William James Brooks, DO, PC

A Treatise on the Functional Pathology of the Musculoskeletal System—Introduction A Unifying Scientific Paradigm for Manual Medicine

"Train the Trainers" A Faculty Development Workshop

Session A: August 15, 16, 17, and 18; 2024 Session B September 12, 13, 14, and 15; 2024

Presenters, table trainers, and planning committee members: William Brooks, DO, Shane Patterson, DO and Alan Yee, DO, do not have commercial relationships constituting conflicts of interest arising from the content of this "Faculty Development Workshop".

- * Dr. Brooks
- ** Introduced and summarized by Dr. Brooks. Trained by Drs. Patterson and Yee.
- *** Drs. Patterson, Yee, and Brooks

Session B

Vertebral Examination; Clinical Application; Professional Considerations

Learning objective - after completing Session B participants will appreciate and be able to discuss the:

- Contrasts between Somatic Dysfunction and FPMSS
- Clinical application of the FPMSS paradigm to regional musculoskeletal pain syndromes
 - Keys to history taking
 - Role of diaphragms
 - Restorative care vs maintenance care
 - Treatment reactions
 - Mechanisms of dysfunctional opening and closing at a joint
 - Risks and contraindications of mobilization (OMM) medicine
 - o Basic concepts of control of posture and movement
 - o "Five-minute" exam
- Professional Considerations
 - Medico-legal implications of the FPMSS paradigm
 - Coding and billing implications of the FPMSS paradigm
- General content of the Advanced Seminar

And will be able to: competently examine the entire MSS (except the cranium and mandible); describe findings in accord with to FPMSS nomenclature and principles; formulate a plan of treatment

Required reading prior to Session B

Chapter 7 Chapter 9 Chapter 10 Chapter 11

Thursday September 12, 2024

8:45—Noon Break ~ 10:00—10:15

- I. Welcome—share interim experiences
- II. Required reading questions

Learning objectives – reading participants will appreciate and be able to discuss and use:

- Interpretation of available motion:
 - Profiling
 - Prioritizing

III. Session A content review and questions

LAB #3: *review* available motion parameters taught in Session A (change partners and trainers) (record findings) **

Noon – 1:30 Lunch

1:30 – 5:45 Break ~ 3:15 – 3:30

IV. Critique and Revision of Historical Definition of "Somatic Dysfunction—Part #2 * Learning objectives - participants will appreciate and be able to discuss:

- Limitations of current osteopathic & related musculoskeletal exams
 - Goals for data collection and interpretation: false positives and false negatives
 - Spine focused
 - Brief historical review of Chicago and Muscle Energy ("postural/structural") models
 - Non-equivalence of positional and motion analyses
 - Limitations of postural analysis
 - Limitations of motion analysis
 - Theories of primary dysfunction: sacral base; atlas
 - Symptom focused
 - Regional
 - Technique: Counterstrain; Trigger Points; Myofascial Release; Balanced Ligamentous Tension; Functional
 - Cranium focused
 - o General and local "listening"
- Renewed definition and naming of Somatic Dysfunction (FPMSS)
 - Healthy ("optimal") function
 - Formal definition
 - TART revised
 - Nomenclature consequences

Learning objective LABS #4, #5, #6 - participants will be able to competently examine the listed segments as well as describe findings in accord with FPMSS principles

LAB #4: available motion of sacrum (prone, propped, fold-up, & side lying) **

Friday September 13, 2024

8:45—Noon Break ~ 10:00—10:15

LAB #4 - continued

LAB #5: available motion of thoracolumbar spine and posterior rib cage (side-lying, seated, prone, prone propped, foldup)

Noon – 1:30 Lunch

1:30 - 5:45 Break ~ 3:15 - 3:30

V. Etiologies and Mechanisms of Somatic Dysfunction

- Learning objectives participants will appreciate and be able to discuss:
 - Mechanisms of dysfunctional opening / closing at a joint (movement) and of posture
 - o Intra-articular
 - o Extra-articular
 - Localization of most somatic dysfunction: "whole is greater than the sum of its parts"
 - Keys to history taking
 - Characterize the chief complaint
 - o Complete lifetime medical / surgical / dental / psycho-social history
 - Lifetime biomechanical (trauma, surgery, habitual use) history
 - o Lifetime loss of breath and altered consciousness

LAB #5 - continued

Saturday September 14, 2024

8:45—Noon Break ~ 10:00—10:15

VI. Clinical Application - regional MSS pain syndromes *

Learning objectives - participants will appreciate and be able to discuss:

- Maintenance vs restorative care
- General principles of restorative care
- Specific principles for restoring proportionate available motion ("mobilization medicine")
- Benefits of restorative care
- Management of "treatment reactions"
- Indications for maintenance care

LAB #6: available motion of abdomen, anterior chest and cervical spine (including regional with oculomotor demand)

VII. Diaphragms *

Learning objective - participants will appreciate and be able to discuss the:

• Role of diaphragms in generating economical posture and motion (storage and release of elastic energy)

MINI-LAB #18: breathing, jumping

• Six diaphragms: three respiratory; two x 2 propulsive diaphragms; CNS

Noon – 1:30 Lunch

1:30 – 5:45 Break ~ 3:15 – 3:30

LAB #7: summarizing data interpretation – practice treatment Learning objective - participants will be able to:

- Interpret available motion of the whole MSS in three stages grading, profiling, and prioritizing
- Develop a treatment plan based upon that interpretation
- Discuss the pros and cons of indirect vs direct action mobilization techniques
- Safely use DIRECT action techniques—HVLA, Counterstrain, Myofascial Release, Articulation (Cranial), Post Isometric Relaxation Stretching—to restore proportionate available motion

DEMONSTRATION #7: examination and treatment for primary care

• Perform the 5 MINUTE EXAM (primary care)

Sunday September 15, 2024

8:45—Noon Break ~ 10:00—10:15

VIII. Risks and Contraindications *

Learning objective - participants will appreciate and be able to discuss the:

- Absolute and relative contra-indications for mobilization (OMM)
- Discrimination of side-effects, complications, and treatment reactions
- Controversy regarding stroke and cervical manipulation

IX. Professional Considerations

Learning objective - participants will appreciate and be able to discuss:

- How the FPMSS paradigm facilitates confident medico-legal opinions ***
- Experiences with Coding and Billing ***
- X. Introduction to the Advanced Seminar *

Learning objectives - participants will appreciate and be able to discuss the principle of postural context expansion to reveal further dysfunction:

DEMONSTRATION #8: expanded postural contexts of evaluation for available motion*

- Integrations with the cranial sacral mechanism and EENT functions
- Economical control of posture and movement

Learning objectives - participants will appreciate and be able to discuss:

MINI-LAB#2: standing pan-spinal standing forward bending with arising and backward bending with arising

DEMONSTRATION #9: seated pedad quarter side bending from pedad, supine pedad quarter straightening leg down *

- Economical generation of posture and movement: command and control of posture and movement
 - Differentiation / integration
 - Muscle AND joint
- Kinetics
 - Open and closed chain
 - o "Stable" posture and movement: optimal wobble
- MSS integration with the whole body and the person
- X. Summary, Questions, and Seminar Evaluation

Post Seminar: virtual discussion - TBD