

## **PRESENTATIONS**

**Title:** Extended Learning Academy: **The TKI System:**

1. Training
2. Knowledge
3. Inspiration

**Location:** The Center of Restorative Exercise (C.O.R.E)

**1/10/11**

The Restorative Exercise Specialist Curriculum is comprised of a lecture class and observational hours. In the lecture class, attendees will learn a variety of restorative exercise techniques for individuals with physical disabilities, diseases and musculoskeletal injuries. In addition information is disseminated about the psychosocial aspects of disability. In the observational hours section, future restorative exercise specialists will utilize their newly acquired knowledge while working hands on with clients with a variety of disabilities.

My teaching style embraces the concept of learning by doing. I do not believe in amphitheater medicine, where you learn by watching. I embrace the concept of “hands on learning equals brains on learning” and what the hand learns the brain never forgets. My enduring philosophy is to learn a procedure, do it, and then teach it

The best words to sum up what motivates me to enlist the cause of teaching the future restorative exercise specialist my award winning, results proven TKI system are these: ” It is not what you get from an experience, it is what you become from the experience”, and “ If you affect a small amount of people for a small amount of time – that is eternal.”  
Sir Thomas Merton

1. A Restorative Exercise Specialist conducts appropriate health-and-fitness-related assessments for members of special populations and develops and administers restorative exercise programs designed to enhance strength, muscular endurance, balance, range of motion, and cardiovascular function.

2. A Restorative Exercise Specialist works with special populations (e.g. disease, physical disability, post-rehabilitation) in cooperation with other qualified healthcare professionals to enhance quality of life and manage health risk. A Restorative Exercise Specialist plays an essential role on each client’s healthcare team, which, depending on the individual’s health status and limitations, may include one or more physicians, a physical therapist, chiropractor, psychiatrist, dietician, and so on.

There are 20 modules in the Restorative Exercise Specialist Curriculum. Each module covers each one of the components of the circle of function:

1. Motivation
2. Gait Mechanics
3. Musculoskeletal Strength

4. Musculoskeletal Endurance
5. Musculoskeletal Power
6. Flexibility
7. Balance
8. Posture
9. Cardiovascular Conditioning
10. Speed
11. Agility
12. Acceleration
13. Quickness
14. Neuromuscular Reactive Training
15. Manual Resistance
16. Manual Flexibility
17. Nutrition
18. Assessment
19. Program Design
20. Performance Enhancement Techniques

**Title:** Non-discrimination on the Basis of Disability by State and Local Governments and Places of Public Accommodation: Equipment and Furniture. 1/21/11

**Agency:** Department of Justice, Civil Rights Division.

**Summary Action:** Advance Notice of Proposed Rulemaking.

The Department of Justice (Department) is considering possible changes to requirements under titles 11 and 111 of the Americans with Disabilities Act (ADA) to ensure that equipment and furniture used in programs and services provided by public entities and public accommodations are accessible to individuals with disabilities. In this Advance Notice of Proposed Rulemaking (ANPRM), the Department is seeking public input on issues relating to possible revisions of ADA regulations to ensure the accessibility of equipment and furniture in such programs and services and also is seeking background

information for the regulatory assessment that the Department may need to prepare if it revises its regulations.

**Title:** Help Jen Walk Again Appreciation Banquet                      12/12/10

**Location:** Our Lady of Mount Lebanon Hall

**Objectives:**

1. To inform the banquet attendees about the psychosocial and physiological scientific parameters involved with a Spinal Cord Injury.
2. To express gratitude to the contributions of the Help Jen Walk Again Angels whose generosity covers the costs, that insurance does not cover, of the necessary restorative exercise that is fundamental to her path to full recovery.

**Title:** World Class Training, World Class Performance                      7/6/10

**Location:** MB2 Speedway

**Meeting Objective:** From Paralysis to the Para Olympics 2012

**METHODOLOGY:**

Together, Sports Science Training and Sports Science Performance provide the most comprehensive training and performance program available for obtaining your goals.

**Sports Science Training** provides seven training modules with comprehensive, science-based workouts to adapt to your sport or event. Exercise programs are displayed in modular format so you can immediately utilize the relevant workout for your sport. Sessions are accessible and fun for all, and both coaches and athletes will find practical, relevant advice:

Module 1: Planning

Module 2: Injury prevention

Module 3: Mobility

Module 4: Endurance

Module 5: Strength

Module 6: Speed and agility

Module 7: Psychology

**Sports Science Performance** will lift your performance to its ultimate. With your training foundations laid with the Sports Science Training, the eleven modules in the Sport's Science Performance shows how to develop your sporting performance right up to competition level:

- Module 1: Planning
- Module 2: Conditioning
- Module 3: Mobility
- Module 4: Endurance
- Module 5: Strength
- Module 6: Speed
- Module 7: Injury Prevention
- Module 8: Psychology
- Module 9: Ergogenic Aids
- Module 10: Evaluation Tests
- Module 11: Competition Preparation

By utilizing the Sport's Science Training Sport's Science Performance you'll improve your performance exponentially.

Remember: Here are some of the **benefits you'll accumulate** from the Sport's Science Training and Sport's Science Performance: You will benefit from these proven techniques

1. Improve the strength and power of movements by optimising the functioning of your nervous system
2. Experience a leap in power and stamina as you change your exercises to mimic the intensities of your sport or event
3. Nullify weaknesses by applying specific strengthening and mobility exercises -- a crucial technique all athletes should master
4. Transform your circuit training to improve strength, power, economy and VO2 max
5. Improve 'lactate threshold' – the best predictor of endurance performance – by using intense workouts close to maximum velocity
6. Utilize 'Neural Training' to fine-tune the nervous system to sustain fast intensity for the full duration of your competitive event
7. Build endurance (rather than strength) for your common 'at-risk' muscles such as your back and trunk
8. Maintain constant speed and power right through to the final stretch (just when the rest of the field slows), using one of the world's most effective training methods (Periodization)
9. Reduce your heart rate and deliver more oxygen to hard-working muscles by increasing blood volume to exceptional levels before competition
10. Improve flexibility and avoid injury using the 'dynamic strength workout', as developed by the strength-and-conditioning specialist Taylor
11. Quickly carve away body fat and replace it with lean muscle

Each Training session will move you towards a new competitive level.

**Training:** With a tested and proven training foundation, you'll be fit and ready to move up to a higher performance level.

**Performance:** the next stage is to focus on performance enhancing techniques.

### **Summary**

1. Provide you with sports-specific and event specific workouts
2. Cut out unnecessary workouts
3. Balance your exercises to ensure certain muscle groups aren't ignored
4. Focus on working up to your highest competitive level

**Title:** Inclusive Fitness: Exercise is for Every-Body

**Location:** IHRSA Conference and Trade Show, San Diego, CA 3/10/10

### **Objective**

The purpose of this presentation is to give the industry an introduction to me and my pioneering work on integrating healthcare into health clubs, termed INCLUSIVE FITNESS. The objective of the presentation is to clearly impress to the industry that the current need and demand for fitness centers with accessible equipment and knowledgeable staff grossly outnumbers the supply. The phrase fitness centers that cater to the disabled population are few and far between concisely summarize the take-home message from this presentation. This is the gap that I am on a mission to close and will do it first and foremost in mind, with client's comfort, total access, and results.

**Title:** Rock and Roll Nutrition: A step-by-step approach to building the rock and getting rid of the roll.

**Location:** Harvard Westlake High School Varsity Tennis Team 3/7/10

### **Objectives:**

1. Nutrition is the foundation of performance enhancement
  - Nutrient Timing
  - Nutrient Quantity
  - Nutrient Quality
  - Front Loading vs Backloading
2. Anything that can be measured can be improved.

3. Nutrition is not about mysticism and unrealistic contortions. It's about feeling good inside and out and getting exactly what you need.
4. Ultraprevention: "Steer clear of the pill for every ill philosophy".
5. There are 5 forces of illness.
  - 1) Malnutrition (sludge)
  - 2) Impaired metabolism (burnout)
  - 3) Inflammation (heat)
  - 4) Impaired detoxification (waste)
  - 5) Oxidative stress (rust)

**Title:** Exercise is a Series of Movements: Success is measured incrementally; what is measured can be managed.

**Location:** Multiple Sclerosis Woodland Hills Support Group                      3/4/10

**Objective:**

You will renew your enthusiasm and develop a fresh perspective toward the benefits, values, and results of exercise.

The question we must ask ourselves is this: What are we doing today to make us stronger tomorrow?

To quote Jack Lallane." Exercise is a king. Nutrition is a queen. When you put them together you have a kingdom."

The key toward recovery is to identify all of the secondary complications and degenerative changes that typically occur following a disabling condition and to prevent them from occurring. At the same time, all measures must be undertaken to maximize recovery. In the case of a multiple co-existing injuries, I advise my clients to always think in terms of the 3 R's - Rejuvenation, Regeneration, and Regrowth in order to optimize the possibility of turning neural pathways into super neural highways.

My ultimate goal is to provide and promote the ongoing benefits of restorative exercise. Currently, a patient undergoes a course of inpatient and outpatient physical therapy and then is discharged by their insurance companies. There is an unfulfilled need that must be met. And that need is continuity of care that focuses on recovering from any disabling condition. This is where I come in. I work very closely with the inpatient and outpatient physical therapists so that when the client is discharged from the hospital environment they can continue to improve by embracing a complete lifestyle enhancement regimen

that is necessary to achieve health and wellness, fitness, and ultimately living a long, healthy and active life.

In my professional opinion, optimal management of a catastrophic injury is more than just an exercise regimen. It is a total lifestyle enhancement program.

With all of my Clients I chart daily lifestyle variables:

1. Sleep status
2. Nutrition status
3. Hydration status
4. Bowel program
5. Bladder program
6. Skin status
7. Spasticity status
8. Perceived pain intensity (0 no pain - 10 max pain)
9. Medication status
10. Supplement status
11. Stress levels (0 no stress - 10 distress)
12. Vitality (0 fatigue - 10 fantastic)

At the end of each week, I determine trends. I establish if there are negative or positive lifestyle changes.

Preventive intervention is the platinum standard. If we detect, then we can monitor. This truly adds meaning to the words "tracking progress". The process is the progress!!

This is the time to Be Better. Better Than Ever!!

**Title: The Power of a Shadowing a Mentor and the Magic of Teaching.**

**Location: College of the Canyons, Kinesiology Department. 11/23/09**

### **Objectives**

1. How did your career in the health and fitness industry begin?
2. Where did you work? What did you do? How many clients did you serve?
3. How did your career change or evolve during that time?
4. What is your philosophy towards health and fitness?
5. Please describe how you came to work with spinal cord injury patients. (Did you have formal training? Where did you begin training SCI clients? How was it different than working with clients without spinal cord injury?)

6. What exercise regimens did you implement? Where did the training sessions take place?
7. Please explain what it's like to train spinal cord injury patients. What are some careful considerations? How did these patients vary in disability?
8. Describe the changes in your career since Kaye Kittrell's book, *Transforming Lives*. What do you do now? How has your career changed or developed since that time?
9. Please give a brief update on "where your clients are now," since the time of Kaye's book. (What are some success stories? How has training improved their function/ability? How were some clients' conditions more difficult to work with than others?).
10. What advise would you give someone desiring to become a Kinesiologist/Exercise Physiologist?

**Title:** Restorative Exercise -Solid to the C.O.R.E: Rehab and Community Physical Activity - When and Where Shall the Two Meet?

**Location:** San Fernando Valley Mobility Works Expo 6/6/09

I'm more convinced than ever that this is the right time to make a seismic policy shift in addressing the need for some type of sustainable health/wellness program after rehab. I've been pontificating for many years that the best time for getting a person's attention is right out of rehab. My presentation at Kaiser Permanente's Physical Medicine and Pain Management Continuing Medical Education Symposium on the transition from rehab to community physical activity seemed to resonate with the audience, which was composed primarily of physicians in physical medicine and rehabilitation. The physicians there were in attendance as part of their official continuing education required to maintain their medical licenses. One of the topics of my lecture was, "A Step-by-Step Approach to Training Clients with Neuromuscular Disorders." The purpose of the presentation is two-fold. Firstly, to establish respective improvements resulting from long-term dedicated commitment to therapeutic exercise. It will also validate the efficacy of restorative exercise for a wide variety of physical disabilities, musculoskeletal injuries, diseases and a host of other disabling conditions.

So, what is this seismic policy shift all about? It's about finding effective strategies that will assist an individual after a traumatic injury or newly diagnosed disability into transitioning into a socially engaging, health-enhancing lifestyle composed of: (a) getting out of the home for a couple of hours a day; (b) connecting with other people in the



community; and (c) finding an enjoyable form of physical activity. All three of these can be accomplished in a local health club or fitness facility.

Physical activity can take on many shapes and sizes. For younger individuals, this may involve recreational or competitive sport surrounded by other players who enjoy the aspect of competition. For middle-aged and older adults with newly diagnosed disabilities, the idea is to get them linked to a community-based physical activity program that will allow them to continue their recovery on their way to a more physically active lifestyle. On the recovery side, examples would include a knowledgeable fitness professional who can work with a rehab professional in establishing a body weight supported treadmill training protocol for stroke survivors; sitting yoga for people with multiple sclerosis; a round of golf in an accessible cart for someone newly diagnosed with Parkinson's; or a warm-water exercise class for an older person with spinal cord injury.

Whatever the condition, health impairment, or disability, it's critical that on the last day of inpatient or outpatient rehab or after a doctor's visit, the patient has a carefully designed transition plan that promotes community physical activity. The plan should be developed by the individual with the disability and his or her rehab professional, and hand-delivered to an exercise instructor working at a facility that is in close proximity (if at all possible) to the person's home. Without that take-home plan, the effects of rehab will be washed out shortly after the person returns home. By establishing a physical activity program after rehab, the person can continue his or her recovery in the community on the way to improving health, fitness and quality of life.

**Title: Crossing the Finish Line: The Power of Possibility - 26.2 miles or 26.2 inches.**  
In the words of St Francis of Assisi "Start by doing what is necessary, then do what is possible and suddenly you are doing the impossible"

**Location: LA Marathon 5/29/09**

**Los Angeles, CA – On May 25, 2009**, at 1pm, approximately fifty individuals who have sustained catastrophic and debilitating injuries will gather at 5th Ave and Flower St. and together as T.E.A.M. Rise Above will walk across the finish line at the Los Angeles Marathon. Whether they complete all 26.2 miles or 26.2 inches, the ability to cross the finish line under their own power is something that many of these individuals were told they would never be able to do.

Marc Richards became paralyzed in 1998 after suffering a seizure due to a brain tumor and a subsequent overdose of medication, spent years of his life confined to using a wheelchair. Under the guidance of Director/Chief Clinical Exercise Physiologist and co-founder of C.O.R.E., Taylor-Kevin Isaacs, Richards set the goal to finish the Los Angeles Marathon. On March 6, 2005, with thousands of individuals cheering and the support of the Army National Guard, he took his first steps for the second time in his life as he lifted himself out of his wheelchair and crossed the finish line.

“With the crowd cheering as I put every little bit of energy I had into those steps, fulfilling a dream to walk again, I knew others needed to share in this powerful experience,” said Richards.

In 2006, Richards teamed with the Center of Rehabilitative Exercise (C.O.R.E.) and a few individuals supported each other as they crossed the finish line. In each successive year the number of injured athletes crossing the finish line grew and in 2009, approximately 50 individuals with catastrophic and debilitating injuries or chronic illness will join together and cross the finish line as T.E.A.M. Rise Above.

While these Therapeutic Exercise Advocates and Mentors for C.O.R.E. (Center of Rehabilitative Exercise) see their ability to cross the finish line as an opportunity to celebrate their process of recovery with their family and friends, they also see it as necessary to show the community the “Power of Possibility” and that “Exercise is Medicine.”

C.O.R.E. co-founder and recovering quadriplegic, Aaron Baker states, “Crossing the finish line is powerful, but more importantly it demonstrates the need that individuals with catastrophic injuries and chronic illness dedicate themselves to therapeutic exercise and experience the power of possibility. The journey of 1000 miles begins with a single step... Or as in today's case, the last 1/8th of a mile at the 2009 L.A. Marathon began with a lot of blood, sweat and tears. Powerful! A word that understates today's achievements. I am excited to have joined the 25,000+ participants in the L.A. Marathon today, but more importantly, honored to walk alongside a select few individuals who are overcoming great adversity. Incredible people, including myself (all suffering different level SCI) or a stroke took independent steps towards the finish line. This amazing feat was spearheaded by clinical exercise physiologist Taylor Isaacs (head clinician) and SCI marathon participant Marc Richards. On the course the energy in the air was electric, the focus in the eyes of my peers was intense, and the sense of achievement at the finishing line...unmatched. To be a part of something so special is difficult to describe. Though each of us celebrated individual triumphs, it was the collective Tour De Force that made today so spectacular, pushing each other to greater heights, supporting and inspiring with each step. This day is a little piece of history, marked by heroic efforts, and sealed with iron will.”

**Title:** The C.O.R.E. (Center Of Rehabilitative Exercise) Development Process: How C.O.R.E. will fulfill an unmet need!!

2/2/09

**Location:** Robert H. Ballard Rehabilitation Hospital in San Bernardino

**Target Audience:** The Free Wheelers and Possibilities: A fairly new organization through Loma Linda University directed toward disabled athletes in the community.

**The purpose** of this presentation is to move one step closer to the goal of changing the health care paradigm. Who better to speak to the need of a C.O.R.E. facility than individuals with a disabling condition who did not have this option at the time of their injury. Their responses will pave the way for future generations to have that choice!! Clients don't need adequate care. They

need excellent care. Excellence does not just come from passion and enjoyment. It comes from study, experience and hard work. Sweat changes things. This is the real key. This is what the "collective we" have in common. The purpose of formulating the CORE committee and CASE STATEMENTS is to first and foremost formulate a transition team that will make this dream a reality!!

**The following questions will be presented and discussed.**

With respect to question #1, it is important to establish how long I have worked with each client and how long each client has had their respective disability. These two variables establish experience - the experience of working toward overcoming a disabling condition, and their respective improvements resulting from a long-term dedicated commitment to therapeutic exercise. It will also validate the efficacy of therapeutic exercise for a wide variety of physical disabilities, musculoskeletal injuries, diseases and a host of other disabling conditions.

1. How has ongoing therapeutic exercise affected the management and improvement of your condition?
  - a. List your primary diagnosis and if applicable all coexisting conditions.
  - b. Date of disabling condition/illness.
  - c. How long have you and Taylor been working together.
  - d. How many days and hours per week do you and Taylor work together.
  
2. How would you have felt, at the time of your injury or diagnosis of your condition, if there was a C.O.R.E. facility for continuity of care post-discharge from outpatient physical therapy?
  
3. What would having access to a C.O.R.E. facility mean to you?

**Title Share the Care: State of the heart care, state of the art technology: 11/19/08**

The purpose of this presentation is to reframe the perspective of the soon to graduate student athletic trainers and student physical therapists. The main objective is to impress across the notion that high performance results are the product of a high performance education. The education that you receive will teach you how to turn theory into thought, thought into action, and action into high performance. In addition high performance results come from having high performance standards. The standard of care is two-fold: first ask yourself this question, Would you like someone like you as your clinician? The seconds aspect is for you to aspire to be like the person your mother would like you to marry.

**LOCATION: University of Northern Iowa, Cedar Falls, Iowa.**

Dr. Terry Noonan Professor and Head Athletic Trainer of Athletic Training.School of Health, Physical Education and Leisure Services

**Title: Releasing habitual muscle tension decreases Chronic Pain: A gradual step-by-step approach**

**11/18/08**

The purpose of this presentation is to discuss various methods that relaxes your whole person instantly upon the first perception of a state of tension. A variety of methodologies designed specifically for the reeducation of the neuromuscular system will be discussed. You will come to recognize localized muscle tension and enact the procedure (s) to induce a relaxation response – after all relaxation is the body's built in tranquilizer.

The following tension release procedures will be discussed, demonstrated and elaborated on:

1. Joe Wolpe: Systematic Desensitization
2. Edmund's Jacobson's progressive systematic relaxation.
3. 4 Transitional zones within an axially aligned vertebral column
4. Diaphragmatic breathing inspiration 4 seconds: hold 7 seconds, expiration 8 seconds
5. Tension inventory
6. Breathing Inventory
7. Passive Tension Flooding
8. Active Tension Release
9. Systemic Quick Tension Release
10. Self – Operations control using the rule of “Peak tension to diminishing tensions”
11. Myofascial Release
12. An 18 step whole body approach to releasing muscle tension by improving blood circulation.

**LOCATION:** Covenant Medical Center: Wheaton Franciscan Healthcare, Waterloo, Iowa.. Dr. Joseph Nora Medical Director Rehabilitation Program

**Title:** Celebration of completion: The full use of one's powers along the lines of excellence **11/9/08**

The purpose of the presentation is to inform members of the allied health care profession, members of the community and individuals living with a disabling condition of a historical milestone. My client Aaron Baker, a recovering quadriplegic, and his mother Laquita along with Team Rise Above completed his cross-country bike ride 9/27/08. Last year he became the first - ever recovering quadriplegic to ride on a tandem bike 3182 miles from San Diego to Florida. This year he rode 4180 miles independently on a trike from San Francisco to Washington D.C - making him the first-ever recovering quadriplegic to achieve a milestone of such magnitude. The purpose of the celebration of completion is to share the process and accomplishment. The overall purpose is to aspire all individuals to the power of possibility and to promote the ongoing benefits of therapeutic exercise in obtaining the result of optimal health and wellness.

Please visit the website [www.riseabovetour.com](http://www.riseabovetour.com)

Here is the link to the Winchester Star article reporting on this milestone.

[http://www.winchesterstar.com/showarticle\\_new.php?sID=5&foldername=20080924&file=Quadriplegic\\_article.html](http://www.winchesterstar.com/showarticle_new.php?sID=5&foldername=20080924&file=Quadriplegic_article.html)

**Location:** The Paseo Recreation and Screening Room, Valencia.

**Title:** **HELP YOUR CLIENT REGAIN FUNCTION: A step-by-step practical approach.** **7/25/08**

**These LEARNING OBJECTIVES will be covered:**

1. Integrate an exercise program into your client's training schedule, ensuring safe, effective and efficient exercise and performance progression.
2. Discuss the importance of using the Karvonen formula instead of the standard  $220 - \text{age} * \text{relative intensity}$  to determine the client's target heart rate zone.
3. Identify the importance of using the SAID principle (Specific Adaptations to Imposed Demands) when designing an exercise program.
4. Specify the elements of the physical activity program for individuals with neuromuscular disorders.
5. Recognize how exercise for an individual with a neuromuscular disorder is highly personalized and prescriptive.
6. List the benefits of passive static standing.
7. Cite client information to obtain from the medical professional.
8. Explain the vicious cycle of disability.
9. Understand the importance of abiding by the special instructions in order to decrease the client's internal core temperature to avoid overheating.

**Location:** Kaiser Permanente Joint Physical Medicine and Rehabilitation Pain Management symposium

**Title:** **Transforming bodies, Transforming Lives.** **7/16/08**

**Description:** The dual- purpose of which is to integrate health care in health clubs and to bridge the gap between physical therapy and personal training with clinical exercise physiology in order to provide the necessary on-going benefits of therapeutic exercise.

On a personal note: My clients ask me how come there aren't any clinicians like yourself nor any facilities that we can go to after we have been discharged from traditional physical therapy. To that question "I respond together we are going to improve the health care system by changing the health care paradigm. Happiness is all about choices. I look forward to the day when a person discharged from formal physical therapy can continue on the remarkable improvements made while in physical therapy, knowing that they are in good, caring, and able hands. I envision the day when the clinical exercise physiologists and physical therapists are considered two horns on the same goat and can work together in preventing injury and enhancing the performance of their client. I look even more forward to the day when the question " where do we go, once we have had our case discharge conference? is no longer asked. There are many stories worth telling and many achievements worth applauding - all fueled through human determination. The process is the progress!!

**Location:** University Hospital: Department of Physical Medicine and Rehabilitation, Salt Lake City, Utah

**Title:** The Notion Of Motion – Out Of Your Seat And On Your Feet. Improving Function Increases Independence and Boosts Self-Efficacy. 7/15/08

**Description:**

This presentation accentuates how-to vigorously, wholeheartedly and conscientiously to live the fitness lifestyle – at any age and level of ability. This presentation emphasizes the necessity of a formal nutrition and exercise program that covers all of the components of the circle of function. It includes a focus on gait mechanics, musculoskeletal strength, power and endurance, balance, flexibility, posture, aerobic conditioning and neuromuscular reactive training, which centers on speed, agility and acceleration. The most important piece of equipment in the gym that I use to reduce my client’s risk of injury and to maximize performance is their body. When training an individual with frailty, it is imperative to adopt a joint-by –joint approach in order to prevent them from becoming a master compensator from which if not detected will lead to common compensatory pain patterns. A successful recovery process makes a great example of the expression, “let my conduct be my case”.

**Location:** Tri- County Independent Living Center, Ogden Utah

**Title:** The Efficiency of Human Movement. The most important biomotor ability in human movement science. 5/7/08

With all of my clients I focus first and foremost on the most important biomotor ability - The efficiency of human movement. This is human movement science in principle. In practice, I reinforce the importance of developing contralateral movements in the patterning of a continuous movement pattern. In essence, nordic walking can boost the neural pathways into superneural highways, which translates into injury prevention and enhanced performance. In one word, RESULTS!!

When a muscle contracts it learns. The best way to imprint a proper movement pattern within the central nervous system is to combine the mental practice with the physical practice. This is what I refer to as directed mental focus: working in (mental) while working out (physical). The effectiveness of the power trek nordic walking system in navigating uneven terrain and also as a cross-training mode is instrumental to the improvement of aerobic conditioning and gait mechanics.

One of the acronyms that I use to educate my clients is W.E.L..L (Walk everyday, live longer). My favorite acronym is W.E.E.L.L. (Walk efficiently everyday, live longer). My logo is quality movement = quality improvement. That is... The FITNESS SCRIPTURE!! Teach it, preach it , learn it, live it and love it.

**Objectives:**

1. Functional mobility = balance + gait
2. The most important biomotor ability in human movement science is: the efficiency of human movement.
3. “If you perform it , I train it” (gait,balance and posture)

4. Walking is just posture in motion
5. Muscles and nerves that wire together fire together.
6. Muscles and joints that work together win together
7. Muscles don't know age, they know overuse, misuse and disuse
8. Mental practice + physical practice best way to learn a skill
9. Mechanical cortical to automatic subcortical
10. Imprinting correct gait mechanics
11. Optimal Sequencing

**Location:** Powertrek Nordic Walking System, Balboa Park, San Diego, CA

**Title:** How a Wellness Centered Approach Keeps a Community Well      4/27/08

This presentation identifies the barriers to regular exercise for individuals with a variety of disabling conditions.. During the presentation the problem (s), what to do about it (them), and how to get it done will be clearly stated. This presentation is centered around improving health and wellness in the residents of an agricultural community.

**Location:** Agua Dulce and Acton.

**Title** The Ongoing Benefits of Therapeutic Exercise in order to maximize your client's recovery. This presentation will discuss the importance of identifying tissue texture abnormalities, restrictions in range of motion, and assymetries that predispose one to injury. Also included will be a complete discussion on prevention, detection and the monitoring of an injury taking into consideration the location, magnitude and rate of progression. The process is the progress.

**LOCATION:** University of Northern Iowa, Cedar Falls, Iowa.      4/22/08

Dr. Terry Noonan Professor and Head Athletic Trainer of Athletic Training.School of Health, Physical Education and Leisure Services

**Title:** Stay In Shape While You Wait      4/21/08

**LOCATION:** Covenant Medical Center: Wheaton Franciscan Healthcare, Waterloo, Iowa.

Dr. Joeseeph Nora Medical Director Rehabilitation Program

**Underlying theme:** The necessity of intense therapeutic exercise post-spinal cord injury and the importance of the ongoing benefit of therapeutic exercise post-medical based treatment for the purpose of effecting the best return of function possible.

- 1) A Step-by-Step Approach to Training Clients recovering from adhesive capsulites – post Hydroplasty protocol.

- 2) The role of a structured progressive integrated approach to exercise along with 4 –AP, growth hormone, and embryonic stem cells in the recovery from spinal cord injury. This topic includes a thorough discussion on the benefits of exercise on the neural, vascular, visceral, and musculoskeletal areas.
- 3) A case study presentation of a C-4,5 quadriplegic with multiple co-existing problems, especially diabetes.

**Title:** Beyond Traditional Training

4/12/08

**Location:** Dr. John Spencer Ellis radio show

**Objectives:**

Learn how to become an ongoing soldier of reliability and excellence in the army of commitment to maximizing one's health and wellness. It is only through daily study, daily practice, and daily preparation that it is possible for one whom is on the road to recovery to proceed along this interactive continuum: From degeneration to regeneration to health and wellness to fitness and to enhanced performance.

FORMULAE: 21 day to change bad habits and 90 days to change behaviors.

1. LIFESTYLE: The S.T.E.P.S to great S.H.A.P.E and boundless E.N.E.R.G.Y.

S – Sleep

T – Training

E – Eating/hydration

P – Planning (Planning doesn't take time, it makes time)

S – Supplement/medications.

S- Spiritually healthy

H- Heart healthy

A – Attitudinally healthy

P – Physically healthy

E – Emotionally healthy

E – Exercise (non –negotiable)

N- Nutrition: Go (cho and fat for energy), Grow (pro for muscle repair and recovery),

Glow – healthful glow from your food being your fuel.

E – Eating. Nutrient timing, Food selection, portion control, front loading (big breakfast, medium lunch, small dinner with snacks inbetween)your calories (Bruce Lee or Sarah Lee). Replace the word diet with nutrition and replace the word overweight with over fat. (Mike Tyson is overweight non over fat. His weight is 240lbs which is 240lbs of hungry muscle. His percentage body fat = 6%)

R- Rest: Quality rest is just as important as quality exercise.

G- Guessing (Varying your training and varying your recipes. Eat smart, play hard program) Human motivation = peak performance.

Y – YOUthful. “Think and act young, you will be so. Think and act old, it will be so.”



1. **Topic: Recovery is a Team Effort: Examining the Individual and Collaborative Roles of the Surgeons, Clinician, Patient, and Researcher on the Journey to Successful Treatment Outcomes.** 3 case studies **2/6-10/08**

Location: American Physical Therapy Association's Combined Sections Meeting, Nashville Csm 2008

**Topic: The Ongoing Benefits of Therapeutic Exercise** **1/13/08**

Location: Westin Spa and Resort: Arizona

The C.O.R.E concept: How to Conquer, Overcome, and Recover through Exercise.

**Topic: Healthy Habits in the Workplace** **11/13/07**

**Location: Partners in Care Foundation Annual Conference: Keynote**

**The L.U.C.K principle: To Labor Under Correct Knowledge**

This objective of this highly interactive presentation is to identify repetitive negative behavior patterns and transform them into repetitive positive behavior patterns that will ultimately result in a permanent behavioral change in lifestyle.

The format of the presentation encompasses a comprehensive lifestyle enhancement regimen.

Attendees will be able to immediately learn the lesson(s) and more importantly apply the lesson(s) learned. Everyone has the potential to transform. What is your transformative potential?

**Topic: Transforming Lives: The Nustep TRS 4000** **10/8/07**

Location: The Motion Picture Academy Sabon Health and Fitness Center

Economy of time meets efficiency of exercise: leg, core, arm, bone, and heart building.

The following lecture topics are appropriate for undergraduate, graduate students and practicing allied health care professionals – and everyone who wants to keep well and well informed. Seize the moment – and the momentum.

**1. Topic: Traits of an Effective Helper.... The Practitioner/Patient Interaction.**

**The B.L.E.S.S.I.N.G. principle.** **11/13/06**

State of the Art Care; State of the Heart Care.

“It is not what you get from an experience. It is what you become from an experience. If you effect a small amount of people for a small amount of time...that is eternal.”

**LOCATION: University of Northern Iowa, Cedar Falls, Iowa.** **11/14/06**

Dr. Biff Williams Associate Professor and Chair Division of Athletic Training.School of Health, Physical Education and Leisure Services

2. **Title:** **Exercise is Strong Medicine:** Fit in the Body, Ready in the Mind, High in the Spirits

**LOCATION: University of Northern Iowa, Cedar Falls, Iowa.** **11/14/06**

Dr. Biff Williams Associate Professor and Chair Division of Athletic Training.School of Health, Physical Education and Leisure Services

3. **Title** **The Integral Role of a Clinical Exercise Physiologist in the optimal management of a musculoskeletal injury, physical disability, disease, and in health and wellness promotion over the course of a client's lifetime.**

**LOCATION: University of Northern Iowa, Cedar Falls, Iowa.** **11/14/06**

Dr. Biff Williams Associate Professor and Chair Division of Athletic Training.School of Health, Physical Education and Leisure Services

**4. Title:** **Stay In Shape While You Wait**

**LOCATION:** Covenant Medical Center: Wheaton Franciscan Healthcare, Waterloo, Iowa.

Dr. Joeseeph Nora Medical Director Rehabilitation Program

**Underlying theme:** The necessity of intense therapeutic exercise post-spinal cord injury and the importance of the ongoing benefit of therapeutic exercise post-medical based treatment for the purpose of effecting the best return of function possible.

- 1) A Step-by-Step Approach to Training Clients with Neuromuscular Disorders
- 2) Help Your Clients to Regain Function: Highly Specialized Assessment Procedures

The S.T.E.P.S to great S.H.A.P.E and boundless E.N.E.R.G.Y

**Healthy Moves & Medications: Partners in Care Foundation.**

**9/6/06**

Topic: From di-stress to de-stress

It should cover stress in the working environment and at home and ways to manage stress so that it doesn't impact work productivity, quality of life and well-being. Objectives: To transition from a victim to a victor and from a worrier to a warrior. Learn how to use the optimal mindset, energizing exercises, and performance nutrition to slay the modern day lions, seek out and destroy the cardio terrorists, and stave off the disease causing devils.

**ALTAMED Health Services Corporation.**

8/25/06

**Topic:** Exercise is for EVERY-BODY

A lecture/workshop impressing the importance of a lifestyle of exercise, nutrition, and attitude on the ultimate goal: To live a long and healthy life.

**MUTUAL AMPUTEE FOUNDATION**

5/13/06

**Topic:** The Keys to Perfect Posture, Balance, and Gait mechanics

**ALTAMED Health Services Corporation.**

**HEALTHY MOVES AND MEDICATION FOUNDATION:** 2/16/06

**Topic:** S.T.E.P.S to take toward the healthy 3% of the Population

The purpose of the training is to lay the groundwork to motivate the care managers (nurses and social workers) to participate in the *Healthy Moves* exercise program that will introduce simple exercises to increase function and strength to their frail clients. The *Healthy Moves* program will be introduced at a later training on Feb. 23<sup>rd</sup>. The goal of this training is to teach the staff about the importance of exercise for themselves. Taylor will give the attendees an inspiring presentation that will motivate them to make physical activity a health priority in their lives. The reason behind this is that if the staff become more active themselves, they will believe in the value of exercise, and become more effective coaches for their clients.

**Mount St. Mary's School of Physical Therapy**

1/31/06

**Title:** The Integral Role of a Clinical Exercise Physiologist in the optimal management of a musculoskeletal injury, physical disability, disease, and in health and wellness promotion over the course of a client's lifetime.

**Reeve-Irvine Research Center: Webcast DVD series**

10/6/05

Produced by Sam Maddox, knowledge manager

**Title:** Stay In Shape While You Wait

**Underlying theme:** The necessity of intense therapeutic exercise post-spinal cord injury and the importance of the ongoing benefit of therapeutic exercise post-medical based treatment for the purpose of effecting the best return of function possible.

**California State University, Northridge, Department of Kinesiology 10/1/05**

**Topic:** Traits of an Effective Helper.... The Practitioner/Patient Interaction.

**Jewish Family Service of Los Angeles: Volunteer Recognition Event 9/20/05**

**Topic:** Volunteer = Generosity of Spirit

The B.L.E.S.S.I.N.G. principle.

“It is not what you get from an experience. It is what you become from an experience. If you effect a small amount of people for a small amount of time...that is eternal.”

**HEALTHY MOVES FOUNDATION:** Freda Mohr Center 2/9/05

**Topic:** Exercise is Medicine: Fit in the Body, Ready in the Mind, High in the Spirits

**HUNTINGTON MEMORIAL HOSPITAL: Pasadena location**

**Topic:** Learn to become your own preventive clinical gerontologist: 2/5/05  
Healthy moves for the aging, old, and advanced age individual.

**IDEA 2004 IDEA Personal Trainer International Summit:** New York: 10/7-10/9/04

- 1) A Step-by-Step Approach to Training Clients with Neuromuscular Disorders
- 2) Help Your Clients to Regain Function: Highly Specialized Assessment Procedures

**SHERMAN OAKS HOSPITAL:** Share the Care Conference 3/6/04  
State of the Art Care; State of the Heart Care.

**CRAIG HOSPITAL** Denver, Colorado  
**October Disabilites Awareness Month** 10/23/03

**KEYNOTE SPEAKER:** The Optimal Management of a Spinal Cord Injury.

**AMERICAN FITNESS INSTITUTE (AFI)** Cherry Hill, New Jersey 10/3-10/5

- 1) The Art of Personal Training
- 2) Rise Above – From Dysfunction to Function
- 3) Corrective Exercise: Anterior/Posterior postural deviations
- 4) Corrective Exercise: Lateral Postural Deviations
- 5) Corrective Exercise: Impaired Balance – Training
- 6) Soccer Readiness Training for All Populations.

**AMERICAN FITNESS INSTITUTE (AFI)** New Haven, Connecticut 7/25-7/27/03

- 7) The Art of Personal Training
- 8) Rise Above – From Dysfunction to Function
- 9) Corrective Exercise: Anterior/Posterior postural deviations
- 10) Corrective Exercise: Lateral Postural Deviations
- 11) Corrective Exercise: Impaired Balance – Training

**IDEA 2003 World Fitness and Personal Trainer International Summit:** Anaheim, California 7/17-7/20/03

- 3) Training Clients with Neuromuscular Disorders
- 4) Help Your Clients to Regain Function: Highly Specialized Assessment Procedures

**AMERICAN FITNESS INSTITUTE (AFI)** Williamsburg, Virginia 6/16-6/18/03

- 1) The Art of Personal Training
- 2) Rise Above – From Dysfunction to Function
- 3) Corrective Exercise: Anterior/Posterior postural deviations
- 4) Corrective Exercise: Lateral Postural Deviations
- 5) Corrective Exercise: Impaired Balance – Training

**GRANADA HILLS HOSPITAL** 4/16/03

Exercise Prescription and Program Design for individuals with Chronic Obstructive Pulmonary Disorders.

**AMERICAN FITNESS INSTITUTE (AFI)** New Orleans 3/21-3/23/03

- 1) The Art of Personal Training
- 2) Rise Above – From Dysfunction to Function
- 3) Corrective Exercise: Anterior/Posterior postural deviations
- 4) Corrective Exercise: Lateral Postural Deviations
- 5) Corrective Exercise: Impaired Balance – Training

**IRSHA: Sanfrancisco** 2/27-3/1

The Obesity Epidemic: Solutions, Socioeconomic Status, and Perceptions.

**IDEA2003 IDEA Personal Trainer International Summit:** Washington D.C 2/14-2/16/03

- 5) Training Clients with Neuromuscular Disorders
- 6) Help Your Clients to Regain Function: Highly Specialized Assessment Procedures

**NIRSA (National Intramural Recreational Sports Association):** 1/29-1/31/03

**National Fitness Institute: Personal Training Track.**

- 1) The Art of Personal Training.
- 2) Extraordinary Personal Training that Creates Tidal Waves in Your Fitness Center
- 3) Ask the Experts: A Panel Discussion

**California State University Fullerton** 11/04/02  
**Clinical Exercise Physiology and Athletic Training Department**  
The Man Inside the Helmet – Rise above.

**National Diabetes Exposition, Baltimore, Maryland** 9/27/02

**Topic:** The Role of Exercise in the Management of Type 1 and Type 2 Diabetes – A Permanent Lifestyle Behavioral Change.

**Topic:** Human motivation = Peak performance: 21 days to change bad habits and 90 days to change behaviors

**TIRSHA: Southwest Chapter “Light the Fire Within” 7<sup>th</sup> Annual Trade Show and Conference– San Antonio, Texas** 8/2/02

**Topic:** The B.L.E.S.S.I.N.G. Principle: The Formula for Unimpeded Progress.

**PACIFIC ATHLETIC CLUB** 7/20/02

**Topic:** FUNctional Training for the Older Adult.

**IDEA – Personal Trainer Summit, West** 6/30/02

**Topic:** Trends for 2002 and On. What’s Hot, What’s Not.

**Bob Babbit’s Competitors Radio Show – San Diego** 6/2/02

**Topic:** The Evolution of the Fitness Industry

**American Council on Exercise – Medical Fitness Association** 5/8/02

**Topic:** Lift weights to lose waist

**California State University, Northridge: Department of Kinesiology** 4/16/02

**Topic:** Kinesiology Majors Club: A Night of Learning

**OPERATION FitKids Program : Compton LA Sheriff's Department 4/15/02**  
**Arnold Schwarzenegger's after school program for inner city youth**

**Topic:** Optimal exercise programming for middle school children

**California State University, Northridge, Department of Physical Therapy 4/9/02**

**Topic:** Education + Motivation = Results: The Formula for Unimpeded Progress

**SPORTS CENTER FITNESS: Redondo Beach: 4/6/02**

**(Presentation to the health club's Master Fitness Trainers)**

**Topic:** Morals, Ethics, Principles and Values in Personal Training

**Suzhou Delegation: Chinese Government Officials 4/3/02**

**Topic:** Therapeutic Exercise for Special Populations

**IDEA PERSONAL TRAINER SUMMIT – EAST COAST: 3/1/02**

**Topic:** Origins, Evolutions, Trends, Issues and Future Directions in Personal Training.

**Thirtieth National Conference on Physical Activity for the Exceptional Individual: "Reaching for the Stars....the Odessey Continues. 11/10/01**

- 1) **Topic:** The importance of a musculoskeletal joint functional evaluation. From Page to Play.....Where does it all begin.
- 2) **Topic:** The Physiological and Psychosocial Effect of Exercise and Nutrition on a Male Incomplete Quadriplegic

**California State University, Northridge, Department of Physical Therapy 10/31/01**

**Topic:** Traits of an Effective Helper.... The Practitioner/Patient Interaction.

**Washington Mutual Corporate Fitness Center 1/24/01, and 10/16/01 and 10/17/01**

- 1) **Topic:** If the Shoe Fits, Run With It. Foot Analysis: Selecting the shoe for your foot type – LA Marathon March,2001 and 2002.
- 2) **Topic:** Computer Injury, Posture, and Exercise Prescription 4/12/00

**Mutual Amputee Aid Foundation**

9/18/01

**Topic:** Home Exercise Program to Improve Function and Decrease Degenerative Changes for the Amputee.

**Topic:** The Value of Therapeutic Exercise and Nutrition for an Amputee. **11/6/00**

**Apple Sports College (Japan)**

**8/8/99**

**Topic:** Benefits of Therapeutic Exercise for Special Populations.

**Northridge Hospital: Spinal Cord Injury Support Group**

**7/9/01**

**Topic:** Benefits of Standing for Wheelchair users.

**Topic:** Advances in Spinal Cord Rejuvenation, Regeneration  
And, Regrowth.....Research and Rehabilitation – 2 hours  
on the same goat. **6/30/99**

**Kaiser Woodland Hills: Fibromyalgia Support Group.**

**11/15/98**

**Topic:** Managing Fibromyalgia through Exercise, Sleep, Nutrition, Planning, and  
Supplementation.