

CURRICULUM VITAE

Michael Policella, PT, DPT, AIB-VR

Education:

University at Buffalo, The State University of New York

Doctor of Physical Therapy, May 2014, GPA 3.9

Capstone: Outcome Measures of Patients with Normal Pressure Hydrocephalus

Licensure Information:

New York State Physical Therapy

License Number: 037722-1

Certifications:

American Institute of Balance (AIB) certified in Vestibular Rehabilitation

April 2015, Recertified April 2017

Certified Manual Physical Therapist (CMPT)

From North American Institute of Orthopedic Manual Therapy (NAIOMT)

Currently in progress estimated completion date by Dec 2018

Will be completed with classes April 2018

Employment Positions Held:

Physical Therapist

Rose Physical Therapy

Williamsville and Lockport, NY

2014 – Present

Teaching Experience:

Adjunct Faculty, Daemen College, Student Clinical Exposure

2017- Present

Clinical Instructor for 10 graduate students from Daemen College and UB

2015- Present

Vestibular Rehab Guest Lecturer, University at Buffalo, 3rd year student's Seminar series

Sept 2015, 2016, 2017

Clinical Instructor for Exercise Science Student from D'Youville College
Spring 2015

Private Tutor to D'Youville DPT student
Spring 2015-Spring 2016

Teacher and Mentor for DPT students, University at Buffalo, Breast Cancer We Can Row
Fall 2013

Student Assistant Teacher, University at Buffalo, Orthopedic and Modalities Lab
March-October 2013

Teaching Assistant, University at Buffalo, Gross Anatomy Lab
May-July 2011

Teaching Assistant, University at Buffalo, Human Anatomy Lab
September 2010-May 2011

Academic Assistant, University at Buffalo, College Freshman intended Pre-med majors
September 2009- May 2010

Continuing Education/ Career Development:

Currently taking 7 NAIOMT courses for Manual Therapy Certification
April 2016- present

Quantifying Whiplash Injury: Making the Invisible, Visible
October 2016

Certified in Vestibular Rehabilitation from American Institute of balance
April 2015

Spinal Manipulation course, D'Youville college
April 2014

CSM Las Vegas with focus on Orthopedic, Neuromuscular and Vestibular courses
February 2014

Lobby Day, Albany, NY: Addressed lawmakers about PT policies
April 2013

National Student Conclave in Arlington, VA
November 2012

Awards and Scholarships:

UB DPT Clinical Achievement Award
2014

Alpha Eta Society induction
2014

Stonegraber Scholarship recipient
2012

Caffiero Scholar
2012

Professional References:

Juli Wylegala PT, PhD. Email: wylegala@buffalo.edu

Dan Keller, PT, DPT Email: dankellerpt@gmail.com

Nick Smith, PT, DPT, ATC Email: nicholassmithdpt@gmail.com

Marsha Levenson, PT, DPT Email: marsha.g.levenson@gmail.com

Teaching Philosophy

As a teacher our job is to navigate our students through the maze that is learning. One part of my philosophy is to let evidence based practice and research lead our way in teaching. By providing students with up to date research and evidence based practice we can guide students to be successful practitioners and make educated decisions during patient treatments. Our profession has a great opportunity to differ ourselves from other healthcare professionals with our use of evidence based practice. This should be used as a guide to determine what concepts are supported in literature and what concepts are more theoretical. As a doctoring profession we should be focusing on providing specific evidence based care. We must give our students the tools to critically analyze all of the information provided and make informed decisions of which interventions to use as a professional. A strong background in evidence based practice will enable the student to answer the frequent patient's clinical question, how will one treatment option help them compared to another.

Researching and making these choices in patient care leads into my teaching philosophy of having a strong basis on anatomy and biomechanics. Certainly in the world of Physical Therapy, theories and paradigms can change relatively quickly from, for example, modalities and manual therapy to pain science theories and then back again. As a Physical Therapist many would conclude that the answer is somewhere in between and the use of all applications can be applicable depending on the patient's needs that you are treating. For students however these rapid paradigm changes can be confusing, but applying knowledge of anatomy and biomechanics to evidence based research can provide a great stable basis in which to build a treatment plan.

Knowledge of anatomy and actively utilizing biomechanics leads me to my next belief that students require hands on experience and visualization of what they are learning to retain information in a way that will lead to clinical success. As a student, I frequently felt as though memorizing a topic never worked well, I would study the information for a test, but the long term retention was not there. I was much more successful if I understood the topic and could visualize the concept. I think it is critical for student's long term success to have a solid image of what is happening. A great example of this was with leg length discrepancies. In school I studied the anterior vs posteriorly rotated innominate at least 15 times, and read the words MET for glute and hip flexor. However not until in my NAIOMT courses did they bring out a model to show what exactly happens during a rotation and since that date, I have been able to visualize which muscle I want to affect to get my desired correction. This was very eye opening in my professional life and I will continue to use lessons such as these in my teaching.

In addition to research, understanding anatomy and biomechanics, and visualization of concepts, case study in learning is crucial for long term success as clinical students and professionals. Case studies allow students to fully integrate their learning utilizing real life examples. Clinical examples can take a student's baseline understanding of textbook knowledge and transform that into excellent patient care. Using all of my outpatient orthopedic and vestibular experience I can

provide students with numerous examples to compliment any topics of teaching. I believe this leads to student success in the clinic, and I have seen that Daemen students have a great background of being able to apply their knowledge. I look forward to the opportunity to continue to add to student success.