



UT Southwestern
Medical Center

Department of Physical
Medicine & Rehabilitation

PM & R

C O N N E C T I O N

Multicultural focus
in patient care, research,
and outside of work
p.3-8

WINTER 2020

Message from the Chair

One of our primary missions as a Department is education and to that end, we currently have 33 residents, 4 fellows, and a growing number of research postdoctoral fellows. As our department specialty capacity continues to grow, so does our educational mission. We are delighted that we have permission from the Texas Medical Board to open our Interventional Spine and Musculoskeletal Fellowship and are actively recruiting at this time. Over the past five years, we have grown from 3 to 7 specialists in this area with more to come. As our path to educational excellence continues, I am proud that 7 of our 9 senior residents have successfully matched into fellowships, including Sports Medicine, Pain, Pediatric Rehabilitation, Spinal Cord Injury, Interventional Spine, and Neuromuscular Medicine and will be representing us at some of the top programs in the field. Our faculty continue to be highly engaged in enhancing undergraduate and graduate medical education locally (Dr. Patel, Scott, Barker, Nguyen, Mathews, Inanoglu, and others) and nationally (Drs. Kowalske, Bell, Barker, Rinaldi and others).

Our thanks this month to Dr. Rupali Kumar and her team for redesigning and editing our new newsletter. We appreciate their innovation and this month's attention to the many cultural influences on our practice, educational and research efforts, and fellowship.



Kathleen R. Bell, MD
Professor/Chair
Kimberly-Clark Distinguished
Chair in Mobility Research
Department of PM&R

PM&R

C O N N E C T I O N

WINTER 2020

Caring for a Multicultural Patient Population

1

A faculty member's experiences on the inpatient rehabilitation unit at Parkland

Problem-Solving Training for Latinx Care Partners

2

Adapting a metacognitive strategy training approach for a Spanish-speaking population

Our Multicultural Department

3

Highlighting the diverse cultural pursuits by members of our own department!

1

Caring for a Multicultural Patient Population at Parkland



John Thottakara, MD Associate Professor, PM&R
Chief of PM&R, Parkland Hospital



There perhaps is no better place to experience how healthcare is delivered to a culturally diverse patient population than a county safety net hospital such as Parkland. The Dallas metroplex ranks in the top 20 cities in the US, in terms of racial diversity. While data on race does not necessarily suggest multiculturalism, there have been significant increases in immigrant populations in Dallas and Texas as a whole over the last decade.

Rehabilitation, more so than other areas in healthcare, requires a collaborative effort between providers and patients. When

formulating a individual's rehabilitation care plan, the social and cultural components have a profound impact on the outcomes of stays. This includes the ability to effectively communicate with the patient and family, cultural gender roles, and the ability of a cultural community to help a member in a time of need. Access to medications, outpatient care, additional therapies, and DME is critical for any rehab patient who has undergone a significant functional decline. While commercial or government health insurance is one means to get these resources, 60% or more of our IPR patients at Parkland rely on the county's program for the indigent.

Our patient population is 40% Hispanic, 30% black, 20% white, and 10% other. However, these ratios do not adequately describe the diversity of such populations. For instance, the category of 'black' could identify patients born in the U.S. to families who have been present for generations, but also includes recent immigrants from the African continent (for instance, Amharic is the 2nd most requested interpreter language). Language, cultural and social profiles vary dramatically between these groups.

There are some potential challenges when delivering care to patients whose primary language is not English. A common mistake is to assume that a patient who has some capability of speaking English can both fully comprehend their treatment plan and communicate decisions about it in English. Patient preference of language to communicate care should always be honored in order to ensure the best outcomes. Translation services allow for access to a multitude of languages, however, in my experience, having in-person interpretation services allows for the best communication of information, particularly in the setting of cognitive impairment.

In my experience, cultural communities help their own in times of need. Whether it be physically, financially, or emotionally, this often makes the difference between a good or poor outcome from a rehabilitation standpoint. I have seen situations time and again where patients without a nuclear

family present here are assisted by members of their cultural community after IPR to allow them to successfully reintegrate back into the community.

“A common mistake is to assume that a patient who speaks some English can fully comprehend the treatment plan and communicate decisions about it in English.”

Gender roles must also be considered in the rehabilitation of multicultural populations. Changes in the ability of a patient to fulfill traditional roles such as ‘male wage-earner’ or ‘female manager of the home’ often require adaptation by family to assume different roles, which may be challenging in some cultures. Understanding these roles and educating patients and their families on predicted short- and long-term outcomes early on during rehab often makes the transition to home considerably easier.

In the end, if we as rehabilitation providers truly aim to provide individualized treatment to all of our patients, then flexibility and adaptation to the patient are paramount, especially when caring for multicultural populations. ■

2

Adapting Problem-Solving Training for Hispanic/Latinx Care Partners



Shannon Juengst, PhD & Candice Osborne, PhD
Assistant Professors, PM&R

Over 65 million people in the United States currently provide informal care to an individual with a chronic condition, often with limited or no caregiving or self-management training or community-based support. As a result, care partners often experience high levels of burden, which may lead to depression, poor health, increased service utilization, and reduced quality of life. Hispanic/Latinx individuals make up over 20% of care partners (i.e. informal/unpaid caregivers) in the U.S., but care partner education and training are rarely available in Spanish or even studied in this population. In 2013, Barrera and colleagues published a progress report on the current state of culturally adapted behavioral health interventions, concluding that these culturally adapted interventions are more

effective than usual care. This has prompted a call for culturally sensitive interventions that meet the unique language and cultural needs of Hispanic/Latinx care partners of adults with disabling conditions.

Dr. Juengst, Dr. Osborne, and Dr. Marlene Vega are currently working on an initial cultural adaptation of Problem-Solving Training (PST), a metacognitive strategy training approach grounded in self-management theory, that teaches a simple, systematic method for evaluating problems, generating and selecting solutions, developing specific goals and action plans, and evaluating and revising plans as needed (see **Figure 1** for PST strategy), for Spanish-speaking Hispanic/Latinx Care Partners (see **Figure 2** for study design). Their current project will include language translation

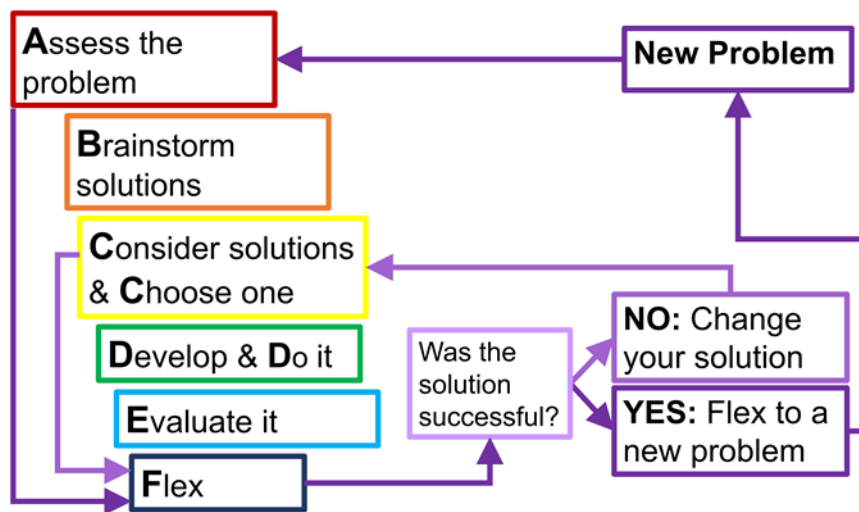


Figure 1

and validation to ensure cultural equivalence. Other adaptations will include cognitive, affective, and environmental content and processes that may be relevant to the care partner’s cultural frame, such as consideration of gender roles, acculturation, and religious beliefs.

standard step-by-step strategy for global problem-solving, but with flexibility that allows for individualization based on subculture. PST would not replace condition-specific education and training for care partners, but rather could be incorporated across clinical populations into education-based interventions to fill the current gaps in clinical practice. ■

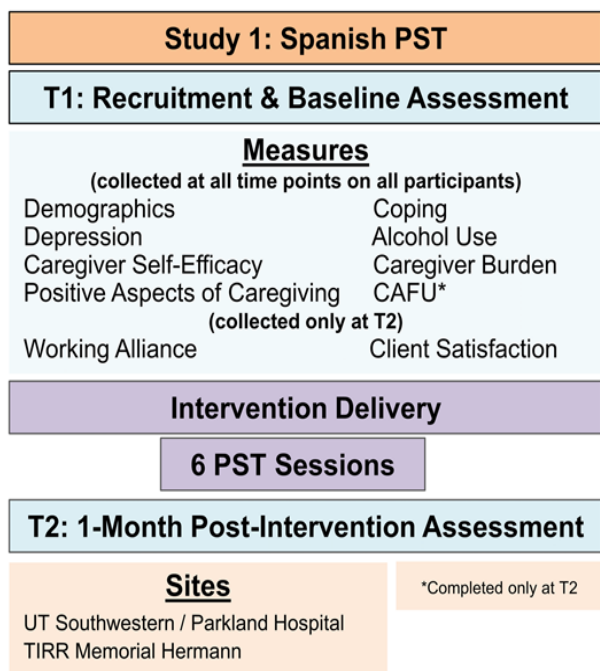


Figure 2

PST is uniquely equipped for cultural adaptation for a Hispanic/Latinx care partner population in a rehabilitation environment. Training in formal problem-solving strategies has previously been successfully incorporated into health interventions for specific Spanish-speaking subculture groups. PST for care partners puts value on the inclusion of loved ones in the recovery process, supporting a more collectivistic approach that validates both cultural values of “respeto” and “familismo” and religious values. Additionally, individuals within the broader Hispanic/Latinx population represent a diversity of cultures and health-related needs. PST teaches a

Bringing Epilepsy Self-Management to the Spanish-Speaking Population

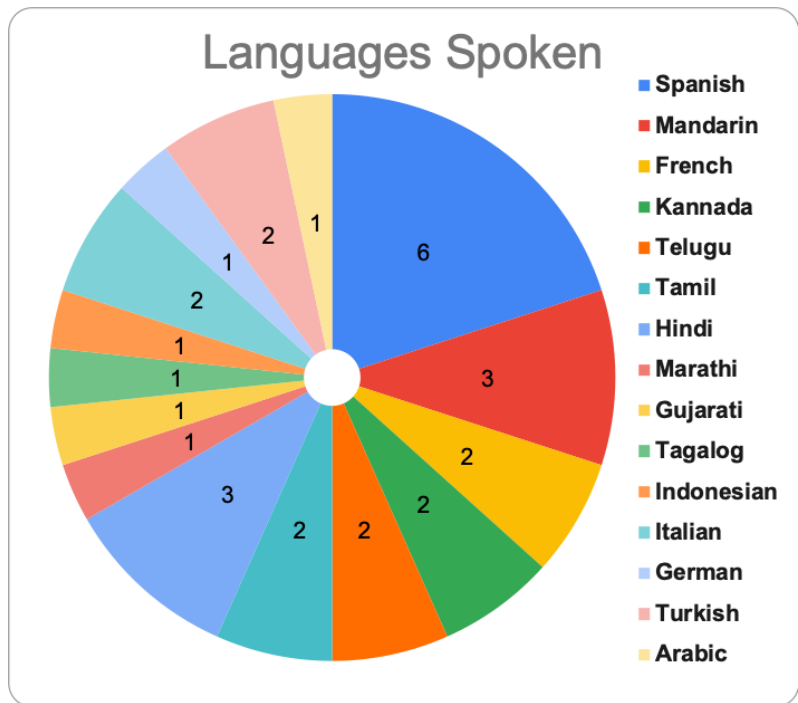
Dr. Jason Smith is a collaborator on a CDC-funded effort to adapt a validated epilepsy self-management program for Spanish-speaking adults.

The program, called PACES in epilepsy, is an 8-session program that has been found to improve self-management, self-efficacy, quality of life, and mood, with sustained benefits up to a year post-intervention. PACES has been validated for in-person and phone-based participation with adults in both urban and rural settings. Dr. Smith will be working in conjunction with PACES principal investigators Dr. Robert Fraser and Dr. Erika Johnson of the University of Washington. ■



Jason Smith, PhD
Assistant Professor, PM&R

In addition to performing high quality clinical care and research geared towards a multicultural patient population, the UTSW PM&R Department itself is a wealth of cultural diversity! A survey of all department members demonstrated that among the **24 respondents**, which included faculty, residents, and research staff, **fifteen** different languages are spoken, with **seven** respondents speaking more than one language other than English!



Department members also filled us in on the diverse and exciting cultural activities they engage in outside of work!



Rajashree Srinivasan, MD | Assistant Professor

I love to cook, crochet and knit. I also teach Indian classical music.

Didem Inanoglu, MD | Associate Professor

Turkish cooking class



Donald Kasitinon, MD | Resident

I eat a lot of Asian food and enjoy playing Mahjong.

Samuel Acuña, PhD | Postdoctoral Researcher

I play electric guitar in a rock band!



Wendy Moore, NP | Nurse Practitioner, Spine

Enjoy listening to music and preparing food from my Puerto Rican culture.

Surendra Barshikar, MD | Assistant Professor

Active member of a traditional Indian drum band & team manager for a local cricket team



3 | Our Multicultural Department

Estefanie Garduno | Research Study Coordinator
Outside of work, I am a professional figure skater!



Kelly Scott, MD | Professor
Piano, guitar, singing, cross-stitch, being a mother!

Radha Holavanahalli, PhD | Professor
Play Carnatic classical music on the Veena (string instrument)



Renee Enriquez, MD | Assistant Professor
Trained vocalist and avid runner

Clarice Sinn, MD | Assistant Professor
I cook & bake multiple types of foods from different cultures



Kavita Trivedi, DO | Associate Professor
Play piano in a small band, Indian classical dance, cooking/baking, music,

Shannon Juengst, PhD | Assistant Professor, PM&R
Oak Lawn Community Band (oboe)



Maria Pia Kabamalan | Research Coordinator
We attend gatherings such as Philippines' Independence Day (June), Lao New Year (April)

Eric James, PhD | Associate Professor
Martial Arts



Teresa Soedirdjo, PhD | Postdoctoral Researcher
Indonesian food bazaar for Indonesian Independence Day!

Fatma Gul, MD | Professor
I love to cook and garden. I like to knit and crochet if I have free time



Yi-Ting Tzen, PhD | Assistant Professor
Violin, piano, costume design

Recognizing Excellence

AWARDS & GRANTS



Nneka Ifejika, MD, MPH
Associate Professor, PM&R

Dr. Ifejika and her team received the Health Impact Award at U-HACK MED 2019, was named a 2019 Super Doctor of Texas in PM&R. She is also received a grant from Commercial Real Estate Women of Dallas in the amount of \$28,724.71 for her project entitled “Bridging the Gender Gap in Post-Stroke Disability,” in which she is the Principal Investigator.



Marlene Vega, PsyD
Assistant Professor, PM&R

Dr. Vega received the 2019 Early Career Practice Award from the American Psychological Association Division 2, Rehabilitation Psychology.

FACULTY PROMOTIONS



Kelly Scott, MD
Professor, PM&R

Dr. Scott was approved for promotion to professor in September 2020. She joined the faculty in 2008 and created and serves as the medical director of the Comprehensive Pelvic Rehabilitation Program, which is expanding rapidly to serve an ever-growing demand. She has developed an outstanding reputation as an expert in her field and has exhibited excellence in multidisciplinary research collaborations in pelvic rehabilitation.

She also participates extensively in medical education, leading two PM&R residency rotations in electrodiagnosis, and serving as the PM&R medical student clerkship director.

Residency Announcements



Dr. Lauren Fulks, MD, and **Dr. Brent Page, MD**, were elected by their peers and faculty members to serve as the 2020-2021 UT Southwestern PM&R Chief Residents!



Dr. David Eng, MD, was chosen by the GO-PMR Committee to participate in the Ethiopia Global Health trip this year. He will be traveling along with **Dr. Amy Mathews, MD** and Dr. Mehari Gebreyohanns, MD of the neurology department. Dr. Eng will be using his photography skills to help teach patients, caregivers, medical and health care staff. He will also be participating in the Bahir Dar Out-Reach for Neurology Education (BORNE) symposium while in Ethiopia.

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GO-PMR

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TO
PROMOTE
RESIDENCY
DEVELOPMENT**



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In Memoriam: Dr. Phala Helm, MD

Kathleen Bell, MD | Professor/Chair, PM&R

To all the friends of UT Southwestern and PM&R: We received word recently that Dr. Phala Helm passed unexpectedly. Some of us had the great privilege of knowing Dr. Helm well. She was the first chair of this department, a very unusual situation for that time. She was a pioneer in PM&R, establishing this department almost from nothing. She was one of the first women on the American Board of PM&R and she was the first non-surgeon on the board of the American Burn Association.

Dr. Helm was instrumental in developing the burn team at Parkland Hospital and was the principal investigator on the first North Texas Burn Model System. In addition to her burn research, she had an early cancer rehabilitation grant. She was dedicated to preventing limb amputation in diabetics, and pioneered the use of total-contact casting for diabetic foot ulcers which is still the treatment of choice today.

Dr. Helm was an important mentor to many, including our previous Chair, Karen Kowalske. She was so dynamic that she was invited to join the corporate board for Kimberly-Clark and obtained an endowment from them that still supports research in our department. Dr. Helm was coming in regularly to continue her burn research until just last year.

She loved living in the country with her dear companion, Marge, playing golf, and tending her 10 acres of land on her giant tractor. We were lucky to have her.

■



Tribute to Retirement: Vikki Nelson

Karen Kowalske, MD | Professor, PM&R



One of the solid foundations of the PM&R department, Vikki Nelson, Vikki started in the department as an administrative assistant 28 years ago. Always having a smile, she advanced to Senior Administrative Assistant, support staff. Through the years, Vikki has been the go-to person for everyone who knew where everything was, from stationery to print cartridges. She had my key off in a lock and when there was water flooding from the ceiling.

Lastly, she was a terrific friend to me and many in the department. She was there while I went to a meeting (which I am not sure we are allowed to do without a reservation when I showed up to a meeting without one). The value of the fact that she will be replaced by two people. From me personally, we will be forever grateful for her service and commitment. We all wish her well spending time with her grandchildren. ■

Announcements

FRISCO PM&R CLINICS OPEN

The PM&R department has moved into the new Frisco outpatient building. The following faculty members and services can be found there:



Juan Cabrera, MD
Neurorehabilitation,
TBI/Concussion



Nyaz Didehbani, PhD
Neuropsychology,
Sports Psychology



Reed Williams, MD
Sports Medicine,
Musculoskeletal



Nasser Ayyad, DO
Spine Center

Full Therapy Services

NEW SPINE FELLOWSHIP

Dr. Ankit Patel is the fellowship director for our new Interventional Spine and Musculoskeletal Fellowship, approved by the Texas Medical Board. Recruitment is ongoing.



retired on January 10, 2020.
rs ago. By working hard and
ant and manager of all of our
anything and everything. She
knew who to call when I broke
ng.

he would sit with my sick kids
anymore) and make a hotel
f her work is demonstrated by
and for the department, we will
well in enjoying life and



Holiday Celebrations!

Here are some fun glimpses of the departmental Ugly Sweater Contest and White Elephant Gift Exchange that we held this past holiday season!



SAVE THE DATE

Scientific Day

on: Friday, May 1st. 8AM –12:15PM

re: West Campus Building 3

st Speaker: Dr. Andrea Cheville from Mayo

Session Possible:

Optional Wellness after TBI

t: Seminar hosted by Dept of PM&R in

ership with Hope After Brain Injury (HABI)

n: Saturday, March 28, 2020, 8:30AM—2PM

re: West Campus Building 3, Room 9.406

Publications & Presentations

PUBLICATIONS

James, EG, Karabulut, M., Conatser, P., Leveille, S.G., Snih, S.A., Markides, K.S., & Bean, J.F. (2019). The Association of Coordination with Physical Activity Levels of Older Adults. *Journal of Aging Science*. 7:212.

Acuña SA, Ebrahimi A, Pomeroy RL, Martin JA, Thelen DG. Achilles tendon shear wave speed tracks the dynamic modulation of standing balance. *Physiol Rep* 7: 2019.

Vega M, Nabasny A, Juengst SB. “Descubriendo Soluciones Juntos” – An Argument for Adapting Problem-Solving Training for Latinx Care Partners after TBI. *Rehabilitation Psychology*, [Epub ahead of print], 2020.

Juengst SB, Nabasny A, Terhorst L. Cohort differences in neurobehavioral symptoms in chronic mild to severe traumatic brain injury. *Frontiers in Neurology*, 10, 2019.
Ketchum JM, Sevigny M, Hart T, O’Neil-Pirozzi TM, Sander A, **Juengst SB**, Bergquist TF, Dreer

LE, Whiteneck GG. The association between community participation and social internet use among adults with traumatic brain injury. *Journal of Head Trauma Rehabilitation*, [Epub ahead of print], 2020.

Kumar RG, Kesinger MR, **Juengst SB**, Brooks MM, Fabio A, Dams-O’Connor K, Pugh MJ, Sperry J, Wagner AK. Effects of Hospital-Acquired Pneumonia on Long-Term Recovery and Hospital Resource Utilization Following Moderate to Severe Traumatic Brain Injury. *Journal of Trauma*, [Epub ahead of print], 2019.

Juengst SB, Nabasny A, Terhorst L. Neurobehavioral Symptoms in Community-Dwelling Adults With and Without Chronic Traumatic Brain Injury: Differences by Age, Gender, Education, and Health Condition. *Frontiers in Neurology*, 10, 2019.

Malone C, Erler KS, Giacino JT, Hammond FM, **Juengst SB**, Locascio JJ, Nakase-Richardson R, Verduzco-Gutierrez M, Whyte J, Zasler N, Bodien YG. Participation following inpatient rehabilitation for traumatic disorders of consciousness: A TBI Model Systems study. *Frontiers in Neurology*, 10, 2019.

Smith, JAD, Kirmse, R, Van Enkevort, E, Armacost, M, Dhamija, R, Trehan, A, Liu, C. (2020). *Improving neuropsychological seizure lateralization in Spanish-speaking people with epilepsy in the US: The Need to Account for Education and Demographic Differences*. *Epilepsy and Behavior*, 104.

Abraham A, Scott KM, Christie A, **Morita-Nagai P**, Chhabra A, and Zimmern PE. Outcomes following multidisciplinary management of women with residual pelvic pain and dyspareunia following synthetic vaginal mesh and/or mesh sling removal. *Journal of Women’s Health Physical Therapy* 2019 Oct/Dec; 43(4): 171-179.

Cullum CM, Bunt S, Hicks C, Didehbani N, Miller S, Vargas B, Sabo T, **Bell K**, Batjer HH. The North Texas Concussion Registry (ConTex). *BMJ Open* 2019;0:e032345. In Press.

PUBLICATIONS, CONT.

Collard MD, Xi Y, Patel A, **Scott KM**, Jones S, Chhabra A. Initial Experience of CT-guided Pulsed Radiofrequency Ablation of the Pudendal Nerve for Chronic Recalcitrant Pelvic Pain. *Clinical Radiology* 2019 Nov; 74(11): 897.e17-897.e23.

Scott KM, Gosai E, **Bradley MH**, Walton S, Hynan L, Lemack G, Roehrborn C. Individualized pelvic physical therapy for the treatment of post-prostatectomy stress urinary incontinence and pelvic pain. *International Urology and Nephrology* (2019). Epub ahead of print.

Hurwitz M, Lucas S, **Bell KR**, Temkin N, Dikmen S, Hoffman J. Use of Amitriptyline in the Treatment of Headache After Traumatic Brain Injury: Lessons Learned From a Clinical Trial. *Headache On-line*. 2020

Bunt S, Didehbani N, Tarkenton T, Rossetti H, Hicks C, Vargas B, Silver C, Nakonezny P, **Bell K**, Batjer H, Cullum CM. Sex Differences and Reporting of SCAT-5 Concussion Symptoms in Adolescent Athletes. *Clinical Journal of Sport Medicine*: January 24, 2020 - Publish Ahead of Print.

PRESENTATIONS

AAPM&R Annual Assembly. San Antonio, TX. November 2019

Enriquez, R. Workshop Faculty and Table Instructor. Resident Bootcamp sessions: Diagnostic Musculoskeletal Ultrasound.

Ifejika NL, Glassman SJ, Grierson M, Singh R, Thomas P. AAPM&R Health Advocacy on the Hill and Beyond: A Town Hall Discussion.

Kasitinon D, Royston A, Wernet L, Garner D, and **Ramey L**. Health-Related Incidents among Collegiate Wheelchair Basketball Players. Poster.

Kasitinon D, Abraham L, Bunt S, Davenport

E, Sabo T, Cullum M, and **Bell K**. The Associations Between Structural Brain MRI Findings and Immediate and 3 Month Outcomes in Children with Concussion. Poster.

Chidomere O, Kasitinon D, Royston A, Garner D, Wernet L, and **Ramey L**. Sports-Related Injuries and Illnesses in Intercollegiate Wheelchair Basketball. Poster.

Tenaglia A, Isidro T, **Kasitinon D**, Weppner J, and Kim C. To The Point: Evolution, Evidence, and Experience of Acupuncture. Co-session director and oral presentation.

Kasitinon D and Tow S. *Resident Boot Camp 1: Ultrasound – Reviewing Essential Nerve Examination Techniques and Common Joint Injection Views*. Main session director.

Ifejika NL, Glassman SJ, Grierson M, Singh R, Thomas P. AAPM&R Health Advocacy on the Hill and Beyond: The Current Health Policy Landscape and Academy Advocacy Activities.

Ifejika NL, Bhadane M, Cai, CC, Watkins J, Grotta JC. Characteristics of Acute Stroke Patients Readmitted to Inpatient Rehabilitation Facilities.

American Congress of Rehabilitation Medicine Annual Conference. Chicago, IL. November 2019.

Conley M, Terhorst L, **Juengst SB**. Convergent and divergent validity of the Behavioral Assessment Screening Tool (BAST) in Traumatic Brain Injury. Poster.

Nabasny AD, Juengst SB. Ability of Behavioral and Emotional Symptoms to Differentiate Those With and Without TBI and/or PTSD. Poster.

Juengst SB, Neaves SM, **Nabasny AD**, Kolessar ML. Change in self-appraisal of cognitive ability after performance on neuropsychological tests after traumatic brain injury. Poster.

Nabasny AD, Juengst SB. Post-TBI gender

differences in behavioral and emotional symptoms by experience of nightmares: a follow-up. Poster.

Osborne CL, Juengst SB. Using the ICF to Classify and Describe the Problems Care Partners Face during Inpatient rehabilitation. Poster.

Wright B, Kajankova M, Terhorst L, Juengst SB. Factor structure differences in the Adolescent versus Adult versions of the BAST after TBI. Poster.

Erler KS, **Kew CL, Juengst SB.** Differences in participation across age groups five years after traumatic brain injury. Oral paper presentation.

Malone C, Giacino JT, Hammond FM, **Juengst SB,** Locascio J, Nakase-Richardson R, Verduzco-Gutierrez M, White J, Zasler ND, Erler KS, Bodien Y. Participation during the first five years following rehabilitation for disorders of consciousness. Poster.

Meltzer KJ, **Juengst SB.** Experiencing frequent pain or headaches by gender and TBI severity and associations with neurobehavioral symptoms. Poster.

Juengst SB, Silva V, Nagele M, Dart G, Goldin Y, **Bell KR.** Feasibility of Early Problem-Solving Training for Care Partners of Individuals With Traumatic Brain Injuries. Poster.

Stevens LF, Ketchum JM, Sander AM, Lequerica A, Finn JA, Kajankova M, Koakowsky-Hayner SA, **Juengst SB,** et al. Racial/Ethnic Disparities in Community Participation After TBI Among Veterans & Service Members. Oral paper presentation.

Juengst SB, Osborne CL, Kew CL, Nabasny A, Bell KR. Feasibility of Early Problem-Solving Training for Care Partners of Individuals With Traumatic Injuries or Stroke. Oral paper presentation.

Juengst SB, Osborne CL, Kew CL, Nabasny A, Bell KR. Feasibility of Early Problem-Solving Training for Care Partners of Individuals With Traumatic Injuries or Stroke. Oral paper

presentation

Wang RH, Nalder E, Astell A, Robillard JM, **Juengst SB.** Information and Communication Technology for Individuals Living with Cognitive Impairments. Symposium.

Driver S, **Juengst SB, Bell KR,** Dubiel R, Vega M. Leading a healthy lifestyle after TBI. Symposium.

Ehrlich-Jones L, Heinemann A, Sullivan JE, Fischer HC, Weaver J, **Juengst SB,** Terhorst L, Grampurohit N. Enriching Curricular Resources for Rehabilitation: Collaborations with the Rehabilitation Measures Database. Symposium.

Annaswamy T, Balakrishnan P, **Ifejika NL,** Desai D. Innovative Augmented-Reality Based Customized Gaming Solutions for Home Exercises Following Stroke.

Ifejika NL. Transitions of Stroke Care Models Using Big Data.

Other Presentations

Ifejika NL. Housestaff Emerging Academy of Leaders (HEAL) - "Crucial Conversations Pt. 1 - Deciding Your Future and Making Tough Choices". UTSouthwestern Medical Center, Dallas, TX, November 2019.

Enriquez, R. 12th Annual Diabetes Management Conference. Invited speaker, "Diabetes & Exercise: Physiology & Practical Application." Parkland Hospital. November 2019.

Ifejika NL. Clinical Complications that Impact Access to Stroke Rehabilitation. North Central Texas Trauma Regional Advisory Council (NCTTRAC) Stroke Committee. Arlington, TX, December 2019.

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