

# Information Processing Among the Sensory Systems: Neurological Support and Treatment Strategies

INTERMEDIATE  
COURSE!

## Faculty

**Renée Okoye, MS, OTR/L** has over 25 years of experience combined with extensive educational background including a Masters in Health Sciences, SIPT Certification and Board Certification in Pediatrics. She is a clinical educator for local colleges in New York, a Sensory Integration Resource for AOTA, and a professional grant reviewer for the U.S. Department of Education. Renée has been recognized by the New York State OT Association for Excellence in Practice and has published a number of articles in the area of pediatrics. Renée is the founder of Dove Ministries for Children and the Director of Dove Rehab Services on Long Island, NY.

### Description:

The primary objective of this course is to provide an updated view of core neurological concepts as they apply to clinical application of sensory processing intervention strategies. Participants will gain a better appreciation of updated concepts of neuro through practical, hands on laboratory experiences. Translating these applications into school and home environments will also be presented.

This course is divided into two main sections. Day 1 is an updated presentation of neurological structures and functions as they related to use of common sensory tools. Day 2 covers relating sensory tools with systems and treatment techniques of activation. Clinical reasoning with video tape analysis will be used.

### Suggested Audience: OTs, PTs & SLPs

*This course is offered for 1.3 AOTA CEUs*

*This course is offered for 1.3 ASHA CEU's (Intermediate Level; Related Area)*

### Objectives:

 Participants will be able to:

1. Describe the function of basic sensory processing systems to parents, teachers and other caregivers.
2. Explain the purpose of a variety of common sensory tools and describe their impact upon essential skills needed for learning and behavior.
3. Describe indications and contra-indications of a variety of sensory tools.
4. Relate how common sensory tools enhance integrative function at home and at school.

### Schedule\* (13 Contact Hours)

#### Day One

- 8:00 Registration
- 8:30 • Review & update basic concepts as they relate to sensory processing skills including neuronal migration, 2nd messenger systems and neuromodulation - video tape analysis
- 9:45 • Neurotransmission Lab
- 10:00 Break
- 10:15 • Brainstem structures and use of sensory tools
- 11:45 • Brain layout #1
- 12:30 Lunch on your own
- 1:30 • Facilitating cranial networks
- 2:15 • Tactile proprioceptive systems and sensory tools
- 3:00 Break
- 3:15 • Sensory integration at the level of the spinal cord
- 3:45 • Functional visual systems
- 4:30 Adjourn

#### Day Two

- 8:30 • Review - questions
- 8:45 • Levels of vestibular influence within the neuraxis
- 9:30 • Stretch break - vestibular interaction lab
- 10:00 Break
- 10:15 • Strategies for vestibular activation
- 11:45 • Structures of the auditory processing system
- 12:30 Lunch on your own
- 1:30 • Auditory tools and sensory processing
- 2:50 • Dietary influences on listening and attention
- 3:15 Break
- 3:30 • Role of sensory tools within a sensory integration approach
- 4:15 • Question and answer session
- 4:30 Adjourn

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

## 2012 Tuition

**Tuition:** \$410.00 (Includes handouts, and morning and afternoon refreshments)


### Discount Deadlines:

Super Saver Deadline (8 weeks prior to course date): \$380  
Early-Bird Deadline (4 weeks prior to course date): \$400  
Registration Deadline 1 week prior to course date •  
Regular Price: \$410 (after this date, \$460)

### Been to a PDP course in the last 3 years?

Ask about our multiple course discount.

**Maximum combined discount limit for a Two-Day course is \$50.00 from the regular tuition.**

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### Interested in bringing this course or any PDP workshop to your facility?

Visit us at [www.pdppro.com/outreach.shtml](http://www.pdppro.com/outreach.shtml) for further information or email [outreach@pdppro.com](mailto:outreach@pdppro.com).

For more information please contact:

### Professional Development Programs

1675 Greeley Street South  
Suite 101  
Stillwater, MN 55082  
Phone: 877-439-8865  
Fax: 877-259-5906  
[www.pdppro.com](http://www.pdppro.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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## 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: \_\_\_\_\_

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