

Manual Therapy in Early-Stage Knee Rehabilitation: Evidence-Informed Multi-Modal Intervention for Knee Joint Mobility, Proprioception, Neuromuscular Control and Functional Joint Stability

Course Description

Following acute knee injury and surgery, the early-stage of knee rehabilitation is the most important stage of a rehabilitation process intended to restore knee functional joint stability. This is because the early-stage of knee rehabilitation lays the foundation for safe and effective implementation of middle- and late-stage rehabilitation techniques. Inappropriate or 'rushed' early-stage knee rehabilitation can increase the risk of a failed overall knee rehabilitation process and poor clinical and patient-relevant outcomes. Manual therapy and taping can be effective interventions to rapidly reduce pain and improve an injured patient's knee joint mobility, proprioception and neuromuscular control. Rapid improvement of knee joint mobility, proprioception and neuromuscular control can then facilitate exercise therapy for more long-term adaptations that contribute to enhanced knee functional joint stability. The purpose of this theory and practical course is to present you with a rational, evidence-informed, multi-modal approach to integrating manual therapy, taping and exercise therapy. Emphasis is placed on clinical reasoning, practical manual therapy and taping techniques, and exercise therapy that is targeted at enhancing knee joint mobility, proprioception and neuromuscular control in early-stage knee rehabilitation for acute injury and surgery.

Course Outline

1. Current concepts in knee stability and instability: implications for manual therapy assessment and treatment
2. Sensorimotor control of knee functional joint stability: proprioception, CNS processing and neuromuscular control
3. Effects of injury and surgery on knee sensorimotor control: understanding and identifying manual therapy treatment indications and priorities
4. Stages of knee rehabilitation and priorities of treatment: role of manual therapy in prehabilitation and early-stage rehabilitation
5. Role of manual therapy in knee nociception and pain modulation: hands-on intervention for bottom-up and top-down effects
6. Evidence-informed clinical reasoning in knee manual therapy: manual therapy progression, regression and termination criteria
7. Clinical application of knee manual therapy: neuromechanical techniques and progressions for regaining joint mobility and enhancing sensorimotor control
8. Taping and bracing in knee sensorimotor rehabilitation: neurophysiological mechanisms and clinical techniques and progressions

9. Rational integration of manual therapy, taping/bracing and exercise therapy in knee sensorimotor rehabilitation: single- and multi-session intervention models
10. Safe and effective implementation of knee exercise therapy: critical within- and between-session clinical considerations following manual therapy treatments
11. Small group work: clinical scenarios and case studies

Biography

Dr Nicholas C. Clark, PhD, MSc, MCSP, MMACP, CSCS.
Knee Consultant Physiotherapist.
Clinical Specialist Sports and Military Physiotherapist.
Certified Strength and Conditioning Specialist.

As a Knee Consultant Physiotherapist with more than 17 years of clinical experience, Nick has practiced in London teaching hospitals, at Saracens Rugby Union Football Club, with the British Army Infantry and Parachute Regiments, and in private practice. Prior to studying Physiotherapy, Nick qualified as a YMCA Gym Instructor and then secondary school Physical Education teacher. Later, in 2000, Nick also qualified as one of the first NSCA Certified Strength and Conditioning Specialists in the United Kingdom. Nick's past teaching roles have included being a Visiting Lecturer and External Examiner to the MSc Manual Therapy and MSc Sports Physiotherapy degrees at University College London and King's College London, a Clinical Tutor and Examiner for the Musculoskeletal Association of Chartered Physiotherapists (MACP), being contracted to teach Exercise Rehabilitation Instructors and Physiotherapists for the Ministry of Defence, and teaching on sports medicine Master's and Doctoral degrees in the United States. Currently, Nick's main role involves being a Senior Lecturer and Researcher at a London university where he also leads the Knee Injury Control and Clinical Advancement (KICCA) Research Group. Other current roles include being a Knee Consultant Physiotherapist in a central London private practice, a Lower Limb Injury Prevention and Rehabilitation Consultant for the consultancy Integrated Physiotherapy and Conditioning, and serving as a Manuscript Reviewer for scientific and clinical journals including *The Knee*, *Physical Therapy in Sport* and *Manual Therapy*. Nick has taught knee rehabilitation continuing professional development courses across the United Kingdom, wider European Union and Asia for more than 12 years.

Information for venues:

The cost for the participant will be: £125 MACP Members; £135 non-members

This is the cost for 2016 and will be reviewed annually.

There is one free place available to whoever organises the course locally. In addition a further free place will be offered for courses that book more than 20 delegates.

The course requires a minimum of 12 bookings to enable the MACP to cover expenses and will be cancelled 6 weeks prior to the commencement of the course if this number has not been reached. If the course requires air travel for the lecturers the prices quoted / number of bookings required will need to be adjusted to reflect the additional costs.

What the MACP Provides:

- Tutors for delivering the courses:
- Pays the accommodation for the tutor(s)
- Pays tutors(s) travel
- Administers the course, taking all bookings and sending all applicants pre-course information.
- Provision for all delegates to download the workbook for the course.
- Refreshments (tea/coffee/biscuits) at a maximum of £3/head
- Advertising in:
 - MACP website
 - MACP newsletters / emails
 - MACP Twitter and facebook feeds
- One copy of a flyer that you may use to circulate and advertise the course
- A list of names of those who have booked prior to the course for registration.
- CPD certificates (online)

You will need to provide:

- A large room that will seat 22 people and separate area for practical aspects with plinths
- AV equipment (data projection or overhead projector)
- 7 to 8 rolls of Hypafix or Fixamol
- 7 to 8 rolls of leukotape P / Zinc oxide tape
- 7 to 8 pairs of scissors
- Provide us with local information re directions how to get to venue, parking, local accommodation list.
- Someone to oversee the local promotion of the course to physiotherapists in the area.
- Someone on the on the day to deal with local venue organization, including organising the AV, putting up signs, refreshments, registering delegates, locking up, taking photographs for the twitter and Facebook feeds, and sending these to the PDC