

EMORY | physical therapy



HeadFiRST

Steve Wolf leads challenge to integrate technology into physical therapists' training

from the director



ON BEHALF OF THE FACULTY, STAFF AND STUDENTS,
I WELCOME YOU TO EMORY PHYSICAL THERAPY.

We are excited to start this new academic year with our newly matriculated class of 2017 represented by 70 students from 25 states and China, 46 universities and 23 majors.

In early May, we graduated the Doctor of Physical Therapy Class of 2014. Dr. Rebecca Craik, professor and chair of Department of Physical Therapy at Arcadia University in Glenside, Pennsylvania, and editor in chief of the *Journal of Physical Therapy*, gave the commencement address. Among the graduates were one DPT/MBA and one DPT/MPH student – a testament to our strong dual-degree programs.

Besides these two very successful dual-degree programs, we have now launched two additional dual-degree programs. The DPT/PhD with the School of Applied Physiology at Georgia Institute of Technology and DPT/MA in Bioethics with the Emory Center of Ethics and Laney Graduate School. These programs are indicative of the strong collaborations we enjoy not only within Emory but also with other prestigious institutions in metro Atlanta.

We are pleased to announce that we graduated our first resident in the Neurologic Physical Therapy Residency program and have expanded our Emory Orthopedic Physical Therapy Residency program. We are committed to expanding and adding other residency programs in the near future in keeping with the need for more specialized training in the physical therapy profession.

The spirit of innovation drives the faculty, and Dr. Steve Wolf, who just completed 40 years of service at Emory University, leads the charge by challenging us to integrate training in the fields of genomics, bioengineering, regenerative rehabilitation and telehealth into our curriculum. We congratulate Dr. Wolf for his dedicated and inspired service to our institution.

Our faculty makes it possible to fulfill our educational, clinical and scholarly endeavors and to bolster these efforts; we are excited to welcome Dr. Michael Borich to our fold. Dr. Borich will lead the Neural Plasticity Research Laboratory in addition to teaching the Principles of Motor Learning course in our curriculum.

I hope you enjoy this issue of *Emory Physical Therapy* and my thanks to all who support the Division of Physical Therapy in so many ways.

Best Wishes,

Zoher Kapasi, PT, PhD, MBA
Associate Professor and Director

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at emorydpt.org



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Emory Physical Therapy

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Emory's Woodruff Health Sciences Center (WHSC) is an academic center focused on teaching, research, health care, and public service. The Division of Physical Therapy is part of Emory University School of Medicine, a component within the WHSC.

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IN THIS ISSUE

Head FiRST 2

Steve Wolf leads challenge to integrate technology into physical therapists' training

Emory's clinical footprint 4

DPT alumni span the nation and the globe

Senior mentor program 6

Pairing students with active seniors brings new perspectives

Serving in Jamaica 7

DPT faculty, alumni and students run intensive stroke clinic

Faculty profile: Michael Borich 8

Expanding service 9

Faculty clinic takes on renal transplant and cancer patients

Two is better than one 10

Dual-degree programs prepare students to compete in increasingly complex health care landscape

Two new dual degrees launched 10

Rewarding students for performance 11

Amy Wolkin and Michelle Sauer receive first merit scholarships

Class of 2014 student awards 12

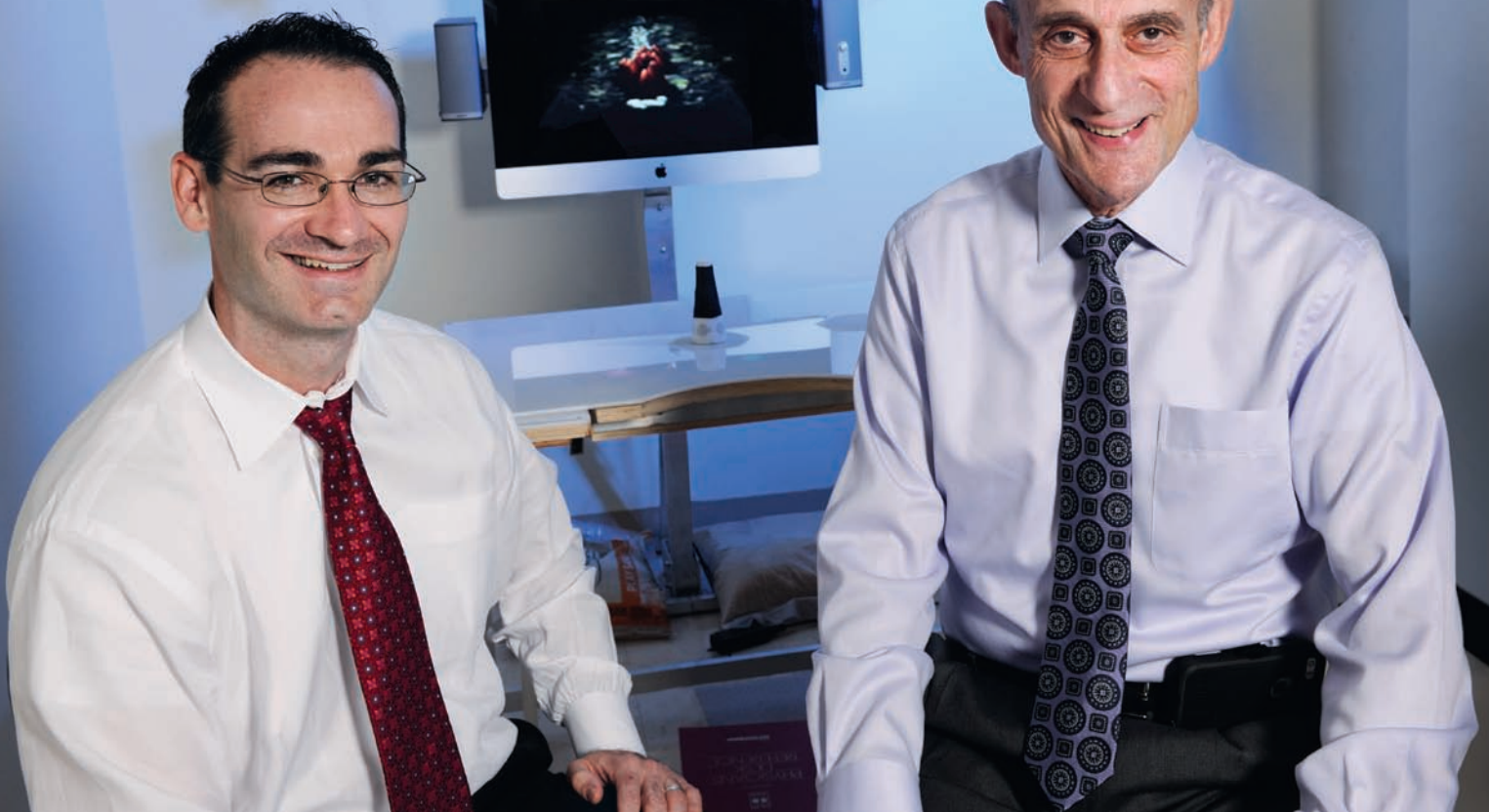
13 Faculty notes

13 Class notes



"Graduates from dual-degree programs report that the dual degree helped in career advancement and that it made them a more competitive job candidate," says *Zoher Kapasi, PT, PhD, MBA and program director.*

Randy Trumbower, MPT, PhD, (left) and Steve Wolf, PT, PhD, FAPTA, FAHA (right) work together on the FiRST initiative.



Head FiRST

By MARTHA NOLAN MCKENZIE

Steve Wolf leads challenge to integrate technology into physical therapists' training

In 2009, the American Physical Therapy Association convened a meeting – the Physical Therapy and Society Summit (PASS) – to gain input from more than 24 different professional, governmental and consumer groups to review their perceptions of physical therapy and recommend changes compatible with how the profession needs to operate in a changing health care landscape. One of the key recommendations to emerge was that physical therapists need to become much more knowledgeable about the advances in science and technology that have direct applications to their practice.

Those recommendations could have died on the vine if not for some organizational concepts initiated by Steve Wolf. The

Emory professor embraced the challenge emerging from PASS and created the FiRST initiative – Frontiers in Rehabilitative Science Technologies. “Whatever success FiRST has had or will have is almost entirely attributable to Steve,” says Marc Goldstein, EdD, director of Research Services for the APTA. “He was as instrumental as is humanly possible in creating the initiative, recruiting the team to craft it, making presentations and even meeting with the new APTA CEO to explain how important it is to keep the initiative going. The absolute truth is, if Steve hadn’t picked up the gauntlet, the PASS summit would have come and gone, the results would have been published, and that would have been the end of it.”

Wolf and the interdisciplinary team he recruited first identified four content areas they deemed critical to the future of the profes-

sion: bioengineering; regenerative rehabilitation; genomics, and telehealth. He then persuaded the research and education arm of the APTA to provide funding to bring together experts both inside and outside the physical therapy profession to generate information in each of the content areas.

“We recognized the knowledge base of most physical therapy programs is not well-equipped to deal with these content areas,” says Wolf, PT PhD, FAPTA, FAHA. “We want to make the information we generate available to everyone through podcasts, webinars and presentations.”

At the most recent APTA conference, eleven hours of FiRST programming was presented. Here’s a quick look at the presentations:

Bioengineering

The greatest change in rehabilitation practice during the past 30 years has been engineering technologies that provide clinicians more efficient and effective techniques to treat persons with physical disabilities. Randy

Trumbower, MPT, PhD, assistant professor in the Emory DPT program, led three presentations discussing the implications of emerging bioengineering technologies on contemporary physical therapy practice and education.

“Bioengineering is everything that is related to FiRST,” says Trumbower. “How can we converge engineering with physiology for rehab purposes?”

Over the course of three hours, Trumbower gave an overview of emerging trends in robotics, haptics, and virtual reality technologies. He discussed robotics and virtual reality technologies in patient care and education and outlined educational resources available to therapists.

Regenerative rehabilitation

Regenerative medicine focuses on the development of treatment interventions designed to repair, replace or regenerate tissues and/or organs to restore lost or

impaired function. More than ever before, the enthusiasm surrounding regenerative medicine is being matched with clinical deliverables, and the number of clinical trials in regenerative medicine is growing at an unprecedented rate. As more of these technologies reach bedside, there will increasingly be a need for trained physical therapists who can help oversee the quality, safety and validity of these new clinical treatments.

Trumbower co-presented two sessions on regenerative medicine. He discussed stem cell populations commonly used in regenerative medicine and introduced the concept of “regenerative rehabilitation,”

It is important that physical therapists are not just consumers of new technologies but are part of their development.

particularly for neurological applications.

“We are finding in research that many of the theories in rehabilitation are very important for the success of regenerative medicine,” says Trumbower. “How do we exercise our patients who are going to have stem cell implants or organ implants? At what point do we stress those tissues as they start to grow? Physical therapists are at the cutting edge of finding those answers.”

Genomics

Advances in the science of genomics over the past 20 years hold much promise for managing and providing effective interventions for many common diseases. Studies have indicated that genetic factors influence many, if not most, of the diseases commonly encountered in clinical practice by physical therapists. Genes appear to influence not only risk for disease, but also progression, outcomes and response to rehabilitation interventions.

Allon Goldberg, PT, PhD, director of the Physical Therapy Department at the University of Michigan – Flint led two sessions on genomics. “We covered everything from basic definitions to the Human Genome Project,” says Goldberg. “We discussed how certain variations in genes might predispose someone to develop a disease, such as lumbar disk degeneration. In the end, what we are really talking about is personalized rehabilitation protocols tailored to a person’s genetic profile.

“The whole idea of the FiRST initiative is to educate physical therapists on emerging trends in science, so we have been putting a lot of articles and educational ma-

terials on genomics on the web,” continues Goldberg. “You can access them at apta.org/genetics.”

Telehealth

Telehealth is the ability to use telecommunication technology (real-time videoconferencing or store-and-forward/remote monitoring) in physical

therapy models for care. Alan Lee, PT, PhD, DPT, CWS, GCS, associate professor in the DPT program at Mount St. Mary’s College presented on telehealth. “Some professionals are hesitant using technology because they see it as a way of replacing the technician,” says Lee. “I don’t see that at all. It could be used as a way to continue care after the patient completes the physical therapy sessions. We as physical therapists should not sit back as other professions learn to use this technology. For therapists who want to learn more about it, we have uploaded a lot of information to apta.org/telehealth.”

Wolf and his team plan to keep the momentum of the FiRST initiative moving forward. “It is important that physical therapists are not just the consumers of new technologies but are part of their development,” says Trumbower. “We need to be active contributors and to be on the cutting edge of new treatments. That is what FiRST is all about.” **EPT**

Emory's clinical footprint

DPT alumni span the nation, and the globe

You can go to nearly any state in the nation – and to many foreign countries – and run into an Emory educated physical therapist.

The program attracts 70 percent to 80 percent of its applicants from outside Georgia. When they graduate, about half elect to remain in the Atlanta area. The other half, however, scatter far and wide. Emory alumni practice in every state but two. And Emory's influence extends beyond the U.S. borders, with alumni practicing from Hong Kong to Belize, and from Australia to Rwanda.

"Clearly, in keeping with Emory's vision, the DPT program is a destination for our applicants from all over the U.S. and abroad, and our graduates and faculty are working collaboratively for a positive transformation in the U.S. and throughout the world," says Zoher Kapasi, PT, PhD, MBA, associate professor and director of the DPT program.

LEARN MORE:

Emory physical therapy alumni are practicing from coast to coast in the United States. For a look at exactly where they are, go to bit.ly/emory-dpt-map.

By Martha Nolan McKenzie



★ HONG KONG, CHINA

Melissa Valentine, 97MPT, 01MPH, moved to Hong Kong with her husband and two young children in 2011. Prior to the move, she had been operating a private clinic in Redmond, Washington, that married her passions of physical therapy and yoga. Valentine, a certified professional yoga therapist, planned to continue the practice in Hong Kong, but she ran into a roadblock when trying to get her PT license. "I was in their office every month for 18 months trying to get registered as a physical therapist," she says. "The four-page application became six inches tall. I finally gave up."

She still practiced yoga therapy, just without the PT designation. Her clients were half Cantonese and half expatriates like herself. "The Chinese patients would come in and do absolutely anything you told them to do. They'd just sign on and never want to leave," says Valentine. "The U.S. patients would come in with 15-pages of information on their problem from the Internet and want to do everything in one session and then leave."

Although they enjoyed their time in Hong Kong, Valentine and her family are in the process of moving back to the states. "We thought if we stayed much longer it would become too hard to leave," she says.

They plan to settle in North Carolina, and Valentine hopes to open a combined yoga/physical therapy practice.



★ KIGALI, RWANDA

Ben Braxley 06DPT has moved to Kigali – the capital of Rwanda – with his wife and young daughter. He is working with Health Volunteers Overseas (HVO) on a continuing education course for Rwandan physical therapists. “HVO is focused on capacity building across multiple specialties and disciplines,” says Braxley. “My course will be on neurological diagnoses, and I will be in charge of the spinal cord injury portion and assisting with the brain injury and stroke portions. Besides teaching, I will do site visits throughout the country to provide clinical mentoring.”

Braxley’s course runs through December. When it is completed, he plans to either assist in the next course, depending on the content, or find other volunteer opportunities. Either way, he’ll be staying in Rwanda at least until next fall since his wife, an emergency room physician who completed her residency at Emory, took a one-year appointment through Columbia University to teach emergency medicine residents.

And when the year is up? “I’ll have great stories to tell my daughter about her adventures during her first year and a half of life,” says Braxley. “And I hope to find a clinical or academic home that allows me to take my early leadership experience and global perspective and do something unique and progressive within the local and regional community.”



★ SOUTHERN BELIZE

Until recently, **Lori (Northcraft) Baxter 10DPT/MPH** served as the rehabilitation director for a faith-based non-profit in Southern Belize that provides medical care, disease prevention and health education free of charge to a vastly underserved community (See “Two is better than one,” p. 10). She traveled to Belize last August with her husband, who studied international development. “We are on this adventure together,” says Baxter. “He helped with the non-medical administration of Hillside International, the same organization I worked for.”

Baxter ran a community-based rehab program, treating patients, supervising students and organizing community outreach events. She worked in a clinic as well as visited patients in their homes and traveled to remote villages to host three-week classes at a local church or community center.

When she finished her one-year term as rehabilitation director, Baxter and her husband embarked on a four-month backpack trip in Africa. She’s not sure what she’ll do next. “I’ve applied for PT opportunities overseas, or we may come back stateside,” she says. “I worked at Hillside as a long-term volunteer and received a living stipend. My goal is to get the necessary skills so I can get a similar salaried position as a rehab director of an international nonprofit.”



★ ST. ELIZABETH, JAMAICA

For each of the past three years, **Assistant Professor Tami Phillips, DPT, MBA, NCS**, has led a group of Emory DPT faculty, alumni and students on a service learning trip to Jamaica (see “Serving in Jamaica,” p.7). This past summer, she went back to the same rural Jamaican community with her family in tow.

Phillips, her husband and her two children, ages 13 and 9, spent two weeks serving the community Phillips has grown to love. Phillips’ husband, a middle school science teacher, worked with local children on their reading. Her children volunteered in the classroom wherever needed. Phillips herself treated patients and visited a local nursing home.

“I saw several patients we had treated in March, and it was nice to see their progress,” she says. “It’s interesting and rewarding to practice in a different health care system. In Jamaica, if someone needs to be treated for an hour and a half, they are treated for an hour and a half. They mostly pay a flat fee, so you can spend whatever time is needed without worrying about insurance regulations.”

Phillips enjoyed watching her children become integrated into the community she has served for several years. “It’s so good for them to learn a lifestyle that is different from ours in the states,” she says.

Phillips plans to return with her family every other summer.

Senior mentor program

Pairing students with active seniors brings new perspectives

For a year, second-year DPT student Rie Tomida carved time out of her busy schedule to meet with Lucy Larrousse, a 70-year-old retired school teacher, at least once a month.

She was not observing or helping with any type of clinical care for Larrousse. Rather, the pair typically had lunch, chatted and perhaps ran a few errands.

Tomida was taking part in the Emory Senior Mentor Program. Created in 2011, the program pairs medical, nursing and physician assistant students with healthy, active seniors with the goal of helping the students learn how to most effectively interact with this population.

Last year the program expanded to include first-year DPT students

under the guidance of Associate Professor Sarah Blanton, DPT, NCS, who has made participation in the program a requirement for the geriatric section of the Growth Processes class.

“When you are going through training, you mainly see very frail seniors in institutional settings – the hospital, the nursing home,” says Jessica Wilson, program coordinator. “But that’s not realistic. When you finish your training, many, if not most, of your patients will be over 65, but they’ll be active and vibrant. Students don’t get any training with that population. We hope to give students a better understanding of the issues facing the seniors they will treat.”

Each month the students meet with their senior mentors to discuss a specific topic. Talking points include nutrition, values, friendship circles and “bucket lists.” They were asked to accompany their senior on a medical visit to see what it’s like for an older person to

access medical care – including finding transportation to the doctor’s office, navigating the waiting room and paying for care.

Despite the assigned topics, many pairs strayed. “We always tried to talk about the topic for that month, but we’d often end up drifting into a different conversation,” says Colby Evan Wallace, second-year DPT student. “We’d go wherever the conversation flowed naturally.”

Like most of the students, Wallace was surprised by how active his mentor was. “Betsy (Allen) is very involved with her church,” says Wallace. “She does volunteer work, exercises, goes out to dinner with friends. Her schedule is definitely busier than mine.”

A secondary goal of the program is to foster interprofessional collaboration. In addition to meeting with their mentors once a month, the students from the various schools come

together to talk about their experiences. “The students are trained in silos, but when they get out, they are expected to work as part of a multidisciplinary team,” says Wilson. “This is a way for students to hear perspectives from other disciplines and get to know each other.”

Jenny Webeler, second-year DPT student, found this aspect particularly helpful. “We normally don’t get the opportunity to interact with students in other disciplines,” says Webeler. “It was really nice to be able to make connections with students in other programs and learn about what they are doing and how they see things.”

A perhaps unintended result of the program was a few enduring friendships. Although the program has officially ended, Tomida and Larrousse plan to keep meeting. Larrousse wants to introduce Tomida to more Columbian restaurants and groceries around town, and Tomida wants to keep practicing her Spanish. **EPT**



Second-year DPT student Rie Tomida and her senior mentor Lucy Larrousse met for their last official session in June. However, the pair plan to continue meeting in the coming year.

In the foreground, DPT students Anjali Malviya and Hayley Siegenthaler work with their client. In the background, Michael Saunders and Rachel Levy work with another.



Serving in Jamaica

DPT faculty, alumni and students run intensive stroke clinic

The young Jamaican woman had suffered a stroke just days after giving birth to her baby.

When she arrived at the physical therapy clinic to participate in a “stroke camp” staffed by Emory DPT faculty, alumni and students, she walked unsteadily and had a very weak right arm, making it difficult to hold and carry her baby. After just one week of intensive therapy, the new mother walked more naturally and, most importantly, could hold and carry her baby for short distances.

This was the third year members of the Emory DPT program traveled to the rural mountainous region of St. Elizabeth, Jamaica, to participate in the week-long camp at the clinic run by an American PT, Brooke Riley. Riley collaborates with Tami Phillips, DPT, MBA, NCS, on offering the trip as a service component of an Advanced Neurorehabilitation elective. Each March, Phillips and three other therapists – faculty or alumni – accompany 14 DPT students to provide stroke

survivors with five full days of intensive PT services, including therapeutic exercise, gait and balance training and interventions for the upper extremities.

The trip is an impactful experience for students and therapists alike. Students get to experience health care in a setting outside the U.S. and get a chance to do more hands-on care. “The most time you’d ever spend with an outpatient in the U.S. is an hour a day,” says Ryan Boudreaux, who went on the trip shortly before he earned his DPT degree in May. “But in Jamaica we were with the same person from 8:00 to 4:30, and we were really working with them the whole time. You have to think on your feet to make sure they get the most out of this week as possible.”

The students also get a chance to see their instructors in a new light. “They usually just see us in the classroom, but in Jamaica they get to see us really collaborating,” says Phillips. “We just work together to create interventions using very little physical

equipment. I think seeing that level of collaboration will help them create that type of culture wherever they end up working.”

Seasoned therapists get as much out of the experience as the students. Brian Maloney, 11DPT and Sarah Caston, 11DPT, NCS, have gone on the trip all three years. Caston loves treating patients who might not have access to care otherwise. She also enjoys being creative in the absence of the resources she typically relies on in her practice. “We have to fabricate a lot of our equipment,” says Caston. “We made our version of a Dynasplint using gloves, rubber bands and safety pins. They’ve created a type of bodyweight-supported gait system using an old treadmill with some pulleys and clamps and crutches tied to the sides.”

Despite the dearth of resources, the patients make remarkable progress in one week. Each patient is evaluated using evidence-based measures at the start of the week and again at the end. “It was shocking to see how much the average patient improved,” says Boudreaux. “Some patients doubled their previous score.”

As satisfying as it was to witness patients’ improvement, the students and therapists were touched in another, equally powerful way. “One of the quite unexpected things about going there is it ends up to be a kind of spiritual experience,” says faculty member Laura Zajac-Cox, DPT, NCS. “Each day starts with a devotional. The patients, therapists and students sing together, and at the end of the day we do a sharing circle. More than one student said it has been one of the most moving experiences of their lives.”

Phillips plans to keep leading the trip annually. “Over the years we’ve been doing this, we’ve developed a nice relationship with the folks in the community, and we try to give back to them,” she says. “But we definitely get much more than we give.” **EPT**

Michael Borich

ASSISTANT PROFESSOR

Michael Borich, DPT, PhD, classifies himself as a rehabilitation neuroscientist.

After earning his DPT degree from the University of Minnesota, Borich worked in an acute neurorehabilitation setting at a Level One trauma center in downtown Minneapolis. “I saw some of my patients get better, and some did not, and I didn’t know why all my patients didn’t improve with therapy,” he says. These experiences prompted him to return to the University of Minnesota to pursue his PhD in Rehabilitation Science with a neuroscience emphasis. After graduating, he continued his training in the Brain Behaviour Laboratory at the University of British Columbia in Vancouver, Canada. He joined the Emory DPT program in January as an assistant professor and director of the Neural Plasticity Research Laboratory. “The goal of the lab is to create new knowledge to advance our understanding of the adaptive capacity of the brain and how then to capitalize on that adaptive ability to achieve improved rehabilitation outcomes for our patients,” says Borich. **EPT**



HOMETOWN:

Duluth, Minnesota

HOBBIES:

Gathering new experiences. I like to try new things, go to new places and learn new things.

TELL US SOMETHING THAT IS PERHAPS SURPRISING ABOUT YOURSELF:

I don’t own a car. Well, actually that isn’t entirely true. Back in high school, my father and I built a 1948 Mercury Coupe, but it stayed behind in Minnesota. Now, I commute everywhere with my bicycle or by public transit. I have been pleasantly surprised by the ease of bicycle commuting in Atlanta. For me, it has been a great

way to get to know the city and keep active while doing it.

WHO HAS BEEN MOST INFLUENTIAL IN YOUR LIFE?

My father. He has instilled in me the importance of hard work but also in maintaining a balanced life. When I was growing up, he always had a positive outlook on life and continually sought out new experiences – traits I see now in myself.

WHAT DREW YOU TO EMORY?

During my visit to Emory last year, when I asked what makes Emory special, the consistent reply was; “the people and the opportunities.” Since my arrival, I could not agree more. Everyone that

I’ve worked with thus far at Emory has been collegial, highly collaborative and has gone out of their way to make me feel very at home, very quickly. And with Emory’s close relationships with Georgia Institute of Technology and Atlanta VA Medical Center, there is no shortage of great opportunities for collaboration.

WHAT ADVICE WOULD YOU GIVE PT STUDENTS?

When you are deciding your area of practice, keep an open mind as long as you can, because you’ll be surprised at how your interests can change during PT school. Especially here at Emory, you have every opportunity you could want – don’t miss out on any of them.

Expanding service

Faculty clinic takes on renal transplant and cancer patients

When transplant surgeon Nicole Turgeon needed physical therapy for problems she was having with her shoulder, she went to Emory Physical Therapy and Wellness, the DPT program's faculty practice. While there she got into a conversation with the clinic's director, Elizabeth Frierson, DPT, OCS, CLT, and the two ended up discussing how therapy could benefit Turgeon's renal transplant patients.

"Before that, I would get a physical therapy consult for a patient who needed additional assistance before being released from the hospital, but after talking to Elizabeth, I realized that perhaps some of my patients could benefit from a PT evaluation before and after transplant," says Turgeon. "I started sending patients to physical therapy after their transplants, and they were improving rapidly with treatment. Now it is part of my post-transplant care checklist – would the patient benefit from PT after the transplant? Many of the other renal surgeons are referring as well, and liver transplant surgeons have started sending patients to the clinic."

Frierson is also working with Turgeon to come up with a frailty index based on a functional test and a medical history. "They've gotten pretty good with people surviving the surgery, but they want them to do more than sit on the couch with their working kidney – they want them to thrive," says Frierson. "So we are doing a pilot study now where we perform some functional tests before the patient gets surgery and then track how they function afterward. That might be able to help them predict who will do well with the surgery and who won't."

Treating renal transplant patients is something of a natural extension for the clinic, which has been seeing cancer patients for a year and a half. Frierson, who is also a certified lymphedema therapist, began by working with breast cancer survivors. "After a mastectomy, you can't start radiation until you can raise your arm over your head," says Frierson. "Physical



Clinic Director Elizabeth Frierson treats a patient at the DPT program's faculty practice. The clinic has begun to treat more renal transplant and cancer patients.

therapy helps them regain the ability to lift their arm into that position, so they can start treatment sooner."

Today about a third of Frierson's patients are cancer survivors. Clinic specialists can help patients deal with the myriad impairments that result from cancer treatment – range of motion, dizziness, balance. "I would love for there to be an automatic PT referral after radiation or chemo," says Frierson. "A lot of times, six months after radiation the tissues get tight and contracted, and patients start developing limited range of motion. They could avoid that if they start therapy after their treatments. A lot of people would benefit from physical therapy after cancer treatments."

Emory Physical Therapy and Wellness was established in 2006 as part of The Emory Clinic by Division of Physical Therapy faculty members and clinicians. **EPT**

Two is better than one

Dual-degree programs prepare students to compete in increasingly complex health care landscape

Medical care in the U.S. is becoming ever more complex, requiring providers to be conversant in areas outside their immediate specialty. The interdependence between personal health and community health calls for knowledge of public health. The growing intricacy of reimbursement systems demands a solid understanding of business and finance.

The Emory DPT program offers dual degrees to allow its graduates to effectively manage and navigate the changing health care environment and become leaders in their field. A DPT/MBA degree was launched in 2007, and a DPT/MPH degree followed a year later.

“By offering DPT students additional degrees in the fields of public health and business administration, we can ensure that our graduates will be well positioned to lead our profession in the clinical, community and administrative arenas,” says Sara Pullen, DPT, MPH, CHES, assistant professor.

As of 2014, 10 students have graduated with dual degrees – four with a DPT/MPH and six with a DPT/MBA. Currently, two students are enrolled in the DPT/MBA program and one in the DPT/MPH program.

Both of the current dual-degree programs are seamlessly incorporated into the DPT curriculum. Students complete the first two years of their DPT coursework, spend their third year obtaining their dual degree and then return to the DPT program to complete their final year of the DPT degree. Students receive both degrees concurrently upon completion of this four-year dual-degree program.

“Graduates from dual-degree programs report that the dual degree helped in career advancement, and that it made them a more competitive job candidate,” says Zoher Kapasi, PT, PhD, MBA and director of the DPT program. “Several of our dual-degree graduates have pursued career paths that exemplify the integration of public health or business into their physical therapy careers.”

Within one year of her graduation, Megan Brock 10DPT/

MPH, accepted a position as the rehabilitation program advisor for Partners in Health, a well-known international health relief organization in Haiti. Her role consisted of 70 percent clinical work and 30 percent program development of community-based rehabilitation services. These services included the training of community health workers, development of environmental modifications and advocacy for those living with disability in the Central Plateau region of Haiti.

“My degree gave me a background in all the global health issues I encountered as well as a lot of useful practical skills, such

as grant writing, assembling data to demonstrate a program’s success and structuring education for community health workers,” says Brock.

Brock’s classmate, Lori (Northcraft) Baxter 10DPT/MPH, until recently served as the rehabilitation director for Hillside Health Care International, a non-profit based in Southern Belize. In that post, she oversaw a community-based rehab program, treating patients herself as well as supervising a rotating cadre of physical therapy students from six partner universities in the U.S.

The care Baxter and her students provided was critically needed. Only two licensed physical therapists practice in Belize City, and that is more than two hours from Baxter’s location. She and her students traveled to

remote villages to bring treatment and injury prevention instruction to a population that had no other medical resources.

Her dual degree prepared her well for the experience. “I applied the dual degree every single day,” she says. “I interacted with 13 future clinicians every month, and I taught them principles about social determinants of health in a developing world.” (For more about Baxter, see “Emory’s Clinical Footprint,” p. 4.)

Crystal Huber 13DPT/MBA, is a physical therapist at St Mary’s Medical Center in San Francisco. She spends about 30 percent of her time working on process improvement projects. Huber serves on a special team with physicians, nurses and consultants who are charged with finding ways to reduce the length of stay in the hospital’s ICU.

“We found that the flow was not as optimal as it could have been, and we are working to develop processes to improve that,” says Huber. “Ultimately the goal of the our team is to reduce the



length of stay in all parts of the hospital.”

Huber enjoys the opportunity to use the knowledge she gained in the MBA portion of her dual degree, and she would like to expand it. “There is a big push in California to have lean processes in the hospital and make flow optimal,” she says. “I could see myself transitioning into process improvement consulting.”

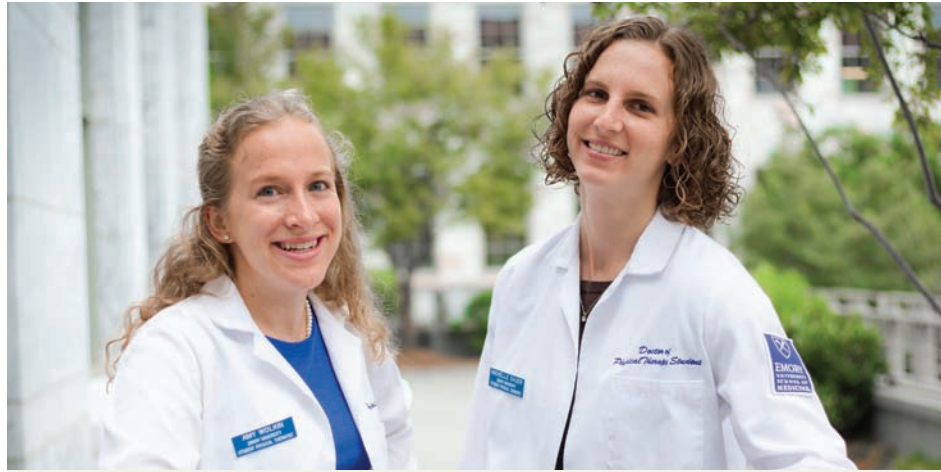
“As the physical therapy profession grows and changes along with a constantly shifting health care environment, the need for public health and business knowledge also increases,” says Pullen. “These dual degrees serve our graduates well in their professional careers.” **EPT**

Two new dual degrees launched

In addition to the DPT/MBA and DPT/MPH degrees, the division is poised to launch a DPT/PhD degree in collaboration with Georgia Institute of Technology and a DPT/MA-Bioethics degree in the fall of 2014. Candidates are being recruited for both of these new dual-degree programs.

Students who enroll in the DPT/PhD program will get their DPT from Emory School of Medicine and their PhD in Applied Physiology from Georgia Tech College of Sciences. The goal of the program is to train the next generation of leaders in academic physical therapy and in movement research.

The goal of the proposed DPT/MA-Bioethics degree is to prepare physical therapists not only to enhance the care they provide to patients in a changing health care environment, but also to prepare them to work on issues of public and institutional policy as it relates to the provision of clinical care, to serve on ethics committees or to conduct education on the ethical foundations of clinical practice.



Rewarding students for performance

Amy Wolkin and Michelle Sauer receive first merit scholarships

Amy Wolkin, second-year DPT student, and **Michelle Sauer**, third-year DPT student, are the first recipients of the new Merit Scholarship offered through the DPT Scholarship Fund. Each student was awarded \$1,500.

“Students submitted applications detailing their service to the community and to the profession, as well as essays about their vision of leadership,” says Bruce Greenfield, PT, PhD, MA. “We had several applications, but Amy and Michelle really stood out.”

Wolkin has a 4.0 GPA. She is the academic/communications committee chair for her DPT class and the women’s soccer intramural sports captain. She attended the American Physical Therapy Association (APTA) Combined Sections Meeting last February.

In one example of her leadership abilities, Wolkin responded to her professor’s repeated requests for student feedback by creating a written survey to administer to all first-year DPT students. She compiled the results and presented them mid-semester to an appreciative professor.

Sauer also has a 4.0 GPA. She won the Physical Therapy Association of Georgia (PTAG) Fall Meeting Student Research Award in 2013. In addition, Sauer co-authored three research posters (one regional and two national) and published a manuscript with Trisha Kesar, PT, PhD, in the *Journal of Neurologic Physical Therapy* (July 2014).

While attending the PTAG conference in 2012, Sauer noticed that there were no research poster submissions from Emory’s DPT program. Determined to rectify the situation, she produced a poster drawn from her work in the Motion Analysis Lab.

Greenfield hopes to expand the scholarship awards in the future. “We want to reward students for performance and commitment,” he says. “Many of our competitors already do this, so in order to maintain the level of students we are getting into this program and to stay competitive, we need to offer these types of scholarships as well. Donations to the DPT Scholarship Fund are critically important to keep this scholarship going.”

Please consider donating. To give, go to emory.edu/give and select “Health Professionals” from the first menu, “Physical Therapy” from the second menu, and continue to follow the online form. **EPT**

STUDENT AWARDS



Class of 2014 student awards

Each year the Emory DPT faculty present awards to recognize students from the graduating class for their outstanding work

EXCELLENCE IN LEADERSHIP AWARD

This award is given to the students who show considerable initiative and organizational skills related to class and program activities.

- Travis Barefoot
- Annie Keener

EXCELLENCE IN SERVICE AWARD

This award recognizes the outstanding service contributions of students to the program and/or our professional association.

- Katherine Hall
- Annie Keener
- Jennifer Pak
- Nancy Ng

FRANCES A. CURTISS AWARD FOR EXCELLENCE IN COMMUNITY SERVICE

This award recognizes the outstanding service contributions of students to the community at the local, national or international level.

- Michael Saunders
- Angela Tsai
- Lilly Webster

JOHNNIE MORGAN AWARD FOR EXCELLENCE IN CLINICAL SCIENCE

This award is given to students based on the recommendations of the clinical instructors and the director of clinical education for going above and beyond what is expected of a student during their clinical affiliations.

- Elizabeth Eldridge
- Lara Perkins
- Zachary Walston

DIRECTOR'S AWARD FOR ACADEMIC EXCELLENCE

This award is given to students for their exceptional academic work.

- Annie Keener
- Nancy Ng
- Lilly Webster

PAMELA A. CATLIN AWARD FOR EXCELLENCE IN CRITICAL INQUIRY

This award is given to students who were deemed by the faculty in consultation with their advisor to have shown leadership, mastery of content knowledge, problem solving ability,

enthusiasm, value to the overall research project, among other qualities.

- Lindsay White
- Michelle Phillips

SUSAN J HERDMAN AWARD FOR CLINICAL PRACTICE

This award is given to students who exemplify the drive to advance our profession and who demonstrate knowledge and skills in a specialized area of patient care.

- Nancy Ng
- Lindsay Nicoletti
- Christine Pieton

DIRECTOR'S AWARD FOR EXCELLENCE IN GROWTH MINDSET

This award acknowledges an exceptional student who models behaviors of perseverance and courage in meeting challenges, and through hard work and dedication creates a love of learning and resilience.

- Carmen Wurtz

NOTES

Faculty news

Kathy Lee Bishop, DPT, CCS, made two presentations at the Combined Sessions Meeting of the APTA this year. One, developed with Beth Davis, DPT, MBA, was "Influence of cardiopulmonary simulator experience in first-year DPT students on accuracy of vital sign measurements with patients." The other presentation was "Ventricular tachycardia and wearable cardioverter-defibrillator during outpatient cardiac rehabilitation."

Sarah Blanton, DPT, NCS, has been promoted to associate professor at the Emory University School of Medicine.

Michael Borich, DPT, PhD, was invited to speak at the Schwartz Center for Computational Neuroscience at the University of California-San Diego in January. His talk was titled "Using concurrent TMS-EEG to characterize brain behavior after stroke."

Beth Davis, DPT, MBA, has served on the APTA IPE Task Force and is a co-founder of the American Physical Therapy Association (APTA) Academic Council, National Interprofessional Education Consortium (NIPEC).

Kathleen Geist, DPT, OCS, COMT, FAAOMPT, successfully completed a two-and-a-half-year course of study in a Manual Physical Therapy Fellowship program from Regis University in July 2013. She received her fellowship status from the American Academy of Orthopedic Manual Physical Therapy in the fall of 2013.

Bruce Greenfield, PT, PhD, MA, was appointed by the APTA's board of directors to serve on the association's Ethics and Judicial Committee.

Marie Johanson, PT, PhD, OCS, serves as co-chair of the Research Initiatives Work Group of the American Board of Physical Therapy Specialties, APTA.

Zoher Kapasi, PT, PhD, MBA, was elected to the Board of Directors of the American Council of Academic Physical Therapy.

Trisha Kesar, PT, PhD, was invited to speak at the 7th World Congress of Biomechanics in Boston in July. Her talk was titled "Innovative techniques for improving gait: Stroke and Cerebral Palsy."

Rich Nyberg, PT, MMSc, OCS, became a Certified Myofascial Trigger Point Therapist (CMTPT) from Myopain Seminars and an Orthopaedic Certified Specialist – 2nd Recertification American Board Physical Therapy Specialists.

Tami Phillips, DPT, MBA, NCS, was elected vice-chair of the Academic Faculty Special Interest Group of the Education Section of the APTA.

Sara Pullen, DPT, MPH, CHES, was elected to serve as the chair of the APTA's Global Health Special Interest Group's Research and Publications Committee, within the Health Policy and Administration Section.

Ainsley Rossi, DPT, OCS, obtained her certification in Functional Dry Needling through

KinetaCore. She uses this skill in clinical practice and as an assistant in the new Dry Needling elective offered in the third year of the DPT program.

Manning Sabatier, PhD, CSCS, recently received funding on a research grant from the National Multiple Sclerosis Society. The project is titled, "The effect of downslope walking on spinal excitability in people with multiple sclerosis."

Randy Trumbower, MPT, PhD, published a paper in the January 14 issue of *Neurology*. The paper, "Daily acute intermittent hypoxia improves overground walking ability in persons with chronic incomplete spinal cord injury: a randomized, double-blind, placebo-controlled, cross-over trial," received extensive national media coverage.

Steven Wolf, PT, PhD, FAPTA, FAMA, was the Ann Shumway-Cook Lecturer at Combined Sections Meeting of the APTA this past year. In addition, a clinical trial conducted by Wolf and published in *JAMA* has been chosen by an international jury as one of the 15 most influential clinical trials in physical therapy. For more information, go to wcpt.org/node/112744.

Michael Wooden, PT, MS, OCS, MTC, presented a two-day program titled "Understanding Lower Extremity Dysfunction: Evaluation and Treatment of Selected Orthopaedic Pathologies" at Physiotherapy Associates, Greenville, SC.

Laura Zajac-Cox, PT, NCS, launched the DPT programs' Neurologic Residency Program and successfully graduated its first resident.

Class news

Kristi Heffernan Duke 85MPT works as a pediatric PT at Duke University Medical Center.

Janis (Jan) Tropp Ground 80PT, MA, MBA, is program manager of Virtual Care for Colorado Permanente Medical Group.

Megan Hector 10DPT is working for Novant Health Presbyterian Rehab Clinic. She is working toward her ATRI certification for aquatic therapy.

Barbara J. Baker 83 PT, PhD, NCS, is associate professor at Grand Valley State University in Grand Rapids, MI.

Collin T. Adu 09DPT, GCS, MBA, has started an in-home therapy clinic in Snellville, called 1Source Sports-Neuro Rehab. The clinic focuses on geriatric patients in the areas of orthopedic, vestibular and cardiopulmonary rehab.

Ellen Pilchik Kaldor 90PT, Med, PCS, CNDT, is self employed working in Early Intervention and CPSE in Westchester County, NY.

Audrey Jones 03 DPT, earned her OCS this year.

Marti Ebert 11DPT, OCS, is assistant facility manager and PT in Athletico in Chicago, IL.

Stephanie Wong Ewing 09DPT, PCS, works at Children's Healthcare of Atlanta as a full-time PT.



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