

# **Learning Objectives**

### MedBridge

Neuromuscular Function: Mastering the Specificity of Manual Neuromuscular Facilitation Vicky Saliba Johnson, PT, FFFMT, FAAOMPT Gregory S. Johnson, PT, FFFMT, FAAOMPT

## **Course Objectives:**

- Demonstrate the use of IPA Functional Tests, mechanical treatment and manual assessment of neuromuscular function, and Tonic Spread in a patient with chronic LBP and reported core weakness
- Demonstrate assessment of the core for functional stability, identification of inefficient neuromuscular function, and use of Manual Neuromuscular Facilitation in a patient experiencing poor core performance after an injury to her back
- Demonstrate manual assessment of ROM, end feel, and neuromuscular function for a patient suffering from chronic neck pain secondary to a cervical herniated disk and discectomy

#### **Chapter 1: Case Study One**

Christina, an active female rock climber with chronic LBP and reported core weakness. This patient presents with chronic low back pain and "weakness in her core..." despite regular core work outs in classes and at the gym. The demonstration, by Vicky Saliba and Gregory S. Jonnson, includes use of the IPA Functional Tests, a mechanical treatment, manual assessment of neuromuscular function, and demonstration of Tonic Spread technique for facilitating an automatic core engagement.

#### **Chapter 2: Case Study Three**

Kristin, an active female who injured her back at the gym and has never felt she could fire her core since the injury. This demonstration, by Vicky Saliba Johnson, focuses on the assessment of her core to provide functional stability, identification of an inefficient neuromuscular function, and use of Manual Neuromuscular Facilitation to activate appropriate initiation and strength.

#### **Chapter 3: Case Study Three**

Jason, an active male who suffers from chronic neck pain secondary to a cervical herniated disk and discectomy. This demonstration, provided by Vicky Saliba Johnson, focuses on the manual assessment of the ROM, end feel, and neuromuscular function of the cervico-scapula region. The progression includes rationale for use of certain manual facilitation techniques as well as use of Combination of Isotonics to increase ROM and restore motor control at end range.