Table of Contents

Physical Dysfunction:

- Emily Alcott, Alicia Frederick, Casey Heinle, Nicholas Scheuing: Modified Constraint Induced Movement Therapy is as effective as conventional therapy in improving motor function and activity in clients 2 weeks to 3 months post-CVA.
- Ashley Bender, Bridget Daly, Hannah Lukin: The effects of a robotic arm on upper extremity function for individuals post-stroke in the acute phase (>8 weeks).
- Michelle Freiberg, Jill McGregor, Katherine Sell, & Nate Thome: There is strong evidence supporting the use of the LSVT-BIG standard protocol for reducing motor symptomology in clients with mild to moderate idiopathic Parkinson's Disease; however, alternative exercise therapy may be equally beneficial.
- Mackinzie Ista, Emily Jacob, & Dana Sopkowiak: Occupational Therapy Driving Intervention Shows Emerging Evidence in Improving Civilian Driving Errors in OIF/OEF Combat Veterans with PTSD
- Stevie Kaufman, Emily Mayer, Taisha Thornton, Kelsey Curry: There is limited evidence supporting the use of resting hand splints to reduce spasticity in the upper extremity in adults post-CVA when compared to therapy alone.
- Ann Page, Hans Severson, and David Turner: Functional Electrical Stimulation plus Repetitive Task Practice Improved Upper Extremity Movement and Functional Task Performance in Less Time Compared to Other Therapy Alone for Chronic Stroke

Pediatrics:

Teresa Bodwell, Jessica Dooney, Rebecca Frett, Devin Tenner: There is emerging low level evidence for stability ball use for children who seek vestibular and proprioceptive input and children with apparent attention concerns. There is no evidence for stability ball use in improving attention for typically developing children.