for you indeed is a constant and will never change.

Lastly, with this fourth edition of “A Healing Mission,” I want to acknowledge change and personally send a message of gratitude to Aaron Weaver as he moves along to a new career. Aaron, the SBU DPT Admission and Alumni Coordinator, has been the energy behind this magazine as well as serving this department and this university with great distinction, working to promote positive change in the lives of young would-be physical therapy professionals. I am truly happy for him, and wish him and his family all of the best as they explore the new change set before them.

“Whatever you do, work at it with all your heart, as working for the Lord, not for human masters, since you know that you will receive an inheritance from the Lord as a reward. It is the Lord Christ you are serving.” —Colossians 3:23-24

Together with you in His service,

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Persistence, Patience and Perseverance

By Aaron Weaver

U.S. Navy photo by Mass Communications Specialist Kelly Agee

Not often does one get to say, “I work with some of the elite athletes in the world.” A rare few can claim to have worked with Hall-of-Fame running backs or Cy Young-winning pitchers. But a special calling is to work with some of the toughest service members in the world – the Navy and Marines.

For Lt. Cortney Shewmaker DPT ‘13, ATC, OCS, this rings true for her every day as the division officer for the Physical and Occupational Therapy Department at the U.S. Naval Hospital in Okinawa, Japan. And, you won’t find her boasting about her calling.

While Shewmaker had a grandfather who served during World War II, the main primer to pursue her career in the Navy came from interactions and relationships developed with retirees and veterans. Sometimes, it takes a tribe to lead one to his or her calling, and the families of service members did just that; encouraging and motivating Shewmaker to enlist and serve.

Her service bleeds into her daily life as she has served with Pacific Partnership, as well. Her work in Okinawa includes supervising 14 staff among the four clinics, while serving more than 47,000 active duty personnel, their family members, civilian employees, contract personnel, and retirees.

Marines are a unique subset of the general population and even within the athlete population. They must be at the pinnacle of fitness to accomplish the mental and physical demands required of them during war. The physical strain can lead to short-term and long-term injuries that Shewmaker is able to work on and treat. But a piece that many PTs are aware of, but maybe don’t stress enough, is educating their patients during the healing process. With Marines’ ability to push through more than the average person, that mentality does not stop when he or she steps off the battlefield. It is an ingrained part of everyday life that, at times, can negatively affect the healing process when he or she wants to return to duty as soon as possible.

“A lot of my motivation with them consists of accurately educating them on what is going on and about the healing process in order to slow them down in a sense,” Shewmaker said. “Even after significant surgery, they are eager to immediately get back into running or performing pull-ups, so the education piece can’t be stressed enough.”

Shewmaker’s experience with the U.S. Navy has opened up opportunities to develop professionally. She was able to participate in a military musculoskeletal residency program, gain OCS credentialing, obtain dry needling training, along with auricular or battlefield acupuncture credentialing. On top of this, Shewmaker recently published a musculoskeletal imaging article on “Intra-articular Focal Nodular Synovitis of the Knee” in the “Journal of Orthopedic and Sports Physical Therapy (Volume 47, Issue 4).” She shared some of her experience on the publication process and how to navigate that process. She noted the need for collaboration and communication between different parts of the healthcare system, through which patients progress. This allows for a deeper medical understanding within a team approach, not only for the patients but for the education of the healthcare professional, in the study of musculoskeletal imaging.

The publication process can be daunting with editing teams, multiple changes to submissions, and even adjustments to the focus of the research. Shewmaker encourages those pursuing publication.

“Be patient with the process,” Shewmaker said. “Articles and research are not accomplished overnight. Once you feel like you have a solid publication, be open-minded to criticism and use it as an opportunity for improvement. The editorial team is great to work with and they are experienced in what they are doing. Take each moment as a learning opportunity.”

Many times the process changes the writer in a way that not only provides clarity and accomplishment but deepens the well of knowledge, making one more confident with patients using their evidence-based practices.

Shewmaker’s journey can be summed up in the motto she explained in her publication process: “Persistence, patience, and perseverance.”

SBU DPT is proud of Shewmaker’s work and accomplishments, and more importantly her servant-minded heart as she provides and serves others.

Southwest Baptist University’s doctor of physical therapy program continues to make great strides in the education and preparation of tomorrow’s physical therapists.

Prior to the Spring 2017 semester, students in SBU’s DPT program progressed through the program’s path, which included classroom lectures and clinicals – standard for a physical therapy program.

Now, those students have the opportunity for a more hands-on education that includes patient treatment at the Warren B. Davis Family Physical Therapy Center Faculty Practice and Judy Taylor Physical Therapy Garden.

The 2,700-square-foot faculty practice, which was dedicated on Oct. 6, 2016, is a student-learning lab that treats select patients from the surrounding community, incorporates high-level care for patients and provides invaluable learning experiences for students. The open-spaced clinic includes two treatment rooms, a sports performance area and consultation rooms.

The faculty practice serves two purposes for patients in the Bolivar area, said SBU President C. Pat Taylor, Ed.D., “to help people improve their health and to be a teaching facility.”

“The faculty-student practice has really been a dream before even I came on in teaching,” said Dr. Josh Layman, associate professor of physical therapy. “That’s been a development process to try to figure out how we integrate a clinic setting where faculty can get our hands on patients and stay current with our practice area, still staying fresh with working with individuals and not just teaching about it.

“I think being with patients helps keep us relevant and reminds us of exactly what we’re trying to prepare our students to do. Students being able to, earlier on, get their hands on patients and seeing physical therapy in practice as they’re actually learning about it is another big part of why we wanted this practice to develop.”

First-year DPT students have already seen the benefits of the faculty practice in their education.
“This is such a unique experience here at SBU, because we’re being taught and mentored by our own faculty,” said first-year DPT student Glory Reichard. “We’re coming in with it, kind of new, so I know that the goal is to help students get used to practicing with patients to get us ready for clinicals. We need to know how to represent our school, know how to apply the knowledge and adapt it to quickly changing situations and different patients.

“I think that it’s a good resource for the community. They’re being encouraged because they can teach us and help us learn, and they’re getting the services that they need.”

LIFE CHANGES IN A MOMENT

One of the clinic’s first patients was longtime SBU business faculty member Dr. Ronda Credille.

Exactly two years before the dedication of the faculty practice, Ronda was in an accident that would change her life forever.

“It was Monday morning after SBU Homecoming in 2014,” Ronda said. “It was Oct. 6, and as was my practice for several months, I went out for a morning bike ride before I got ready to go to teach. I had lights on my bike, reflective vest – thought I was pretty visible – and was riding east on Division Street. There was an unusual amount of traffic coming west, so I was being very careful to stay over to the right. It is a bike route, so motorists should be aware of that.

“All of the sudden, I realized one of the oncoming vehicles, without signaling, was making a left turn into a private driveway, and I wasn’t prepared for that. Had it been an intersection, I might have been more aware, but he just whipped into this driveway, and I could not stop. I was right on top of him and we collided. I don’t think I ever lost consciousness.”

Fortunately, one of the very first people who stopped out of that string of traffic was a local nursing student.

“She started barking orders at people to not move me, and she stabilized my head and neck until the ambulance got there,” Ronda said. “I was flown to Cox South (in Springfield) and they assessed my injuries and decided that I had fractures of the fourth and fifth vertebrae. I ultimately learned that my spinal cord had been severely bruised.”

Ronda underwent surgery and was at Cox South until Oct. 15. She was then flown to Denver and admitted to Craig Hospital – a world-renowned rehabilitation hospital that specializes in the neuro-rehabilitation and research of spinal cord injury and traumatic brain injury patients.

She remained at Craig as an inpatient until Jan. 16, 2015, and then stayed an additional two weeks as an outpatient – “kind of a trial run.”

“They have outpatient apartments, so you and your caregiver, in this case, (my husband) John, stay in that apartment with kind of the safety net of the hospital next door if you do anything really stupid,” Ronda said. “We stayed there two weeks and then we flew home.

“I had applied for admittance into the NRN (NeuroRecovery Network) program, and we were told it would be a couple of months. Instead, they had an unexpected opening in three weeks, so we were
With the spinal cord population, I look to see where their main functionality is. Layman, one of a handful of neuro-certified physical therapists in Missouri, has been instrumental in Ronda’s therapy.

"With the spinal cord population, I look to see where their main functionality is," Layman said. "Often, that’s related when somebody’s had an incomplete spinal cord injury, meaning they have some preservations of movement. It has to do with simple movement tasks, walking and balance, those kinds of things."

One piece of innovative equipment that is used with Ronda’s therapy is the Open Area Support System (OASUS), which is designed to hold the patient upright or offer them support, so if they lose their balance it will catch them.

“It allows us to do more high-end balance training things that might be unsafe to do otherwise," Layman said. "I’ve found some pretty good results working with that to challenge balance in a safe way, so we can gain in ways that couldn’t be gained otherwise.”

Ronda’s progress not only has impressed her therapists and students, but John, as well.

"Considering the fact that her injury made her totally dependent on others, Ronda’s recovery has been remarkable," John said. "When I reflect to those early months, I am in awe of her hard work, the help and knowledge of her physical therapists and the grace of God, in how much Ronda can do without my assistance. Then, when I do help with many tasks, my total help is much less than it used to be."

JUDY TAYLOR PHYSICAL THERAPY GARDEN

In addition, the clinic is able to utilize the Judy Taylor Physical Therapy Garden for patient therapy. Dr. Steve Lesh, chair and professor of physical therapy, approached Dr. Taylor with the idea of developing a physical therapy rehabilitation garden to honor SBU’s late first lady Judy Taylor.

The garden was built to assist patients with gait difficulties by incorporating a variety of terrains, ramps and walking paths. The garden is located in front of the Davis Family Physical Therapy Center.

Lesh’s vision was sparked by Judy Taylor’s dedication to the beautification of the SBU campus.

“Judy believed that everything should have a function,” Taylor said, “and this garden is beautiful, but it does have a function. And I’m very pleased that the very first patient that went through a rehab assignment here was her good friend, Ronda Credille. And I know Judy was smiling when she saw Ronda here."

“Judy would be thrilled with this and she would want it to help people.”

Ronda enjoys the chance to get outside during her therapy.

“The garden gives me several different surfaces for what they call, in this case it is literally, over-ground walking because I even get out and walk in that gravel," Ronda said. "It’s different surfaces, changing levels either doing the steps or the slope, and just being outside and the sunshine… It’s prepared me to be able to walk around in our yard and our grandson’s yard. I really like the outdoors, so that’s been a great experience for me.”

We might not be her class, but she’s still investing in us. So, I was very motivated that she took such an awful situation and she’s still using her talents to help other people.

Glory Reichard
first-year DPT student

WORKING WITH RONDA

Even before she returned home and before the faculty practice and garden were open, arrangements had been made for SBU PT to work with Ronda.

“The summer that I came home – Summer of ’15 – they were displaced,” Ronda said. “They were getting ready to move in to the new facility, but it wasn’t all ready yet. They had to do my therapy here at the house, which was great because we practiced with me walking on this pile of carpet, which was different. And, they immediately had me start going up and down our stairs. I had done stairs at Craig, but it wasn’t the same as hardwood stairs without treads; the handrail was different, etc.

“They immediately had me start doing things in the house to make sure I was comfortable being at home alone. It was wonderful. They had already helped John choose arrangements of furniture and that sort of thing, so that the house was ready for me. They just continued to help me adapt to being at home. Not only did I have a faculty person with me for all those sessions, but a couple of students. They really were encouraging. They weren’t afraid to challenge me to continue to improve.”

Therapy has helped in how to accomplish tasks and in repetition, John said.

“They consistently ask what she wants to do again, and try to accomplish that, as well,” John said. “Therapy at the clinic is the beginning and we continue it at home. We do therapy at home every day.”

Layman, one of a handful of neuro-certified physical therapists in Missouir, has been instrumental in Ronda’s therapy.

“With the spinal cord population, I look to see where their main problems are, in terms of mobility and getting around,” Layman said. “Often, that’s related when somebody’s had an incomplete spinal cord injury, meaning they have some preservations of movement. It has to
COMMUNITY SUPPORT

The Bolivar community has been receptive to the services and the purpose of the clinic.

“We weren’t sure how heavy the demand would be, but very quickly we were able to fill the schedules and we’re actually working on a little bit of a waiting list right now,” Layman said. “It’s a good challenge to have figuring out how to triage and prioritize those who have the most acuity of need and making sure we’re trying to balance that all out, with the ultimate goal of the clinic being that learning experience for the student.”

Striking that balance has been a little bit of a challenge, but the community has been supportive.

“I think it’s been great for the community,” said first-year DPT student Ethan Hodges. “When I first learned about it, Dr. Lesh was telling me about how it was going to be free for anyone in the community that would come. I’ve already seen the benefits from that, and I think it’s going to be great from here on out for the community and for the students that are coming into the program after us.”

And this experience will help the students become better service-oriented therapists.

“I think that realization of the whole person will really help them understand the role that PT has in restoring patients’ function and recognizing that whole entity in serving them to help them attain their ultimate goals,” Layman said. “Also, recognizing that sometimes what we have in mind when we do our tests and our measures and we see these issues, we can kind of get a preconceived idea of what we need to work on. But, it needs to be focused on the patients’ goals. Sometimes, they don’t always match with what we think they should be working on, but we need to make sure we’re serving them and not our own interests.”

The faculty practice has also been about give-and-take between the students and the patients, as well as a great source of encouragement.

ONCE A TEACHER, ALWAYS A TEACHER

“Miss Ronda — she was a teacher, and I can tell because she added to my education,” Reichard said. “I was a little nervous coming in. She went out of her way to explain things. She’s heard the explanation several times, but she’s like, ‘Hey, I want you to hear this. I want to show you this,’ and I can tell that she is invested in her students. We might not be her class, but she’s still investing in us. I was very motivated that she took such an awful situation and she’s still using her talents to help other people.”

Ronda has been encouraged, as well.

“I participated in a panel session a couple of weeks ago, and one of the students asked what had been beneficial to me that a therapist had done or said during my rehab,” Ronda said. “I told them it seemed like many of my therapists had also, perhaps, been former cheerleaders because they were just so encouraging and could always find something to compliment me on, or a way to make me feel like I was making progress.

“I think just seeing the proverbial light bulb come on when they connect something they’ve learned in class to something that they help me with, that it just solidifies what they’re learning and I know they’re going to be able to help hundreds or, perhaps, thousands of patients in the future because of that. That’s encouraging to me, that I can still be helpful in a small way.”

But the best thing to come out of her therapy at SBU is... hope.

“It’s given me tangible hope,” Ronda said. “I have hope in the Lord, but knowing that they are pouring so much expertise into helping me continue to improve, it’s given me hope that I can continue to improve.

“I have been told that most of SCI patients’ improvement comes within 12 months; very little after 18 months. I was concerned once I got close to two years, that that was going to be it, and I wasn’t where I had hoped I would be. I’ve had that practical hope restored that I can keep working, and that there are techniques and tools and therapies that continue to help me improve.”

www.SBUniv.edu/pt     9
Dreams really can come true, but sometimes in better ways than we can imagine.

Growing up, little kids have dreams of becoming an astronaut, firefighter, teacher, doctor, or a ballerina. They spend countless hours imagining, pretending and exploring those possibilities. Sometimes, they get to meet their idols whom they adored and keep them dreaming. Other times, those dreams fade and transition to other dreams. But for Priscilla Paoli, DPT ’17, she got to experience a dream in a way that is truly unique.

Paoli grew up in a world of ballet and dance. From the age of 3, her grandmother ushered her around to summer ballet camps and classes. With more focus on classical, she began intensive training at Tulsa Ballet Center for Dance Education, and even time at the Kirov Academy in Washington, D.C., with a goal of becoming a professional dancer.

“Ballet was all I did, but I liked the feeling of working hard and the adrenaline rush of being on stage,” Paoli said.

This expanded to a variety of styles to diversify her skill set. However, by her junior year in high school, the dream began to collapse as unhealthy expectations from the profession overshadowed the art itself.

“My body image became negative because of comments from my instructors and some of my friends had resorted to eating disorders,” Paoli said. “While I knew the difference between being healthy and starving myself, it became difficult pursuing a profession that would constantly knock me down.”

After a mild hamstring injury in high school that introduced her to physical therapy and Graston techniques and a continual reflection through the first part of college, things shifted and she became interested in the physical therapy profession. Cheering at William Jewell through her college experience, she
stumbled upon Southwest Baptist University’s Doctorate of Physical Therapy program and decided to apply.

“Once I visited Bolivar, I was immediately drawn to the Christ-centered atmosphere and academics and knew it was the right fit,” Paoli said.

An aspect of the third year of SBU DPT students’ experience is clinical education, gleaning valuable experience with highly knowledgeable clinical instructors across the country. One rotation for Paoli was the chance to combine her dance expertise with her growing physical therapy education with Neurosport Physical Therapy, working with elite clinical educators and physical therapists.

We had the opportunity to ask her questions about her clinical education experience in this unique and challenging rotation.

**Tell us about your interest in combining dance and PT.**

“Physical therapy gave me a positive outlook on the human body. The reason I desire to work in the dance population is to be a positive influence in a world that is often so negative. I love that I can combine both of my passions in order to transform others’ perceptions of themselves. Performers are highly motivated people who are striving for perfection, and I hope to be an influence that helps them visualize themselves as amazing creations, capable of achieving great things.”

**What was a day in the clinic like versus a day in the theater as a PT? Since you have two other rotations under your belt, how did they vary from your NYC experience?**

“I worked in the clinic Tuesday through Saturday (Mondays are Broadway off-days) and treated performers and non-performers alike. Each patient received an entire hour of treatment, which always consisted of 30 minutes of manual work and 30 minutes of therapeutic exercise/training. Each therapist would treat two patients each hour, which meant having to manage your time wisely, especially if there was an evaluation or progress note that had to be completed. Tuesday and Friday evenings the cast of Broadway’s “A Bronx Tale” would sign up for 20-minute treatment sessions in the clinic. My instructor and I would also treat at the theatre of the off-Broadway production “Cagney” for two hours on Wednesday and Saturday. For several weeks, I covered another therapist for “Waitress” and “School of Rock.”

“Treating for specific shows differed from the clinic in that the time slots consisted only of manual work and did not require documentation. Learning the manual techniques was extremely difficult, but very rewarding. By the fifth week, I had learned how to treat every part of the body via deep tissue mobilization, ART techniques, and muscle energy techniques. The clinic was also inclined to receiving patients with TMJ issues, so I learned specialized mobilizations and often endured vigorous quizzing on TMJ kinematics. The patients were always very receptive to having a student ‘practice’ on them and provided good feedback on pressure and precision of my hand placement. Several performers would tell my instructor, ‘She’s a keeper,’ which always made me feel accomplished. Often times, I would be so focused on my learning experience that I would forget I was working in New York City. I always just saw the performers as people and would treat someone famous without even knowing it. Several times, I treated Tony Award winners only to find out who they were the next day.

“While this specific rotation was exceptional, I don’t discredit my other clinical experiences. Each one has helped me to develop my clinical reasoning skills and hands-on training to become a great therapist. The biggest difference is the manual techniques I learned in NYC because I’ve been able to visualize what hands-on manipulation can do for various pathologies. The training I received in New York was exceptional and I am very thankful for the opportunity to learn from some truly skilled therapists.”

**What is one thing that you are taking away from that experience from a personal standpoint and a professional standpoint? What has this experience taught you about your potential future/direction as a PT?**

“One thing I am taking away from my New York experience is the power of touch. In school, we were lectured on the importance of hands-on contact in developing therapist/patient rapport, but didn’t seem realistic until this specific clinical. I’ve had the opportunity to see how much power our hands can have as clinicians and as human beings. Very rarely did I have patients who just wanted me to massage their aching body parts. The majority of the time they came to me with ailments caused by repetitious actions from two-show nights filled with choreography that is hard on the body and spirit. I have learned how important our influence as physical therapists can be on people who are truly hurting and desire to improve. My New York experience took me out of my comfort zone and was one of the most difficult things I have ever done. It challenged me intellectually, spiritually and physically, and I have learned more than I had ever expected. I have definitely found my calling in this realm of practice and hope to pursue a career that allows me to develop my manual techniques and challenges me on a daily basis.”

**What is something you wish you would have learned/known as a younger athlete that you know now on this side of things?**

“I wish I would have known how to better equip my body for performance. During this rotation, I presented an in-service on hamstring injuries in the dance population and plan to educate future patients on the importance of dynamic stretching to prevent injury. I also wish I had had the resources to regularly visit a physical therapist to maintain my performance and a healthy state of mind. Therefore, I strive to be a confidant in this profession, and hope that I can encourage my patients to live healthy lives in a critical world.”
SERVICE LEARNING OPPORTUNITIES FULFILL PHYSICAL THERAPY NEEDS ACROSS THE GLOBE

The Southwest Baptist University Department of Physical Therapy was honored to serve communities in Haiti, Peru and East Asia over the last year.

If you are interested in serving alongside our students, faculty members, other physical therapy and medical teammates and skilled workers, contact Dr. Beverly McNeal at bmcNeal@SBUniv.edu.
Southwest Baptist University’s Doctor of Physical Therapy department presented 13 posters at both the Combined Sections Meeting on Feb. 15-18 in San Antonio, and at NEXT 2017 on June 21-24 in Boston.


I recently found myself sitting in a Sunday morning church service, celebrating the Fourth of July when the preacher used this phrase from the Declaration of Independence, “We hold these truths to be self-evident…”

Of course, he was relating the phrase to some biblical or spiritual truths that ought to be obvious. He also related Thomas Paine’s book “Common Sense,” where Paine argues that some things or ideas are just common sense and that these “truths” speak for themselves, self-evident, like “all men are created equal.”

This is how I think we should be thinking about manual therapy in physical therapy. It should be obvious, self-evident, that manual therapy works and that it helps a lot of our patients with various musculoskeletal disorders and their associated impairments and functional limitations.

Today, in the world of musculoskeletal physical therapy, manual therapy is a big deal. If you have not noticed this, then I don’t know what rock you have been living under. Thankfully, the profession has gone beyond the obvious and pursued the evidence. There is continuing and ongoing evidence in the research literature that manual therapy helps in most, if not all, musculoskeletal problems. As I sit here writing, I cannot think of one thing I have read that goes against that thought or self-evidence. I have read too many articles or studies and treated too many patients with varying manual therapy techniques to see things any other way. Of course, there needs to be some limit on what we call manual therapy. I don’t want to perpetuate every thought anyone has on some technique they want to tout as THE manual therapy technique to end all techniques. But I don’t want to stifle progress, either. We need good research to be conducted to prove something new is actually better, not just another way or technique to do the same thing.

Throughout the years in the Southwest Baptist University Physical Therapy program, whether in the Master or Doctorate program, we have always taught a foundation in manual therapy. Dr. Gary Hunt established that foundation years ago as the lead faculty member in the orthopedic series of courses. Some of you may well remember all the manual techniques you had to perform on him in one of those very involved orthopedic practical exams. During the past 10 years, Dr. Terry Cox has certainly continued the tradition of a foundation in manual therapy. Dr. Cox has really brought an evidence-based approach of manual therapy to us all as students sitting through the musculoskeletal series.

The foundation and emphasis in manual therapy has been made stronger by broadening the hands-on skills to include high-velocity, low-amplitude thrust or grade 5 mobilizations. There is great evidence out there favoring positive outcomes using this approach for patients with low back pain, neck pain and thoracic spine pain, and physical therapists have been leading the charge in the research. The core musculoskeletal faculty have always agreed together to avoid any one particular (guru) approach of manual therapy taught in the program, and rather, have taken on the infamous, “Move it and move on” eclectic approach Tim Flynn pushed in his Journal of Orthopedic and Sports Physical Therapy editorial way back in May 2002.

The evidence for positive outcomes continues to build, and the availability of that evidence continues to improve. Of course, research databases are more readily available today online and, certainly PubMed allows for a Medline search to anyone with internet access. But one really great resource that I have noticed is the Clinical Practice Guidelines (CPG), available through the American Physical Therapy Association. These guidelines are documents describing and classifying the care provided by physical therapists. Each document is based on a specific musculoskeletal condition. The goal of the guideline is to help physical therapists provide the best care based on the available evidence. Within each of these CPGs is a section on intervention and almost all of the musculoskeletal guidelines have a section on manual therapy.

There is no better challenge for a physical therapist than to help a patient with their pain or problem and have only your hands and the body’s internal ability to heal itself. Manual therapy is at the heart of this challenge. However, manual therapy is not the only intervention to use in almost all cases, but it is a key component in a true “multimodal approach” of care for a patient. (Yes, I am hearing Dr. Cox in my head as I use that statement.)

If you find yourself not up to the challenge, then maybe an update on some manual therapy techniques for specific conditions is what you need. Use your hands to heal and manual therapy at its foundation.
Employers are asking, “What do you bring to the table?”

As the field of physical therapy expands, PTs are looking for ways to stand out in a growing and competitive market. Because of this, the Southwest Baptist University Doctor of Physical Therapy department is excited to partner with SBU’s Master of Business Administration and with LifeStar Training Specialists to help our students prepare for future advancement in their careers.

Most students enter into the DPT program, first and foremost, interested in physical therapy. Serving their patients to help them achieve their goals is a main motivator, but some aspire to move up into management positions or run their own private practice.

The SBU MBA program fills this need to equip students with the business skills necessary in entrepreneurship, leadership and faith integration. The program is designed to allow students to take DPT and MBA courses, simultaneously. All MBA courses are offered online through the professional track. Admission into the MBA program is competency-based, which aids those who may not have any business background coming into their work.

SBU DPT also has partnered with LifeStar Training Specialists to introduce an Emergency Medical Technician (EMT) track that is a nine-month intensive opportunity that prepares students with the emergency management skills to enter a sports residency after earning their entry-level DPT.

“The emergence of the dual-credentialed DPT/EMT has expanded the ability of the sports physical therapy professional to provide the contemporary emergency care that is needed at times by the athletes they serve,” said Dr. Steven Lesh, Ph.D., PT, SCS, ATC. “The DPT/EMT is well-suited to provide superlative sports venue management.”

The program began in the Fall of 2017.

Nattier designated as Bill Karl Award Winner

Coby Nattier ‘17 was named the Bill Karl Service Award recipient, which is presented annually to a graduating Doctor of Physical Therapy student who demonstrates superlative service to the Lord, the profession of physical therapy, and the University. The award, which is the highest award the department gives, is named as a memorial to Bill Karl, MPT ’98, who died tragically shortly after graduating. Karl exemplified what it means to be a servant leader both in the classroom and in his personal life. He was the first graduate honored with the award, which was given posthumously. Nattier earned his bachelor’s degree from Rockhurst University in Exercise and Sports Science. He was noted as exemplary in his service to his fellow classmates, the department, and the community.

Kevin Meglan earns 2017 Clinical Instructor of the Year Award

While physical therapists are teachers at heart, it is difficult to find one as passionate at training the next generation of physical therapists as Kevin Meglan. Kevin has been helping SBU grow in their acute care experience for more than 10 years. Kevin remarked at the annual DPT banquet this May, “I love to see students grow throughout their clinical rotations similar to how patients improve in regards to functional status.” We are grateful for the servant-hearted work Kevin does and the way he has poured into and educated our students. For this, the Department of Physical Therapy at Southwest Baptist University honored Kevin as the 2017 Clinical Instructor of the Year. He received a crystal award along with his name listed alongside other award recipients in the Warren B. Davis Physical Therapy Center.
HealthSouth Fort Worth worthy of SBU DPT’s 2017 Clinical Facility of the Year Award

Taking on Southwest Baptist University DPT students since 2013, HealthSouth Fort Worth has been a trusted partner in physical therapy education. Under the direction of CCCE Natasha Woolery and clinical instructors Tammy Bennett and Sheryl Moresco, SBU students gain a rich experience in their 60-bed rehabilitation hospital. HealthSouth Fort Worth’s stroke rehabilitation, amputee rehabilitation, hip fracture, and Parkinson’s disease program have earned Disease-Specific Care Certification from the Joint Commission in addition to Joint Commission accreditation for the overall facility. The Department of Physical Therapy was pleased to honor, via Skype, HealthSouth Fort Worth with the 2017 Clinical Facility of the Year at the DPT banquet in May for their outstanding work in educating SBU DPT students.

SBU holds graduate commencement ceremony

The Department of Physical Therapy welcomed 75 new DPT alumni into the family on Saturday, May 20th, 2017 at the Jane and Ken Meyer Wellness and Sports Center.
PT at the Park in Springfield

Southwest Baptist University’s Doctor of Physical Therapy department invited alumni and clinical faculty out to the ballgame Friday, Aug. 4, at Hammons Field in Springfield, Mo., for the fourth annual PT at the Park event.

The Springfield Cardinals played the Northwest Arkansas Naturals during a beautiful August night. Seventy-two members enjoyed a Cardinals win in the Ashley HomeStore Dugout Deck area, some in-between games, on-field dance party, and fireworks. SBU DPT appreciates all the hard work done by our alumni and clinical instructors in equipping and training the next generation of physical therapists.

Be looking for an alumni event this February at CSM in New Orleans!

Certifications and Specializations from the American Board of Physical Therapy Specialists

Congratulations to the following for earning the distinguished credentialing from the American Board of Physical Therapy Specialties:

**Board-Certified Neurologic Specialists**
- Brittany Millspaugh Storms '10
- Jennifer Witt '13 - NCS

**Board-Certified Orthopedic Specialists**
- Paul Hartman ’13
- Cortney Shewmaker ’13

SBU PT alumni announce future Bearcats

Katie (Krus) Mazzaferro '12 welcomed Sophia Sabra in December 2016.

Angela (Long) Childress '10 welcomed Makenna Grace in February 2017.

Anne (Ghebrial) Armanyous '16 welcomed Emmanuel in February 2017.

Leticia (Pena) Fernandez '10 welcomed Joel in February 2017.

Jenna (Wixson) Kure '10 welcomed Monroe Leighton in March 2017.

Tiffany (Jernigan) '10 and Damon Grandy '09 welcomed Caroline Elizabeth in April 2017.

Alyson (Snell) ’14 and Alex Key ’13 welcomed Austin Alexander in April 2017.

Jacqueline (Hulet ) '10 and Al '09 Perea welcomed Evie Grace in May 2017.

Joe Tepp '09 welcomed Everly Hazel in May 2017.

Bridget Evans '01 welcomed Beckham in May 2017.

Rachel Kaminski ’09 welcomed Madelyn Loraine in June 2017.

Kayla White (Rhodes) '14 welcomed Nora Joelle in June 2017.

Mary Nguyen '11 welcomed Summitt Becklee in June 2017.
INSIDE THIS ISSUE:

Putting Knowledge into Action: SBU PT faculty clinic, garden serve community | Physical Therapy with the Stars: Q&A with Priscilla Paoli ’17