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**Selected Occupational History**

*Family Nurse Practitioner*, Northeast Premier Physical Medicine, LLC: 2020 – present

*Family Nurse Practitioner*, Primary Spine & Rehab, LLC: 2016 – present

*Family Nurse Practitioner*, The Center for Minimally Invasive Spine Surgery: 2016 – present

*Family Nurse Practitioner*, St. Francis Hospital, Department of Neurosurgery: 2016 – present

*Family Nurse Practitioner*, Johnson Memorial Hospital, Department of Surgery: 2017 – present

*Chiropractic Physician*, Northeast Premier Physical Medicine, LLC: 2020 – present

*Chiropractic Physician*, Primary Spine & Rehab: 2003 – present

*Chiropractic Physician*, Northgate Spine & Injury Center: 2007 – 2010

*Chiropractic Physician*, Chiropractic Health Center of Bristol: 1999 – 2003

*Chiropractic Physician*, Managing Care Managing Claims peer review: 2008 – present

**Education and Licensure**

Samford University, *Masters of Nursing*, Family Nurse Practitioner, Birmingham, AL 2015

Wayland Baptist University, *Bachelor of Nursing*, Plainview, TX 2013

Logan College of Chiropractic, *Doctorate of Chiropractic*, St. Louis, MO 1998

Logan College of Chiropractic, *Bachelor of Science, Human Biology*, St. Louis, MO 1996

Rensselaer Polytechnic Institute: Undergraduate Studies: Biology, Troy, NY 1991-1993

Springfield College: 1993-1995: Undergraduate Studies: Biology, Springfield, MA 1993-1995

Licensed by the Connecticut Department of Public Health – Chiropractic Physician (#1310) 1999 - present

Licensed by the Massachusetts Department of Public Health – Chiropractor (#3147) 2007 – present

Licensed by the Connecticut Department of Public Health – Registered Nurse (#113938) 2013 – present

Licensed by the Connecticut Department of Public Health – Advanced Practice Registered Nurse (#6454) 2016 – present

Board Certified Part I, *Includes subject examinations in each of six basic science areas: general anatomy, spinal anatomy, physiology, chemistry, pathology, and microbiology and public health.*

National Board of Chiropractic Examiners, Davenport, IA 1997

Board Certified Part II, *Includes subject examinations in each of six clinical science areas: general diagnosis, neuromusculoskeletal diagnosis, diagnostic imaging, principles of chiropractic, chiropractic practice and associated clinical sciences.* National Board of Chiropractic Examiners, Davenport, IA 1998

Board Certified Part III, *Includes questions that address nine clinical areas: case history, physical examination, neuromusculoskeletal examination, roentgenologic examination, clinical laboratory and special studies examination, diagnosis or clinical impression, chiropractic techniques, supportive techniques, and case management.* National Board of Chiropractic Examiners, Davenport, IA 1998

Board Certified part IV, *Examination tests individuals in three major areas: x-ray interpretation and diagnosis, chiropractic technique and case management.* National Board of Chiropractic Examiners, Davenport, IA 2006

Connecticut Board Certified, *Includes questions that address nine clinical areas: case history, physical examination, neuromusculoskeletal examination, roentgenologic examination, clinical laboratory and special studies examination, diagnosis or clinical impression, chiropractic techniques, supportive techniques, and case management.* 1999

### **Selected Post-Graduate Education**

**Connective Tissue Pathology, Spinal Biomechanics as Sequella to Trauma, MRI Spine Interpretation, Ordering Protocols & Triaging the Injure**, *The latest research on the 6 ways to age-date disc herniations and bulges from trauma inclusive of disc pathology nomenclature. MRI ordering protocols, inclusive of Dixon format and fat-suppressed images. The neurology and pathology of connective tissue and the sequella of trauma at the biomechanical level leading to bio-neuro-mechanical failure. Contemporary evidenced-based building blocks for triaging and in a collaborative environment.* Cleveland University Kansas City, Chiropractic and Health Sciences, Academy of Chiropractic Post-Doctoral Division, Long Island NY, 2018

**Spinal Biomechanical Engineering Digitizing**, *integrating automated mensuration into creating treatment plans and determining maximum medical improvement. A literature-based study of normal vs. abnormal motor until function. Determining ligamentous laxity, alteration of motion segment integrity and pathological stress units and whole person impairments based upon the literature and academic standards,* Cleveland University Kansas City, Chiropractic and Health Sciences, Academy of Chiropractic Post-Doctoral Division, Long Island NY, 2018

**Science of the Chiropractic Spinal Adjustment**, *The literature-based definitions of both the mechanisms the chiropractic adjustment and how it affects the central nervous system in pain pathways and systemic issues that is the arbiter for normal vs. abnormal function. The physiological mechanisms of*

*how the chiropractic spinal adjustment affects the peripheral and central nervous systems. Subluxation degeneration/Wolff's Law will be detailed from a literature perspective combined with the mechanism of subluxation (bio-neuro-mechanical lesion). A literature perspective why long-term chiropractic care is clinically indicated as usual and customary to effectuate demonstrable biomechanical changes in the spine. An evidenced-based perspective of why physical therapy is a poor choice for spine as a 1st referral option for any provider inclusive of the literature.* Cleveland University Kansas City, Chiropractic and Health Sciences, Academy of Chiropractic Post-Doctoral Division, Long Island NY, 2018

**Documentation, Collaboration, and Primary Spine Care**, *An academic basis for documentation that is usual and customary across professions in collaborative care. Maintaining ethical medical-legal relationships based upon Voir Dire and Duabert standards with ensuring an inclusive report. Ensuring Primary Care Status based upon an academic standards.* Cleveland University Kansas City, Chiropractic and Health Sciences, Academy of Chiropractic Post-Doctoral Division, Long Island NY, 2018

**Musculoskeletal Ultrasound Diagnosis, Interpretation and Ultrasound Needle Guidance**, *Musculoskeletal Ultrasound Sonoanatomy & Pathology Hands-On Workshop with Cadavers. Anatomy and pathology, with direct visualization of anatomical structures for ultrasonographic scanning excellence and optimal understanding of images for the purpose of tissue diagnosis and ultrasonic needle guidance treatment protocols. Review of ultrasound physics, knobology, probe manipulation for all regions of the body including patient and probe positioning.* MSKUS via The Institute for Medical Studies, Norfolk, VA 2016, 2017, 2018, 2019

**Credentialed ImPACT Consultant & ImPACT Administration and Interpretation**, *Clinical application of best in class concussion care by completing training covering the administration, interpretation, and best practices for using ImPACT Applications' concussion assessment tools. History, Pathology, Anatomy, Diagnosis, Management and Return to Play Protocols.* ImPACT Applications, Inc. San Diego, CA, 2018

**Musculoskeletal Ultrasound Diagnosis, Interpretation and Ultrasound Needle Guidance**, *Musculoskeletal Ultrasound Sonoanatomy & Pathology Hands-On Workshop with Live Patients. Anatomy and pathology, with direct visualization of anatomical structures for ultrasonographic scanning excellence and optimal understanding of images for the purpose of tissue diagnosis and ultrasonic needle guidance treatment protocols. Review of ultrasound physics, knobology, probe manipulation for all regions of the body including patient and probe positioning. Diagnosis and delivery of ultrasound guided needle injections to live patients in a medically underserved population base.* MSKUS via The Institute for Medical Studies, Mazatlan, MX, 2018

**Orthopedic Testing: Principles**, *Clinical Application and Triage, Integration of orthopedic testing in the clinical setting to develop a differential diagnosis. Utilizing radiographic and advanced imaging inclusive of MRI and CAT scan findings to verify tissue pathology suspected by orthopedic testing conclusions and developing a treatment plan as sequelae.* ACCME Joint Providership with the State University of New York at Buffalo, School of Medicine and Biomedical Sciences, Academy of Chiropractic Post-Doctoral Division, Buffalo, NY, 2018

**Orthopedic Testing: Cervical Spine**, *Integration of cervical orthopedic testing in the clinical setting to develop a differential diagnosis. Utilizing radiographic and advanced imaging inclusive of MRI and CAT*

*scan findings to verify tissue pathology suspected by orthopedic testing conclusions and developing a treatment plan as sequelae.* ACCME Joint Providership with the State University of New York at Buffalo, School of Medicine and Biomedical Sciences, Academy of Chiropractic Post-Doctoral Division, Buffalo, NY, 2018

**Orthopedic Testing: Lumbar Spine**, *Integration of lumbar orthopedic testing in the clinical setting to develop a differential diagnosis. Utilizing radiographic and advanced imaging inclusive of MRI and CAT scan findings to verify tissue pathology suspected by orthopedic testing conclusions and developing a treatment plan as sequelae.* ACCME Joint Providership with the State University of New York at Buffalo, School of Medicine and Biomedical Sciences, Academy of Chiropractic Post-Doctoral Division, Buffalo, NY, 2018

**Orthopedic Testing: Clinical Grand Rounds**, *how to integrate orthopedic testing in the clinical setting utilizing both simple and complex patient scenarios. It includes potential stroke, or vertebrobasilar insufficient patients and understanding the nuances in a clinical evaluation with orthopedic testing as a critical part of the evaluation and screening process. how to integrate orthopedic testing in the clinical setting utilizing both simple and complex patient scenarios. It includes potential stroke, or vertebrobasilar insufficient patients and understanding the nuances in a clinical evaluation with orthopedic testing as a critical part of the evaluation and screening process.* ACCME Joint Providership with the State University of New York at Buffalo, School of Medicine and Biomedical Sciences, Academy of Chiropractic Post-Doctoral Division, Buffalo, NY, 2018

**Mild Traumatic Brain Injury/Traumatic Brain Injury/Concussion**, *Differentially diagnosing mild traumatic brain injury vs. traumatic brain injury and the clinical and imaging protocols required to conclude an accurate diagnosis for head trauma.* Cleveland University – Kansas City, Academy of Chiropractic Post-Doctoral Division, Long Island, NY, 2018

**Medical-Legal-Insurance Documentation**, *Accurate and compliant documentation of history and clinical findings inclusive of functional losses, loss of activities of daily living, duties under duress and permanent loss of enjoyment of life. Prognosing static vs. stable care, gaps in care both in the onset and in the middle of passive care with a focus on detailed diagnosing. The integration of chiropractic academia, the court system and the insurance reimbursers' requirements for complete documentation.* PACE Recognized by The Federation of Chiropractic Licensing Boards, Academy of Chiropractic Post-Doctoral Division, Long Island, NY, 2018

**Stroke Anatomy and Physiology: Brain Vascular Anatomy**, *The anatomy and physiology of the brain and how blood perfusion effects brain function. A detailed analysis of the blood supply to the brain and the physiology of ischemia.* ACCME Joint Providership with the State University of New York at Buffalo Jacobs School of Medicine and Biomedical Sciences, Buffalo, NY, 2018

**Stroke Anatomy and Physiology: Stroke Types and Blood Flow**, *Various types of stroke identifying ischemia, hypoperfusion, infarct and penumbra zones and emboli. Cardiac etiologies and clinical features as precursor to stroke with associated paradoxical emboli and thrombotic etiologies. Historical and co-morbidities that have etiology instroke inclusive of diabetes, coagulopathy, acquired and hereditary deficiencies.* ACCME Joint Providership with the State University of New York at Buffalo Jacobs School of Medicine and Biomedical Sciences, Buffalo, NY, 2018

**Stroke Principles of Treatment an Overview for the Primary Care Provider**, *Stroke type and treatments performed by vascular specialists. The goals of treatment with the physiology of the infarct and penumbra zones and the role of immediate triage in the primary care setting. Detailing the complications of stroke and future care in the chiropractic, primary care or manual medicine clinical setting.*. ACCME Joint Providership with the State University of New York at Buffalo Jacobs School of Medicine and Biomedical Sciences, Buffalo, NY, 2018

**Clinical Evaluation and Protocols for Identifying Stroke Risk**, *The neurological history and examination for identifying stroke risks with a focus on supra and infratentorial regions, upper and lower motor lesions, cranial nerve signs, spinal cord pathology, motor and sensory pathology and gait abnormalities. Examining genetic and family histories along with dissection risk factors. Stroke orthopedic testing and clinical guidelines pertaining to triage for the primary care provider.* ACCME Joint Providership with the State University of New York at Buffalo Jacobs School of Medicine and Biomedical Sciences, Buffalo, NY, 2018

**Spinal Trauma Pathology, Triage and Connective Tissue Injuries and Wound Repair**, *Triaging the injured and differentially diagnosing bot the primary and secondary complaints. Connective tissue injuries and wound repair morphology focusing on the aberrant tissue replacement and permanency prognosis potential.* ACCME Joint Providership with the State University of New York at Buffalo, School of Medicine and Biomedical Sciences, Buffalo, NY, 2018

**Spinal Trauma Pathology, Ligament anatomy and injury research and spinal kinematics**, *Spinal ligamentous anatomy and research focusing on wound repair, future negative sequella of abnormal tissue replacement and the resultant aberrant kinematics and spinal biomechanics of the spine.* ACCME Joint Providership with the State University of New York at Buffalo, School of Medicine and Biomedical Sciences, Buffalo, NY, 2018

**Spinal Trauma Pathology, Spinal Biomechanics, Central Nervous System and Spinal Disc Nomenclature**, *The application of Spinal Biomechanical Engineering models in trauma and the negative sequella it has on the central nervous system inclusive of the lateral horn, periaqueductal gray matter, thalamus and cortices involvement.* ACCME Joint Providership with the State University of New York at Buffalo, School of Medicine and Biomedical Sciences, Buffalo, NY, 2018

**Spinal Trauma Pathology, Biomechanics of Traumatic Disc Bulge and Age Dating Herniated Disc Pathology**, *The biomechanics of traumatic disc bulges as sequella from trauma and the comorbidity of ligamentous pathology. Age-dating spinal disc pathology in accordance with Wolff's Law.* ACCME Joint Providership with the State University of New York at Buffalo, School of Medicine and Biomedical Sciences, Buffalo, NY, 2018

**Spinal Trauma Pathology, Clinical Grand Rounds**, *The review of case histories of mechanical spine pathology and biomechanical failures inclusive of case histories, clinical findings and x-ray and advanced imaging studies. Assessing comorbidities in the triage and prognosis of the injured.* ACCME Joint Providership with the State University of New York at Buffalo, School of Medicine and Biomedical Sciences, Buffalo, NY, 2018

**MRI Disc Overview & Imaging Protocols**, *MRI Protocols Clinical Necessity, MRI slices, views, T1, T2, STIR axial, stacking, FFE, FSE and sagittal images. Clinical indication for the utilization of MRI and pathologies of disc in both trauma and non-trauma sequellae, including bulge, herniation, protrusion,*

*extrusion and sequestration. ACCME Joint Providership with the State University of New York at Buffalo, School of Medicine and Biomedical Sciences, Buffalo, NY, 2018*

**MRI Interpretation of Lumbar Bulges/Degenerative Disc Disease**, *MRI Interpretation of Lumbar Degeneration/Bulges, MRI slices, views, T1, T2, STIR axial, stacking, FFE, FSE and sagittal images in the interpretation of lumbar degeneration. With the co-morbidities and complications of stenosis, pseudo-protrusions, cantilevered vertebrate, Schmorl's nodes and herniations. Central canal and cauda equina compromise interpretation with management. ACCME Joint Providership with the State University of New York at Buffalo, School of Medicine and Biomedical Sciences, Buffalo, NY, 2018*

**MRI Interpretation of Lumbar Herniated Discs**, *MRI Interpretation of Lumbar Herniations, MRI slices, views, T1, T2, STIR axial, stacking, FFE, FSE and sagittal images in the interpretation of lumbar herniations. With the co-morbidities and complications of stenosis, pseudo-protrusions, cantilevered vertebrate, Schmorl's nodes and herniations. Morphology of lumbar disc pathologies of central and lateral herniations, protrusions, extrusions, sequestration, focal and broad based herniations are defined and illustrated. Central canal and cauda equina compromise interpretation with management. ACCME Joint Providership with the State University of New York at Buffalo, School of Medicine and Biomedical Sciences, Buffalo, NY, 2018*

**MRI Interpretation of Cervical Bulges/Degenerative Disc Disease**, *MRI Interpretation of Cervical Degeneration/Bulges, MRI slices, views, T1, T2, STIR axial, stacking, FFE, FSE and sagittal images in the interpretation of cervical degeneration. With the co-morbidities and complications of stenosis, pseudo-protrusions, cantilevered vertebrate, Schmorl's nodes and herniations. Spinal cord and canal compromise interpretation with management. ACCME Joint Providership with the State University of New York at Buffalo, School of Medicine and Biomedical Sciences, Buffalo, NY, 2018*

**MRI Interpretation of Cervical Herniated Discs**, *MRI Interpretation of Cervical Herniations, MRI slices, views, T1, T2, STIR Axial, FFE, FSE and sagittal images in the interpretation of lumbar herniations. With the co-morbidities and complications of stenosis, pseudo-protrusions, cantilevered vertebrate, Schmorl's nodes and herniations. morphology of lumbar disc pathologies of central and lateral herniations, protrusions, extrusions, sequestration, focal and broad based herniations are defined and illustrated. Spinal cord and canal compromise interpretation with management. ACCME Joint Providership with the State University of New York at Buffalo, School of Medicine and Biomedical Sciences, Buffalo, NY, 2018*

**Virtual Grand Rounds**, *MRI Interpretation of Degenerative Spine and Disc Disease with Overlapping Traumatic Insult to Both Spine and Disc, MRI slices, views, T1, T2, STIR Axial, FFE, FSE and sagittal images in the interpretation of degenerative spondylolesthesis, spinal canal stenosis, Modic type 3 changes, central herniations, extrusions, compressions, nerve root compressions, advanced spurring and thecal sac involvement from an orthopedic, emergency room, chiropractic, neurological, neurosurgical, physical medicine perspective. ACCME Joint Providership with the State University of New York at Buffalo, School of Medicine and Biomedical Sciences, Buffalo, NY, 2018*

**Impairment Rating**, *The understanding and utilization of the protocols and parameters of the AMA Guide to the Evaluation of Permanent Impairment 6th Edition. Spine, neurological sequelae, migraine, sexual dysfunction, sleep and arousal disorders, station and gait disorders and consciousness are detailed for impairment rating. Herniated discs, radiculopathy, fracture, dislocation and functional loss are also detailed in relation to impairment ratings. ACCME Joint Providership with the State*

University of New York at Buffalo Jacobs School of Medicine and Biomedical Sciences, Buffalo, NY, 2018

**Musculoskeletal Ultrasound Diagnosis, Interpretation and Ultrasound Needle Guidance,** *Musculoskeletal Ultrasound Sonoanatomy & Pathology Hands-On Workshop with Live Patients. Anatomy and pathology, with direct visualization of anatomical structures for ultrasonographic scanning excellence and optimal understanding of images for the purpose of tissue diagnosis and ultrasonic needle guidance treatment protocols. Review of ultrasound physics, knobology, probe manipulation for all regions of the body including patient and probe positioning. Diagnosis and delivery of ultrasound guided needle injections to live patients in a medically underserved population base.* MSKUS via The Institute for Medical Studies, Puerto Vallarta, MX, 2017

**BOTOX® for Migraine Certification and Preceptor Training - Preceptorship Programs** are designed to give current injectors the tools and knowledge needed for BOTOX® injections within your practice. Hands-on, one-on-one instruction conducted by a Faculty who will mentor Trainees in injecting BOTOX®. The Expert Faculty will instruct you on patient identification, safety, and BOTOX® dosing before performing injections on live patients. Training in clinical applications related to diagnosis and treatment options related to headaches and migraines. Allergan via Hartford Headache Center, LLC, Tanya Bilchik, MD; East Hartford, CT, 2017

**Musculoskeletal Ultrasound Diagnosis and Interpretation,** *Musculoskeletal Ultrasound Sonoanatomy & Pathology Hands-On Workshop with Live Subjects. Anatomy and pathology, with direct visualization of anatomical structures for ultrasonographic scanning excellence and optimal understanding of images. Review of ultrasound physics, knobology, probe manipulation for all regions of the body including patient and probe positioning.* MSKUS via The Institute for Medical Studies, San Diego, CA, 2017

**Musculoskeletal Ultrasound Diagnosis, Interpretation and Ultrasound Needle Guidance,** *Musculoskeletal Ultrasound Sonoanatomy & Pathology Hands-On Workshop with Cadavers. Anatomy and pathology, with direct visualization of anatomical structures for ultrasonographic scanning excellence and optimal understanding of images for the purpose of tissue diagnosis and ultrasonic needle guidance treatment protocols. Review of ultrasound physics, knobology, probe manipulation for all regions of the body including patient and probe positioning.* MSKUS via The Institute for Medical Studies, Los Angeles, CA 2016

**Musculoskeletal Ultrasound Diagnosis and Interpretation,** *Musculoskeletal Ultrasound Sonoanatomy & Pathology Hands-On Workshop with Live Subjects. Anatomy and pathology, with direct visualization of anatomical structures for ultrasonographic scanning excellence and optimal understanding of images. Review of ultrasound physics, knobology, probe manipulation for all regions of the body including patient and probe positioning.* MSKUS via The Institute for Medical Studies, Glastonbury, CT 2016

**Joint/Extremity/Non Spinal Injections and Procedures,** *Course for Myofacial and Joint pain of the shoulder, arm, wrist, knee, and lower extremity areas. This training includes procedures in Joint Injections, Prolotherapy, Viscosupplementation, and Trigger Point Injections. Training in administering these specialty injections and in the diagnosis of localized and referred pain of various medical pain conditions are inclusive to the training. The techniques and procedures were presented utilizing current guidelines and medical protocols.* Empire Medical Training, NY, New York, 2016

**MRI Spine Interpretation and Spinal Biomechanical Engineering-Primary Spine Care,** *Correlating spinal biomechanics secondary to trauma and MRI findings inclusive of herniation, bulging, protruded*

*and extruded discs. Correlating co-efficient of forces translated from the bullet vehicle to the target vehicle to the occupant in determining causality of bodily injury, Academy of Chiropractic, PACE approved for the Federation of Chiropractic Licensing boards, Texas Chiropractic College, Las Vegas NV, 2015*

**Evidence Based Interprofessional Collaboration-Primary Spine Care**, *Chiropractic as Primary spine care based upon the literature conclusions and the documentation requirements to support those conclusions in an ethical collaborative environment inclusive of hospitals, emergency rooms, primary care medical doctors and medical specialists. Academy of Chiropractic, PACE approved for the Federation of Chiropractic Licensing boards, Texas Chiropractic College, Las Vegas NV, 2015*

**Contemporary Literature Review of the Chiropractic Adjusting Mechanisms – Primary Spine Care**, *The latest scientific evidence of the effects of the chiropractic spinal adjustment on the central nervous system, both upper and lower motor neurons. A comparative analysis of chiropractic vs. other modalities and therapies, Academy of Chiropractic, PACE approved for the Federation of Chiropractic Licensing boards, Texas Chiropractic College, Las Vegas NV, 2015*

**Accident Reconstruction: Terms, Concepts and Definitions**, *The forces in physics that prevail in accidents to cause bodily injury. Quantifying the force coefficients of vehicle mass and force vectors that can be translated to the occupant and subsequently cause serious injury. CMCS Post Doctoral Division, New York Chiropractic Council, New York State Department of Education, Board for Chiropractic, Long Island, NY, 2010*

**Accident Reconstruction: Causality, Bodily Injury, Negative Acceleration Forces, Crumple Zones and Critical Documentation**, *Factors that cause negative acceleration to zero and the subsequent forces created for the vehicle that get translated to the occupant. Understanding critical documentation of hospitals, ambulance reports, doctors and the legal profession in reconstructing an accident. CMCS Post Doctoral Division, New York Chiropractic Council, New York State Department of Education, Board for Chiropractic, Long Island, NY, 2010*

**Accident Reconstruction: Skid Marks, Time, Distance, Velocity, Speed Formulas and Road Surfaces**, *The mathematical calculations necessary utilizing time, distance, speed, coefficients of friction and acceleration in reconstructing an accident. The application of the critical documentation acquired from an accident site. CMCS Post Doctoral Division, New York Chiropractic Council, New York State Department of Education, Board for Chiropractic, Long Island, NY, 2010*

**Accident Reconstruction: Research, Causality and Bodily Injury**, *This course reviews Delta V issues correlated to injury and mortality, side impact crashes and severity of injuries, Event Data Recorder reports correlated to injury, frontal impact kinematics, crash injury metrics with many variables and inquiries related to head restraints. CMCS Post Doctoral Division, New York Chiropractic Council, New York State Department of Education, Board for Chiropractic, Long Island, NY, 2010*

**MRI Clinical Application**, *The clinical application of the results of space occupying lesions. Disc and tumor pathologies and the clinical indications of manual and adjustive therapies in the patient with spinal nerve root and spinal cord insult as sequellae. CMCS Post Doctoral Division, New York Chiropractic Council, New York State Department of Education, Board for Chiropractic, Magdy Shady MD, Neurosurgeon, State University of New York at Stony Brook, Long Island, NY, 2009*



**MRI Methodology of Analysis**, *MRI interpretation sequencing of the cervical, thoracic and lumbar spine inclusive of T1, T2, STIR and 3D gradient studies to ensure the accurate diagnosis of the region visualized.* CMCS Post Doctoral Division, New York Chiropractic Council, New York State Department of Education, Board for Chiropractic, Robert Peyster MD, Neuroradiologist, State University of New York at Stony Brook, Long Island, NY, 2009

**MRI Spinal Pathology**, *MRI interpretation of bone, intradural, extradural, cord and neural sleeve lesions. Tuberculosis, drop lesions, metastasis, ependymoma, schwannoma and numerous other spinal related tumors and lesions.* CMCS Post Doctoral Division, New York Chiropractic Council, New York State Department of Education, Board for Chiropractic, Robert Peyster MD, Neuroradiologist, State University of New York at Stony Brook, Long Island, NY, 2009

**MRI Disc Pathology & Spinal Stenosis**, *MRI interpretation of bulged, herniated, protruded, extruded sequestered and fragmented disc pathologies in etiology and neurological sequelae in relationship to the spinal cord and spinal nerve roots.* CMCS Post Doctoral Division, New York Chiropractic Council, New York State Department of Education, Board for Chiropractic, Robert Peyster MD, Neuroradiologist, State University of New York at Stony Brook, Long Island, NY, 2009

**MRI Anatomy & History**, *Normal anatomy of axial and sagittal views utilizing T1, T2, 3D Gradient and STIR sequences of imaging. Standardized and desired protocols in views and sequencing of MRI examination to create an accurate diagnosis in MRI.* CMCS Post Doctoral Division, New York Chiropractic Council, New York State Department of Education, Board for Chiropractic, Robert Peyster MD, Neuroradiologist, State University of New York at Stony Brook, Long Island, NY, 2009

**MRI Physics and History**, *Magnetic fields, T1 and T2 relaxations, nuclear spins, phase encoding, spin echo, T1 and T2 contrast, magnetic properties of metals and the historical perspective of the creation of NMR and MRI.* CMCS Post Doctoral Division, New York Chiropractic Council, New York State Department of Education, Board for Chiropractic, Terry Button, PhD, Medical Physicist, State University of New York at Stony Brook, Long Island, NY, 2009

**AMA Guides to the Evaluation of Permanent Impairment 5<sup>th</sup> Edition**, *Clinically coordinating spinal pathology with neurological and functional sequelae including station & gait, migraines, sexual dysfunction, sleep & arousal disorders, paroxysmal disorders, radiculopathic disorders and central nervous system disorders,* Massachusetts Chiropractic Society, Boston, MA 2001

**Neurodiagnostics, Imaging Protocols and Pathology of the Trauma Patient**, *An in-depth understanding of the protocols in triaging and reporting the clinical findings of the trauma patient. Maintaining ethical relationships with the medical-legal community,* CMCS Management Post Doctoral Division, New York Chiropractic Council, New York State Department of Education Board for Chiropractic, New York 2009

**Risk Factors, Clinical Presentation and Triaging the Trauma Patient**, *An extensive understanding of the injured with clinically coordinating the history, physical findings and when to integrate neurodiagnostics. An understanding on how to utilize emergency room records in creating an accurate diagnosis and the significance of "risk factors" in spinal injury,* CMCS Management Post Doctoral Division, New York Chiropractic Council, New York State Education Department Board for Chiropractic Diagnostics, New York, 2009

**Crash Dynamics and its Relationship to Causality**, *An extensive understanding of the physics involved in the transference of energy from the bullet car to the target car. This includes G's of force, Newton's, gravity, energy, skid marks, crumple zones, spring factors, event data recorder and the graphing of the movement of the vehicle before, during and after the crash. Determining the clinical correlation of forces and bodily injury.* CMCS Management Post Doctoral Division, New York Chiropractic Council, New York State Education Department Board for Chiropractic, New York, 2009

**MRI, Bone Scan & X-Ray Protocols, Physiology and Indications for the Trauma Patient**, *MRI interpretation, physiology, history and clinical indications, Bone Scan interpretation, physiology and clinical indications, x-ray clinical indications for the trauma patient* CMCS Management Post Doctoral Division, New York Chiropractic Council, New York State Education Department Board for Chiropractic, New York, 2009

**Electromyography (EMG,) Nerve Conduction Velocity (NCV,) Somato Sensory Evoked Potential (SSEP,) Visual Evoked Potential (VEP,) Brain Stem Auditory Evoked Potential (BAER) and Visual-Electronystagmosgarphy (V-ENG)** *interpretation, protocols and clinical indications for the trauma patient*, CMCS Management Post Doctoral Division, New York Chiropractic Council, New York State Education Department, Board for Chiropractic, New York, 2009

**Documentation and Reporting for the Trauma Victim**, *Understanding the necessity for accurate documentation and diagnosis utilizing the ICD-9 and the CPT to accurately describe the injury through diagnosis. Understanding and utilizing state regulations on reimbursement issues pertaining to healthcare,* CMCS Management Post Doctoral Division, New York Chiropractic Council, New York State Education Department Board for Chiropractic, New York, 2009

**Documenting Clinically Correlated Bodily Injury to Causality**, *Understanding the necessity for accurate documentation, diagnosis and clinical correlation to the injury when reporting injuries in the medical-legal community. Documenting the kinesiopathology, myopathology, neuropathology, pathophysiology in both a functional and structural paradigm,* CMCS Management Post Doctoral Division, New York Chiropractic Council, New York State Education Department, Board for Chiropractic, New York, 2009

**The Graston Technique - M1 and M2 Modules** - *An advanced form of instrument-assisted, soft tissue mobilization, which incorporates the use of six specially designed stainless steel instruments. GT enables clinicians to effectively treat the adverse effects of scar tissue and fascial restrictions as well as improve and maintain optimal range of motion. The purpose of this basic training is to introduce clinicians to GT, its clinical applications, physiological effects/benefits, and potential contraindications. The primary objective of M1 is to develop an understanding of GT and how to apply it into the full spectrum of musculoskeletal treatment approaches.* Boston, MA, 2007

**Myofascial Dry Needling** - *Dry Needling is a skilled intervention that uses a thin filiform needle to penetrate the skin and stimulate underlying myofascial trigger points, muscular, and connective tissues for the management of neuromusculoskeletal pain and movement impairments. Dry needling (DN) is a technique used to treat dysfunctions in skeletal muscle, fascia, and connective tissue, and, diminish persistent peripheral nociceptive input, and reduce or restore impairments of body structure and function leading to improved activity and participation.* Torrington, CT, 2013

**Validating Chiropractic**, *The effects of chiropractic care on the acceleration of tissue healing, pain relief, the removal of edema, restoration of motion, reduction in the progression of degeneration,*

*restoration of normal sensory input, documentation of complicated cases and the need for prolonged care.* Life College of Chiropractic West Postgraduate Education Division and Washington State Chiropractic Association, Boston, MA 2004

**Whiplash and Brain Injury Traumatology Module 1:** *Comprehensive training program in whiplash and brain injury traumatology, emphasizing the biomechanics, injury mechanisms and occupant kinematics.* Spine Research Institute of San Diego, 2002

**Whiplash and Brain Injury Traumatology Module 2:** *Comprehensive auto crash reconstruction and advanced diagnostics and case management of whiplash and related disorders.* Spine Research Institute of San Diego, 2002

**Whiplash and Brain Injury Traumatology Module 3:** *Narrative report writing, independent medical examination and application of AMA guidelines in personal injury and forensic practice.* Spine Research Institute of San Diego, 2002

**Whiplash and Brain Injury Traumatology Module 4:** *Medical legal issues, arbitration, deposition, and testifying in court.* Spine Research Institute of San Diego, 2002

**Advanced Certification in Cervical Acceleration Deceleration Trauma,** *Completed the prescribed course of study, literature review and comprehensive examination.* Spine Research Institute of San Diego, 2002, 2004

**Functional Rehabilitation of the Lumbar Spine,** *This course provides detailed literature reviews covering the crisis of lumbar disorders in patient populations, the role of spinal manipulative therapy, structural correction of the sagittal lumbar lordosis and comprehensive clinical application.* Los Angeles College of Chiropractic Post Doctoral Education Division, 2004

**Diplomate Program for Chiropractic Orthopedics,** *This course provides detailed literature reviews covering lumbar disorders in patient populations, the role of spinal manipulative therapy, lumbar differential diagnosis, and current standards of care and treatment options for lumbar disorders.* National College of Chiropractic, 1999

**Fibromyalgia Syndrome, Muscle Dysfunction & Myofascial Pain,** *Discuss current theories and concepts of Fibromyalgia. Learn the principles and practical application of proprioceptive mechanisms, perform effective assessment, release and integration techniques that help relieve tender points, soft tissue tension and myofascial pain, combine these new skills with other modalities to maximize patient outcomes.* University of Bridgeport, 2005

**Adjust , Support & Rehabilitation,** *blend manipulation, stabilization approaches in individualized treatment plans to provide full spectrum of care from pain management to prevention of injury to performance enhancement and rehab the spine & train the entire locomotor system with the foot and ankle as the base.* Foot Levelors, 2005

**Key Rehabilitation Strategies, Lumbar spine, pelvis and lower extremities,** *Evidence-based concepts and hands on mobilization & rehabilitation skills. McKenzie method for the spine, Mulligan mobilizations for the extremities, Butler neural mobilizations, spinal stabilization exercises, biopsychosocial principles, principles of public health and clinical prediction rules.* National University of Health Sciences, 2008

**Key Rehabilitation Strategies, Cervical Thoracic spine and upper extremities,** *Evidence-based concepts and hands on mobilization & rehabilitation skills. McKenzie method for the spine, Mulligan mobilizations for the extremities, Butler neural mobilizations, spinal stabilization exercises, biopsychosocial principles, principles of public health and clinical prediction rules.* National University of Health Sciences, 2008

**McKenzie Institute International Educational Program – McKenzie Method Part A – Lumbar Spine,** *End range loading strategies, including the chiropractic adjustment. The programme affords an expanded, evidence based algorithm concerning the source, direction and degree of forces used for movement and positioning as therapy.* National University of Health Sciences, 2009

**McKenzie Institute International Educational Program – McKenzie Method Part B – Cervical Spine,** *End range loading strategies, including the chiropractic adjustment. The programme affords an expanded, evidence based algorithm concerning the source, direction and degree of forces used for movement and positioning as therapy.* National University of Health Sciences, 2009

**McKenzie Institute International Educational Program – McKenzie Method Part C –** *Assimilates advanced concepts through problem solving discussion, group exercises, and appropriate practice of technique progression. The program affords an expanded, evidence based algorithm concerning the source, direction and degree of forces used for movement and positioning as therapy.* Cleveland Clinic, Cleveland, OH, 2009

**McKenzie Institute International Educational Program – McKenzie Method Part D -** *Establishing correct diagnosis and identifying multiple diagnoses, recognizing appropriate vs. inappropriate changes, progression of forces in treatment, reactivation / functional restoration, patient compliance and reassessment, indications for use of advanced manual therapy techniques and application of advanced clinician techniques.* OSF - St. Francis HealthCare, Peoria, IL, 2010

**McKenzie Institute International Educational Program – McKenzie Method Part E -** *Establishing correct diagnosis and identifying multiple diagnoses, recognizing appropriate vs. inappropriate changes, progression of forces in treatment, reactivation / functional restoration, patient compliance and reassessment, indications for use of advanced manual therapy techniques and application of advanced clinician techniques in treatment of the extremities.* Grand Rapids, MI, 2010

**International Symposium on Musculoskeletal Pain and Motor Control:** Highlighting the Assessment and Management Approaches of Dr. Pavel Kolar and Dr. Stuart McGill. *Skills learned included identifying and interpreting clinical observation and assessment for musculoskeletal pain, motor control and spinal stabilization. Identifying and reviewing key clinical skills of varied diagnosis and treatment for musculoskeletal pain, motor control and spinal stabilization. Performed clinical diagnostic and treatment skills for musculoskeletal pain and motor control determined important and interact with a panel of experts on the clinical understanding and applications of the methods from Drs. Kolar and McGill.* The Central Institute for Human Performance, FL 2010

**Functional And Kinetic Treatment with Rehabilitation, Provocation and Motion.** *Assessment and treatment of chronic musculoskeletal pain conditions derived on the principle that chronic pain results from dysfunction of the sensorimotor system, which is manifested in soft tissue and fascia. This treatment approach to soft tissue dysfunction combines instrument-assisted soft tissue mobilization with proprioceptive techniques to reduce pain and return function. Combining manual treatment of soft tissue*

*with proprioceptive exercises to produce faster results than conventional treatment methods.* CT Chiropractic Association. Enfield, CT March 2010

### **Selected Presentations**

“Current Treatment Options for Back Pain” – Enfield Senior Center, Enfield, CT 2014

“Current Conservative Treatment Options for Chronic Myofascial Pain” – Jefferson Radiology, Farmington, CT 2009

“Lower Back Pain – Current Treatment Options” – Johnson Memorial Hospital, Stafford Springs, CT 2005-2008

“Fibromyalgia – Current Treatment Options” – Johnson Memorial Hospital, Stafford Springs, CT 2005-2008

“Arthritis and Osteoporosis” – Senior Center, Enfield, CT 2006

### **Selected Memberships**

National Headache Foundation, Member 2018 – present

American Association of Orthopedic Medicine, Member 2016 – present

American Academy of Pain Medicine, Member 2016 – present

American Academy of Medical Legal Professionals, Member 2009 – present

Academy of Chiropractic, Active Trauma Team, Cleveland University – Kansas City, Chiropractic and Health Sciences, Long Island, NY, Member 2018 – present

American College of Forensics, Member 2009 - 2012

Council on Chiropractic Orthopedics, Member 2009 - 2012

Connecticut Chiropractic Association, Member 2005 - 2017

McKenzie International Organization, Member 2009 – present

Sigma Theta Tau – Honors Nursing Society, Member 2015 – present

American Association of Nurse Practitioners, Member 2015 – present

Connecticut Advanced Practice Registered Nurse Society, Member 2015 – present