



# Development of Pediatric

## Gait & Posture:

### “When, Why and How to Intervene”

WITH LIESA PERSAUD, PT, DPT, PCS, CKTP

FRIDAY, APRIL 26 – SATURDAY, APRIL 27, 2019

**Therapy West Inc./pLAy Studio**  
**18333 S. Main Street**  
**Gardena, CA 90248**  
**Contact: aosborn@therapywest.org**

### Course Description

This 2-day intermediate level workshop covers therapeutic evaluation & treatment of pediatric gait and posture. Evaluation of posture &/or gait dysfunction in children is not as difficult as it first seems, and the results can be very rewarding. However, children are not small adults, so merely applying adult-based treatment techniques to a child can be both a waste of time and a potential risk for harm. A child's skeletal and neurological systems are immature and underdeveloped, so it is critical for practitioners to be aware of what is both normal and atypical. This seminar addresses the flaws of a “wait and see” approach, while supporting proactive & preventive intervention, with proposed methods for enjoyable, realistic & effective intervention. The increased prevalence of developmental delay is considered. Proposed etiologies of developmental delay are discussed, & the future effects on postural control, language, cognition, & social interaction.

This course emphasizes the value of deliberate intervention for pediatric gait. Content highlights gait & its relationship to multiple body systems. Neuroplasticity, & the opportunities it provides for therapists, is presented with regards to ideal upright mobility. This course clearly explains the significant components of evaluation and treatment of pediatric gait and posture, in a clinically relevant manner. Participants will leave with skills and treatment tools to immediately put into practice.

### Program Objectives

**UPON COMPLETION OF THE COURSE, PARTICIPANTS WILL BE ABLE TO:**

• **DAY 1:**

1. Describe the benefits of proactive & preventive intervention.
2. Discuss factors for the increased prevalence of developmental delay.
3. Identify the effects of delayed ambulation on postural control, language, cognition, & social interaction.
4. Understand the value of gait to body system(s) function & performance.
5. Explain the relationship between sensory experiences, the somatosensory system, movement and activity.
6. Recognize the opportunities provided by neuroplasticity with regards to ideal upright mobility.

- **DAY 2:**

1. Examine pediatric lower extremity foot anatomy and function as related to growth and development, & assess impairments associated with misalignment
2. Discuss the relationship between normal/abnormal function, mobility/stability, and weight distribution of the multiple joints of the foot
3. Identify growth phases and how they affect pediatric posture and gait
4. Compare common and uncommon characteristics of specific diagnoses
5. Identify specific equipment to keep in your "foot locker"
6. Utilize a systematic approach to evaluating the pediatric lower extremity and foot
7. Increase your knowledge of systematic, didactic and manual evaluation techniques
8. Understand the components, indication and usage of custom orthotics
9. Participate in hands-on skills to implement with confidence

## About the Instructor

**Liesa M. Persaud, PT, DPT, PCS, CKTP** is a licensed physical therapist with over 25 year's experience in the field of adult and pediatric therapy. Ms. Persaud is a practicing physical therapist at Tulsa Sunshine Center in Oklahoma, where she provides Animal Assisted Therapy with her Border Collie, Serendipity. Additionally, Liesa is owner of Know to Change, PLLC in Skiatook, Oklahoma, and has educated health care professionals, both nationally and internationally, in advanced treatment techniques, specialized practical training and consultative services. She has worked in a variety of settings, including private pediatric and adult clinics, schools, private homes, hospitals and long-term care facilities. Ms. Persaud is a Credentialed Clinical Instructor and has taught human anatomy, physiology and nutrition at Tulsa Community College. She received her Associate's Degree in 1993 from Tulsa Junior College and worked as a physical therapist assistant while completing her Bachelor of Science Degree in Organizational Leadership from Southern Nazarene University in Tulsa, Oklahoma. Ms. Persaud earned her Master's Degree in Physical Therapy from the University of Findlay in Findlay, Ohio in 2003 and continued to expand her expertise in the field. She received her post-graduate Doctorate from Rocky Mountain University of Health Professions and is a Board Certified Specialist in Pediatric Physical Therapy. Ms. Persaud's passion for travel has led her to teach & treat overseas in Australia, New Zealand, Turkey, the Arab Emirates, Mexico, Ukraine, Palestine, Poland & South Africa. Her wide range of clinical experience, organizational leadership, and proficient teaching skills make Liesa an exciting and compelling instructor.

## Participant Requirements

This intermediate-level course is open to physical therapists, occupational therapists, and assistants.

## Cancellation Policy

There will be a \$50 processing fee for cancellation by a participant more than 14 days prior to the course. No refunds will be given for cancellations within 14 days of the course; however, registrations may be applied towards a future seminar with a \$50 processing fee. In the event of course cancellation by Therapy West, Inc., a full refund will be provided.

**SPACE IS LIMITED!! EARLY REGISTRATION IS HIGHLY RECOMMENDED.**

# Development of Pediatric Gait and Posture

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| Registration:<br>___ \$450 Standard Registration<br>___ \$425 Group Registration (3 or more participants registering simultaneously) |  |
| <b>TOTAL</b>   |  |

Name: \_\_\_\_\_

Phone: (\_\_\_\_\_) \_\_\_\_\_

Email Address (REQUIRED): \_\_\_\_\_

Profession (please circle): PT / OT / PTA / COTA / OTA / SLP

## REGISTRATION & PAYMENT METHODS:

1. **Online:** Register online at [www.therapywest.org](http://www.therapywest.org) and pay with PayPal

2. **Register via email.** Email form to [aosborn@therapywest.org](mailto:aosborn@therapywest.org)

Form should include payment information below:

**Check:** Payable to Therapy West. Please send check to:

Therapy West, Inc., Attn: Lauren Hong  
11605 Washington Blvd  
Los Angeles, CA 90066

**Credit Card Number:** \_\_\_\_\_

VISA / MC / DISC Security Code: \_\_\_\_\_ Expiration Date: (\_\_\_\_\_/\_\_\_\_\_)

Name on card & billing address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Signature: \_\_\_\_\_

## Registration Information & Cancellation Policy

Email confirmation will be sent upon receipt of payment. Payments received within 14 days of the course must be made with a credit card. Please DO NOT make travel or hotel accommodations until you have received confirmation of your registration. There will be a \$50 processing fee for cancellation by a participant. In the event of course cancellation by Therapy West, Inc., a full refund will be provided.