

THE MCKENZIE INSTITUTE® INTERNATIONAL

Course Goals

As the name implies, this course focuses on the application of the McKenzie Method of Mechanical Diagnosis and Therapy for the Lumbar Spine. Each major subdivision of the course has very specific educational objectives. In general terms, the goals of this course are that you gain knowledge and skills that form the basis from which you may begin to develop your own abilities in applying these principles.

Following attentive participation in, and completion of, this course will provide participants with the introductory knowledge, basic skills and abilities to begin to:

- 1. Appropriately apply the McKenzie Method of Mechanical Diagnosis and Therapy to patients with lumbar spine symptoms.
- 2. Distinguish between the McKenzie syndromes (Derangement, Dysfunction, Postural) and the subgroups of OTHER and provide appropriate management regimes for each of the syndromes.
- 3. Identify when the application of clinician forces is required for the resolution of symptoms using McKenzie's "progression of forces" concept.
- 4. Assist patients to design and apply the therapeutic processes required to achieve the goals of management.

NOTE: Modules 1-6 are completed in the pre-requisite online component before the three-day live course.

MODULE ONE INTRODUCTION AND EPIDEMIOLOGY

OBJECTIVES

With sufficient time to/for practice, participants will be able to meet/achieve the following objectives:

- 1. Describe and discuss the cardinal features of MDT and contrast it with other management approaches.
- 2. Describe and discuss the major epidemiological factors associated with low back pain.
- 3. Describe and discuss the risk and prognostic factors of low back pain.
- 4. Describe and discuss the low back pain first-line management strategies that are recommended in the literature and those that are not recommended.
- 5. Describe and discuss two lifestyle factors affecting low back pain

MODULE TWO EVIDENCE FOR MDT IN THE LUMBAR SPINE

OBJECTIVES

- 1. Describe and discuss the current evidence on the reliability of the MDT classification for the lumbar spine.
- 2. Describe and discuss the current evidence on the prevalence of Centralisation, Directional Preference (DP) and the MDT classifications in the lumbar spine.
- 3. Describe and discuss the current evidence on Centralisation and DP as prognostic indicators.

- 4. Describe and discuss the current evidence on the potential of MDT to reduce surgery rates and reduce healthcare costs.
- 5. Describe and discuss the current evidence on the efficacy of the MDT management of the lumbar spine.
- 6. Describe and discuss the current evidence on the association of MDT and psychosocial outcomes.

MODULE THREE MDT CLASSIFICATION AND DEFINITION OF TERMS

OBJECTIVES

With sufficient time to/for practice, participants will be able to meet/achieve the following objectives:

- 1. Identify and discuss indications and contra-indications for MDT.
- 2. Describe the clinical characteristics of the Derangement Syndrome.
- 3. Describe the clinical characteristics of Dysfunction Syndrome.
- 4. Describe the clinical characteristics of the Postural Syndrome.
- 5. Describe the clinical characteristics of Subgroups of Spinal OTHER.
- 6. Differentiate between Derangement, Dysfunction, Postural and OTHER.

MODULE FOUR

UNDERSTANDING PAIN AND DISABILITY DRIVERS AND THEIR RELATIONSHIP TO MDT CLASSIFICATION

OBJECTIVES

With sufficient time to/for practice, participants will be able to meet/achieve the following objectives:

- 1. Describe and discuss the definition and clinical understanding of pain and how this may affect patient outcomes in the context of the ICF framework.
- 2. Identify and determine how the drivers of pain may influence the differential diagnostic process and classification.
- 3. Recognise and discuss how drivers of pain and / or disability manifest and how they may be relevant to the patient management and outcomes

MODULE FIVE

PATHOANATOMICAL CONSIDERATIONS, MOVEMENT AND LOADING IN THE LUMBAR SPINE FOR MDT

OBJECTIVES

- 1. Describe and discuss why MDT does not use pathoanatomical based diagnosis.
- 2. Describe how different movements affect the lumbar spine and how these movements and loading are reflected in daily activities.
- 3. Describe the typical balance of flexion and extension on a daily basis and some of the associated research.

MODULE SIX HISTORY AND PHYSICAL EXAMINATION

OBJECTIVES

With sufficient time to/for practice, participants will be able to meet/achieve the following objectives:

- 1. Identify the aims of the history taking and describe the clinical relevance of each component of the McKenzie lumbar spine assessment form.
- 2. Describe the components of the history section of the McKenzie lumbar assessment form and discuss the interpretation and clinical relevance of each section, including responses that may implicate Serious Pathology.
- 3. Discuss the use of effective communication strategies and the interpretation of the patient's responses to the history questions.
- 4. Identify and discuss the aims of the physical examination.
- 5. Describe the components of the physical examination section of the McKenzie lumbar assessment form and discuss the clinical relevance of each section.
- 6. Define and demonstrate the appropriate use of terms involved in completing the McKenzie lumbar spine assessment form.
- 7. Accurately complete a McKenzie lumbar spine assessment form.

MODULE SEVEN

EVALUATION OF CLINICAL PRESENTATIONS

OBJECTIVES

With sufficient time to/for practice, participants will be able to meet/achieve the following objectives:

- 1. Discuss the symptomatic and mechanical presentations of patients obtained during the assessment.
- 2. Describe the symptomatic and mechanical presentations of patients with Derangement, Dysfunction, and Postural Syndrome.
- 3. Discuss the symptomatic and mechanical presentations of the subgroups of OTHER.
- 4. Discuss the management principles of the three MDT syndromes.

MODULE EIGHT INTRODUCTION TO MDT PROCEDURES

OBJECTIVES

- 1. Describe and explain the use of the "force progressions" concept in MDT.
- 2. Describe and explain the use of the "force alternatives" concept in MDT.
- 3. Discuss the differences between patient procedures and clinician procedures.
- 4. Understand and apply the clinical reasoning needed to achieve clinical benefits of patient procedures and clinician procedures in the management of the three MDT syndromes.

MODULE NINE MDT PROCEDURES – PRACTICAL

OBJECTIVES

With sufficient time to/for practice, participants will be able to meet/achieve the following objectives:

- 1. Perform and teach the MDT patient and clinician procedures for the lumbar spine.
- 2. Understand the rationale for the application of each procedure, and its place within the sequence of Progression of Forces.

MODULE TEN MANAGEMENT OF DERANGEMENT SYNDROME

OBJECTIVES

With sufficient time to/for practice, participants will be able to meet/achieve the following objectives:

- 1. Identify and explain the four stages of management of a Derangement.
- 2. Understand and apply the clinical reasoning and the indications for the progression of forces required in the management of the Derangement Syndrome.
- Discuss the specific management pathways for the three sub-classifications of Derangement central or symmetrical symptoms, unilateral or asymmetrical above the knee and unilateral or asymmetrical below the knee.

MODULE ELEVEN MANAGEMENT OF DYSFUNCTION SYNDROME

OBJECTIVES

With sufficient time to/for practice, participants will be able to meet/achieve the following objectives:

- 1. Describe and apply the clinical reasoning used in the management of patients with lumbar Dysfunction Syndrome.
- 2. Explain the essential principles of self-management and of patient responsibility necessary to achieve optimal outcomes.
- 3. Describe the clinical features of an Adherent Nerve Root and discuss a typical management programme for this type of Dysfunction.

MODULE TWELVE MANAGEMENT OF POSTURAL SYNDROME

OBJECTIVES

With sufficient time to/for practice, participants will be able to meet/achieve the following objectives:

- 1. Describe and apply the clinical reasoning used in the management of patients with Postural Syndrome.
- 2. Explain the essential principles of self-management and of patient responsibility necessary to achieve optimal outcomes.

MODULE THIRTEEN FOLLOW UP EVALUATIONS

OBJECTIVES

2020 Part A – MDT: The Lumbar Spine Goals and Objectives

- 1. Describe the indicators used to establish changes in the patient's symptomatic and mechanical presentation.
- 2. Describe the review process and clinical reasoning used to confirm that patient's classification.
- 3. Assess, evaluate and apply clinical reasoning to the response to the management provided **for a patient with a provisional classification of Derangement.** Assess progress in relation to the patient's goals and make appropriate modifications to ensure that the goals are achieved.

MODULE FOURTEEN PREVENTION OF RECURRENCES

OBJECTIVES

- 1. Explain the concept of prevention.
- 2. Discuss the role of self-management and patient responsibility in effective prevention

Part A: The Lumbar Spine

28 hours

DETAILED SCHEDULE

1+3 format / Online+Onsite

Typically Friday - Sunday

			Typically Friday - Sunday
ONLINE	Pre-Requisite		TOPICS
COMPONENT			Module 1:
includes Pre-Test, Module Q	uizzes and Post-Exam		Introduction and Epidemiology & Module 1 Quiz
			Module 2: Evidence for MDT in the Spine & Module 2 Quiz
			Module 3: MDT Classification and Definition of Terms & Module 3 Quiz
			Module 4:
			Understanding Pain and Disability Drivers and Their Relation to MDT Classification & Module 4 Quiz Module 5:
			Pathoanatomical Considerations, Movement and Loading for MDT in the Lumbar Spine & Module 5 Quiz
			Module 6:
			History and Physical Examination & Module 6 Quiz
	Online hours:	7	
Day One	7:30am-8:00am	0	- Day One Registration/Continental Breakfast
Friday	8:00a-9:30a	90	Introduction and Review of Online: History and Physical Exam (Module 6)
8:00am to 5:30pm	9:30a-9:45a	0	- Break - am
	9:45a-11:00a	75	Evaluation of Clinical Presentations (Module 7)
	11:00a-12:00p	60	Patient #1
	12:00p-1:00p	0	- Lunch -
	1:00p-2:00p	60	Patient #2
	2:00p-3:00p	60	Patient #3
	3:00p-3:15p	0	- Break - pm
	3:15p-3:30p	15	Discussion of Patients
	3:30p-4:00p	30	Procedures of Mechanical Therapy – Theory (Module 8)
	4:00p-5:30p	90	Procedures of Mechanical Therapy – Practical (Module 9)
	Day One hours:	8.00	
Day Two	7:30am-8:00am	0	- Day Two sign-in/Continental Breakfast
Saturday	8:00a-8:15a	15	Q & A, Review and Discussion
8:00am to 5:30pm	8:15a-9:00a	45	Procedures of Mechanical Therapy – Practical Review
	9:00a-10:30a	90	Management of Derangement Syndrome (Module 10)
	10:30a-10:45a	0	- Break - am
	10:45a-12:15p	90	Management of Derangement Syndrome (Module 10) cont
	12:15p-1:15p	0	- Lunch -
	1:15p-2:45p	90	Return Patients
	2:45p-3:00pp	0	- Break - pm
	3:00p-4:00p	60	Patient #4
	4:00p-5:00p	60	Patient #5
	5:00p-5:30p	30	Discussion of Patients
	Day Two hours:	8	
Day Three	-		Day Three sign in/Capting to Dreakfast
Day Three	7:30am-8:00am	0	- Day Three sign-in/Continental Breakfast
Sunday	8:00a-8:30a	30	Q & A, Review and Discussion
8:00am to 1:00pm	8:30a-9:30a	60 20	Management of Dysfunction (Module 11)
	9:30-10:00am	30	Management of Posture Syndrome (Module 12)
	10:00a-10:15a	0	- Break - am
	10:15a-12:15p	120	Return Patients
	12:15p-12:45p	30	Follow-Up Evaluations (Module 13)
	12:45p-1:15p	30	Recurrences and Prophylaxis/Conclusions (Module 14)
	Day Three hours:	5	
	TOTAL course hrs.	28	

NOTE: These are fairly typical timelines; however the actual order of topics and timeline may vary between individual instructors' activities and patient simulation scheduling. Each day incorporates one hour lunch break midday and a fifteen-minute break morning and afternoon except the final day. It is mandated by the Institute that all faculty adjust accordingly to maintain the contact hour requirement.