

## CLINICAL REASONING AND TREATMENT PLANNING FOR PRAXIS INTERVENTION

ADVANCED  
COURSE!

### Description:

This advanced-level clinical reasoning course builds upon the clinical intervention knowledge gained in the course **Clinical Assessment and Practical Interventions for Praxis: From Ideation to Execution** and allows for development of advanced clinical reasoning and treatment planning skills for praxis intervention. A clinical reasoning model will be presented and through use of case studies and group discussion, participants will develop and refine their ability to create effective treatment plans for praxis problems. Participants are encouraged to bring case study information and videos for group discussion and problem solving. Those desiring to bring video for discussion must contact PDP at least 3 weeks prior to the course to assure technical compatibility.

Participants **MUST** have taken the two day course: **Clinical Assessment and Practical Interventions for Praxis: From Ideation to Execution**, as this course will build on information presented in the earlier course. Participants are encouraged to bring their praxis wheels.  
**Suggested Audience:** OTs, PTs and SLPs

*This course is offered for .6 AOTA CEUs  
This course is offered for .6 ASHA CEUs (Advanced Level; Related Area)*

### Objectives:

 Participants will be able to:

1. Identify praxis problems and select appropriate and effective intervention strategies and activities.
2. Apply clinical reasoning to selection of activities to maximize impact of treatment.
3. Create and apply effective treatment plans for praxis problems.

### Schedule\*

 (6 contact hours)

8:00 Registration  
8:30 • Introduction to clinical reasoning for sensory integration and praxis  
10:00 Break  
10:30 • Clinical reasoning and treatment planning for ideation  
12:00 Lunch on your own  
1:00 • Clinical reasoning and treatment for motor planning  
2:30 Break  
3:00 • Clinical reasoning and treatment planning for sequencing, bilateral coordination, and projected action sequences  
4:30 Adjourn

\* Topic times may vary; contact hours do not.

## 2012 Tuition


**Tuition:** \$260.00 per Course (Includes lab materials, handouts and morning and afternoon refreshments)

### Discount Deadlines:

Super Saver Deadline (8 weeks prior to course date): \$240  
Early-Bird Deadline (4 weeks prior to course date): \$250  
Registration Deadline 1 week prior to course date • **Regular Price:** \$260 (after this date, \$310)

**Maximum combined discount limit for a One-Day course is \$30.00 from the regular tuition.**

APPROVED PROVIDER



ASHA  
CONTINUING  
EDUCATION  
AMERICAN SPEECH-LANGUAGE-HEARING ASSOCIATION

Professional Development Programs & Products is approved by the Continuing Education Board of the American Speech-Language-Hearing Association (ASHA) to provide continuing education activities in speech-language pathology and audiology. See course information for number of ASHA CEUs, instructional level and content area. ASHA CE Provider approval does not imply endorsement of course content, specific products or clinical procedures.

## GOAL ATTAINMENT SCALING AS A MEANINGFUL OUTCOME MEASURE FOR SENSORY INTEGRATION: A TRAINING PROGRAM

ADVANCED  
COURSE!

### Description:

This course presents an in-depth look at Goal Attainment Scaling (GAS) methodology and its application as a functional outcome measure for occupational therapy using a sensory integration approach. This training program will present theoretical and practical information needed to prepare therapists for the use of the GAS methodology in both clinical and research applications.

**Suggested Audience:** OTs and PTs

*This course is offered for .6 AOTA CEUs  
This course is offered for .65 ASHA CEUs (Advanced Level; Related Area)*

### Objectives:

 Participants will be able to:

1. Describe GAS theory and methodology and its application to outcome measurement in sensory integration.
2. Describe the psychometric properties of GAS and the strengths and weaknesses related to its application as an outcome in sensory integration intervention.
3. Demonstrate the ability to write appropriate, reliable, and functional GAS outcome goals.
4. Implement GAS methodology as a functional outcome for sensory integration-based treatment.

### Schedule\*

 (6.5 contact hours)

8:00 Registration  
8:30 • Introduction to GAS • History of development of GAS  
• Gas Model  
10:00 Break  
10:30 • Characteristics of GAS Objectives • Identifying issues to be measured • Understanding the ICF • Common problems in scaling Goals  
12:00 Lunch on your own  
1:00 • Examples of goals • Peer review of technical qualities of goals  
• Practice writing goals from cases  
2:45 Break  
3:00 • Conducting initial interviews • Conducting follow-up interviews and measuring progress  
4:45 Adjourn

\* Topic times may vary; contact hours do not.

## Faculty

**Teresa A. May-Benson, ScD, OTR/L**, Clinical Specialty Director of Occupational Therapy Associates-Watertown, P.C. and Research Director of the Spiral Foundation at OTA-Watertown, is a well known lecturer on sensory integration theory and intervention. Dr. May-Benson has a special interest in and extensive experience with autism, particularly older students and adults. Dr. May-Benson received her bachelors degree from Ohio State University and her master's and doctoral degrees from Boston University with a concentration in sensory integration and school system therapy. She has also authored four book chapters on praxis, published dozens of papers, and received numerous awards recognizing her contributions.



For more information please contact:

### Professional Development Programs

1675 Greeley Street South  
Suite 101  
Stillwater, MN 55082  
Toll-Free Phone: 877-439-8865  
Toll-Free Fax: 877-259-5906  
www.pdp pro.com



# PDP Registration Information

## Registration Procedures

Register by mail, phone, fax or on-line. Early registration is recommended. Mail completed registration form with check or money order to Professional Development Programs postmarked no later than the registration deadline. Make check payable to Professional Development Programs and mail to: 1675 Greeley St. So., Ste. 101 Stillwater, MN 55082. Designate the course and site you plan to attend. Full payment is required to confirm space. For Purchase Orders without payment add \$50 for the processing fee. Copy of PO must accompany registration. Phone, fax or on-line registration must include a valid VISA, MasterCard or Discover number with expiration date & signature.

## Documentation/Credit

All participants will receive certification of the number of contact hours attended. If additional information is required for specific credit or CEU purposes, contact Professional Development Programs 6-8 weeks prior to the course.



Professional Development Programs is an American Occupational Therapy Association (AOTA) Approved Provider of Continuing Education. The assignment of AOTA CEUs does not imply endorsement of specific course content, products or clinical procedures by AOTA. See individual course listing for specific information.



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pathology and audiology. **See course information for number of ASHA CEUs, instructional level and content area.** ASHA CE Provider approval does not imply endorsement of course content, specific products or clinical procedures.

## Discounts/Additional Information

Group Size	1-Day Course Discount	2-Day Course Discount
3-5	\$10/person	\$20/person
6 or more	\$20/person	\$30/person

All registrations must be submitted together by the course deadline and all discounts must be taken at time of registration. No refunds are made retroactively or after the course deadline. Maximum combined discount limit is **\$50 for a Two-Day course and \$30 for a One-Day course** from the **regular tuition**. This brochure may be copied for informational and/or registration purposes.

## Cancellation Policy

All cancellations must be in writing, including the reason for cancelling and must be received by PDP at least three weeks prior to the course; no compensation will be granted after that date. If the cancellation meets the three week deadline, the registrant may choose a refund or a transfer credit, minus a \$75 processing fee, to be issued following the program. A transfer credit may be applied toward another PDP course within three years of the issue date.

PDP reserves the right to cancel any course with due cause and refund in full. Participants purchasing NON-refundable airfare tickets should verify course availability before final purchase. Weather and/or transportation difficulties are not the responsibility of the workshop sponsor, PDP, and failure of a chosen means of transportation is not grounds for tuition refund when the course is held.

Our ADA policy can be found online at: [www.pdppro.com/policies.shtml](http://www.pdppro.com/policies.shtml).

## Authorship disclosure:

The speakers may receive royalties from their authored publications and materials.

For a complete look at our courses and therapeutic products, visit us online at [www.pdppro.com](http://www.pdppro.com).

# -----Professional Development Programs Registration Form:-----

Date sent: \_\_\_\_\_

## Please sign me up for the following workshop:

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

Course Dates: \_\_\_\_\_

Course Location: \_\_\_\_\_

Additional Course Materials: \_\_\_\_\_

See individual course listings for any required materials

\_\_\_\_\_

Course Tuition: \_\_\_\_\_

8 Week Discount: \_\_\_\_\_

for registrations received 8 weeks prior to course dates.

4 Week Discount: \_\_\_\_\_

for registrations received between 8 and 4 weeks prior to course dates.

Group Discount: \_\_\_\_\_

\$50.00 Late Fee: \_\_\_\_\_

for registrations received < 1 week prior to course dates.

\$50.00 Processing Fee: \_\_\_\_\_

for purchase orders requiring invoicing.

Additional Materials: \_\_\_\_\_

Total Tuition: \_\_\_\_\_

Name: \_\_\_\_\_ Professional Title \_\_\_\_\_ Employer \_\_\_\_\_

Home Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Work Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Evening Phone: \_\_\_\_\_ Daytime Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

Name as it appears on card (please print) \_\_\_\_\_ Signature \_\_\_\_\_

Card Number \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Exp Date \_\_\_\_\_ / \_\_\_\_\_ CVV \_\_\_\_\_

Billing address if different than home address listed above \_\_\_\_\_

How did you hear about us? \_\_\_\_\_ Promo Code: \_\_\_\_\_

**Register online at: [www.pdppro.com](http://www.pdppro.com) or by phone: 877-439-8865 (M-F; 9-5 CST)**