

Sports Injury Concepts for Massage Therapists

Presented by Active Spine & Sport Therapy

Course Description

As a member of your clients' healthcare team, it is essential for massage therapists to have a better understanding on the basics of sports injuries. Almost every client you will have in your professional career will have an injury you are required to work around while continuing the clients' therapy.

Participants in this course will be taken through the basics of sports injuries and common musculoskeletal conditions pertaining to the spinal column, upper and lower extremities. Participants will better recognize different categories of injuries and develop confidence in dealing with injured clients.

Course Objectives

- Enhance basic understanding of:
 - Causes of a sports injury
 - Classifications of sports injuries
 - The Recovery/Healing Process
- Develop recognition of clients' type of injury
- Learn how to adjust injured clients therapy to avoid interfering in recovery process
- Build confidence in dealing with injured clients
- Instruction on giving accurate simple self care tips
- Develop recognition of when to refer to specialists for further evaluation

Educational Credit

A certificate of attendance will be presented to each participant for contact hours approved by the Texas Department of State Health Services Massage Therapy Program. Active Spine & Sport Therapy is recognized as an Approved Continuing Education Provider by the Texas Department of State Health Services.

Approved Contact Hours: 6 CEU's.

Speaker/Lecturer

Brian Mulhall DC, CCSP, CSCS, ART, MDT, CKTP

Dr. Mulhall is the owner of Active Spine & Sport Therapy in Fort Worth and his practice was just recently voted "Best Place to go for a Sports Injury in Texas" by the readers of Competitor Texas Magazine for 2007 and 2008.

Dr. Mulhall has taught numerous seminars for personal trainers, athletic clubs, businesses and organizations and has received extensive training in the treatment of athletic and musculoskeletal conditions: Certified Chiropractic Sports Practitioner, Certified Strength and Conditioning Specialist, Certified Kinesio Taping Practitioner, Certified in Active Release Techniques, Certified in McKenzie Mechanical Diagnosis and Therapy

Agenda

8:00 – 9:00	Intro, Course Objectives, Injury Prevalence, Anatomy, Posture
9:00-10:00	Stretching Concepts, Proper Biomechanics
10:00-10:15	Short Break
10:15 – 11:00	Injury Process, Inflammation, Spinal Conditions
11:00 – 11:30	Spinal Conditions Cont.
11:30 – 12:30	Lunch Break on your own
12:30 – 1:00	Upper Extremity Conditions
1:00 – 2:00	Upper Extremity Conditions Cont.
2:00 – 2:15	Lower Extremity Conditions
2:15 – 2:30	Short Break
2:30-3:00	Lower Extremity Conditions Cont.
3:00- 3:30	Client self care tips, Review, Questions

Massage Therapy – Sports Injury Course Registration

Early Bird Registration

\$155

Registration and payment must be received 3 days prior to the start of the course.

Late Registration

\$175

Late registration will apply to all registration and payments received less than 3 days prior to the start of the course and at-the-door registrations.

Refund & Cancellation Policies

Active Spine & Sport Therapy reserves the right to refuse services, cancel or reschedule this seminar due to an insufficient number of registrants or other unforeseen circumstances. Under these circumstances, seminar fees will be returned in full to the registrant in the same method as the payment was received. Please note that Active Spine & Sport Therapy is not responsible for hotel, airline or other expenses incurred.

All cancellations must be submitted in writing. For cancellations received on or before 14 days prior to the seminar date, the seminar fee will be returned less a \$25.00 administrative fee. Absolutely no refunds (No Exceptions) will be available if cancellation is requested 13 days or less prior to the seminar or after the seminar.

Enrollment

Please select date you plan on attending

- Saturday April 17, 2010
- Saturday July 31, 2010
- Saturday November 13, 2010

Name: _____
Please include name as you would like it to appear on your certificate

Home Address: _____

City: _____ State: _____ Zip: _____

Phone: (_____) _____ Email: _____
To confirm registration and payment receipt

- Mail Reg. Form and payment to: Active Spine & Sport Therapy
3200 Collinsworth St.
Fort Worth, TX 76107
- Fax Reg. Form 817.332.5358 (Credit Cards Only)
- Scan & Email Reg. Form laurie@activespineandsport.com
- or Phone Active Spine & Sport Therapy 817.332.5353 complete form over phone

Please make Check/Money Order payable to: Active Spine & Sport Therapy

Please charge my credit card: Visa MasterCard Discover Am Ex

CC#: _____

Expiration Date: _____

Signature: _____

I agree to comply with the card holder agreement

Course Location/Time

Active Spine & Sport Therapy
3200 Collinsworth St.
Fort Worth TX, 76107

Class begins - 8:00 am
Class ends – 3:30 pm

**Please be courteous and show up on time, the seminar will begin promptly at 8:00 am.*