

## Vestibular Rehabilitation: Evidence-Based Evaluation and Treatment to Decrease Dizziness and Restore Balance

*Featuring Brady Whetten, DPT, GCS*

### Schedule – Friday, Nov. 1

1 p.m.	Introduction; dizziness, imbalance, and falls – a growing problem
2 p.m.	Review of anatomy and physiology of the vestibular system
2:30 p.m.	Functional classification of dizziness and vertigo
3 p.m.	Break
3:15 p.m.	Differential diagnosis for peripheral vestibular dysfunction, including benign paroxysmal positional vertigo (BPPV), vestibular neuritis, labyrinthitis, bilateral vestibular hypofunction (BVH), Meniere’s disease, acoustic neuroma, perilymphatic fistula
4:15 p.m.	Lab – BPPV
5:15 p.m.	Dismiss

### Schedule – Saturday, Nov. 2

8 a.m.	Lab – BPPV (continued)
9 a.m.	Comprehensive vestibular evaluation: history, systems review, oculomotor exam (Dynamic Visual Acuity, saccades, smooth pursuits, head thrust test), gait and postural control (Clinical Test of Sensory Integration in Balance [CTSIB], modified Dynamic Gait Index, Four Square Step Test), motion control (Motion Sensitivity Quotient)
10:15 a.m.	Break
10:30 a.m.	Lab – evaluation techniques
11 a.m.	Additional evaluation considerations – dual tasking, optokinetics, cognition
Noon	Lunch (on your own)
1 p.m.	Interventions – habituation, adaptation, compensation, and other treatment techniques
2 p.m.	Lab – interventions
2:30 p.m.	Central vestibular consideration, differential diagnosis, treatment
3:15 p.m.	Break
3:30 p.m.	Concussion – evaluation considerations and treatment
4:14 p.m.	Non-vestibular considerations – migraine, CSD, cervicogenic dizziness
4:45 p.m.	Review of case studies, Conclusion, Q & A
5:30 p.m.	Adjourn