

10.04.2017

From

Mrs. M. Sindhuja.,

Asst. Professor in Physiotherapy

Sree Balaji College of Physiotherapy,

Chennai

To

Dr.S.S.Subramanian., Ph.D

The Dean,

Sree Balaji College of Physiotherapy,

Chennai

Sir,

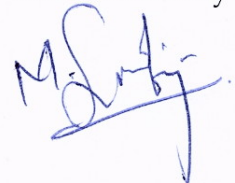
Sub: (Permission to conduct Seminar on Evaluation in Lowback Pain Organized by  
our college and Pain and Stroke - Reg)

Kindly consider in permitting the Seminar on Evaluation in Lowback Pain by  
eminent expert S. Sangeetha., on 21.04.2017 for 1day in line with our MOU with

Our students shall benefit this recent trends related to physiotherapy

Thanking You

Yours faithfully





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(Vide Notification No. F.9-5/2005 - II.3 Ministry of Human Resource Development, Govt. of India, dated 4<sup>th</sup> July 2005)

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Chennai - 600 073, Tamil Nadu



# SREE BALAJI COLLEGE OF PHYSIOTHERAPY

10.04.2017

To

Mrs. M. Sindhuja.,

Asst. Professor in Physiotherapy

Madam,

With reference to your communication dated on 10.04.2017

Hereby we grant permission to conduct seminar on evaluation in management of lowback pain on 21.04.2017 for 1 day



Dr.S.S.Subramanian., Ph.D

The Principal,

Sree Balaji College of Physiotherapy

15.04.2017

To

Dr. Ravi., B.P.T (APTA)

The Founder & Chief Physiotherapist of Pain & Stroke

Chennai

Sir,

Further continuation of our MOU, to enrich academic and research activities kindly coordinate the proposed approve seminar to benefit faculty and students of both our institutions. Further classification if any kindly communicate the coordinator Mrs. M. Sindhuja., Asst. Professor., email Id: [sbcp2007@gmail.com](mailto:sbcp2007@gmail.com)

Enclosing details along with

1. Course outline, objective
2. Dates, Resource person



Thanking You

  
Dr.S.S.Subramanian., Ph.D

The Principal,

Sree Balaji College of Physiotherapy



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# SREE BALAJI COLLEGE OF PHYSIOTHERAPY

## Seminar on Evaluation in Lowback Pain

Date: 21.04.2017

Time: 09.00 A.M to 04.00 P.M

ORGANIZED BY

PAIN & STROKE & SREE BALAJI COLLEGE OF PHYSIOTHERAPY

### Objectives:

To differentiate cause of back pain and management

### Course Outline:

To educate all possible cause of LBP- Prevention of LBA - Medical and physiotherapy management - Post surgical care

### Resource Persons

Speaker	S. Sangeetha., M.P.T (Neuro) Consultant Physiotherapist	Evaluation and Management Lowback Pain
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**Eligibility: III Year & IV Year B.P.T, Interns, M.P.T students, Clinical Physiotherapists**

Fees: Free

For Registration Contact: 044 - 22461883, 044 - 22462179,

e - Mail: [sbcp2007@gmail.com](mailto:sbcp2007@gmail.com)

**ORGANIZING SECRETARY**

Mrs. M. Sindhuja., Asst. Professor & T. Vinitha., Consultant Physiotherapist



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Time: 09.00 A.M to 04.00 P.M

### ORGANIZED BY

**PAIN & STROKE & SREE BALAJI COLLEGE OF PHYSIOTHERAPY**

### AGENDA

Time	Events
09.00 - 09.30	What is lowback pain and causes
09.30 - 10.00	Evaluation of discogenic and visceral back pain
10.00 - 10.30	Evaluation of postural and mechanical back pain
10.30 - 11.00	Use of imaging study
11.00 - 11.10	Tea
11.10 - 11.30	Outcome measures in back pain evaluation
11.30 - 12.00	Special tests
12.00 - 12.30	Evaluation of muscle power and length
12.30 - 01.00	Evaluation of pain
01.00 - 01.30	Lunch
01.30 - 02.00	Tools used in physiotherapy to access function
02.00 - 02.30	Ergonomics evaluation
02.30 - 03.00	Posture assessment
03.00 - 04.00	EMG, functional MRI, gait evaluation in lowback ache



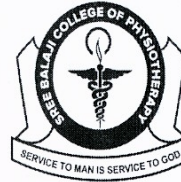
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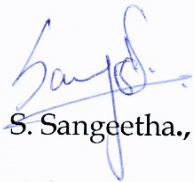
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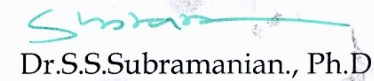
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### **CERTIFICATE OF PARTICIPATION**

This is to certify that Mr./ Ms GLADIS SNEEIN-R, (Reg No V14PT004) of  
III/IV year/ Interns/ B.P.T/M.P.T/ Clinical Physiotherapists has participated in the seminar on evaluation in management of  
lowback pain on 21.04.2017

  
S. Sangeetha.,

Consultant Physiotherapist, Pain & Stroke

  
Dr.S.S.Subramanian., Ph.D

Principal

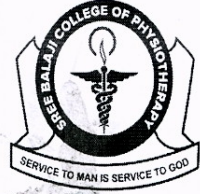


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# SREE BALAJI COLLEGE OF PHYSIOTHERAPY

Seminar on Evaluation in Lowback Pain

ORGANIZED BY

PAIN & STROKE & SREE BALAJI COLLEGE OF PHYSIOTHERAPY

Date: 21.04.2017

Time: 09.00 A.M to 04.00 P.M

## REGISTRATION FORM

Name: GLADIS SHERINA D.O.B: 07/11/1996 IAP/Reg No: VIAP7004 Batch: 2014 - 2018

Contact No: 9442150552 E-Mail: gladissherina@gmail.com Address: Tirunelveli

BATCH

Kindly Mention The Course Completed/ Presently Studying/ Working Institution

Course	College	University	Year of Completion Month & Year	Designation
UG	SBCP	BIHER	II Year (Aug, 2016)	BPT Student
PG				
Clinical Therapist				



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### FEEDBACK FORM

1. Adherence with due time: Good / Punctual / Can Be Improved
2. Audiovisual - Adequate / Needs To Improve
3. Depth of session - Good / Bad / Not Enough
4. How much relevant to future - Practice Useful / Not Sure
5. Further suggestions - Its Very Longer Sessions/ More Such Events to be Conducted / No Comments
6. Way of presentation Good/ Bad/ Can be Improved
7. Preparation for the event can be informed before / more arrangement / can be done / appreciable



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S.NO	CANDIDATE NAME
1	Binita Gurung
2	Ganesh Balaji. L
3	Gladis Sherin. R
4	Hema. S
5	Jeevitha. G
6	Madhan kumar. R
7	Mohammed Shabeer.N
8	Nivetha.S
9	P. Prasanth
10	Abinaya P
11	Akila V
12	Anu Priya K

13	Ashmika R
14	Atchaya G
15	Bhavana S
16	Bhuvaneshwari B
17	Boopathi S
18	Divya J
19	Gayathri M
20	Gayathri S
21	Hemalatha E
22	Ilakia S
23	Jagan B
24	Jeevitha K
25	Kalaiarasi K
26	Kalaivani E
27	Karthickeyan R
28	Kavitha N
29	Abinaya. B
30	Abdul Asif. K
31	Alwin Raj. A
32	Bharathi. M
33	Bhuvana. K
34	Deepthi Priya. K

35	Devi. B
36	Evarani. K
37	Gokul Raj. M
38	Gopi Krishnan .A
39	Hema. A
40	Joshna kousalya
41	Jyothi. K
42	Kaleeswari. R
43	Kamalee. K
44	Keerthana. K
45	Kirthika. B
46	Priyanka.M
47	Saranya Devi. M
48	Vani Shree U
49	Venippriya PN
50	Masthura Haseena. S



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