1. Membership Committee
2. Education Committee
3. Orthopaedic Physical Therapy Practice
4. Research Committee
5. ICF-based CPGs
6. Practice Committee
7. Independent Study Courses
8. Public Relations Committee
9. Nominating Committee
10. Occupational Health SIG
11. Foot and Ankle SIG
12. Pain SIG
13. Performing Arts SIG
14. Animal Rehabilitation SIG
15. Imaging SIG
16. Orthopaedic Residency/Fellowship SIG
17. Orthopaedic Specialty Council
18. Historian Report
Membership Committee Report
2018 January CSM Board of Directors Meeting

Submitted by:
Megan Poll, Chair
Academy of Orthopaedic Physical Therapy, APTA

Committee Members and Terms:

Megan Poll, Chair 2018-2021
Thomas Fliss 2015-2019
Molly O’Rourke 2017-2020
Nate Mosher 2017-2020
Christine Becks Mansfield 2015-2019

Update on Committee Activities since Oct 2018:

- Academy of Orthopaedic’s Mentorship Program call for applicants and mentors has been completed
- AOPT 2019 is comprised of 15 students (from 12 different states) and 15 clinical mentors who will meet at CSM on Friday January 25th for their Meet and Greet
  - We are happy to have new mentors and mentors who have volunteered in the past
- Christine Becks Mansfield will transition to the program director at CSM 2019
  - Christine was very successful finding mentors via using previous mentor lists, enlisting SIG help, and utilizing residency networks

Discussion Items for the Board:

- Adding student member, Kelsey Smith, to the Membership Committee
- Brainstorm with AOPT BoD on alternative social media communication strategies to best reach current members, new members, relapsed members

Motions for the Board: N/A

Membership Project – Strategic Plan:
- Monthly communication to new members/lapsed members/renewed members
  o Alternatives to emailing these groups may be more effective in terms of reaching these individuals
- Volunteer/Interest Form: committee will continue to work with staff in gathering interested members and directing them to appropriate SIG, committee, and/or governance project
  o Received Student Membership Committee position inquiry Nov 2018
- Student outreach: committee is committed to improving student engagement with the Section. We are working with PR committee to promote the Mentorship Program. Additional student participation on committees may improve that connection to this group

Membership Counts (As of November 2018):

Overall

Total members: 19,578 (up 138 members from previous report)
- APTA total sections 69,877; Ortho Section comprises 28% total APTA membership
  o Second largest section: Sports at 7,855
  o 2% higher composition than previous report
- PT comprises 90%
- PTA comprises 4%; up 0.8% from previous report
- Students comprise 6.3%; up 0.6% from previous report
  o Likely result of timing of data collection for Nov

| Area of Care | PT CSID | CSID2 | CSID3 | DOC | FULL | LIFE | LIFE2 | MSTR | RETIR | TRAN | TOTAL | PT CSID | CSID2 | CSID3 | CSID4 | CSID5 | CSID6 | CSID7 | CSID8 | CSID9 | TOTAL |
|--------------|---------|-------|-------|-----|------|------|------|------|------|------|-------|---------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|
| General Care | J       | 216   | 137   | 121 | 25   | 125  | 124  | 122  | 121  | 120  | 119   | 118     | 117   | 116   | 115   | 114   | 113   | 112   | 111   | 110   | 109   |
| Acute Care   | Q       | 21    | 17    | 12   | 8    | 668  | 37   | 122  | 8    | 707  | 12    | 14     | 9      | 10    | 9     | 8     | 7     | 6     | 5     | 4     | 3     | 2     |
| Cardiovascular & Pulmonary | L | 53    | 51    | 52   | 32   | 24   | 12   | 15   | 309  | 67   | 72    | 4      | 53    | 1261   | 17    | 8     | 8     | 1     | 2     | 1     | 1     | 1     | 1     |
| Pulmonary Respiration | K | 14    | 10    | 10   | 6    | 7    | 449  | 16   | 19   | 96   | 8      | 12    | 646    | 5      | 4     | 2     | 2     | 2     | 1     | 1     | 1     | 1     |
| Education    | C       | 8     | 5     | 3    | 9    | 88   | 259   | 23   | 246  | 2     | 9     | 2070   | 1     | 6     | 1     | 2     | 1     | 1     | 1     | 1     | 1     |
| Federal      | R       | 40    | 30    | 15   | 14   | 12    | 370   | 16   | 71   | 22   | 597    | 4      | 2     | 1     | 2     | 1     | 1     | 1     | 1     | 1     |
| Genetic      | P       | 109   | 143   | 112  | 93   | 32    | 3709  | 172  | 353  | 15   | 51     | 4512   | 46    | 40    | 28    | 14    | 301   | 1     | 1     | 1     | 1     |
| Hand & Upper Extremity | B | 9     | 7     | 4    | 3    | 2    | 315   | 167  | 142  | 5    | 9      | 521    | 4      | 5     | 2     | 9     | 1     | 1     | 1     | 1     | 1     |
| Health Policy & Administration | Y | 20    | 27    | 10   | 18   | 370   | 156   | 8    | 246  | 2   | 23    | 2181   | 3     | 1     | 1     | 1     | 1     | 1     | 1     | 1     | 1     |
| Home Health  | B       | 41    | 48    | 30   | 31   | 7    | 1751  | 58   | 126  | 3    | 9     | 2097   | 13    | 9     | 11    | 4     | 107   | 3     | 2     | 1     | 2     |
| Neurology    | N       | 432   | 352   | 226  | 164  | 86   | 3742  | 75   | 57   | 1    | 140    | 5017   | 41    | 23    | 18    | 9     | 134   | 1     | 1     | 1     | 1     |
| Oncology     | T       | 39    | 28    | 31   | 24   | 6    | 1221  | 32   | 57   | 5    | 13     | 1250   | 5     | 4     | 1     | 4     | 1     | 1     | 1     | 1     | 1     |
| Orthopedics  | J       | 1231  | 1239  | 640  | 434  | 12987 | 841   | 720  | 4    | 15    | 417    | 1147   | 62    | 57    | 39    | 25    | 455   | 2     | 1     | 2     | 1     |
| Pediatrics   | H       | 241   | 267   | 100  | 123  | 3539  | 2155  | 285  | 15   | 125   | 6866   | 17     | 14    | 9     | 10    | 104   | 1     | 1     | 1     | 1     |
| Physical Therapy | E | 13    | 36    | 29   | 20   | 8    | 3073  | 48   | 152  | 1    | 18     | 6921   | 4     | 2     | 2     | 2     | 2     | 3     | 1     | 1     | 1     |
| Research     | D       | 193   | 75    | 54   | 20   | 134   | 397   | 24   | 155  | 12   | 414    | 2037   | 47    | 15    | 7     | 3     | 39    | 1     | 1     | 1     | 1     |
| Sports       | F       | 445   | 341   | 220  | 155  | 106   | 4751  | 95   | 329  | 1    | 15     | 228   | 6882   | 28    | 12    | 9     | 10    | 150   | 1     | 1     | 1     | 1     |
| Women's Health | M | 191   | 127   | 82   | 67   | 97   | 2086  | 78   | 243  | 13   | 70     | 2870   | 12    | 6     | 3     | 5     | 41    | 1     | 1     | 1     | 1     |

<table>
<thead>
<tr>
<th>PT CSID</th>
<th>Total</th>
</tr>
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<tbody>
<tr>
<td>19,578</td>
<td>19,578</td>
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</tbody>
</table>

Likely result of timing of data collection for Nov.
Transaction History (November 2018)

- 185 new members to the section
- 430 dropped members with 254 members reinstated (increase from previous report)
Note: Trend is remaining consistent with previous years

Note: PTA numbers with slight increase in numbers between Aug and Nov compared to previous years
Note: Trending positively from Sept to Nov which has not been seen since 2015
Education Committee Report
January 2019

Submitted by:
Nancy Bloom, Chair
Academy of Orthopaedic Physical Therapy, APTA

Committee Members and Terms:

Chair:
Nancy Bloom 2016-2019 (1st term)
2019 - 2022 (2nd term)
Vice Chair 2015
(member since 2011)

Vice Chair:
Manny Yung 2016-2019 (1st term)
2019 – 2020 (2 year 2nd term)
(member since 2013)

Members:
Eric Folkins 2018-2021
Cuong Pho 2014-2020
John Heick 2014-2020
Valerie Spees 2015-2021
Kate Spencer 2016-2022

AOM Planning Committee

Members:
Director: Keelan Enseki (2019 – 2022); takes over for Tara Jo Manal (new BOD)
Education Chair: Nancy Bloom
VP Board of Directors: Lori Michener (if MOP changes are approved)
ISC Leader: Chris Hughes
2 Educator/Research Members (3 year term)
  To be announced (2019 – 2022) replace Keelan Enseki (2015 - 2018)
2 Subject Matter Experts
  Dave Sinacore (2019)
  Kelley Fitzgerald (2019)
Update on Committee Activities since October, 2018

CSM 2019

Education Sessions and Pre-Conference Courses for CSM 2019

- Sponsoring new session proposed by FiRST Council: AOPT accepted and scheduled the session but all sections co-sponsor); topic is Genomics

- Both pre-conference courses that were accepted will be held (no cancellations)
  - 2 – day: MS Sonography of the Lower Limb Focused in Sport and Performing Arts (enrollment as of 1/9/19 = 37) Imaging and Performing Arts SIG
  - 1-day: Clinical Excellence and Quality Standards in Residency and Fellowship Education (enrollment as of 1/9/19 = 58) (Residency/Fellowship SIG)

- Spotlight on Research: Rotator Cuff Related Research Translated to Practice

- Research committee Vice Chair will attend SPC meetings at CSM and be funded to attend Section Program Chair meetings May 2-4, 2019, in Alexandria, Va.

- Historical Information Regarding Education Session
  - CSM 2019: 93 submissions total, 28 accepted (DC)
    - (+ 1: proposal by FiRST Council)
  - CSM 2018: 90 submissions total, 27 accepted (New Orleans)
  - CSM 2017: 77 submissions total, 27 accepted (San Antonio)
  - CSM 2016: 86 submissions total, 27 accepted (Anaheim)
  - CSM 2015: 70 submissions total, 24 accepted (Indianapolis)
  - CSM 2014: 79 submissions total, 25 accepted (Las Vegas)
  - CSM 2013: 95 submissions total, 28 accepted (San Diego)

DISCUSS:
- Approve revisions to Education Policy Document Revisions

Summary of changes:
1) Section changed to Academy throughout the document
2) Topics identified on 1st page updated to reflect sections in the document
3) ScholarOne taken out because APTA is no longer using them – substituted APTA submission site
4) Moderating responsibilities – took out paper copy of CEUs since all is done online – see if you would prefer different wording
5) Registration fees for AOM: Changed to match AOM brochure - reflects addition of PT students, Residents, Fellows, and PhD students and criteria for their attendance. Also explains discount pricing and eligibility.

1) Annual Orthopaedic Section Meeting:
• **Director of AOM**
  - Position established and Tara Jo Manal recruited to serve as “Interim Director”
  - Tara Jo has taken over the planning of AOM 2019 and imitated planning of 2020.
  - A search was completed for volunteers interested in becoming AOM Director – 2 candidates submitted forms.
  - Keelan Enseki was approved as the new Director of AOM and will begin his role at CSM 2019 because Tara Jo has been elected to the Board of Directors.
  - Keelan Enseki’s term: 2019 – 2022

• **Minneapolis, Minnesota has been chosen as the location of AOM 2020: April 3-4**
• **Planning and Speaker Invitation for the “7th Annual Orthopaedic Section Meeting”, Omni Interlocken Hotel in Denver: April 4-6, 2019**
  - NEW: Poster session
    - A limited group of speakers whose proposals were of good quality but did not get accepted for CSM were invited to present at AOM.
    - There will be a “Eureka Hour” and the session will be on Friday from 4:30 – 5:30. Each presenter will have 5 slides in 5 minutes.

**Previously Reported:**
- Theme: Performance Enhancement Across the Life Span
  - 2 Subthemes: Mobility and Dosing
- Format: No keynote speaker, Reception after Day 1, Panel Discussion at end of day
- Day 1
  - Theme: Adolescents and Young Adults- Recovery and Mobility after ACL Injury
  - Speakers:
    - Mark Paterno
    - Laura C Schmitt
    - Kevin Ford
    - Jeff Taylor
  - General content: screening, prevention, assessing performance for training progressions, enhancing functional performance with sports activities, secondary prevention (prevent next ACL), Lack of performance recovery (return to sport) and future OA.
- Day 2
  - Theme: Older Adult Mobility and Dosing
  - Speakers:
    - Mike Bade (OA and TKA continuum),
    - Johnny Owens (Blood flow restriction exercise and talk about postoperative use (even athletes) and transition to Older adults),
    - Jen Brach: Part 1 Older Adult Screening/evaluating mobility (or motor skill of walking),
    - Jessie Van Swearingen: Part 2 Older Adult motor skill intervention to improve mobility- which exercises and how should we progress?

• **Funded:**
  - Tara Jo Manal (Director)
  - Nancy Bloom (Ed Chair)
o Additional helpers: to be determined

DISCUSS:
- AOM Planning Committee – new Educator/Research members
- Identify who will be funded as additional helpers for AOM 2019
- Approve revisions for MOP

Summary of revisions
1) Changed “section” to “academy” throughout the document
2) AOM: change “hands on” in the purpose statement to “laboratory based skill acquisition” to better reflect the variety of types of activities that can be done in the breakout sessions.
3) Program Objectives: Updated to reflect current policy – no PTA but allow students, residents, and fellows. There is new pricing and discounted rates for these groups as well as criteria for attendance. The content matches the content on the recent AOM brochure.
4) If there is a keynote presentation, the Board needs to decide whether the topic is about PT and health care delivery OR the topic coordinates with the theme of the meeting OR either one is okay.
5) Planning the AOM:
   a. Remove VP of BOD as planning committee member because Ed Chair can serve as Board liaison.
   b. Updated responsibilities to reflect addition of “Director of AOM” position and removal of Vice Chair of Education Committee. Also, modified language to reflect the decision to make the Ed Chair an ad-hoc member of the Planning Committee who will act as Board Liaison.
   c. Clarification regarding line of communication between SIGs, ISC, and Planning committee for generation of new ideas
   d. Timeline: everything is shifted to be completed earlier – redesigned table

Strategic Planning Updates: Changes since October, 2018 Report

Education/Professional Development
Provide exceptional educational content for continuing competence in Orthopaedic Physical Therapy
   o Objective 2: Promote and enhance the educational content, professional development opportunities, and the viability of the Annual Orthopaedic Section meeting (AOM), balancing didactic and hands-on learning experiences.

   - Restructured the AOM Planning Committee
   - Updated Manual of Procedure for AOM
   - Updated Education Policy

Research
Provide resources and support for conducting and disseminating research to expand the knowledge base for orthopaedic physical therapy and to improve patient management
CSM:
“Spotlight on Research” – Topic: Rotator Cuff Related Research Translated to Practice
Moderated by Amee L. Seitz, PT, PhD, DPT, OCS,
Lori A Michener, PT, TAC, SCS, PhD, FAPTA,
Chuck Thigpen, PT, PhD, ATC, ATI

AOM: Given the restriction on the number of posters and platforms that could be selected for CSM, a decision was made to provide an opportunity to present their research at AOM. Selected speakers with quality proposals on topics related to the AOM theme were invited to present at AOM.
Orthopaedic Physical Therapy Practice Report
2019 CSM BOD Meeting
Submitted by:
Chris Hughes, Editor & Sharon Klinski, Managing Editor
Orthopaedic Section, APTA

Advisory Council & Term Limits:
Chris Hughes, Editor  2004-2019
Rita Shapiro, Associate Editor  2017-2020
Aimee Klein, Board Liaison  2017-

Update on Activities since October 2018:
1. Regularly published issues
   The January 2019 issue of OP was mailed on 1.7.19.
2. Pending articles
   With the January issue, Chris has completed his final issue of OP.
   John Heick and Rita Shapiro have been reviewing all incoming articles. At this time, we
   have 7 accepted articles and 7 additional articles in various stages of review.
3. OP Associate Editor
   Rita Shapiro continues reviewing articles and overseeing Book Reviews.
4. Advertising
   The total 2019 advertising sales to date equals $14,000. As mentioned previously, print ads are
   getting harder and harder to sell.

Contracted Newsletter:
- GeriNotes (5x/year)-3-year contract has been renewed through 2019.
Research Committee Report  
January 2019 Board Meeting  
CSM 2019 Washington, DC

Submitted by:  
Daniel K. White PT, ScD, MSc

Committee Members and Terms:
- Dan White, Chair  2019-2021
- Amee Seitz, Vice Chair  2019-2021
- Marcie Harris-Hayes  2018-2020
- Sean Rundell  2018-2020
- Joshua Stefanik  2016-2019 (outgoing)
- Edward Mulligan  2019-2021 (incoming)
- Louise Thoma  2018-2022
- Alison Chang  2018-2021
- Arie van Duijin  2018-2021

Board Liaison:
- Scott Davis  2016-2019

Update on committee activities since October 2018 Board Meeting:

1. Rose Award Nominations

   Allyn Bove was selected as the 2019 Rose Excellence in Research Award recipient for the article: “Exercise, Manual Therapy, and Booster Sessions in Knee Osteoarthritis: Cost-Effectiveness Analysis from a Multicenter Randomized Controlled Trial

2. External Grant Review Committee

   Joel Bialosky will again oversee the grant reviews as vice chair of the External Grant Review Committee, which consists of 9 members including Joel. We had a large influx of grants this year, which is an improvement upon last year. There were two (2) career development award grants, eleven (11) unrestricted grants, and seven (7) new investigator grants. The External Grant Review Committee will meet at CSM on Wednesday, January 23rd from 2-5 PM in the Academy suite.

3. CSM Platform Sessions

   Platform moderators at CSM 2019 include Marcie Harris Hayes, Rich Willy, Carol Courtney, Alison Chang, Meg Sions, and Amee Seitz.

4. Research Poster Award

   There are 11 posters that met nomination criteria for the Poster Award. Nominated posters will be reviewed and scored on Thursday at CSM. All Poster Award nominees will present on Thursday, February 23 from 1 to 3 PM in the exhibit hall.
5. Research Spotlight Workgroup

    Amee Seitz will be presenting the second Research Spotlight Education Session on Shoulder Biomechanics and Outcomes this year at CSM. She has invited three authors from this year’s CSM abstract pool to present their work and hold a roundtable discussion.

6. CoHSTAR Implementation Grant

    Lori Michener and Dan White are in ongoing conversations with CoHSTAR leadership with regards to funding a project-specific grant to implement AOPT CPGs and facilitate training of the next cadre of implementation scientists.
## STRATEGIC PLAN (Progress)

**Research**

Provide resources and support for conducting and disseminating research to expand the knowledge base for orthopaedic physical therapy and to improve patient management

- **Objective 1**: Implement a sustainable National Clinical Research Network (CRN) to support multicenter orthopaedic physical therapy research through Section funded project grants and external funding within three years.

<table>
<thead>
<tr>
<th>Performance Measures</th>
<th>Resources Required</th>
<th>Time Line</th>
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</table>
| The original CRN Project (OPT-IN) will result in two peer-reviewed publications that informs orthopedic PT practice. | No additional resources needed beyond the $300,000 grant. *The $300,000 has already been released.*  
**Person Responsible:** Chair Research Committee will monitor | September 2016  
(Completed - 3 have been accepted) |
| The Section Board will approve one CRN Project Grant for the 2016-2017 funding period. | $30,000 every two years (2016, 2018) with Board oversight and approval  
**Persons Responsible:** Chair Research Committee, External Grant Review Committee, and Board of Directors | February 2016  
*The Board has already approved funding for 2016-2017 CRN Project Grant. Project approval will be based on a recommendation from the Research Chair/External Grant Review Committee*  
(No Proposals were submitted for 2016. The CRN grant is featured on orthopt.org and in osteoblast) |
| The CRN Project Grant will result in one peer-reviewed publication that informs orthopedic PT practice | No additional resources required beyond the $300,000 grant that has already been released.  
**Persons Responsible:** Chair Research Committee will monitor | September 2018  
(The CRN has one manuscript under review and three published, two in JOSPT, and one in PTJ) |
- **Objective 2**: Implement a process to systematically disseminate findings from the research projects that have been funded by the Section within two years of completion.

Implementing the yellow flag tool on the new orthopt.org website is a tangible and practical use of the CRN study findings and a logical place to disseminate study findings.

<table>
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</table>
| Conduct a comprehensive assessment of the Section’s Grant Funding Program (including SIG grants) by surveying past grant recipients to obtain information on:  
- Presentations  
- Publications  
- Additional grant funding | No financial resources are expected as the Research Chair and Section staff will use the Section’s SurveyMonkey account.  
**Persons Responsible:** Research Chair, Research Committee, Section Staff, Board of Directors | Survey completed by October 2015. Results presented to the Board of Directors at the February CSM 2016 meeting.  
(Completed and presented to the Board at fall 2015 Board meeting)                                                                                                                                 |
| Display a list of references for all publications that resulted from Section funding on the Section’s Research webpage. | No financial resources are expected.  
**Persons Responsible:** Chair Research Committee and Section Staff. | March 2016  
(Discussed with Tara adding a publication list to the new webpage) |
<table>
<thead>
<tr>
<th>Task</th>
<th>Responsible</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Work with JOSPT and PTJ to link to full text articles from the Section’s website as a member benefit.</td>
<td>Research Chair, Executive Director, and Board of Directors.</td>
<td>October 2016 (Requested from Tara an updated regarding new Website development to include this)</td>
</tr>
<tr>
<td>Start a quarterly reference list of 3-5 outstanding orthopedic articles to be posted in Osteoblast and/or the Section’s Facebook page. <strong>Persons Responsible:</strong> Research Chair, Section staff</td>
<td>It is unknown at this time if financial resources will be needed. Section members should have access to both journals as a Section and APTA member. Linking to the full text article would simply be a convenience for Section members. No financial resources are expected.</td>
<td>Start January 2016 (No progress has been made so far. I may punt this to members of the research committee to recommend)</td>
</tr>
</tbody>
</table>
ICF-based Clinical Practice Guidelines for Common Musculoskeletal Conditions

Board of Directors’ Meeting

December 2018

Submitted by: Christine McDonough PT, PhD*, Guy Simoneau, PhD, PT, FAPTA *, Robroy Martin, PT, PhD, CSCS*, and Brenda Johnson**

*ICF-based Clinical Practice Guidelines Co-Editors

** ICF-based Clinical Practice Guidelines Coordinator

Advisory Panel:

Jim Elliot, PT, PhD – (Implementation methods overview)
Sandra Kaplan, PT, DPT, PhD (methods)
Tom McPoil, PT, PhD, FAPTA (foot/ankle & production strategies)
Paul Beattie, PhD, PT, OCS, FAPTA (low back and neck)
Kevin Wilk, PT, DPT (shoulder and knee and sports)

Work Group Leaders:

Peter Blanpied, PT, PhD, OCS, FAAOMPT –
  Neck CPG Work Group Lead 2017 – 2019
Keelan Enseki, PT, MS, OCS, SCS, ATC, CSCS–
  Hip CPG Work Group Lead 2019 – 2021
Tony Delitto, PT, PhD, FAPTA –
  Low back CPG Work Group Lead 2017 – 2021
Ann Lucado, PT, PhD, CHT –
  Elbow/Hand/Wrist CPG Work Group Lead 2017 – 2019
RobRoy Martin, PT, PhD, CSCS –
  Ankle/foot CPG Work Group Lead 2017 – 2021
Lori Michener, PT, PhD, ATC, SCS, FAPTA –
  Shoulder CPG Work Group Lead 2017 – 2020
Lynn Snyder-Mackler, PT, ATC, Sc.D, SCS, FAPTA –
  Knee CPG Work Group Lead 2017 – 2019
Strategic Plan Directive:
ORTHOPAEDIC SECTION, APTA STRATEGIC OBJECTIVES 2015-2020
Standards of Practice - Support the development and distribution of resources that promote the provision of best practices in orthopaedic physical therapy
Objective 1: Prior to 2020, disseminate ICF-based Clinical Practice Guidelines for 25 common musculoskeletal conditions

Stages of Clinical Practice Guideline Development

<table>
<thead>
<tr>
<th>Stage</th>
<th>Description</th>
</tr>
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<tbody>
<tr>
<td>1.</td>
<td>Topic Selected</td>
</tr>
<tr>
<td>2.</td>
<td>Initial Draft in Development</td>
</tr>
<tr>
<td>3.</td>
<td>Initial Draft Reviewed and Edited by Coordinator</td>
</tr>
<tr>
<td>4.</td>
<td>Author Review and Approval of Coordinator Edits</td>
</tr>
<tr>
<td>5.</td>
<td>Place Draft on orthopt.org to Disseminate and Solicit Feedback</td>
</tr>
<tr>
<td>6.</td>
<td>Draft in Review by Content Experts</td>
</tr>
<tr>
<td>7.</td>
<td>Authors Incorporating Content Expert Comments</td>
</tr>
<tr>
<td>8.</td>
<td>Content Expert Draft Review by Coordinator</td>
</tr>
<tr>
<td>9.</td>
<td>Place Updated Draft on orthopt.org to Disseminate and Solicit Feedback</td>
</tr>
<tr>
<td>10.</td>
<td>Draft in Review by Stakeholder Reviewers</td>
</tr>
<tr>
<td>11.</td>
<td>Authors Incorporating Stakeholder Reviewer Comments</td>
</tr>
<tr>
<td>12.</td>
<td>Stakeholder Reviewer Comments Review by Coordinator</td>
</tr>
<tr>
<td>13.</td>
<td>Draft in Review by JOSPT Editors</td>
</tr>
<tr>
<td>14.</td>
<td>JOSPT Editor Draft to Authors for Change Requests or Approval</td>
</tr>
<tr>
<td>15.</td>
<td>Final Draft to JOSPT</td>
</tr>
<tr>
<td>16.</td>
<td>Authors Review of Proofs</td>
</tr>
<tr>
<td>17.</td>
<td>Publication in JOSPT</td>
</tr>
<tr>
<td>18.</td>
<td>Submission for National Guidelines Clearinghouse Acceptance</td>
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</tbody>
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CURRENT STATUS

Completed Guidelines - published in JOSPT
   Heel Pain / Plantar Fasciitis Revision (2014)
   Neck Pain – Revision (2017)
3. Hip Pain and Mobility Deficits / Hip Osteoarthritis (2009)

Hip Pain and Mobility Deficits / Hip Osteoarthritis-Revision (2017)


Knee Stability and Movement Coordination Impairments / Knee Ligament Sprain - Revision (November 2017)

5. Knee Pain and Mobility Impairments / Meniscal and Articular Cartilage Lesions (2010)

Knee Pain and Mobility Impairments / Meniscal and Articular Cartilage Lesions – Revision (February 2018)


7. Low Back Pain (2012)

8. Shoulder Pain & Mobility Deficits/Adhesive Capsulitis (May 2013)

9. Ankle Stability and Movement Coordination Impairments/Ankle Ligament Sprain (Sep 2013)

10. Non-arthritic Hip Joint Pain (June 2014)
11. Antipartum Pelvic Pain (collaborating with the Section on Women's Health – Published in Journal of Women's Health Physical Therapy May 2017)
   Clinton, SC, Newell, A, Downey, PA, Ferreira, K. Pelvic Girdle Pain in the Antepartum Population
   J Women’s Health Phys Ther: 2017 May;41(2): p 102–125
   https://journals.lww.com/jwhpt/Fulltext/2017/05000/Pelvic_Girdle_Pain_in_the_Antepartum_Population_7.aspx?WT.mc_id=HPxADx20100319xMP

12. Exercise-Based Knee and Anterior Cruciate Ligament Injury Prevention

Guidelines - under review (i.e., authors have submitted a draft to the Coordinator/Editors)
13. Carpal Tunnel Syndrome (Lead Author: Mia Erickson, PT, EdD) (with Authors for final edits before sending back to editors to prepare for public comment/review)
14. Patellofemoral Pain Syndrome (Lead Author: Richard Willy, PT, PhD) (CPG Editors reviewing and providing feedback)

Guidelines - under development (i.e., authors are being assembled and receiving tasks, literature is being reviewed, and drafts are being created)
15. Elbow Epicondylitis (collaborating with the Hand Rehabilitation Section) (Lead Author: Ann Lucado, PT, PhD, CHT)
16. Distal Radius Fractures (collaborating with the Hand Rehabilitation Section) (Lead Author: Sue Michlovitz, PT, PhD, CHT)
17. Shoulder Instability (collaborating with the Sports Section) (Co-Lead Authors: Amee Seitz, PT, PhD, DPT, OCS and Tim Uhl, PT, ATC, PhD, FNATA)
18. Hip Fracture (collaborating with the Academy on Geriatrics) (Lead Author: Christine McDonough, PT, PhD)
19. Post Concussion Syndrome (collaborating with the Neurology Section and Sports Section) (Lead Author: Karen McCulloh, PT, PhD, MS, NCS)
20. Medical Screening in Management of Common Musculoskeletal Conditions (collaborating with the Federal PT Section) (Lead Author: Todd Davenport, PT, DPT, MPH, OCS)
21. Prevention of Chronic Pain Associated with Common Musculoskeletal Conditions (collaboration with Education Sections) (Lead Author: David Morrise and, PT, PhD)
22. Pelvic Pain (collaboration with Section on Women’s Health) (Lead Author: Meryl Alappattu, DPT, PhD)
23. Thigh Muscle Injury (collaborating with Sports Section) (Lead Authors: Mike Cibulka, DPT, MHS, FAPT, OCS and Lori Bolgla, PT, PhD, MACC, ATC)
24. Work Rehabilitation (Lead Author: Deirdre Daley, DPT) (Group working on a new search based off feedback from APTA librarian)

Planned Clinical Practice Guidelines:
25. Shoulder Rotator Cuff Syndrome (will be initiated follow completion of the Shoulder Instability Guidelines)
Clinical Practice Guidelines Revision Activities:

Completed Revision

1. The Heel Pain / Plantar Fasciitis (Lead Author: RobRoy Martin, PT, PhD, CSCS) - published in November 2014 issue of JOSPT

2. Hip Mobility Deficits / Hip Osteoarthritis (Lead Author: Mike Cibulka, PT, MHS, DPT) – published in June 2017 issue of JOSPT

3. Neck Pain (Lead Author: Peter Blanpied, PT, PhD, OCS, FAAOMPT) – published in July 2017 issue of JOSPT

4. Knee Stability and Movement Coordination Impairments / Knee Ligament Sprain (Lead Author: David Logerstedt PT, PhD, MPT, MA, SCS) – published in November 2017 issue of JOSPT

5. Knee Pain and Mobility Impairments / Meniscal and Articular Cartilage Lesions - Revision (Lead Author: David Logerstedt PT, PhD, MPT, MA, SCS) – published in February 2018 issue of JOSPT

6. Achilles Pain, Stiffness, and Muscle Power Deficits / Midportion Achilles Tendinitis (Lead Author: Robroy Martin, PT, PHD, CSCS) – Published in May 2018 issue of JOSPT

Guidelines in the Revision Process

7. Low Back Pain (Lead Author: Anthony Delitto PT, PhD, FAPTA)
8. Shoulder Adhesive Capsulitis (Lead Author: Ellen Shanley PhD, PT, OCS, CSCS)
9. Ankle Stability and Movement Coordination Impairments/Ankle Ligament Sprain (Sep 2013) (Lead Author: RobRoy Martin, PT, PhD, CSCS)
10. Non-arthritic Hip Joint Pain (Lead Author: Keelan Enseki, MS, PT, OCS, SCS, ATC, CSCS)
11. The Heel Pain / Plantar Fasciitis (Lead Author: RobRoy Martin, PT, PhD, CSCS) - published in November 2014 issue of JOSPT
Guideline Revisions - under review (i.e., authors have submitted a draft to the Coordinator/Editors)
none

Guidelines to initiate the Revision Process in 2018
12. Neck Pain (Lead Author: Jim Elliott, PT, PhD) – published in July 2017 issue of JOSPT
Recent Activities and Action Items

Activity #1 - Developing and piloting sustainable process for updating CPGs
- CPG Editors and Coordinator working on developing a new surveillance method that will help reduce the workload on authors while maintaining methodological standards and rigors. Heel Pain, being already based on systematic review, will be the first CPG update to pilot this process.

Activity #2 - APTA Clinical Practice Guidelines Development Workshop
- Christine McDonough and Sandra Kaplan and were invited to facilitate this workshop, for the 6th time, in mid-August 2018
- The new surveillance process will be presented and rolled out to all groups. We will present on our experience and provide education on this process.

Activity #3 - Continuing Guideline Education
- Brenda Johnson, Guy Simoneau, and Christine McDonough attended the 2018 GIN Conference and other GIN/Guideline.gov webinars as available.
- Brenda and Christine presented a poster at GIN Conference: “A Surveillance Approach to Updating Guidelines: Maintaining Rigor While Enhancing Efficiency” and receive feedback on our surveillance process. Sandra Kaplan and Christine also presented a poster on guideline uptake and use Titled: “CPGs on a Shoestring Budget: Evidence of Impact in Physical Therapy”.

Activity #4 – Vendor Partnership/non dues generating income opportunities
- Piloting/soft launch of the Vendor Partnership Program
  - Update, signed agreement from vendor
- Signed agreement with the Korean Physical Therapy Association (KPTA) to translate, publish, and sell CPGs in a book. The royalties from book sales will be split equally amongst copyright holders. (KPTA finished working on translations) Update: KPTA decided during a recent board meeting to publish the translations on their site and keep them open access so will not distribute or charge members for a physical copy of a book

Activity #5 –2019 ICF-related CSM Presentations
1. Physical Therapy Management of Older Adults with Hip Fracture (CSM 2019 AOPT)
2. CPG to Recognize Health Conditions That May Necessitate Referral to a Physician (CSM 2019 – Federal Section)
3. Clinical Practice Guideline: Shoulder Stability & Movement Coordination Deficits (CSM 2019 AOPT)
4. PT Clinical Practice Guideline: Management Following a Concussive Event (CSM 2019 AOPT)
Activity #6 - 2018 Engaging Volunteer Network
• Email was sent to all Ortho Residency Directors to let them know about opportunities to help with CPG Development. Activities to help with article screening, article appraisal, and data extracting.
  o The call out was a success and we have 17 volunteers to help with the tasks above
  o The effort will continue to build out resources to make CPG development faster and reduce the burden on authors
• October 2018 Update: Second email sent out to all residency directors with another positive response of 8 additional volunteers (with emails still coming in daily) for a total of 25 volunteers. These volunteers are now helping with 8 different CPGs.

Activity #7 - Guideline Implementation Tools
• Work with the ICF-based CPG Implementation Advisory Panel and other stakeholders to facilitate the current and create new "tools" to disseminate for implementing the CPGs - Initiate by substantive discussions at CSM.

Implementation Update:
• Knee Injury Prevention CPG is the first CPG to have supplemental video content:
  Court Version Video:
    New Link: https://youtu.be/zf2Cpozi9Gc
  Field Version Video:
    o New link: https://youtu.be/RfROpda4kvg
• CPG-based Classification system currently being developed and implemented into FOTO
• Short quizzes being developed to promote engagement with members and awareness of certain aspects or recommendations in each of the current CPGs
  o Quizzes complete:
    ▪ https://www.surveymonkey.com/r/HeelPainQuiz (Heel Pain Revision: 1st quiz to launch on both social media and emailed out to membership – n=761)
    ▪ https://www.surveymonkey.com/r/KneeLigFunQuiz (Knee Ligament Revision: emailed out to members n=200)
    ▪ https://www.surveymonkey.com/r/KneeMeniscCartFunQuiz (Knee Meniscal & Cartilage Revision: emailed out to members n=192)

  o High Level Web Traffic:

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(From our 2015-2020 Strategic Plan):
CPG implementation tools available for members, collaborative health care professionals, and patients made available through either the Section or JOSPT portals, and/or partnering vendors. Potential implementation tools include:
Embedded tools, such as instructional videos, within the web-based version of the CPG on www.jospt.org

CPG-related “Patient Perspectives”

CPG presentations at CSM and/or other professional conferences

CPG training iPad / web based app for clinicians

CPG condition-based exercise app for clinicians and patients

CPG-based read for credit products

CPG-based webinars on the foundational knowledge (anatomy, kinesiology, biomechanics, etc) of the CPG condition, which would provide education for students and healthcare professionals learning about guidelines-based care

**Action Item #1 – Streamlined Guideline Development**
Continue efforts on lessening the burden of work to authors. Develop protocols for measures searches, updating revision methods, and pilot two different approaches to compare time saved, measure author satisfaction, and the possibility to engage more members in the CPG development process.

**Action Item #2 – Streamlined Guideline Development**
Formalizing the translation process of CPGs into non-English documents.

**Action Item #3 - Resource development:**
- Working on developing brief summary of post-publication/implementation process for guideline development groups
Practice Committee Report
2019 Board of Directors Meeting
Washington DC

Submitted by:
Kathy Cieslak, Chair
Orthopaedic Section, APTA

Committee Members and Terms:

Kathy Cieslak, Chair 2017-2020 State Government Affairs
Kathleen Geist 2016-2019 Residency/Fellowship
Kathleen Geist 2018-2021 Residency/Fellowship
James Spencer, Vice Chair 2018-2021 Federal Affairs
Marcia Spoto 2018-2021 Payment Policy
Mary Fran DeLaune 2013-2019 Federal Affairs/Dry Needling
Jim Dauber 2016-2019, 2019-2022 Dry Needling,
Scope of Practice, Direct Access
Emma Williams White 2019-2022 Payment Policy/Scope of Practice
Gretchen Johnson 2019-2022 State Government Affairs

Update on Committee Activities for 2018:

STATE GOVERNMENT AFFAIRS
• State Legislative Issues: Members are encouraged to utilize the State Legislative Issue Tracking Tool

Physical Therapy Licensure Compact
• Adopted by 21 states to date
• 5 states are issuing compact privileges – (OR, ND, MO, MS, TN); the others are working to implement the requirements of the compact and start issuing privileges.
• Colorado’s suspension has been lifted
• Legislation pending in one state (PA)
• A map of compact states and their current status can be found here: http://ptcompact.org/ptc-states

Term and Title Protection
• Connecticut: Legislation failed which proposed to permit physical therapists who have a doctorate in physical therapy to use the designation of Doctor of Physical Therapy or D.P.T.
Direct Access
- Legislation introduced in California, which is still pending
- Legislation introduced in New York, which is still pending

Dry Needling
- **Idaho**: On March 22, 2018, Idaho Governor Butch Otter signed legislation permitting physical therapists in the state to perform dry needling if the PT completed minimum education and training standards to be determined by the Idaho Physical Therapy Licensure Board. This legislation’s effective date will be July 1, 2018.
- **South Dakota**: In March 2018, South Dakota Governor Dennis Daugaard signed legislation permitting physical therapists in the state to perform dry needling if the PT successfully completes a course of study in dry needling approved by the South Dakota Board of Medical and Osteopathic Examiners. Requirements for course approvals are in process and are anticipated to be completed prior to the legislation’s effective date of July 1, 2018.
- **Iowa**: The Iowa Court of Appeals upheld a prior decision (2016) by the Iowa District Court (Polk County); supporting the decision by the Iowa Board of Physical and Occupational Therapy that dry needling is within the scope of physical therapy. This decision was in response to a petition filed by the Iowa Association of Oriental Medicine and Acupuncture.
- **Colorado**: In January, 2018, the Colorado State Physical Therapy Board defeated a lawsuit filed by two acupuncture organizations challenging Physical Therapy Board Rule 211 and physical therapists’ ability to perform dry needling.
- Legislation pending in **Massachusetts**, **Wisconsin** and **New Jersey**.

Manipulation/mobilization
- Legislation still pending in North Carolina (HB 187) to remove the referral requirement for spinal manipulation. The bill is through the House, but still needs to be considered in the Senate.

Disability Parking Placard
- On March 13, 2018, Michigan Governor Rick Snyder signed legislation adding physical therapists to the list of providers who may provide certification of a person’s disabling condition for purposes of windshield placards, special registration plates, motor vehicle registration plate tabs, and free parking stickers.

FEDERAL AFFAIRS UPDATE

Use of Students under Medicare
- APTA, AOTA, and ASHA met with CMS on December 11th to discuss the use of therapy students in hospitals, including IRFs. CMS provided written clarification on this topic which can be read here: [http://www.apta.org/Payment/Medicare/Supervision/](http://www.apta.org/Payment/Medicare/Supervision/)

Movement on TRICARE PTA Regulations
- Department of Defense has released a proposed rule adding PTAs and OTAs as TRICARE authorized providers. APTA will be sending an action alert in the new year encouraging individuals to submit comments supporting the rule. More
information and a template letter are available here:
http://www.apta.org/RegulatoryIssues/TakeAction/

- The TRICARE proposed rule:

**APTA & NATA Statement**

- APTA & NATA released a joint statement on our associations increasing collaboration. For more information -
  http://www.apta.org/PTinMotion/News/2018/12/19/APTANATAStatement/

**Functional Limitation Reporting (G-codes)**

- G-code reporting requirements to CMS ended January 1, 2019.
- Of note, other private plans that currently require G-code reporting may not be following CMS's lead, at least not for 2019, so you will need to inquire with each payer.

**Opioid Update**

- In November APTA staff participated in the Academy of Integrative Pain Management Integrative Pain Care Policy Congress. During the meeting APTA staff co-facilitated a workgroup on addressing access to comprehensive integrative pain management. On December 3rd and 4th APTA was a financial and content leader in the National Academy of Sciences meeting, The Role of Nonpharmacological Approaches to Pain Management. The meeting highlighted the important role of nonpharmacological approaches to addressing pain management in the U.S. while addressing the need for Opioid Stewardship.
- APTA launches new advocacy webpage on the opioid epidemic:
  - Check it out here: http://www.apta.org/OpioidEpidemic/

**PTA Payment Differential**

- CMS is establishing two new therapy modifiers to identify the services furnished in whole or in part by PTAs and OTAs. CMS notes that the Bipartisan Budget Act of 2018 requires that claims from all providers of PT and OT services furnished on and after January 1, 2020, will be required to include these new PT- and OT-Assistant therapy modifiers for services furnished in whole or in part by a PTA or OTA. These modifiers will be used in place of the GP and GO modifiers (modifiers currently used to identify PT and OT services furnished under an outpatient plan of care).
- CMS proposes that all services that are furnished “in whole or in part” by a PTA or OTA are subject to the use of the new therapy modifiers. CMS proposes to define “in part” to mean any minute of the outpatient therapy service that is therapeutic in nature, and that is provided by the PTA or OTA when acting as an extension of the therapist. Thus, a service furnished “in part” by a therapy assistant would not include a service for which the PTA or OTA furnished only non-therapeutic services that others without the PTA’s or OTA’s training can do, such as scheduling the next appointment, greeting and gowning the patient, preparing or cleaning the room.
- APTA and AOTA met with CMS staff on August 15 to discuss the therapy
assistant modifier and the 85% payment differential set to go into effect in 2022. APTA and AOTA also are securing a letter from Congress to the General Accountability Office to gain information on the potential impact of the differential to patient access in rural and underserved areas. APTA will submit comments on the CY 2019 fee schedule/QPP proposed rule before September 10 deadline.

**Stark Law Reform**
- APTA met with House Ways & Means majority and minority staff following the July 17 hearing *Modernizing Stark Law to Ensure the Successful Transition from Volume to Value in the Medicare Program,* that examined options to reform the Physician Self-Referral Law (Stark Law) to shift Medicare to a value-based system. APTA submitted comments in response to CMS’s Request for Information on suggestions for reforms to Stark.

**PAYMENT POLICY AND REIMBURSEMENT**

**Merit-Based Incentive Payment System (MIPS) Summary**
- **General Information**
  The most significant change in the payment arena is the inclusion of physical therapists in the merit-based incentive payment system (MIPS). Beginning January 1, 2019, physical therapists in outpatient practice settings will be included in this value-based payment system under Medicare. This program is replacing the old Physician Quality Payment System (PQRS). MIPS were implemented for physicians in 2017. CMS, in its proposed physician fee schedule for 2019, requires some physical therapists to participate in MIPS.

  MIPS entails providers reporting in 4 areas: (1) Quality, (2) Advancing Care Information (replacing the old meaningful use program), (3) Clinical Practice Improvement, and (4) Cost. A total score is derived from each of the 4 categories, and the score is then used to determine whether a payment penalty or incentive is awarded, or if no payment adjustment occurs. Initially, physical therapists will only report in 2 areas: quality (which accounts for the majority of points), and clinical practice improvement.

  It is important to note that the current estimate is that only approximately 5% of physical therapists will be mandated to participate.

- **Eligibility**
  MIPS only applies to physical therapists in private practice.
  So how is eligibility determined? This is somewhat complex, but here is a brief summary:
  - Eligibility is dependent on both the number of new Medicare patients seen by an individual physical therapist, and the total Medicare charges over a one-year period.
  - The low volume thresholds for participation are: participants must see a minimum of 200 unique Medicare part B beneficiaries per year, render at least $90,000.00 in charges per year under Medicare part B, and provide a minimum of 200 Medicare services per year to Medicare enrollees.
  - Physical therapy group practices exceeding the low volume threshold will also be eligible to participate. If a group participates, all providers in the group must submit data and participate fully in the program.
• Individuals and groups who meet or exceed one or both of the low volume thresholds are eligible to opt in.
• Individuals and groups who do not exceed the low volume threshold and do not want to opt in can choose to voluntarily report, however this will not result in any payment adjustment

• Payment Adjustments
  • For physical therapists and groups who meet the low volume threshold, lack of participation will result in up to a 7% payment penalty. On the other hand, up to a 7% payment incentive will be awarded to those who meet the reporting requirements.
  • As with PQRS, the payment adjustments will occur 2 years following the reporting period.
  • It is important to note that no other Medicare fee schedule changes will occur from 2020 through 2025.
  • Payment adjustments are based upon performance thresholds: out of a total score of 100 points, 30 points is the break-even point whereby there is a neutral payment adjustment, greater or equal to 80 points will result in a positive adjustment of 7%, and less or equal to 7.5 points will result in a negative payment adjustment of 7%.

• Quality Measures
  The MIPS quality measures replace the PQRS and quality portion of the value modifier. MIPS quality measures include the PQRS measures, and additionally will incorporate outcomes registry measures (i.e. FOTO, PT Outcomes Registry), and new specialty specific measure sets (yet to be determined for PT). CMS plans to retire measures that have high performance rates, and will eventually replace these with more outcomes measures.

• Claims Reporting
  Starting in 2019, practices with more than 15 PT MIPS eligible clinicians will need to report via EMR systems. Claims-based reporting will not be permitted.

For more information, please visit the APTA MIPS website at: [http://www.apta.org/MIPS/](http://www.apta.org/MIPS/)

Aetna Pre-authorization Program
On September 1, 2018, Aetna rolled out a new pre-authorization program in 4 states: Delaware, New York, Pennsylvania and West Virginia. Although the respective state chapters were informed of the program, APTA was not informed prior to the start date. APTA subsequently became involved through communications with the respective chapters.

Aetna has selected Magellan/National Imaging Association (NIA) to administer the utilization management program. They have provided training to physical therapy providers and administrative staff members, although not universally, in the states impacted by the program. Despite this training, there have been many problems encountered by physical therapists with this pre-authorization program. In particular, Aetna is requiring authorization for units of care instead of the usual practice of
authorizing visits. As a result, there have been delays in medically necessary treatment as well as denials of patient care. APTA staff members have been working diligently with chapter representatives to address this issue. Despite multiple phone conferences, there have been no significant changes to the program. Organized and administered by the Delaware, New York, Pennsylvania and West Virginia chapters, a survey went out to members at the end of 2018 in order to collect data on how the program is impacting patient care. This data will be shared with Aetna in early 2019.

APTA staff is scheduling a face-to-face meeting with Aetna at their headquarters in Pennsylvania in early March, 2019. State representatives will also be present.

Aetna has indicated that this program eventually will be implemented in every state. New Jersey has been added as of January 1, 2019.

Multiple Procedure Payment Reduction (MPPR)

- CMS had updated the multiple procedure payment reduction (MPPR) calculator which incorporates the 50% multiple procedural payment reduction for values under the Medicare physician fee schedule. The 2019 calculator also applies the overall 2% sequestration cut on Medicare payments.

MANIPULATION/MOBILIZATION

- The Manipulation Education Manual draft has been completed. It is currently being reviewed prior to submitting to APTA.

ADVOCACY

Advocacy Grants

- The Academy of Orthopaedic Physical Therapy provided funding for four advocacy grants of $5,000 each in 2018:
  - California Chapter of the American Physical Therapy Association
  - Florida Chapter of the American Physical Therapy Association
  - Idaho Chapter of the American Physical Therapy Association
  - Texas Chapter of the American Physical Therapy Association

RESIDENCY AND FELLOWSHIP

- Currently 106 Orthopaedic Accredited Residency programs are listed on the American Board of Physical Therapy Residency and Fellowship Education (ABPTRFE) Directory of Residency Programs. In addition, 8 Orthopaedic residency candidate programs and 13 developing programs are listed on the ABPTRFE residency directory.
- Currently 32 Orthopaedic Manual Physical Therapy Fellowship Programs are listed on ABPTRFE directory. In addition 3 more are in candidate status and 3 are in developing program status.
- The committee engaged the PR committee to disseminate information on grants offered for developing residency and fellowship programs. Up to 3 grants ($1,850) are available annually. One grant was approved in January, 2018.
Data on grant recipients for the past 3 years:
2018: 1 grant: $1,850
2017: None
2016: None

ORF-SIG Activities (See ORF-SIG Report for details):
- Strategic Planning
- ABPTRFE
  - New Quality Standards
  - Annual Continuous Improvement Report
- CSM Pre-Con Course: “Clinical Excellence and Quality Standards in Residency/Fellowship Education” Kirk Bentzen, Kathleen Geist, Aimee Klein, Tara Jo Manal, Matt Haberl and Eric Robertson.
- Participation in Education Academy Residency and Fellowship Special Interest Group (ERFSIG)
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<td>29.1.1 Overview of the Relationship Between Pain and Movement - Elizabeth Bloom</td>
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<td>file was returned to the author for revisions; needs until February 1, 2019 to turn</td>
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<tr>
<td>29.2.2 Overview of a Movement System Impairment Approach Toward Diagnosis and Management of Painful Conditions - Carrie Hall, Dianne Allen (SME: Barbara Norton)</td>
<td>due 5.25.18</td>
<td>final draft has been received and will be reviewed by the Editor</td>
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<td>29.2.3 Movement Systems Approach to Diagnosis and Treatment of the Lumbo-Pelvic-Hip Complex - Carrie Hall (SME: Nancy Bloom)</td>
<td>due 5.25.18</td>
<td>file needs to be copyedited</td>
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<td>29.2.4 Movement Systems Approach to Diagnosis and Treatment of the Tibiofemoral Joint - Sylvia Szuppon</td>
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<td>29.2.6 Therapeutic Strategies for Improving Outcomes - Lori Thein Brody</td>
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<td>29.2.1 Intro to Neurophysiology Concepts Underlying Muscle Function, Injury and Recovery &amp; Treatment for Orthopaedic Injury - Jean-Sebastian Roy et al</td>
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<td>reminder sent; author has a good 40 pages written and plans to meet his deadline; delayed to January 11</td>
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<td>29.2.2 Joint Mobility &amp; Stability Strategies for the Shoulder/TOS - Mary Fisher, Matt Day</td>
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<td>29.2.5 Joint Mobility &amp; Stability Strategies for the Ankle - John Fraser, Jay Hertel</td>
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<td>29.2.6 Understanding and Managing Tunnel Syndromes for the Lower Extremity - Ben Kivlan, RobRoy Martin (SME: Jeevan Pandya)</td>
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<td>30.1.1 Common Injuries and Care - Doug Adams</td>
<td>due 2.1.19</td>
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<tr>
<td>30.1.2 Running Footwear - Dana Webb, Clay Holton, Angela Stanglano</td>
<td>due 2.15.19</td>
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<td>30.1.3 Care for the Competitive Runner vs the Recreational Runner - Colin Gundling</td>
<td>due 3.1.19</td>
<td></td>
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<tr>
<td>30.1.4 The Adolescent Runner - Michelle Fearihelle</td>
<td>due 3.15.19</td>
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<tr>
<td>30.1.5 Injury Prevention - David Kempfert</td>
<td>due 3.29.19</td>
<td></td>
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<tr>
<td>30.1.6 Running Biomechanics &amp; Energetics - Janice Loudon</td>
<td>due 4.12.19</td>
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<td>30.2, Tissue Tolerances</td>
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<td>All documents have been sent for signatures</td>
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<td>30.2.1 Muscle Tendon/Unit - Dhinu Jayaseelan</td>
<td>due 5.3.19</td>
<td></td>
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<tr>
<td>30.2.2 Ligament &amp; Capsule - Katherine Wilford</td>
<td>due 5.17.19</td>
<td></td>
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<td>30.2.3 Articular Cartilage &amp; Bone - Ann Smith</td>
<td>due 5.31.19</td>
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<td>30.3, Special Topics</td>
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<td>All documents except for monograph #5 have been sent for signatures</td>
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<td>30.3.1 Nutrition - Leslie Bonci</td>
<td>due 8.2.19</td>
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<td>30.3.2 Sleep &amp; Performance - Kristinn Heinrichs (Italy)</td>
<td>due 8.16.19</td>
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<td>30.3.3 Recovery Modalities - Johnny Owens</td>
<td>due 8.30.19</td>
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<td>30.3.4 Mental Techniques &amp; Performance - Scott Martin</td>
<td>due 9.13.19</td>
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<td>30.3.5 TBD: Proposed: Emerging Technologies to Monitor Performance (wearables)</td>
<td>due 9.27.19</td>
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<td>30.3.6 Training Methodologies for Runners - Jerry Monaco, Richard Hubler</td>
<td>due 10.4.19</td>
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<td>Miscellaneous</td>
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<td>Submitted Author Vetting Scale for BOD Review/Approval</td>
<td>submitted to Aimee on 10.19.18: before the December 1 deadline</td>
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<td>Review of all 2020 ISC Authors who answered the Call</td>
<td>CH reviewed all submissions 10.31.18 (~30) MB completed 11.4.18, participated in conference call to discuss selection process</td>
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Public Relations Committee Report  
Board of Directors Meeting, CSM 2019  

Submitted by:  
Academy Staff 
Academy of Orthopaedic Physical Therapy, APTA  

Committee Members and Terms:  
Adrian Miranda - Chair  2019-2022  
Tyler Shultz – Section Historian  2016-2019  
William Stokes  2018-2020  
Ryan Maddrey  2018-2020  
Derek Charles  2018-2021  
Kelsea Weber – Student Member  2018-2021 (transition to professional)  
Avery Gerstenberger - Marketing Intern  
Scott Davis – Board Liaison  

Review of 2018 Activities:  
The PR Committee Chair has worked with our Board Liaison, Academy staff, and other Academy leadership to complete our mission. Our accomplishments from 2018 include:  

Member Engagement  
- Completed three committee meetings  
- The Academy’s Facebook page has 7,823 likes, an increase from 7,583 likes at last report (September ‘18)  
  - Growth: Increase from 5,148 likes 2 years ago  
- Twitter page has 7,467 followers, up from 6,671 (September ‘18)  
  - Growth: Increase from 3,513 likes 2 years ago  
- Instagram page has 563 followers, an increase from 243 followers at last report (September ‘18)  
- Private FB groups for EIG and SIGs continue to engage members and grow  

Streamlined Social Media  
- The Academy has invested in the online scheduling program called Hootsuite to schedule and post on all of the Academy’s social media platforms (Instagram, Facebook, and Twitter) at one time.  
  - Social Media posts have been designated weekly Tuesdays, Thursdays, and Saturdays  
- The Public Relations Committee has selected members to create and share content with the Marketing Intern on research, JOSPT articles, and other information deemed valuable to our membership.
As the Marketing Intern, Avery Gerstenberger, has taken on the responsibility of coordinating social media with all of the Academy staff (highlighting conferences, Independent Study Courses, Clinical Practice Guidelines, benefits, and other memos). He also designs and creates most of the graphics used on the social media platforms.

#WhyAOPT Campaign

- The Campaign will begin at CSM and highlight specific members and why they chose to become members of the Academy of Orthopaedic Physical Therapy.
  - Interviews, Photos, and Videos will be taken at the AOPT Exhibit Hall booth throughout the week.
  - Interviewees will use AOPT branded white boards to write out why they have become and remained members.
  - This content will be posted on the Academy’s social media platforms using the hashtag #WhyAOPT

45th Anniversary

- Updated 45th Anniversary logos were created by Vendi Advertising
  - Logos without the “Leaders. Innovators. Changemakers.” tagline
- Various Academy photos from the past will be integrated into social media posts throughout the year
- A 45th Anniversary Collage was created to be displayed at all conferences throughout the year

Giveaways for CSM and AOM

- Most conference giveaways include the 45th Anniversary branding
- Items include:
  - Pop Sockets
  - Luggage Tags
  - Pens
  - Beanies
  - Lip Balm
  - Adhesive Phone Wallets

Future Projects:

- Continue to consult/work on increased social media presence— still working on improving consistency of posts
- Utilize Facebook live as a way to engage with membership and the public
- Push multi-media efforts (ie. photos, videos of Section happenings)
Nominating Committee Report  
CSM 2019

Submitted by:  
Carol Courtney, PT, PhD, ATC  
AOPT, APTA

Committee Members and Terms:
Chair:  
Carol Courtney 2016 - 2019

Members:
Brian Eckenrode 2017 – 2020  
Michael Bade 2018 – 2021

Update on Committee Activities since CSM 2018:

1. The following individuals agreed to run for office for the 2019 election:

President Candidates:

• Joseph Donnelly (elected)

Director Candidates:

• Tara Jo Manal (elected)  
• Daniel Curtis  
• Beth Jones  
• Tess Vaughn

Nominating Committee Member Candidates:

• Stephanie Di Stasi (elected)  
• Adam Walsh, PT  
• Nancy Robnett Durban  
• Darren Calley  
• Caleb O. Johnson

2. Election Counts

• Total number of ballots mailed (electronic & USPS): 18,665  
• Total number of votes cast: 1,157  
• Number of votes required for valid election: 933  
• Total number of illegal votes: 0

3. Offices Open for Election in 2020

• Vice President  
• Non-officer Director #3  
• Nominating Committee Member

4. Incoming Nominating Committee Chair

• Brian Eckenrode
Occupational Health SIG (OHSIG)
Academy of Orthopaedic Physical Therapy, APTA

Report to the Board of Directors
February 2019
Submitted by: Lorena Pettet Payne, President

SIG Members and Terms:

Lorena Pettet Payne, President
President-elect: Rick Wickstrom 2019-2022
Brian Murphy, Vice President/Ed Chair 2017-2020
Lori Deal, Nominating Chair 2018-2021
Frances Kistner, Research Chair 2017-2020

Discussion Items for the Board: None

Motions for the Board: None

Strategic Planning Updates:

Goal: Standards of Practice

Objective 1: Disseminate ICF-based clinical Practice Guidelines (CPG)
The Work Rehab Clinical Guideline has been submitted to the Academy of Orthopaedic Physical Therapy CPG development group. The group has suggested a new literature review. The initial literature reviews included “physical therapy” and “physical therapist” in search criteria. The search criteria is modified with the third literature search complete. The OHSIG-CPG development group will be working January 22-23, 2019 to place information into the APTA database. The inclusion of any new data will be completed by June 2019.

Objective 2: Deliver educational content
Two webinars were presented on functional assessment in the fall of 2018 and have been made available to members on the OHSIG web page.

Goal: Public Awareness

Objective 3: Promote the Section mission, vision and resources

- The OHSIG will continue to advise the APTA on their initiative, “Working with Employers toward Population Health.”
- A meeting with OSHA acting director Loren Sweatt, Douglas Kalinowski, director of cooperative and state programs, and four other directors took place on October 2, 2018. Representing APTA and OHSIG were APTA staff Justin Elliott, Kara Gainer and Wanda Evans, members Curt DeWeese and Lorena Pettet Payne. The purpose of this meeting was to introduce the new leadership at OSHA to APTA and the OHSIG.
• A second meeting has been requested with the medical directors of OSHA to discuss specific conclusions made in past letters of determination. This is anticipated to be completed in February, 2019.

**Goal: Advocacy**

**Objective 1: Formal communication process to support scope of practice issues**
Communication between APTA payment policy staff addressing workers compensation and OHSIG president continues. See public awareness, Goal 3 above.

**Objective 2: Disseminate payment policy information to members**
OHSIG continues quarterly emails to its members which includes payment policy related to worker compensation.

**Goal: Member Engagement**

**Objective 3: Strategies to enhance recruitment, retention, engagement**
The OHSIG will introduce mentoring program during CSM 2019.
Foot and Ankle SIG (FASIG) Report
2018 October Board of Directors Meeting

Submitted by:
Christopher Neville, President
Academy of Orthopaedic PT, APTA

SIG Members and Terms:

- Christopher Neville, President 2016-2019 Re-elected 2019-2022
- Jeff Houck, Vice President/Ed Chair 2017-2020
- Eric Folmar, Nominating Chair 2016-2019

Update on SIG Activities since February 2018 Report:

President Update - The updates below are submitted to provide an overview of the work completed by the FASIG since the October 2018 Board report. The report of activities is organized using the FASIG strategic plan which was finalized in February 2018. The FASIG strategic plan was formulated to be consistent with the Academy of Orthopedic Physical Therapy strategic plan but directed at FASIG activities. Only pertinent activities for each of the major FASIG goals are included below. The FASIG strategic plan is also included for reference.

Goal 1: Research will ensure foot and ankle rehabilitation practice is current and evidence based.

- Strategic Goal 1.1.b: Attendance and collaboration with the American Orthopedic Foot and Ankle Society (AOFAS) is ongoing as they plan for the 2019 Summer meeting (September 2019; Chicago)
- Strategic Goal 1.3.b: Ongoing: disseminate literature summaries via the Facebook page
- Strategic Goal 1.2.a: A travel award for research training, skill acquisition, will be considered for 2019. The process and funding for this will be discussed at CSM 2019.

Goal 2: Develop and distribute resources that promote the optimal utilization of foot and ankle content in PT practice.

- A decision to engage FASIG in the development of a Foot and Ankle Fellowship occurred and the beginning stage planning has begun. A draft survey to be used for the development of the DFP has been completed and initial input will be gathered at CSM 2019. Further work on this effort including task force assignment and “next-steps” will be completed in the first quarter of 2019.
Initiatives to begin drafting patient handouts and to work with existing and developing residency and fellowship opportunities in Foot and Ankle areas are a target for work during 2019. Specifically, 2.3.a – to develop practitioner and patient centered education material.

**Goal 3: FASIG will support relationships to meet strategic objectives.**

- Strategic Goal 3.1.b: giving out FASIG awards was approved at our membership meeting in February 2018 – Our first Lifetime Achievement Award will be given out at CSM 2019.

- Strategic Goal 3.1.c – Develop promotional *information decks* that can be used by schools/ APTA Chapters to disseminate FASIG activities and aims – slated to be considered in 2019.

**Discussion Items for the Board:**

NONE

**Motions for the Board:**

NONE
MISSION: The mission of the Foot and Ankle Special Interest Group (FASIG) is to promote excellence in orthopaedic foot and ankle physical therapy.

VISION: The Foot and Ankle Special Interest Group (FASIG) will be a world leader in advancing orthopaedic foot and ankle physical therapy.

**Goal 1: Research will ensure foot and ankle rehabilitation practice is current and evidence based.**

Objectives/Initiatives:

1. **FASIG will support and engage in Research**
   a. Provide to the Orthopedic Section each year the names of 2 FASIG members to serve as foot and ankle specialist content reviewers for grants, abstracts, meeting planning, and other related tasks
   b. Create and/or disseminate via email blast one opportunity for foot and ankle conference presentations each year.
   c. Engage a task force to identify research priorities that will help FASIG guide funding decisions by the end of 2018.

2. **FASIG will improve the level of competitiveness of foot and ankle researchers within our membership.**
   a. Develop and award one “traveling award” to support researchers to advance their skills or connect with another researcher/lab.

3. **FASIG will provide activities that translate evidence into PT Practice**
   a. Complete 1 webinar each year using the Orthopaedic Section webinar platform to disseminate current evidence into clinical practice for our members.
   b. Develop a literature dissemination strategy (email, RSS feed, social media) in 2018 and initiate strategy by end of 2018

**Goal 2: Develop and distribute resources that promote the optimal utilization of foot and ankle content in PT practice.**

Objectives/Initiatives:

1. **FASIG will identify and address practice related challenges**
   a. In 2018 develop a task force to query members regarding clinical challenges to allow rating and prioritizing

2. **Promote excellence in foot and ankle practice.**
Develop a survey in 2018 to assess if entry-level standards previously developed are being used.

In the next 3 years create a framework for establishing “expert practice” for foot and ankle, including the training, fellowships, and content.

Develop a draft curriculum (standards and terminology) to support “foot and ankle specialist” by the end of 2018

3. **Develop practitioner and patient-centered education materials.**
   a. Produce one patient hand-out that can be disseminated to our membership to aid in translating new evidence into clinical practice

**Goal 3: FASIG will support relationships to meet strategic objectives.**

Objectives/ Initiatives:

1. **FASIG will engage with its members**
   a. Quarterly newsletters will be sent to membership to maintain open communication
   b. Establish FASIG Awards for recognition of achievement within the SIG in 2018 for the first awards to be giving in 2019 (consider research, practice, service to SIG, student)
   c. Providing information to schools (PT/PTA)
      i. Develop promotional “info decks” that can be used by schools/ Chapters

2. **FASIG will engage with the Orthopaedic Section**
   a. FASIG will identify and promote FASIG programming for annual meetings such as CSM.
   b. Submissions to Orthopaedic Practice will occur as requested and scheduled.
   c. FASIG will engage with other SIG’s or Orthopaedic Section initiatives or programming as requested.

3. **FASIG will engage with the wider APTA and its constituents**
   a. Collaborate with sections
      i. Develop task force to establish contacts with pertinent sections/ SIGs for the purpose of: info sharing, research, practice standards, fellowship establishment in the next 2 years
   b. Chapter FASIG liaisons
      i. Identify and develop relationships to establish a FASIG liaison at the APTA Chapter level in 2018.

4. **FASIG will engage with all external relationships to meet its goals.**
   a. Evaluate external relationships on an on-going and as needed basis.
      i. Use FASIG leadership with the Section Board Liaison to evaluate all new and ongoing relationships with external professional organizations
PSIG Board Members and Terms
Carolyn McManus, President 2017 - 2020
Mark Shepherd, Vice President/Ed Chair 2018 - 2021
Dana Dailey, Research Chair 2017 - 2020
Craig Wassinger, Practice Chair 2018 - 2021
Derrick Sueki, Public Relations Chair 2018 - 2021
Michelle Layton, Membership Chair 2018 - 2021
Tasha Parman, Social Media Chair 2017 - 2020
Jacob Thorp, Nominating Committee Chair 2016 - 2019
Brett Nielsen, Nominating Committee 2018 - 2021
Colleen Louw, Nominating Committee 2018 – 2020

Update on Activities Since October 2018

Strategic Plan Updates

Goal 1. Practice: Identify and promote best practice standards for pain management by physical therapy professionals.

Objective 1: Identify and disseminate information on evidence-based practice for pain diagnosis and treatment by physical therapy professionals

Action Items:

1. Provide monthly emails to members and website posts on pain-related research and clinical pearl topics
   - Volunteer Bill Rubine and I coordinated Clinical Pearl emails October Topic, submitted by PSIG member Nancy Durban, MPT: Talking about Pain Using Analogies and Metaphors and the December Topic submitted by me: Coaching the Worrywart.

2. Solicit manuscripts on pain-related topics for OPTP
   - Carolyn wrote an article on Chronic Pain, Chronic Stress and the Corticolimbic System for the January issue of OPTP.
   - Carolyn received a commitment from PSIG member Janet Carscadden, DPT, OCS to write an article for the July 2019 OPTP issue.
3. Involve members in the Academy of Orthopaedic PT ICF-based Clinical Practice Guidelines process for pain diagnosis and treatment
   - Pain SIG Practice Chair Craig Wassinger continues his active involvement in the development of CPG for pain diagnosis and treatment. The CPG team has been in the manuscript review process and will meet prior to CSM to begin writing the document.

4. Develop a pathway for clinical specialization in the diagnosis and management of pain
   - Pain SIG Public Relations Chair Derrick Sueki has taken steps to initiate this process. He contacted the director of the Specialization process, Derek Stepp and Board member, Marie Johansson, to discuss our interest and received the Specialization Application packet. Derek is now leading the effort to fulfill its requirements and is currently collecting letters from the public and healthcare professional supporting the need for a pain specialization tract. Next steps include creating a survey polling PTs regarding the need for a specialization tract and placing the results into the application document. Derek Stepp, the director of the Specialization process, has promised to assign a Board member to our group to help guide us through the process.

Objective 2: Provide high quality pain management education to physical therapy professionals

Action Items:

1. Provide education sessions at CSM
   - Education Chair Mark Shepherd and Derrick Sueki have been preparing and will facilitate a panel at CSM 2019, Pain Talks: Conversations with Pain Science Leaders on the Future of the Field. At the time of this writing, a Facebook live session of this program is being discussed and planned.
   - Mark Shepherd is leading the effort to develop a 2-day pre-conference course for CSM 2020 regarding the IASP physical therapy pain curriculum guidelines. Carol Courtney, Derrick Sueki, Craig Wassinger and Carolyn McManus have been included in this planning.

2. Develop an online pain education webinar series
   - Mark Shepherd is coordinating this program and is planning a Winter 2019 webinar with Kathleen Sluka on the topic: A Mechanistic Based Approach to Physical Therapy Pain Management

Goal 2. Pain Education: Transform society’s understanding of pain and the role of physical therapy professionals in the management of pain

Objective 1: Promote inclusion of pain science education in entry-level PT education

Action Items:

4. Develop a continuing education course that “educates the educator” on inclusion of IASP guidelines into every DPT program in the US
   - The 2-day pre-conference course being developed for CSM2020 by Mark Shepherd and colleagues noted above is envisioned as a template for a continuing education course that “educates the educator” and could be offered throughout the country.
**GOAL 3. Research:** Promote specific physical therapy research funding initiatives that align with the Federal Pain Research Strategy and reflect the national urgency to effectively address the burden of pain.
Nothing to report

**4. Advocacy:** Educate funding agencies, government officials and payors about the role and expertise of physical therapists in the non-pharmacological approach to pain management, prevention of opioid use, and treatment of opioid use disorder.

*Objective 1: Be a resource for the APTA or other agencies for pain outreach.*

**Action Items**

2. Recommend liaison(s)/content expert(s) to APTA to help develop initiatives focused on the National Pain Strategy, Opioid Epidemic, and Federal Pain Research Strategy, e.g. #Choose PT
   - Craig Wassinger is serving as the PSIG representative on an APTA Pain Management Workgroup led by Hadiya Green Guerrero, PT, DPT, Senior Practice Specialist at the APTA.
   - Kathleen Sluka is serving on an NIH workshop panel in animal models of pain
   - Kathleen Sluka is serving on a National Academy of Science work group on temporomandibular disorder
   - Steve George was on a panel in December for National Academy of Science workgroup on non-pharmacological treatments for pain
   - Steve George has been nominated for consideration to serve on the Department of Health and Human Services Interagency Pain Research Coordinating Committee (IPRCC)
   - Several PSIG Board members provided comments to Kara Gaynor in response to her request for comments to be provided to the White House National Science and Technology Council on its “Draft Report of the Fast Track Action Committee (FTAC) on Health Science and Technology Response to the Opioid Crisis.”

**5. Engagement:** Increase APTA member engagement with PSIG and partner with other professional associations that have a goal of advancing pain education, research, practice and advocacy.

*Objective 1: Promote membership and active engagement by members in PSIG projects and activities*

**Action Items**

1. Include an announcement about the PSIG in introductory remarks at all Academy of Orthopaedic PT CSM and Annual Orthopaedic Meeting programming that involve the topic of pain
   - Mark Shepherd will include identifying and describing the role of the PSIG in his opening remarks at CSM 2019 programming

2. Invite members to participate in PSIG ongoing activities and special projects
   - PSIG members have been invited to contribute research and clinical pearl topics for monthly emails and articles for the PSIG section of OPTP.
Objective 2: Broaden access to PSIG to reach other SIG and Academy members

Action Items
1. Collaborate with the Academy of Orthopaedic PT Leadership to expand access to the PMSIG by other Academy/Section members
   - AOPT President Steve McDavitt continues to lead these efforts

Objective 3: Partner with other professional associations that have a goal of advancing pain education, research, practice and advocacy.

Action Items
1. Appoint and have available liaisons for key professional organizations involved in pain (nationally, internationally) that will represent the role of physical therapy in pain management (IASP, APS, AIPM)
   - Steve George and Kathleen Sluka met with IASP President, Secretary and Councilor at the IASP World Congress in September 2018 to begin a discussion of partnering opportunities. This discussion is being continued by APTA CEO Justin Moore.
Performing Arts SIG (PASIG) Report
2019 January BOD Meeting
La Crosse, WI

Submitted by:
Annette Karim, President
Academy of Orthopaedic Physical Therapy, APTA

SIG Members and Terms:

<table>
<thead>
<tr>
<th>Name</th>
<th>Term</th>
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<tbody>
<tr>
<td>Annette Karim, President</td>
<td>2017-2020</td>
</tr>
<tr>
<td>Lori Michener, Academy Board Liaison</td>
<td>2017-2020</td>
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<tr>
<td>Rosie Canizares, Vice President/ Education Chair</td>
<td>2016-2019</td>
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<tr>
<td>Jessica Fulton, Nominating Committee Chair</td>
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<td>Brooke Winder, Nominating Committee</td>
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<td>Marisa Hentis, Nominating Committee</td>
<td>2018-2021</td>
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<tr>
<td>Elizabeth Chesarek, Membership Chair</td>
<td>2018-2020</td>
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<tr>
<td>Sarah Edery-Altas, Research Chair</td>
<td>2018-2020</td>
</tr>
<tr>
<td>Laurel Abbruzzese, Fellowship Taskforce Chair</td>
<td>2018-2020</td>
</tr>
<tr>
<td>Dawn Muci, Public Relations Chair</td>
<td>2018-2020</td>
</tr>
<tr>
<td>Amanda Blackmon, Dancer Screening Chair</td>
<td>2018-2020</td>
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<tr>
<td>Anna Saunders, Scholarship Chair</td>
<td>2017-2019</td>
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<td>Janice Ying, ISC Chair</td>
<td>2017-2019</td>
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<tr>
<td>Megan Poll, Secretary</td>
<td>2017-2019</td>
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<tr>
<td>Andrea Lasner, Practice Chair</td>
<td>2018-2020</td>
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<tr>
<td>Marissa Schaeffer, Outreach Chair</td>
<td>2018-2020</td>
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Update on SIG Activities since June 2018:

CSM 2019

The PASIG will provide Academy of Orthopaedic Physical Therapy programming for CSM 2019

Preconference:

- On January 22 & 23, 2019, the Performing Arts and Imaging Special Interest Groups of the Academy of Orthopaedic Physical Therapy, APTA will be jointly sponsoring a 2-day course in Washington, DC entitled "Musculoskeletal Sonography of the Lower Limb Focused in Sport & Performing Arts." Presenters will include Megan Poll, Doug White, Marika Molnar, and Scott Epsley, who have extensive experience in use of real time ultrasound imagery augmenting the clinical examination in athletes and performing artists.

Main Session:

- Our main programming will take place on January 24th at 8 AM. "Olympian to Novice: Using Evidenced-Based Screening for the Performing Artist" will be the PASIG educational session during CSM, presented by Kristen Schuyten, who was the physical therapist who traveled to PyeongChang for the 2018 Olympics with Team USA for Figure Skating.

Meetings:

- The PASIG membership meeting, Outreach Committee, Fellowship Taskforce, and Dancer Screening Q&A will also be conducted at CSM 2019.

Post-conference:

- The PASIG will co-sponsor an Emergency Medical Response Course January 27-28 at the University of Delaware.

Finances

Encumbered: $1,306.00
2019 Non-rolling balance: $2,150.00

OPTP

The PASIG has contributed to the PASIG pages with three new articles.

- Volume 30, Number 3: From the Inside of the Performing Arts Fellowship by Tessa Kasmar, PT, DPT, Performing Arts Fellow-in-Training, The Ohio State University Wexner Medical Center
• Volume 30, Number 4: Playing-related Musculoskeletal Pain among College-level Music Students Before and After an Informative Lecture by a Physical Therapist by Caryn Pierce, PT, DScPT, JSCC, BCSI, MTC; Lori Walton, PT, DPT, PhD, MPH(s); Elizabeth Oakley, PT, DPT, DHSc; Rose Caceres, PT, DPT; Hilary Sadow, PT, DPT; Kirstin Yoder, PT, DPT

• Volume 31, Number 1: Ischial Tuberosity Avulsion Fracture in an Adolescent Dancer: A Case Report by Megin Sabo John, PT, DPT, OCS, Minnesota Dance Medicine Foundation

New Volunteers

• Marissa Schaeffer has been appointed Outreach Chair. She has 12 committee members. She is currently working on creating relationships with performing arts organizations with the goal of networking, access to performing arts physical therapists and public education on what the PASIG does.

Membership

• There are currently 675 PASIG members. The PASIG Twitter handle is, “Performing Arts PT”. There are 624 followers. The PASIG also has a closed Facebook page, “Performing Arts Special Interest Group (PASIG)” with 187 members.

• This year we will distribute PASIG swag at our membership meeting. These are samples of our swag:

Fellowship

• The Performing Arts Description of Fellowship Practice (DFP) was approved by the American Board of Physical Therapy Residency and Fellowship Education (ABPTFRE). The DFP is now available on the ABPTFRE website. [http://www.abptrfe.org/uploadedFiles/ABPTRFEorg/For_Programs/DFPs/ABPTRFE_PerformingArtsFellowshipDFP.pdf]
Awards

- The PASIG will award a $1,000 Lifetime Achievement Award to Marika Molnar at CSM 2019. (pending BOD approval)
- CSM 2019 student award recipient is Alyssa Anderson for her study, “Flexor Hallucis Longus Tendon Morphology in Dancers With and Without Tendinopathy.”
  alyssaa@usc.edu

Sponsorship

- The PASIG sponsored IADMS 2018 with Mandy Blackmon and Andrea Lasner representing us. We will continue to sponsor at IADMS from our non-encumbered funds.

Representation

- The PASIG was represented at the National Student Conclave 2018. We thank the AOPT for the opportunity. Rosie Canizares was our representative.
- Our officers will wear PASIG/AOPT swag wear at CSM 2019. We may consider selling our swag wear as pre-paid items.

Strategic Planning Updates:

- The PASIG has continued to meet during a summer conference call and will meet at CSM 2019. Janet Bezner has been our facilitator. The leadership has been working on the document via a Google document. The current document is shown at the end of this report.

Motions for the Board:

Motion from Lori Michener our AOPT liaison regarding the Lifetime Achievement Award.

Thank you for your consideration!
Performing Arts Special Interest Group
Academy of Orthopaedic Physical Therapy
American Physical Therapy Association
Strategic Plan (update, January 2019)

Mission Statement

The mission of the Performing Arts Special Interest Group (PASIG) is to be the leading physical therapy resource to the performing arts community.

Vision Statement

Advancing knowledge and optimizing movement and health of the performing arts community through orthopaedic physical therapist practice through the following guiding principles:

· Identity
· Quality
· Collaboration

Goals

1. **Identity:** The PASIG will have a consistent presence at major physical therapy and performing arts conferences.

A. Design and sell/distribute PASIG swag. The PASIG has completed the goals we set out in this regard and we will distribute PASIG swag at CSM 2019 as well as wear our PASIG swag wear. We may consider selling swag wear as pre-paid orders in the future.

   a. Design a PASIG brand that is inclusive of multiple performing arts genres and diverse demographics. See above

   b. Order products with PASIG brand for distribution (T-shirts, caps, hoodies, water bottles, cell phone accessories, pinkie balls, etc.) [with budget limitation for initial order]-See above

B. PASIG will send at least one representative to each APTA national conference in 2018-2019.
a. Identify which PASIG members will attend each 2018-2019 conference. PASIG VP Rosie Canizares attended National Student Conclave in Providence, RI, October 11-13, 2018 with support from AOPT. The PASIG Leadership and Membership meetings will occur at Combined Sections Meeting in Washington, DC, January 23-26, 2019 with some support from AOPT. Performing Arts Fellow Tessa Kasmar has submitted an abstract for NEXT in Chicago, IL, June 12-15, 2019 and was accepted.

b. Commit to completing a master schedule on PASIG Leadership’s shared Google Drive of members who will represent PASIG at each conference for the next 5 years. The PASIG Leadership and Membership meetings will continue to occur at each CSM. A list of PASIG members who are presenting at 2018-2019 conferences will be compiled at CSM 2019.

C. PASIG will send at least one representative to an inter-professional conference in 2018-2019.

a. Identify which inter-professional conference a PASIG member will attend in 2018-2019. PASIG will be a sponsor of the 28th Annual Conference of the International Association for Dance Medicine & Science (IADMS) in Helsinki, Finland, October 25-28, 2018.

b. Appoint one PASIG member to attend chosen 2018-2019 inter-professional conference. Practice Chair Andrea Lasner and Screening Chair Mandy Blackmon attended the 28th Annual Conference of IADMS. Janice Ying, Annette Karim, and Brooke Winder attended the Performing Arts Medicine Association’s 2018 annual conference. Janice Ying is on the leadership team of PAMA. Annette Karim, Mandy Blackmon, and Andrea Lasner attended the Dance USA 2018 annual conference and will attend the 2019 conference, as contributing members of the Dance USA Taskforce on Dancer Health. Annette Karim abstract to PAMA 2019 was accepted, so she will attend.

D. PASIG will form an outreach committee in 2018-2019 to create easily-accessible, valuable and evidence-based information to the performing arts community.

a. PASIG will appoint an Outreach Committee Chair by June 2018. Marissa Schaeffer has been appointed Outreach Committee Chair.

b. The PASIG Outreach Chair will form an Outreach Committee by October 2018. Marissa has 12 committee members currently.

c. Outreach Committee will commit to a primary platform on which to develop evidence-based resources and content for the performing arts community by February 2019.
d. PASIG Outreach Committee will share generated evidence-based resources and content with the performing arts community on its chosen platform by December 31, 2019.

e. The Outreach Committee will address the PASIG strategic plan clauses ____ and assign Committee members to carry out each clause by November 1, 2018.

2. **Quality:** PASIG will be a diverse and inclusive organization that produces high-quality education and research.

A. Increase diversity of PASIG leadership; PASIG executive team will include leaders from multiple geographical regions, genders, ethnicity/races, years of clinical experience, PT role and performing arts genre by 2020 election cycle.

   a. Nominating Committee will actively recruit a diverse slate of candidates in each election cycle (gender, ethnicity, PA genre, PT role, etc.) by Dec. 2018.

   b. PASIG will identify a role(s) that student members can serve in PASIG leadership by June, 2019.

B. Increase diversity of PASIG membership. PASIG will increase membership by 5% in underrepresented demographics by Dec. 31, 2019.

   a. Membership committee will survey current members in order to describe the demographic diversity of the PASIG by March, 2019.

   b. Membership committee will create a plan to enhance member diversity with respect to gender, ethnicity, PA genre, (and any other underrepresented demographic) by June, 2019.

   c. Membership committee will execute plan to enhance diversity by September 2019.

   d. PASIG will consult with the Academy of Orthopedics in order to identify potential resources and barriers to the development of a specific PA mentoring program within the Academy of Ortho mentoring program by March, 2019.

C. Improve evidence-based education offerings from PASIG targeted to physical therapists, student physical therapists, and the performing arts community.

   a. Identify members who can submit short courses for NEXT and CSM 2020 and provide resources to them to submit courses by CSM 2019 (Jan 2019).

   b. Submit a PASIG co-sponsored pre-conference course proposal for CSM 2020 by March 2019.
c. Create a course targeted at PTs/Students that can be offered separate from a major conference in Nov 2019.

d. Add five new PA clinical sites for entry-level DPT programs to the PASIG website list by March, 2019.

e. Curate/create 2 new PA fellowship resources per year and disseminate to PASIG members beginning Dec 2019.

f. Create one evidence-based education offering for the performing arts community in 2020 (performing arts instructors, parents/families, performing arts students, performers).

D. Increase high quality performing arts research.

a. Identify 2 grant sources that members can apply to for grant funding. PASIG Research Committee Chair, Laura Reising, will identify 2 grant sources for members to apply to and will make them available on the PASIG webpage and at CSM 2019.

b. Develop a plan to amass funds to support grant funding. PASIG Leadership will develop a plan to amass funds to support grant funding by CSM 2019.

c. Facilitate academic-clinical partnerships to support multisite research projects. PASIG Leadership will facilitate academic-clinical partnerships to support multisite research projects at IADMS 2018, CSM 2019, and future conferences. The PASIG has facilitated this conversation between sites at CSM 2018 in the Pre-professional Dancer Screening meeting.

d. Develop a resource that residency and fellowship education programs can use to facilitate PA physical therapist research. PASIG Fellowship and Research Committee Chairs will create a Task Force to develop resources for residency and fellowship education programs to facilitate PA physical therapy research at CSM 2020. Resources will be presented at CSM 2019 during the membership meeting.

E. Pursue corporate sponsorships.

a. Identify one corporation to target for a sponsorship per year. PASIG Leadership and Public Relations Chair will create a list of targetable corporations for sponsorship. Each year at CSM one corporation will be selected to pursue sponsorship with PASIG.

b. Create a one page “ask” document that can be used to request sponsorship. PASIG Leadership and Public Relations Chair create a one page “ask” document that can be used to request sponsorship at CSM 2019.
3. **Collaboration:** PASIG will work collaboratively with inter and intra-professional performing arts organizations to advance its vision and mission.

A. PASIG will appoint members within the Outreach Committee to develop collaborative relationships with two professional performing arts organizations each year to help identify areas of need.
   a. PASIG’s Outreach Committee will identify members to contact designated organizations by the end of October, 2018.
   b. PASIG’s Outreach Committee members will contact assigned organizations and identify methods of collaboration by January 23, 2019.

B. PASIG will create resource pages on the PASIG website to be made available to the performing arts community and medical professionals by July, 2019.
   a. PASIG will create a document for performing arts unions and governing bodies on the role of the performing arts physical therapist to be posted on the PASIG website and disseminated to performing arts organizations by July, 2019.
   b. PASIG will develop a resource page for physical therapists identifying performing arts unions, governing bodies and other resources available to support patients in the performing arts community by July, 2019.

C. Create and identify local/regional, formal/informal networking events for current and potential PASIG members.
   a. Identify 2 events per year. We will have a vendor's table presence at the National Student Conclave in October 2018, International Association of Dance Medicine and Science in October 2018 and October 2019, and vendor's table presence, a membership meeting, and an informal meet and greet at the Combined Sections Meeting in January 2019.
   b. Notify members about events at least one month in advance of event using a variety of media (newsletter, email, social media, etc.). We will notify members via the monthly citation blast, the OPTP, FaceBook and Twitter at least one month in advance.

D. Develop inter-section collaborations for continuing education offerings, networking events, research partnerships, and other collaborative ventures.
   a. Identify one section/academy with which PASIG can collaborate on a project in 2019. The PASIG will collaborate with the AOPT and the Imaging SIG to provide a preconference course at CSM in January 2019.
   b. Contact identified section/academy to explore interest. The PASIG has already done this.
   c. Develop work plan with section/academy including resource and work sharing. The PASIG has already done this.
Animal Rehabilitation SIG (ARSIG) Report  
Board of Directors Meeting  
January 23-26, 2019  

Submitted by:  
Kirk Peck, President 
Academy of Orthopaedic Physical Therapy, APTA

SIG Members and Terms:  
Kirk Peck, President 2013- 2019  
Stevan Allen, Vice President/Ed Chair 2017- 2020  
Ashley Manoogian, Nominating Chair 2018- 2019  
Lisa Bedenbaugh, Newsletter Coordinator 2009- Present  
Cheryl L. Riegger-Krugh, State Liaison Coordinator 2014- Present

Update on ARSIG Activities since October 2018:  
1. ARSIG Officer Voting Results for 2019:  
   a. New ARSIG President - Jenna Encheff, PT, PhD, CMPT.  
   b. Nominating Committee Member – No nominations received in 2018  

2. Kirk Peck PT, PhD, CSCS, CCRT, CERP- Will be completing his second term as President, ARSIG. Term Expires at the end of APTA, CSM, 2019.  

3. **Key Accomplishment:** Completion of the first ever Animal Rehabilitation SIG Practice Analysis, and Description of Practice with corresponding Standards. Documents to be submitted to the AOPT Board for review in January, 2019.  


5. The proposed ARSIG CE course, “Introduction to Animal Rehabilitation”, schedule for November 3-4, 2018 at the University of North Georgia, Dahlonega, GA was cancelled.

Discussion Items for the Board:  
The ARSIG will be submitting two documents to the Board for review, either for the meeting at CSM or the following Board meeting in February. The two documents include: 1) ARSIG Practice Analysis, and Description of Practice; and 2) Standards of Practice for Animal Rehabilitation.
**Motions for the Board:**
The ARSIG will be seeking a motion from the Board to approve the official Practice Analysis, Description of Practice, and Standards of Practice for animal rehabilitation.

**Strategic Planning Updates:**
The SIG remains intentional about integrating all action plans as part of achieving its current strategic goals. Activities include: conducting CE courses, engage in state political advocacy to encourage a change in laws & regulations related to PTs treating animals, exploring mechanisms to enhance the evidence of animal rehab through collaborative research, and promoting the treatment of animals by physical therapists in both national and international venues.

Challenges for 2019:
1) ARSIG leadership transition in the role of President
2) Engaging licensed PTs to take political action to change state laws and regulations.
3) Recruiting additional SIG members to sustain long-term strategic action plans
4) Encouraging SIG members to run for elected positions.
5) Actively engaging the ARSIG in its role with the International Association of Physical Therapists in Animal Practice (IAPTAP), WCPT.
Imaging SIG (ISIG) Report
2019 CSM Board of Directors Meeting
January 9, 2019

Submitted by:
Charles Hazle, President-Imaging SIG
Academy of Orthopaedic Physical Therapy, APTA

SIG Members and Terms:
Charles Hazle, President (re-elected) 2016-2022
James Elliott, Vice President/Ed Chair 2018-2021
Paul Beattie, Nominating Chair (out-going) 2016-2019
Megan Poll, Nominating Committee (incoming Chair) 2017-2020
Mohini Rawat, Nominating Committee 2018-2021
Kimiko Yamada (recently elected) 2019-2022

Update on SIG Activities since the September 2018 report:

1) American Institute for Ultrasound in Medicine (AIUM) Webinars:
   a. We have had 2 webinars scheduled so far with AIUM in 2019:
      i. Optimizing Treatment of Rotator Cuff Related Shoulder Pain Using Diagnostic Ultrasound by Charles Thigpen, PT, PhD, ATC; Date: Tuesday, March 12 @ 1-2 PM ET.
      ii. Monitoring Joint Health, Damage and Disease Activity using MSKUS: The MSKUS experience in Hemophilic Arthropathy Management. Speaker: Bruno U.K. Steiner, PT, DPT, RMSK. Monday, May 6 @ 1-2PM ET
      iii. We plan on scheduling two additional webinars in 2019 and have prospects toward those. More information will be forthcoming.

2) The Imaging SIG scholarship winner is Ruth Maher for project entitled "Concurrent Validity of Coccygeal Motion Palpation and Transabdominal Ultrasound Imaging in the Assessment of Pelvic Floor Function in Women." She will be presented with a check for $500 and recognized by Lena Volland, Scholarship Chair, at CSM at the start of our educational session. Lena will continue as Scholarship Chair for the coming year.

3) We are continuing with multiple SIG members involved in executing items within our strategic plan, which is categorized in 3 domains: Research, Education, and Practice. Jim Elliott is leading a team addressing Education issues, George Beneck as Research Chair is leading the Research group, and Chuck Hazle is facilitating activities in the Practice group. Several projects are in process. Progress reports for these are being gathered to be given at our member meeting at CSM.

4) Our educational session at CSM 2019 will focus on interdisciplinary communication and patient management decisions relating to imaging referral by physical therapists. We have an outstanding panel, including Dr. Amma Mauer, a MSK radiologist, who will give the radiologists’ perspective in accepting referrals and completing follow-up with
physical therapists. We will also feature novel data from two settings in which physical therapists have been referring patients for imaging and practitioners will share their experiences. The presenters are: Aaron Keil, PT, DPT, OCS; Amma Maurer, MD; Scott Rezac, PT, DPT, OCS, FAAOMPT; Daniel Watson, PT, DPT, OCS, SCS; Connie Kittleson, PT, DPT and the session will be moderated by Jim Elliott, PT, PhD. In addition to this presentation, we hope for this to lead to a publication as there is a void in the PT literature pertaining to the communications in imaging referral and response. Educational curricula tend address the technical aspects of imaging, but not the essential nature of communications before and after and the responsibility/procedural/legal aspects of follow-up.

5) The 2-day preconference course entitled “Musculoskeletal Sonography of the Lower Limb Focused in Sport & Performing Arts” features presenters Megan Poll, PT, DPT, OCS, RMSK; Doug White, PT, DPT, RMSK; Scott Epsley, PT, Grad Cert. Sports Physio, SCS, RMSK and Marika Molnar, PT, LAc has 37 registrants at last count and has all the indicators of being a success at this stage.

6) Elections results are noted at the top of the cover page of this report.

7) The Wisconsin chapter has been collecting data since the start of their imaging referral privileges. Some of this data is included in our educational session for CSM, but they have an abundance of great information likely to be useful to many, including other states following with similar evolution of imaging privileges. We have tentatively planned a webinar for presenting this data sometime during the summer. More information will be forthcoming after details are determined.

8) We are seeking to change some of the content of APTA webpages. Interestingly, the pages on “Scope of Practice” (http://www.apta.org/ScopeOfPractice/) and “State Advocacy” (http://www.apta.org/StateAdvocacy/) contain no information on imaging among the variety of other topics included. These are remarkable omissions in need of correction.

9) Reimbursement for physical therapist point-of-use of ultrasound remains very inconsistent with denials occurring, often depending on location/jurisdiction/insurance plan or any combination of those. We plan to establish a working task force to compile the evidence toward addressing these denials of reimbursement. Some of the refusals by 3rd party payers have included archaic literature and newspaper articles as their foundation rather than recent peer-reviewed evidence.

10) The Imaging SIG is still a young organization, but we are attempting to establish members in all jurisdictions/states to increase organizational awareness of the imaging landscape in those areas and also to promote preparation for imaging referral privileges in those states.

**Discussion Items for the Board:**

None

**Motions for the Board:**

None
Strategic Planning Updates:

At this time, reports on progress of the strategic plan are being compiled. Several projects are underway—more information will be forthcoming.
Orthopaedic Residency/Fellowship SIG (ORFSIG) Report
2019 CSM Board of Directors Meeting
Washington, DC

Submitted by:
Matt Haberl, President
Academy of Orthopaedic Physical Therapy, APTA

SIG Members and Terms:

Matt Haberl, President 2018-2021
Kathleen Geist, Vice President 2018-2021
Matt Stark, Nominating Chair 2018-2019

Update on SIG Activities since February 2018:

Chair Update- New information is BOLDED.

1. ABPTRFE New Quality Standards, Policies and Procedures, Descriptions of Residency Practice updates
   a. Following CSM 2018 the ABPTRFE pushed back the implementation of the New Quality standards to 2020 given several questions that came from the Academy/Section Res/Fellowship Leadership meeting in New Orleans.
   b. June 2018 – ABPTRFE released new Policies and Procedures as well as the new Annual Continuous Improvement Report with Exhibits 2 and 3 to replace the previous Annual Report.
      i. Included in the reports was the reporting of Primary Health Conditions which are a part of the new Quality Standards. The ORF-SIG received several questions regarding the submission of these for the 2018 year given implementation does not occur until 2020. Discussion did ensure with Kendra Harrington to clarify the discrepancy where programs can still submit the old patient condition chart with any resident/fellow who is involved in the program in 2020 will have to use the new format.
   1. The ORF-SIG has brought forth program concerns to the use of the Primary Health Conditions and additional burden this will ultimately put on residents/fellows without any valuable learning included. ABPTRFE response has been that it did work with Section/Academy leadership in the development of these conditions in collaboration with the Registry. A Meeting has been established with James Irrgang, Joe Donnelly, Aimee Klein and Matt Haberl as CSM on Friday to understand fully the extent to which the Academy was aware.
ii. As programs began to work on Exhibits 2 and 3 it became apparent the expectations for this first years annual report was significantly different than years past. The ORF-SIG receive several questions regarding completing these documents. Given the challenge programs were reporting and our upcoming course on assisting programs to meet the new Quality Standards we requested the January 31st deadline be moved back. Unfortunately this was denied by Kendra noting that it is always “policy” for the 31st deadline.

c. November 2018 – Complimentary documents to the Policies and Procedures including Substantive changes was released.

i. Following the release of these documents several question arose regarding the new Substantive Change requirements for required additional site visits funded by programs when a site grows by greater that 2 sites or participants in a single reporting year.

1. In collaboration with Elaine Lonnemann, AAOMPT President, and Cameron McDonald, AAOMPT Fellowship Program Director Special Interest Group President, and Julie Whitman, a survey was developed to evaluate how this would impact Orthopaedic Res/Fellowship Programs.

   a. Of the 57 Ortho Programs who responded (Total 104 programs- 57%)
      i. 24 (42%) are unsure or will not keep their accreditation status with ABPTRFE.
      ii. They make up 356 of the 533 clinical sites that are offered (67%).
      iii. 311 of the 436 annual resident graduates (71%).

2. Given the considerable impact on programs the discussion of the Academy creating a work group to determine if an alternative accreditation/credentialing process can occur. Further discussion will occur at CSM 2019.

3. AAOMPT PD-SIG has encouraged its member write ABPTRFE regarding these policy requirements with several considering an alternative route via AAOMPT to still meet IFOMT standards.

2. **Strategic Planning**

   a. Orthopaedic Academy Strategic Planning Grant funding was provided to Janet Bezner to facilitate the development of the strategic plan. **Janet has met with our strategic planning group via WebEx three separate occasions with our Mission, Vision, Goals and Objectives to be announced at our CSM 2019 meeting.**

3. **ABPTRFE Ad-Hoc Section R/F SIG Chair Committee**
a. Met again on Thursday, November 15 from 10:30am to 11:30am EST where SIG Chair Committee shared updates with what their Section/Academies were completing. Key discussion items included
   i. Clarification of Annual Continuous Improvement Report, Exhibits 2 and 3 submission, substantive changes, and the timeliness of these requests.
   ii. Process for providing feedback and recommending process changes. The current process is for programs to send requests to Kendra Harrington, at ABPTRFE where she will collect and answer any questions. Concerns then will be provided to the New Quality Standards Committee which will review at their annual meeting and then submit recommendations to the board for consideration.
   iii. Development of a Mission and Plan for the Leadership Group
   iv. The Hand Section noted requests for their programs to be Residencies versus fellowships was denied where they will be considering pulling from the APTA for accreditation and specialty certification. So far 1 program has already pulled out and are pursuing an alternative method. They are requesting assistance with this matter.
   v. The Education Section RF-SIG will be releasing resources for programs regarding common content that could be used across programs. This is located on the APTA HUB. They have also established a research group where the ORF-SIG will be meeting with them at CSM.

b. Next meetings
   i. CSM Saturday, January 26 from 6:45am to 7:45am EST

4. Education Section Residency and Fellowship Special Interest Group (RF-SIG) Collaboration
   a. Following initial collaborative mentorship webinar with ED-RFSIG on Mentoring the Mentor. Continue to work with Kris Porter (ORF-SIG) Arlene McCarthy (Neurology) and Carol Jo Tichenor (ED-SIG) regarding the development of an Annual Mentor Evaluation and Development Tool. Currently we are trialing the tool and will determine future use.
   b. RFESIG Think Tank: Resources have been collected and are being posted to the APTA HUB.

5. Working Committees
   a. Committees:
      i. Quality Standards Review Work Group: Given the ongoing changes with the new Quality Standards a working committee was developed to better assist our members. Kevin Farrell, Tina Hertlein, Brian Eckenrode, Frank Hoefer, Molly Malloy, Kirk Bentzen have elected to assist in the review and education regarding the new Quality Standards.
         1. This group never took off given the CSM course offering. Will re-evaluate group pending further developments.
ii. **Res/Fellowship Applicant Aggregate Data Review:** A work group including: Peter McMenamin, Tom Denninger, Kevin Farrell, Joe Donnelly will be evaluating low resident application volumes / way for programs to know of potential openings in other programs to share with residents not accepted in the future.

1. Peter McMenamin followed up with Ryan Bannister regarding some of the information sharing restrictions between RF-PTCAS and ABPTRFE. A meeting has been proposed to determine any alternative routes.

iii. Standardized application date / sharing applicants

1. Stephan Kareha lead a group where they developed a survey to understand program interest.

   a. **Currently only 49% of residency and 30% of fellowship programs would be interested in common application process. Will not pursue this at this time.**

iv. Residency/Fellowship Administration Survey

1. Kathleen Geist, Stephan Kareha and Kris Porter are working on a Survey to evaluate current pay for residency directors, administration time for PD’s and faculty/mentors to serve as a resource for current and developing programs.

   a. **Survey is complete and will be sending out in next month.**

6. **AAOMPT collaboration and communication**

   a. Discussion has continued with AAOMPT President Elaine Lonnemann regarding the new Quality Standards and Fellowship mentorship hours, pre-requisite requirements and mentor requirements.

      i. Most recently AAOMPT developed a Description of Fellowship Practice with recommendations to maintain consistency with IFOMT standards which was reviewed at the May ABPTRFE meeting. Discussion here is still ongoing.

      ii. **Collaborated with discussion around the new ABPTRFE Policies and Procedures and alternative accreditation process.**

         1. The ORF-SIG will continue to provide support here as needed.

7. **2018 Budget / Member attire**

   a. Mary Derrick identified and worked with Tara Fredrickson regarding purchasing leadership clothing, pens and shaker bottles. Items will be provided to SIG leadership and to distribute to members and aspiring members at upcoming national meetings (NSC and CSM). **These were a big hit at NSC.**

8. **National Student Conclave**

   a. ORF-SIG sent a representative with Academy office to APTA’s National Student Conclave to recruit members and provide resources to aspiring Res/Fellows regarding the value of R/F education, how to choose a program etc. **We had a tremendous turnout as several PT students stopped by with questions**
regarding the different types of residency programs, how to choose and what to expect. Several found the OP issue evaluating the different types of programs helpful in their evaluation process.

9. CSM Pre-Con Course Accepted
   a. “Clinical excellence and quality standards in Residency/Fellowship Education” on Wednesday, January 23rd at CSM. Kirk Bentzen, Kathleen Geist, Aimee Klein, Tara Jo Manal, and Eric Robertson. To include breakout discussions to discuss methods in meeting the new ABPTRFE Quality Standards. Group is actively working on content and marketing strategies.

10. CSM R/F Program Social discussion
    a. In 2018 ABPTRFE discontinued their Residency and Fellowship social offering at CSM and moved this to National Student Conclave. With this move several programs requested that the ORF-SIG host and similar social for orthopaedic residency and fellowship programs. Upon evaluation, 74 Orthopaedic R/F programs previously attended this to now just 18. Of the 18 only 2 are fellowship programs. AAOMPT President Elaine Lonnemann also reached out inquiring about co-sponsoring an event. The ORF-SIG worked with the Academy office in identifying avenues for this completed and are still discussing options.

11. Website Development:
    a. Our website is up and running. Matt Stark and Kris Porter are recommending modifications to fit the new headlines. Still utilizing Facebook Groups and looking at other avenues of member communication. Will continue to work with the PR committee in generating member engagement and information sharing.

12. OPTP Quarterly Submissions: Marketing to current programs to highlight R/F work. We look forward to future submissions. Will also use this as an avenue to publish current research.

13. Regular Meetings:
    a. Quarterly meetings are scheduled throughout the year to address strategic planning initiatives.
       i. CSM: January 24th 6:45 am EST
       ii. WebEx: April 17th 10am CST
       iii. WebEx: July 24th 11am CST
       iv. WebEx: October 23rd 12 noon CST
I. Specialty Council Members and Terms:

- Judy Gelber (MOSC)  12/2020
- Hilary Greenberger (Chair)  12/2021
- Grace Johnson (IRC)  12/2019
- Pam Kikillus   12/2022
- Peter Sprague   12/2021

II. New Appointments

- There were ten applications for the council position opening. Of those applications, only two individuals had appropriate qualifications. Pam Kikillus, outgoing chair, was reappointed to a 4 year term.
- Appointed new (additional) CCE, Kelby Kaplan.
- Council reviewed 70 SACE applications in August 2018. Twenty new SACE writer were appointed for 2019.

III. Certified Specialists

- 1,475 newly certified specialists in 2018
- 430 recertified specialists in 2018
- Total number of orthopaedic board certified specialists = 14, 368

IV. Council Activities

- Council met at NBME in July 2018 to review 125 new items. Overall, 96 items were accepted at the meeting and were added to the item bank, 4 were deleted, and 25 were designated for rewrite.
- Council met at APTA in September 2018 to develop the form for the 2019 exam. Two hundred exam questions were reviewed at that time.
- Council reviewed approximately 200 portfolio’s for recertification. The remaining portfolios were reviewed by external reviewers.
• A regional item writing workshop took place in Tacoma, Washington on October 20, 2018. Pam Kikillus and Hilary Greenberger led the workshop. There were seven individuals in attendance, and 27 items were generated.
• A regional workshop in Atlanta, Ga is being considered for March 2019.

V. IRC Activities

• There were 35 active writers. A total of 137 items were moved into the NBME bank (into ORTH 2020 cycle). This consisted of 127 new items and 10 revised items.

VI. MOSC activities

• There have been several meetings regarding the Maintenance of Specialist Certification (MOSC) examination which will occur at year 10. The first exam will be administered in 2023.
• Details of the exam are still being worked out and may vary by specialization. For Ortho, it will likely be a non-proctored 100 question exam, to be divided into 25 questions per month for 4 months.

VII. New Proposals

• Changes to the minimum eligibility requirements for the initial specialty exam were approved by ABPTS in February 2017 for pilot testing. Council is expecting a report on the pilot study in May 2019.
• Individual recognition of newly certified specialists will not occur at CSM any longer starting with CSM 2019. The orthopedic specialty council is unaware of any plans by the Academy for a separate ceremony.
The Academy of Orthopaedic Physical Therapy continued to demonstrate leadership in the physical therapy profession that it has become known for in 2018. Additionally, the Academy continues to experience growth on a variety of fronts. The goal of this report is to document that growth, as well as the activities and accomplishments of the Academy over the past year.

MEMBERSHIP & LEADERSHIP:
The current strategic position of the Academy was set up by current and past leadership and staff, and supported by hard work from many Academy volunteers. Continuing to use the 2015-2020 strategic plan as a guide, the Academy continues to serve and evolve to the needs of the profession and practice of orthopaedic physical therapy, and also to the public and patients we treat.

Total Academy membership at the close of 2018 was 19,373, down 1.7% from the 19,713 members at the close of 2017. Overall, membership numbers have remained relatively stable over the past three years staying above the 19,000 mark. The Academy represents approximately 18.6% of overall APTA membership. This figure includes PT, PTA, and student members. Although Academy membership has remained relatively stable, it does not match the overall growth of APTA membership, which was 2.51% over 2018. The Academy continues to be the largest section in the APTA by a wide margin.

At the October 2017 Board of Directors meeting a proposed bylaw amendment motion was presented and adopted to change the name of the Orthopaedic Section to the Academy of Orthopaedic Physical Therapy. The proposed bylaw amendment was presented to the membership at the 2018 CSM Membership Meeting by President, Steve McDavitt. The amendment was voted on by the membership in April 2018 and adopted. It is widely felt that the name change from “Section” to “Academy” is a better representation of the purpose and composition of our organization. Additionally, it is consistent with changes made by several other APTA Sections in response to continued growth.

Academy Leadership:

<table>
<thead>
<tr>
<th>Position</th>
<th>Name</th>
</tr>
</thead>
<tbody>
<tr>
<td>President</td>
<td>Stephen McDavitt PT, DPT, MS, FAAOMPT, FAPTA</td>
</tr>
<tr>
<td>Vice President</td>
<td>Lori Michener, PT, PhD, ATC, SCS, FAPTA</td>
</tr>
<tr>
<td>Treasurer</td>
<td>Kimberly L. Wellborn, PT, MBA</td>
</tr>
<tr>
<td>Director</td>
<td>Aimee Klein, PT, DPT, DSc, OCS</td>
</tr>
<tr>
<td>Director</td>
<td>Duane “Scott” Davis, PT, MS, EdD, OCS</td>
</tr>
</tbody>
</table>

Academy Committees:

- Membership Chair: Megan Poll, PT, DPT, OCS
- Education Chair: Nancy Bloom, PT, DPT, MSOT
- OPTP and ISC Editor: Chris Hughes, PT, PhD, OCS
- Research Chair: Dan White, PT, ScD, MSc, NCS
- Practice Chair: Kathy Cieslak, PT, DScPT, MSEd, OCS
- Finance Chair: Kimberly L. Wellborn, PT, MBA
- Nominating Chair: Carol Courtney, PT, PhD, ATC
- Public Relations Chair: Jared Burch, PT, DPT
- Awards Chair: Lori Michener, PhD, PT, ATC, SCS, FAPTA
Special Interest Groups (SIGs):
- Occupational Health SIG; President: Lorena Pettet, PT, MBA, OCS
- Foot and Ankle SIG; President: Christopher Neville, PT, PhD
- Pain SIG; President: Carolyn McManus, MSPT, MA
- Performing Arts SIG; President: Annette Karim, PT, DPT, PhD, OCS, FAAOMPT
- Animal Rehabilitation SIG; President: Kirk Peck, PT, PhD, CSCS, CCRT, CERP
- Imaging SIG; President: Charles Hazle, PT, PhD
- Residency/Fellowship SIG; President: Matt Haberl, DPT, OCS, ATC, CSCS, FAAOMPT

Academy Staff:
- Terri DeFlorian, Executive Director
- Tara Fredrickson, Executive Associate
- Leah Vogt, Executive Assistant
- Sharon Klinski, Managing Editor
- Laura Eichmann, Publishing Assistant
- Brenda Johnson, Clinical Practice Guidelines Coordinator
- Avery Gerstenberger, Marketing Intern

STANDARDS OF PRACTICE:
The Academy has continued to make significant progress towards its goal to “support the development and distribution of resources that promote the provision of best practices in orthopaedic physical therapy.” The Academy’s plan to accomplish this goal involves the publication of Clinical Practice Guidelines (CPGs), establishing advanced methods for providing educational content, and officially partnering with the APTA Physical Therapy Outcomes Registry. The Academy made significant progress towards all three aspects in 2018.

Currently, there are 12 CPG topics covered with 6 being on their second update since initial publication for a total of 18 publications. Additionally, there are 6 CPGs in the revision stage and 12 are in the development stages. The Academy has a goal to publish 25 by the year 2020, and should achieve this goal based on the current pace. New to the CPG line-up in 2018 was Exercise-Based Knee and Anterior Cruciate Ligament Injury Prevention published in the September 2018 issue of Journal of Orthopaedic and Sports Physical Therapy (JOSPT) by Amelia Arundale et al. Guideline topics with published revisions in 2018 include: Knee Pain and Mobility Impairments: Knee Meniscal and Articular Cartilage Lesions; Achilles Pain, Stiffness, and Muscle Power Deficits: Midportion Achilles Tendinopathy. In addition to the CPGs and clinical decision making trees published for clinicians, JOSPT has continued to publish “Patient Perspectives” that coincide with the information found in the CPG for use in patient education interventions.

The Academy continued its commitment to excellence in orthopaedic physical therapy practice by officially signing into a partnership with the APTA Physical Therapy Outcomes Registry at CSM in 2018. The Academy’s involvement in the National Physical Therapy Outcomes Database (NOPTOD) ensures the enhancement of the registry as it applies to orthopaedic practice. Along with the development of Clinical Practice Guidelines, the Academy’s involvement in NOPTOD development allows for the implementation of CPG data elements. This provides an avenue to track outcomes as they relate to published CPGs. The Academy has been instrumental in developing modules for the neck, shoulder, knee, and low back.

The Independent Study Courses (ISCs) offered by the Academy have been transitioned to an online/online plus print system, available at orthoptlearn.org. Additionally, the ISCs continue to be an important contributor to the non-dues revenue of the Academy. The high quality repository of topics continues to be developed and made available to both members and non-members of the Academy.
EDUCATION AND PROFESSIONAL DEVELOPMENT:
The Academy has continued to make progress toward education and professional development on several fronts. The Academy has continued to develop its Annual Orthopaedic Meeting (AOM), advanced the participation at Combined Sections Meeting (CSM), increased growth of Orthopaedic Residency and Fellowship education, and continued to develop the Membership Mentorship Program.

The 6th Annual Academy Meeting (AOM) was held April 26-28, 2018 in Baltimore, Maryland. The focus was on pain science and movement systems. The AOM continues to provide exceptional content for continuing competence in an environment that balances a didactic and hands-on learning experience which is unique for conferences of this size. 172 were in attendance, which was in line with the attendance at the 2017 AOM. 2019 AOM will be held in Denver, Colorado.

The 2018 Combined Sections Meeting was held February 21-24 in New Orleans, Louisiana. It was the largest CSM on record with over 17,000 attendees. The Academy accepted and presented 27 educational sessions and sponsored 3 pre-conference courses. The 2019 CSM will be held in Washington D.C. and the Academy looks forward to continued growth in attendance by Academy members as well as sponsored course content.

Orthopaedic residency and fellowship education has continued to increase in 2018. The American Board of Physical Therapy Residency and Fellowship Education (ABPTRFE) recognized 106 accredited Orthopaedic Residency programs at the end 2018. Additionally, there are 8 candidate programs and 13 developing programs. The ABPTRFE recognizes 32 Orthopaedic Manual Physical Therapy Fellowships and 2 Spine Fellowships at the close of 2018. There are currently 3 candidate programs and 3 developing fellowships in Orthopaedic Manual Physical Therapy and 1 candidate fellowship in Spine.

The Membership Committee continued to sponsor the Mentorship Program in 2018 which matched 15 students to mentors. The program will be matching an additional 15 protégés to mentors for a formal 6-month mentorship in 2019. Selected protégés will meet their mentors at CSM in Washington D.C. Areas of mentoring include research, academics/teaching, manual therapy, leadership, and private practice. The program is led by Megan Poll, PT, DPT, OCS, Membership Chair.

RESEARCH:
In 2018 the Academy recognizes the following publications as Outstanding Articles with regards to orthopaedic physical therapy practice:


The Grant Program sponsored by the Academy awarded over $154,000 in 2017 to researchers to further orthopaedic physical therapy research. These grants are two-year grants that conclude in 2019. Updates from the prospective researchers indicate that all grant funded research has made significant progress towards their stated research purposes over the course of 2018. Additionally, the Grant Program awarded an additional $39,000 in 2018 to researchers.
AWARDS PROGRAM:

<table>
<thead>
<tr>
<th>Award</th>
<th>2018 Recipient</th>
</tr>
</thead>
<tbody>
<tr>
<td>Outstanding PT Student</td>
<td>Christopher Chism, SPT University of Wisconsin-Madison</td>
</tr>
<tr>
<td>Outstanding PTA Student</td>
<td>Megan Trimble, SPTA Somerset Community College</td>
</tr>
<tr>
<td>James A. Gould Excellence in Teaching Orthopaedic PT</td>
<td>Amee L Seitzé, PT, PhD, OCS Northwestern University</td>
</tr>
<tr>
<td>Rose Excellence in Research</td>
<td>Julie Fritz, PT, PhD, FAPTA University of Utah</td>
</tr>
<tr>
<td>Richard W. Bowling - Richard E. Erhard Orthopaedic Clinical Practice</td>
<td>No award in 2018</td>
</tr>
<tr>
<td>Paris Distinguished Service</td>
<td>Philip McClure, PT, PhD, FAPTA Arcadia University</td>
</tr>
</tbody>
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SUMMARY:
At the end of 2018, it is apparent that the Academy continues to make important progress towards meeting the goals and objectives outlined in their Strategic Plan. The Academy continues to have a strong positive impact on progressing the standards of orthopaedic physical therapy practice. In line with progress made over the course of 2018, the Academy continues to make advancements in research, education, and professional development. As the Academy prepares to celebrate its 45th anniversary in 2019, the membership and general public should expect the upward trend of accomplishments to continue.