

Content

- 4 Letter from the Chair
- 5 Facility Update
- 6 Global Health Outreach: A Healing Mission
- 8 Reflections from Peru
- Manual Therapy and Clinical Pain Neuroscience: My Journey, the Past and Future Terry Cox PT, DPT, OCS, FAAOMPT
- 1 5 Questions with Dr. Cox
- Diving into the Deep End:
 Physical Therapy Specialization
- 13 Alumni Spotlight
- 14 DPT Program Update

LETTER FROM PROGRAM DIRECTOR

Dear SBU Physical Therapy Community,

As you open the pages and read through A Healing Mission, I first and foremost want to thank the good Lord for the many blessings that he has placed upon the Doctor of Physical Therapy program at Southwest Baptist University. May 2014 brought the commencement of the seventh class of doctoral prepared Christian physical therapists to add to the already established graduates of the master's and bachelor's programs. Our alumni are working across the globe to transform the lives of their patients and clients. Our alumni are practicing clinicians, administrators, and academics in both the private and public health care sectors. Our alumni are serving as active duty military officers across three different branches of service. Our alumni are reaching out to those in need through interdisciplinary evangelical healthcare mission trips. Our alumni are contributing to the ever-expanding physical therapy body of knowledge. Our alumni reflect every day the value and blessing that it is to be a Christian physical therapist.

Another blessing that was revealed during the 2013-14 academic year was notification from the Commission on Accreditation in Physical Therapy Education (CAPTE) to continue accreditation for our program through 2023. I want to thank all of the people who were involved in the accreditation process for their many hours of work and dedication to making the vision of graduating Christian physical therapists an ongoing reality. From the administration, to the faculty, to the staff, to the clinical faculty, to the students, to the alumni, to the employers, to the commissioners, and to the site team members, without each of their individual passions leading to a collective focus, achieving this milestone would not have been possible.

As the Southwest Baptist University Doctor of Physical Therapy program moves into the future, I want to encourage and empower each of you to serve the profession, society, and the good Lord. It is my hope and prayer that we are devoted to be the premier Christian physical therapy program and to be faithful servant leaders.

"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,

Steven G. Lesh, Ph.D., PT, SCS, ATC

Board Certified Specialist in Sports Physical Therapy

Chair, Physical Therapy Department

slesh@SBUniv.edu

417.328.1672



Gait and Neuro Lab Update Equipment

The Warren B. Davis Family
Physical Therapy Center has
recently acquired a new Biodex
Balance System SD machine, a
concussion management system,
and a Terason t3200 – high
resolution diagnostic ultrasound
unit.

Helping students learn and test balance and stability, the Biodex Balance System SD is currently used to emulate patient abnormalities, perform tests, and collect data. This helps train students to interpret results and learn techniques when technology is not available. The acquisition of the balance system, headed by Dr. Joshua Layman, assistant professor of physical therapy, replaces an older model.

The department recently implemented the use of a concussion management system. Future uses for the machine includes a concussion management system which would benefit SBU athletics in determining when an

athlete is ready to return to play. The machine can also be used in assessing fall-risk with geriatrics.

The Terason t3200, a high-resolution diagnostic ultrasound unit, obtained through the efforts of Dr. Tom Sneed, is improving the quality and technology within the Diagnostic Imaging courses. Students incorporate the equipment to identify musculoskeletal structures, assess and apply rehabilitative needs, and aid in interventional solutions.





The Global Health Outreach (GHO)

initiative in the Department of Physical Therapy at Southwest Baptist University coordinates physical therapy students, alumni, and other professionals with organizations and underserved communities across the world, providing opportunities to use their skills and knowledge to equip, serve, and love individuals with physical therapy needs.

The GHO, headed by Beverly McNeal, DPT, GCS, has served people groups in El Salvador, Peru, India, Venezuela, Kenya, Russia, and Haiti. GHO partners with organizations such as Medical Ministry International, which provide communities with continual care while also mobilizing professional assistance on one to two week projects.

Team members provide physical therapy evaluations, treatments, and equipment distribution to a wide range of ages, from pediatric to geriatric patients. GHO collects and distributes wheelchairs, crutches, braces, and other equipment during clinical visits. Team members have seen hundreds of patients in multiple countries. Health education for local community members and resident physical therapy professionals is another important component to relationships built with the communities.

This year, teams travelled to Peru over Thanksgiving 2013, Brazil in March of 2014, and will travel to Haiti this summer. If you are interested in joining a team, contact Dr. McNeal at bmcneal@SBUniv.edu.



Amanda Meusborn, DPT2 student, assisting a pediatric patient.

describe how I felt at that moment but shocked summed it up, as Pat, one of the pastors of the organizations we were working with, started telling us about the Peruvian mindset. Their view of human worth, I realized, was much different than my own. There is an assumption I hold that human dignity is highly valued. It is my opportunity and desire to love and see human worth no matter who they are. As a student training to become a Doctor of Physical Therapy, one of my deepest desires is to serve others, especially those who have deep needs, with my skills and knowledge stateside but also across the world. I soon found out this assumption does not hold in Peru.

Pat went on to explain that the word Peruvians use to refer to those with disabilities literally translates to "less worth" and that is exactly how they are viewed. It is extremely common for fathers to abandon their family because they are so ashamed that they have a child that is "not complete" or "not whole." As if the situation is not hard enough, struggling single mothers are left to take care of their children in a society that has no accommodation for or understanding of disability. Dirt roads, the lack of any governmental or financial assistance of any kind, and no equipment leave mothers no choice but to tie their children to chairs or carry 10 or 11 year-old children in their arms everywhere they go. My heart breaks seeing the disparity of a society that allows this to happen but also the measures these parents would take to care for their children. That was exactly how I felt when a father, mother, and disabled child walked into the clinic at Shalom, the ministry we worked hand-in-hand with during our time in Peru. It was strange to see a father walk in; it was an incredible miracle of the Lord what happened when he walked out.

Throughout the week in Peru, our clinics were in three different locations and we just adapted to whatever space we had. Our last day we spent in a mountainous region and our clinic was a one room metal shack with sheets hung up to divide workspaces. Even in tight quarters and with limited resources, we were there to help. One major aspect to our

trip was distributing and modifying wheelchairs for patients. With the financial support and medical donations we received, we distributed over 100 orthotic braces, 7 canes, 2 sets of crutches, 8 walkers, 41 wheel chairs, more than 20 pairs of shoes, and countless other medical supplies. Not only did we fly them over with us, we transported them across the Peruvian landscape. We were a strange sight within Lima with wheelchairs strapped onto the roof of our bus and the interior packed full of equipment. We even got pulled over. We were the image of a circus scene as we paraded through the surreal Lima traffic.

It is hard to explain all the things that we did for patients. Whatever issue they came to us with was what we treated. We saw a lot of cerebral palsy, Down syndrome, arthritis, back pain, and other disabilities and diseases. Our patients ranged from newborns to elderly. We brought a lot of wheelchairs so we quickly and skillfully learned to modify chairs, fitting the patients and teaching them how to use their new equipment. We were fortunate to have an orthotist travel with us. We fit countless patients for prevention and treatment. Orthotic treatment is



readily available stateside and, thus, easy to take for granted. In Peru, orthotic treatments not only have positive long-term effects in a place where this is scarcely available to the underserved, but there is an even deeper appreciation. It was incredible to see how the Lord provided with such little resources. We saw patients come in needing a specific thing for their treatment; we would turn around and find the perfect cushion or wheelchair, exactly what was needed for them. We saw the Lord's faithfulness and provision day in and day out.

While it was amazing to see the Lord provide physical healing graciously through us, it was also very difficult at times. There were a few patients that we really could do nothing for except love while they were present with us. It was a difficult reality to hold, not being able to provide any type of tangible help, and it is still something I am processing. I am trying to remember that even though I do not understand why this child is born with a degenerative disease, the Lord has a plan and purpose for his or her life, and He is sovereign in those situations. I also experienced the struggles they go through on a daily basis as I helped my elderly amputee patient down to the end of the road and help put his new wheelchair into the mototaxi. It took the taxi driver and both of us to get the chair into the vehicle. The struggles of everyday life for this man were eye opening.

Juan Daniel, his mother, and father arrived at Shalom as a contact of a deacon. It was a strange sight, seeing a father in Shalom with a child. We did not understand the gravity of the situation at hand but thought it a strange sight to see a father here. He walked out on his wife

and Juan Daniel when he found out that he had muscular dystrophy. The oddity today was that he was physically there. A father who walked away from his family now stands with them in Shalom. There was no good explanation why he was in Shalom this time. We did not know the background at the time and we continued to treat our patients. We loved on Juan Daniel and in our broken Spanish asked him what is his favorite thing to do. Following his treatment, we finished up what was a routine meeting for our Peruvian standards and released them to leave. They left.

After they left, unbeknownst to us, that was the moment everything changed. Pat received a follow up phone call from the deacon who was in contact with Juan Daniel's family. We thought we just helped him physically. God changed his family. His father told the deacon," If these strangers love and care so much for my child, how can I not?" The Lord's presence was evident; healing and forgiveness in this family began. He vowed to not only stay with his family but to protect them.

This is why we came. It was not by anything we did but through the Lord's grace that allowed us to use the skills He has given us to serve those in Peru. While we assisted in bringing some physical healing to underserved communities that do not have access to these types of resources, tools, or training, it is the Lord's healing and mercy that really made anything we did meaningful or worthwhile. We may live in a world of limited goods, limited tools, limited spaces, and even limited time, but we serve an unlimited God who heals all aspects of our lives and culture.

The Physical Therapy Department at Southwest Baptist University and the Global Health Outreach has an ongoing partnership





with Shalom in Peru. For more information about opportunities to join us serving, teaching, and loving others on mission trips across the world, including serving with Shalom Ministries in Peru, contact Dr. McNeal at bmcneal@SBUniv.edu. ❖

Manual Therapy and Clinical Pain Neuroscience:

My Journey, the Past and Future

TERRY COX PT, DPT, OCS, FAAOMPT

s I reflect on my career in physical Atherapy, I really can see a formative moment being when my eyes were opened to evidence-based practice. I remember being the director of a department at a small hospital and having some frustration regarding some of the things that I was doing with patients, wondering if I was doing the best for each of them. Certainly I was doing the best that I knew how to do, but was it the best for them that anyone could do. At that time I was not reading physical therapy and related literature nearly as much as I do now. I was reading the Physical Therapy Journal and the Journal of Orthopedic and Sports Physical Therapy as these two journals came to my house each month as part of my membership in the American Physical Therapy Association (APTA) and the Orthopedic Section of the APTA. I remember as I read many of the articles and editorials, there was a lot of discussion regarding evidence-based practice (EBP) and to be honest, I was not sure what exactly EBP was. Just the name made me think that it must be an answer to my questions regarding the best practices for my patients. I had to know more, so of course I got on the internet and searched away. Through my searching I found the website for Evidence in Motion and I decided to call one of the contacts on the site. As I emailed Dr. John Childs I remember hoping that he could inform me of a continuing education course that I could take to learn all I needed to know about EBP. His reply to me was both informative and a bit scary as his highest recommendation was to pursue a transitional Doctor of Physical Therapy (tDPT) degree from Regis University.

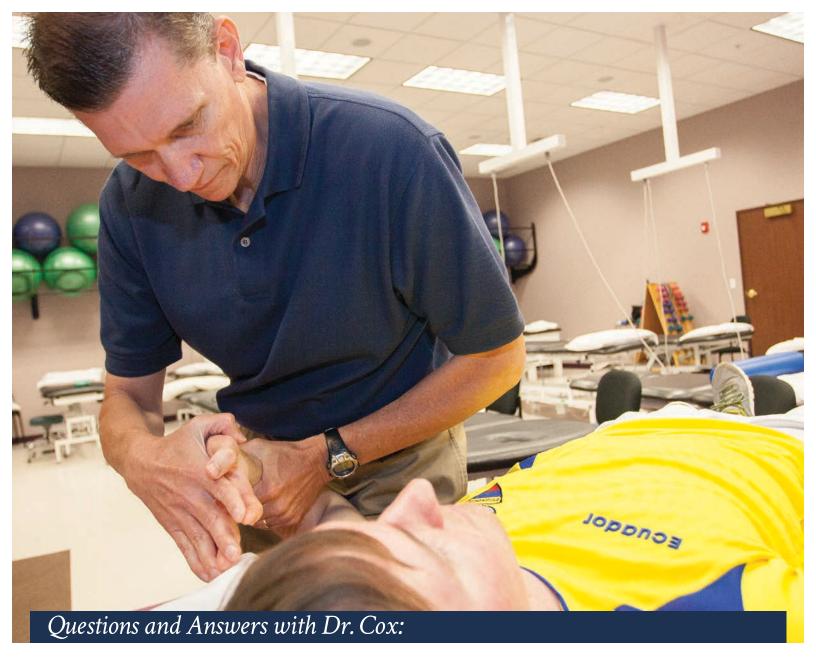
As I entered the tDPT program at Regis I was very pleased to find out that the faculty was not only nationally renowned but also internationally. I was fortunate over the next 4 years to have Dr. Tim Flynn, Dr. Julie Whitman, Dr. Josh Cleland, Dr. Tim Noteboom, and Dr. Britt Smith as instructors and mentors. These were not only instructors whom I would grow to respect but also giants in the field of

research. All five of these physical therapists taught from an evidence-based perspective, which led me to become a manual therapist. The reason for this is that there is a wealth of good research on the use of manual therapy for improving patient care and that is what I sought from the beginning of this journey. In particular, there is good evidence for mobilization and manipulation of the spine to improve outcomes regarding pain and disability.

After graduating from Regis University I began to see better improvements in my patients through the use of manual therapy that actually had research behind it. This is when I truly felt that I was more professional than I had ever been in my career. I wanted to know more. The next step for me was to hone my skills as a manual therapist and add to them an improved ability to clinically reason. That is why I entered the Fellowship in Manual Therapy program, also at Regis University. Through this training and mentorship, I earned my Fellowship Certificate and following the examination process, became a Fellow of the American Academy of Orthopedic Manual Physical Therapy, the highest level of manual therapy training available in the United States. This also led me to my current affiliation as an instructor for the International Spine and Pain Institute (ISPI) and working with some of the best therapists in both manual therapy and pain neuroscience. Dr. Adriaan Louw and Dr. Louie Puentendura are some of the best therapists and researchers in the areas of manual therapy and clinical pain neuroscience in North America and perhaps the world. As I teach on weekends and at annual conferences for ISPI and with Adriaan and Louie I continue to learn and be challenged. Through their encouragement and mentorship, along with the wonderful support of Southwest Baptist University, I recently entered a Ph.D. program through Nova Southeastern University. Obtaining a Ph.D. will better allow me to assist in the research process for adding to the literature in the areas of manual therapy and clinical pain neuroscience. I am very interested in the area of clinical pain neuroscience and feel that this area of study and practice is a growing and important field for our patients. I also believe that clinical pain neuroscience and manual therapy work well together as the manual therapy component is rather personal to a patient (there is improved patient satisfaction with physical therapy care when manual therapy is included) and to educate patients on pain neuroscience you must establish a relationship with them on a professional level.

I have discussed my journey in order to say that the area of manual therapy has opened my eyes to the world of evidencebased practice and clinical pain neuroscience. The literature is clear that manual therapy and clinical pain neuroscience are two areas that have strong research support. These two modes of treatment, along with well thought out, quality therapeutic exercise likely gives our patients in the clinic the best chance for improvement. And improving patient's outcomes is what we should be all about. The future of manual therapy and clinical pain neuroscience is bright: we still have so much to learn. We should view each encounter with our patients as a learning experience through applying the skills that we seek to master, continued search of the literature, and through reflective practice. This allows us to treat our future patients with continually improving skills for the betterment of the patients.

As I reflect on my journey, I can say that one of the greatest privileges of my professional career in physical therapy has been to be able to give back to the profession that I love. My time as a faculty member at Southwest Baptist University has allowed me to impart my knowledge, experience and skills to young, energetic therapists of the future. I greatly enjoy the interaction with my fellow faculty members and students and I enjoy teaching each class of students that come through the program. In addition, I look forward to improving my teaching skills and mentoring future therapists.



What is the top issue that needs to be addressed within the manual therapy field?

The easy answer to this is more quality research. The area of physical therapy research has exploded over the last 15 years or so but there is so much more to learn. We generally understand the biological plausibility of many of the techniques that we use but not all of them. Additionally, we need better information on dosing and the neuromuscular control aspect and where manual therapy might fit in with this.

In the next 5 years, how do you see physical therapy "transforming society by optimizing movement to improve the human experience?" (APTA new vision)?

A lot of this depends on health care reform. Where will we be regarding health care reform in 5 years? I believe that the future looks bright for physical therapy even in the context of health care reform. We are positioned well to fill a void in health care but still need legislation to help fulfill our goals as established by the APTA.

In your career, what has been the best advice you have been given?

One of my mentors, Dr. Tim Flynn, once told me to seek to be the best at something rather than good at everything. This has helped me in many ways, but especially professionally. In addition to this I once read an anonymous quote that has helped me as a life-long learner: "Education means developing the mind, not stuffing the brain." And one final quote that I really like is by Matt Foley, who said, "You will get all you want in life, if you help enough other people get what they want."

What benefits do you notice being one of three manual therapy fellows in the state of Missouri?

Aside from the skill and knowledge acquisition,

I would have to say the main benefits have been in the area of credibility regarding manual therapy education and professional satisfaction and, of course, the wonderful colleagues and mentors that I have had the privilege to learn from and befriend as a result.

What piece of advice would you give for those looking to take the next step in their physical therapist career?

First, realize that to be a great therapist you have to first become a great educator. We educate patient first and treat them second. Second, hone your thinking skills; physical therapy is about clinical reasoning and decision making. And lastly, strive to be the best at something.



Physical therapy is a vast pool of knowledge spreading across many areas. How do you distinguish yourself in a market that just sees PT or DPT at the end of your name? How do you let patients know that you are well versed in neuro-rehabilitation or pediatrics? Perhaps you are continually drawn to working with geriatric patients and spend hours working with patients within that area. Maybe the next step is a jump off the diving board into the deep end to swim in the depths known as specialization.

The American Board of Physical Therapy Specialties (ABPTS) adopted the mission to "improve public health by enhancing clinical excellence in physical therapy practice through clinical specialist." Specialization not only recognizes the physical therapist's skills and expertise in a defined area of study but also opens doors to serve patients, the community, and the physical therapy profession more effectively. When a specific physical therapy related issue arises, others can now pinpoint an expert to help.

Established in 1978, the ABPTS has certified over 14,000 specialists in eight areas.^{2,3} The largest specialty area is orthopaedics with 8.532 certified specialists; other areas of specialty include cardiovascular and pulmonary, clinical electrophysiology, geriatrics, neurology, pediatrics, sports, and women's health.²

The best advice Beverly McNeal, DPT,

GCS has about the specialization process is that it is a commitment of time. "Understand what you are getting into as you look into specialization," she advises. The use of scholarly journals and continuing education classes are crucial steps to stay abreast with the latest in specialty areas, deepening your knowledge base and helping you study. As a lifelong learner, the impact will spill over to your practice using your clinical reasoning and investigation foundation.

Specialization certification is valid for a 10 year period and comes with earned credentials and recognition; after, recertification is necessary to maintain credentials.⁵ Application for recertification can begin within the last three years of the certification expiration date. For those entering into the specialization field or looking at renewing, updating, and staying current in your credentials, the process is changing, transitioning from recertification to Maintenance of Specialist Certification (MOSC).⁶

With a vast and continually changing array of knowledge, research, and practices within each specialization, you cannot prepare yourself too much. Take advantage of great resources for preparation from the ABPTS including the Exam Content Outlines, Application Booklet, the Description of Specialty Practice (DSP), and websites like http://learningcenter.apta.org. Membership in the American Physical

Process of specialization⁴

- Applicants must hold a current license to practice physical therapy.
- Apply before the specialty deadline occurring once a year (e.g. July 31st for Orthopaedics) and pay appropriate application fees.
- Meet specialty specific requirements for experience in direct patient care and other certifications (e.g. 2000 hours of direct patient care within the specialty).
- Gain approval to sit for exam and pay exam fee.
- Pass a specialty specific, written examination.

Therapy Association provides direction, vision, networks, and a wealth of knowledge for physical therapist looking to advance and stay current in the profession.

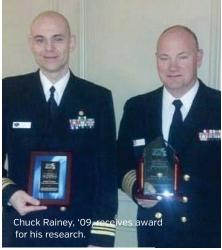
Specialization not only helps set you apart professionally but helps you better serve your fellow physical therapists, the field, and the community as we seek to "transform society by optimizing movement to improve the human experience."

Adapted from http://www.abpts.org, with permission of the American Physical Therapy Association. Copyright © 2014 American Physical Therapy Association.

Citations

- ABPTS Mission and Responsibilities. American Physical Therapy Association: American Board of Physical Therapy Specialties. http://www.abpts.org/About/Mission/. Updated February 17, 2011. Accessed March 18, 2014.
- ABPTS Certified Specialists Statistics. American Physical Therapy Association: American Board of Physical Therapy Specialties. http://www.abpts.org/About/Statistics/. Updated July 10, 2013. Accessed March 18, 2014.
- ABPTS History. American Physical Therapy Association: American Board of Physical Therapy Specialties. http://www. abpts.org/About/History/. Updated August 19, 2013. Accessed March 18, 2014.
- 4. Minimum Eligibility Requirements and General Informatino for All Physical Therapist Specialist Certification Examinations: Cardiovascular & Pulmonary, Clinical Electrophysiolgic, Geriatric, Neurologic, Orthoepaedic, Pediatric, Sports, and Women's Health. American Physical Therapy Association: American Board of Physical Therapy Specialties. http://www. abpts.org/uploadedFiles/ABPTSorg/Specialist_Certification/ About_Certification/SpecCertMinimumCriteria.pdf. Accessed April 1, 2014.
- About Specialist Recertification. American Physical Therapy Association: American Board of Physical Therapy Specialties. http://www.abpts.org/Recertification/. Updated October 17, 2013. Accessed March 18. 2014.
- ABPTS Transition to Maintenance of Specialist Certification (MOSC). American Physical Therapy Association: American Board of Physical Therapy Specialties. http://www.abpts.org/ MOSC/Transition/. Updated October 17, 2013. Accessed March
- Vision Statement for the Physical Therapy Profession and Guiding Principles to Achieve the Vision. American Physical Therapy Association. http://www.apta.org/Vision/. Updated March 27, 2013. Accessed April 4, 2014.





Dr. Chuck Rainey, '09, Earns Top Honors at 2014 CSM

Chuck Rainey, '09, presents an American flag flown over various bases in Afghanistan. Left to right: Tom Sneed, Steve Lesh, Chuck Rainey, Terry Cox.

Congratulations to SBU DPT Alumni LCDR Chuck Rainey, DPT '09, DSc, OCS, FAAOMPT, who was presented with the IJSPT Achievement of Distinction Case Report Manuscript Award for "The Use of Trigger Point Dry Needling and Intramuscular Electrical Stimulation for a Subject with Chronic Lower Back Pain: A Case Report." He was presented the award at the Combined Sections Meeting (CSM) in Las Vegas, Nev., in February.

Rainey is a 2009 DPT graduate now in his fifth year with the Navy. In his service, he deployed with U.S. Navy SEAL Teams providing physical therapy services in support of Operation Enduring Freedom. As the former division officer for the largest branch medical clinic in Navy Medicine West and currently serving all west-coast SEAL teams as the division officer for the Tactical Athlete Program (TAP) Sports Medicine division, he is soon transferring to Naval Health Clinic Hawaii as the department head of two physical therapy clinics at Pearl Harbor and Kaneohe Bay.

Rainey said SBU's DPT program has instilled in him a passion for Christ-centered service.

"It is this Christ-centered service that is the cornerstone of the Southwest Baptist University physical therapy program, which has inspired me to continue this personal conviction by serving in the military," he said. "Servicing the men and women who are protecting our great nation is my personal way to serve, and it has given me the personal satisfaction in knowing that I am a part of something much bigger than myself. I have had the ability to touch many people across all demographics both spiritually and physically by using my skills as a physical therapist."

His published research on trigger point dry needling and the use of intramuscular electrical stimulation is adding important information into a fairly new realm within physical therapy. In the near future, he hopes to add more to the depth of research for "dry needling and spinal manipulation in the thoracic spine for treatment of psychosocial disorders and its effects on brain biochemical markers," Rainey said.

In a recent visit to the SBU DPT program, Chuck presented the department with an American flag flown over a variety of bases in Afghanistan during his time with the U.S. Naval Special Forces. It is proudly displayed in the Warren B. Davis Family Physical Therapy Center in gratitude of alumni who have served and currently serve our country.

Chuck and his wife, Deanna, have two children, Jackson (3) and Grayson (1). Together, they love the outdoors and spending time together watching movies, trying different cuisines, and exploring the city.

ALUMNI GATHERINGS

Eleven alumni, faculty, and current students met at Buddy V's in the Venetian at the 2014 CSM: The Catalyst in Las Vegas in February. If you are attending the 2015 CSM meeting Feb. 4-7, 2015 in Indianapolis, join us for a meal, an update about the program from chair Dr. Steve Lesh, and an opportunity to connect with other alumni.



DPT1 Student Wins All-Regional Honors in Cross Country



First-year student
Karissa Fisher
finished her cross
country career on
top. Karissa, along
with her teammates,
competed for the first
time in school history
at the Division II
cross-country national
championships in

Spokane, Wash. She was the first graduate studentathlete for the physical therapy department.

Staying disciplined in two demanding fields was difficult at times to succeed in the classroom and on the course. In the midst of this, Karissa pointed out, "I finally got to see everything come together. Eventually all the hard work and dedication has paid off."

When asked about her experience at the national competition she stated, "It was crazy yet official. People screaming and yelling everywhere.

You could not tell if they were saying your name or not. Definitely surreal."

She finished the season with all-conference and all-region accolades. $\,$

"It [was] a privilege," she said. "The professors really helped me not only accomplish my goals but also to find ways to be successful."

She will continue to serve her cross country teammates, as they look forward to another successful season in one of the most competitive conferences in Division II

Tyler Burke earns Bill Karl Award at 2014 DPT Banquet



Recent graduate, Tyler Burke, earned the Bill Karl Award. The "Bill Karl Service Award" is presented annually to a graduating Doctor of Physical Therapy student who demon-

strates superlative service to the Lord, the profession of physical therapy and the University. The award is named as a memorial to Bill Karl, MPT '98, the first recipient of this award, who died tragically after his graduation in 1998. Bill exemplified what it means to be a servant leader both in the classroom and in his personal life.

The award goes to a recipient who has made an impact in this world through their service. Tyler has gone on a mission trip to El Salvador. He also served as Vice President of the SPTA and as a teacher's assistant in 2012. While in Bolivar, he was a member of the Bolivar United Methodist Church, volunteered with the Special Olympics, and volunteered as a YMCA football coach, He was always willing to serve the community in general.

CoxHealth earn Clinical Facility of the Year Honors



Robin King PT, C/ NDT, CCCE and CoxHealth Hospitals have partnered with SBU and our DPT 3 students for many years. They are an invaluable asset to

the success of the doctorate program by consistently investing in our students. In the last four years, 44 of our students have walked through the doors of CoxHealth. Robin has worked with CoxHealth for 21 years as a PT and rehab therapy manager. Robin and CoxHealth were recognized during commencement week in May.

Jessica Gleason, PT, DPT – Clinical Instructor of the Year



Jessica Gleason of Select Specialty Hospital was recognized last May for her outstanding work preparing DPT 3 students on their clinical rotations. Jessica not

only displays a deep knowledge of physical therapy but a passion to teach, serve, and equip the next generation of physical therapists from SBU. She has worked with and trained over 10 SBU students during her time as a CI. Her name is recognized in the main hallway at the Warren B. Davis Family Physical Therapy Center and the physical therapy department will financially support Jessica in a professional development endeavor this year.

SBU DPT Faculty & Alumni Introduce Future Bearcats

Myliah, daughter of Quinn and faculty member Becky Schoeneberg (2008), was born Jan. 6, 2014. Faculty Amber Fleer (2001) and her husband Gabe added Brynlee Elizabeth on May 27, 2014. Jennifer Allen (2008) welcomed Brooklyn Noelle in January 2014. Gabby Kinnett (2014) welcomed Samuel Asher to their family in December 2013. Lindsay Johnson [2004] welcomed Camden Neal in September 2013. Larissa Sorrells [2012] welcomed Barker Owen in July 2013.

DPT 2nd Year Student Charters Black Student Union



Paige Reed, from Indianapolis, Ind., started the Black Student Union at SBU. After graduating from Indiana University, she did not know why she ended up at SBU. "It's a long story but

it can only be explained by God's hand," she said.

Now in her second year as a student in the DPT program, Paige not only is working towards her doctorate degree but her work has brought dialogue and change to Southwest Baptist University as a whole.

Paige and the Black Student Union draw off of four pillars for everything they do: respect,

unity, love, and fortitude. Their mission statement is: "Black Student Union at Southwest Baptist University is an inclusive organization whose purpose is to improve the quality of life for our African American and African Diaspora students on the SBU campus by inspiring spiritual growth, personal growth, academic success, and unity within the black community. In addition to building and uplifting these students on a personal and community level, Black Student Union also seeks to work with various SBU administrative departments/committees to increase diversity on campus, increase the graduation and retention rate of black students, and educate the general student body on African American and African Diaspora culture."

Their holistic mission has bridged the gap for

students and faculty to create healthy dialogue accross campus. Campus and community leaders joined together for a leadership dinner to address current issues and discuss proactive solutions for the student body. They have provided study tables for students with the hope of creating mentorship programs, awareness during Black History Month, and many other events.

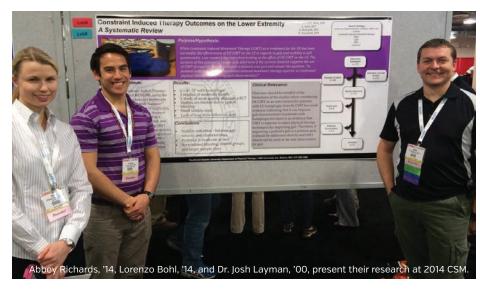
Paige's impact will not only be felt at SBU but also in her profession as an example of servant leadership. "It was a time of immense personal and spiritual growth," Paige said. Humbly, Paige was able to step into the gap for black students. "I learned that I just need to follow God through it all."

Faculty and Student Research Receives Award at CSM: The Catalyst

The SBU DPT program proudly displayed five research posters at the CSM: The Catalyst conference in February of 2014 in Las Vegas. Research from programs across the country and more than 900 posters were available for viewing and review. Research led by Dr. Terry Cox, DPT, OCS, FAAOMPT, and recent DPT graduates Ryan Holzum, Kevin Klecka, Robert Moser, and Jason Rathun won honors for their research in manual therapy titled "The Effect of Soft Tissue Mobilization in Treating Symptoms Associated with Lateral Epicondylitis in Adults: Systematic Review." The poster was nominated as a finalist in the outstanding poster award for the Orthopedic Section of the APTA. Other research presented include:

-Matheny C, Anderson C, Steventon D, Winter J, Zayas M. A Systematic Review of Literature: Does concurrent physical therapy intervention have a positive impact on impairments, functional limitations and quality of life in patients undergoing treatment for pediatric cancer? Poster Presentation. Combined Sections Meeting, American Physical Therapy Association, Las Vegas, NV, February 3 - 6, 2014.

-Cox T, Lovegreen N, Miyazawa A, Reed D. The Effectiveness of Spinal Manipulation on Chronic Low Back Pain: A Systematic Review. Poster Presentation. Combined



Sections Meeting, American Physical Therapy Association, Las Vegas, NV, February 3 - 6, 2014.

-Layman J, Bohl L, Richards A, Scandrett N. Constraint Induced Therapy Outcomes on the Lower Extremity: A Systematic Review. Poster Presentation. Combined Sections Meeting, American Physical Therapy Association, Las Vegas, NV, February 3 - 6, 2014.

-Layman J, Bennett J, Cayce D, Choate D. Functional outcomes of early mobilization on stroke recovery. A Systematic Review. Poster Presentation. Combined Sections Meeting, American Physical Therapy Association, Las Vegas, NV, February 3 - 6, 2014.

-Coleman KA, Clinical Findings Lead to a New Anatomical Variation Finding of the Serratus Posterior Superior: Theoretical Considerations. Poster Presentation. NEXT Conference & Exposition, American Physical Therapy Association, Charlotte, NC, June 11 – 14, 2014.

-Layman J, Snell A, Schmidt H, Schmidt T. Anterior Cruciate Ligament injuries create neuroplastic changes in the central nervous system: a systematic review. Poster Presentation. NEXT Conference & Exposition, American Physical Therapy Association, Charlotte, NC, June 11 – 14, 2014.

-Fleer A, Graddy J, Meyer L, Meyer T, Rhodes K. The Effectiveness of Increased Step Rate, Decreased Stride Length, and Foot Strike Pattern in Reducing the Incidence of Running Injury: A Systematic Review of the Literature. Poster Presentation. NEXT Conference & Exposition, American Physical Therapy Association, Charlotte, NC, June 11 – 14, 2014.

Dr. McNeal Receives GCS Credential



Beverly McNeal, DPT, GCS, completed here geriatric certification and was recognized at the 2014 CSM: The Catalyst award ceremony. Dr. McNeal champions the Global Health Outreach program at SBU, orchestrating physical therapy specific mission trips for current students, alumni, and medical professionals to communities in Peru, Haiti, Brazil, El Salvador, and many more. She also has been instrumental for providing

physical therapy education in these locations. The GHO has seen tremendous growth in depth and opportunities under her leadership. We are proud of all that Dr. McNeal has accomplished personally, professionally, and for the DPT program.

Congratulations to Other Faculty and Alumni Earning their Specialization!

Jason Russell, Geriatric
Residency 2014 Grant Collins
OCS 2013
Micah Hilton OCS 2013
Katie Krus CLT 2013
Katie Crayton Andes CSMT 2013
Chuck Rainey FAAOMPT 2013
Stephanie Davidson, Dry
Needling 2013

John Burnett, CLT 2012
Jeff Nickel GCS 2012
Mandy Lancaster NCS 2012
Josh Layman NCS 2012
Joni Barrett Chy OCS 2012
Stephanie Davidson OCS 2012
Trevor Davidson OCS 2012
Rocky Sowards OCS 2012
Tom Sneed OCS 2012

Southwest Baptist University 1600 University Avenue Bolivar, MO 65613





>>>>>> How can alumni get involved? <<<<<

- 1. Stay connected by liking the SBU Physical Therapy Facebook page.
- Invest in current students by becoming a clinical instructor.
- 3. Stay in touch by emailing your former professors.
- 4. Mentor a current student.
- 5. Update us about a recent birth, marriage, earned credentials.
- 6 Guest lecture
- 7. Help a student go on a mission trip with the Globa

- 8. Serve on a mission trip with the Global Health Outreach.
- 9. Hire a SBU DPT graduate.
- Donate to the SBU DPT program for projects you are passionate about.
- 11. Meet together at the 2015 CSM in Indianapolis.
- 12. Meet at the annual PT at the Ballpark gathering every summer
- 13 Participate in a CEU put on by the SBU DPT program
- 14. Lead with excellence and serve
- 15. Share a story about your experience is the DPT program.

Invest in PT at SBU

Online: giveto.SBUniv.edu

Enter amount and select from list of areas to support. Select: Missions> Physical Therapy Mission Fund or Non-Academic Programs> Bill Karl Emergency Fund