

Physiatry

F O R W A R D

FALL 2025 | AAP'S MEMBER MAGAZINE



Association of Academic Physiatrists



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MedStar Georgetown Simulation Training

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New UAB Rehab Pavilion



PennRehab at ASCIP



UCDavis SCI Awareness



VUMC PM&R Residents



UNC with Habitat for Humanity



Living and loving PM&

Choosing a different specialty
UT San Antonio



USTW Adaptive Sports Expo



UofL Stroke Survivor and Caregiver Celebration



UW in China

CELEBRATING INNOVATION AND CONNECTION



UT San Antonio Rehab



UPenn-Botswana Partnership



Yale Division of Hip & Knee



PennPM&R Pool Party





Physiatty Forward, AAP's member magazine

As the year winds down, this issue celebrates the spirit of innovation and connection that defines our community. From new ideas sparked at Physiatty NXT to advocacy in action on Capitol Hill and the joy of bringing people together through adaptive sports, these pages highlight how we grow, lead, and lift each other up.

From groundbreaking research to a resident's thoughtful reflection on mentorship and the power of interns, you'll also find some fresh perspectives and see how we're able to award innovation.

As you head into the holidays, may these stories inspire you to reflect and reimagine what's next. And if you're ready to share your own story, submissions for our Winter '26 issue are now open!

Liz Raubach

AAP Communications Manager
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physiatty.org/PhysiattyForward



Physiatty Forward is published four times a year by the Association of Academic Physiatrists [AAP]. With a circulation of 3,000, Physiatty Forward is sent to active members of the AAP. To view past issues, visit physiatty.org/PhysiattyForward.

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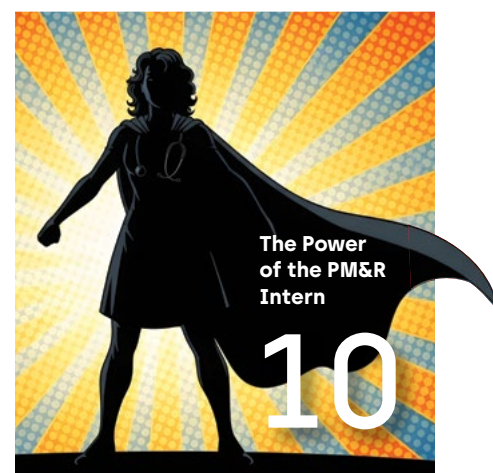
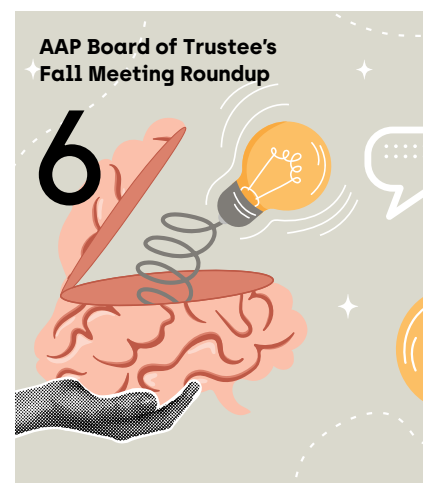
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ON THE COVER

It's nothing but net for this wheelchair basketball player at Penn State Health's annual RecFest. Read more about the event on pg. 20.



Contribute to our Winter issue of Physiatty Forward!

Submit your photos, content, ideas, and more by visiting physiatty.org/PhysiattyForward and filling out a submission form.



FROM THE PRESIDENT

Dear AAP community,

As we approach the close of another remarkable year, I find myself reflecting on how far our community has come and how much we continue to evolve together.

This fall, our Board of Trustees gathered in Philadelphia to chart AAP's future. Around that table, the conversation was bold and forward-looking: how can we strengthen the impact of physiatry, amplify our collective voice, and build an organization that grows with the needs of our members and the patients we serve? It was a meeting full of energy, ideas, and a deep sense of purpose.



Christopher J. Visco, MD

Just a few weeks earlier, AAP members took that same purpose to the nation's capital for our Hill Visits in Washington, D.C. There, we stood together to advocate for physiatry, ensuring that rehabilitation medicine remains visible, valued, and supported at the federal level. Joining us were participants from AAP's new Advocacy & Public Policy Leadership Program (APPL)—the next generation of our specialty's advocacy stars—who took part in their first Hill Visits as part of their training and added tremendous value to our collective efforts. These visits remind us that progress is not made from a distance, but through direct conversation and shared conviction.

And in August, we launched something entirely new against the beautiful backdrop of the Chicago skyline: Physiatry NXT. It was a first-of-its-kind event for early-career physiatrists, designed to spark growth, mentorship, and connection. Seeing over 60 rising leaders come together with such enthusiasm was both humbling and exhilarating.

As we look ahead, that future shines even brighter on the horizon of Physiatry '26 in Puerto Rico. It promises to be more than a meeting, celebrating collaboration, culture, and innovation. I hope to see many of you there, continuing conversations and soaking up some sun.

For now, as the year winds down, I hope you take time to rest, recharge, and savor the season. Whether that means time with family, reflection on your work, or simply a quiet moment of gratitude, know that your contributions make our community stronger every day.

Here's to a new year filled with discovery, connection, and purpose. Together, we'll keep advancing physiatry—one idea, one patient, and one step forward at a time.

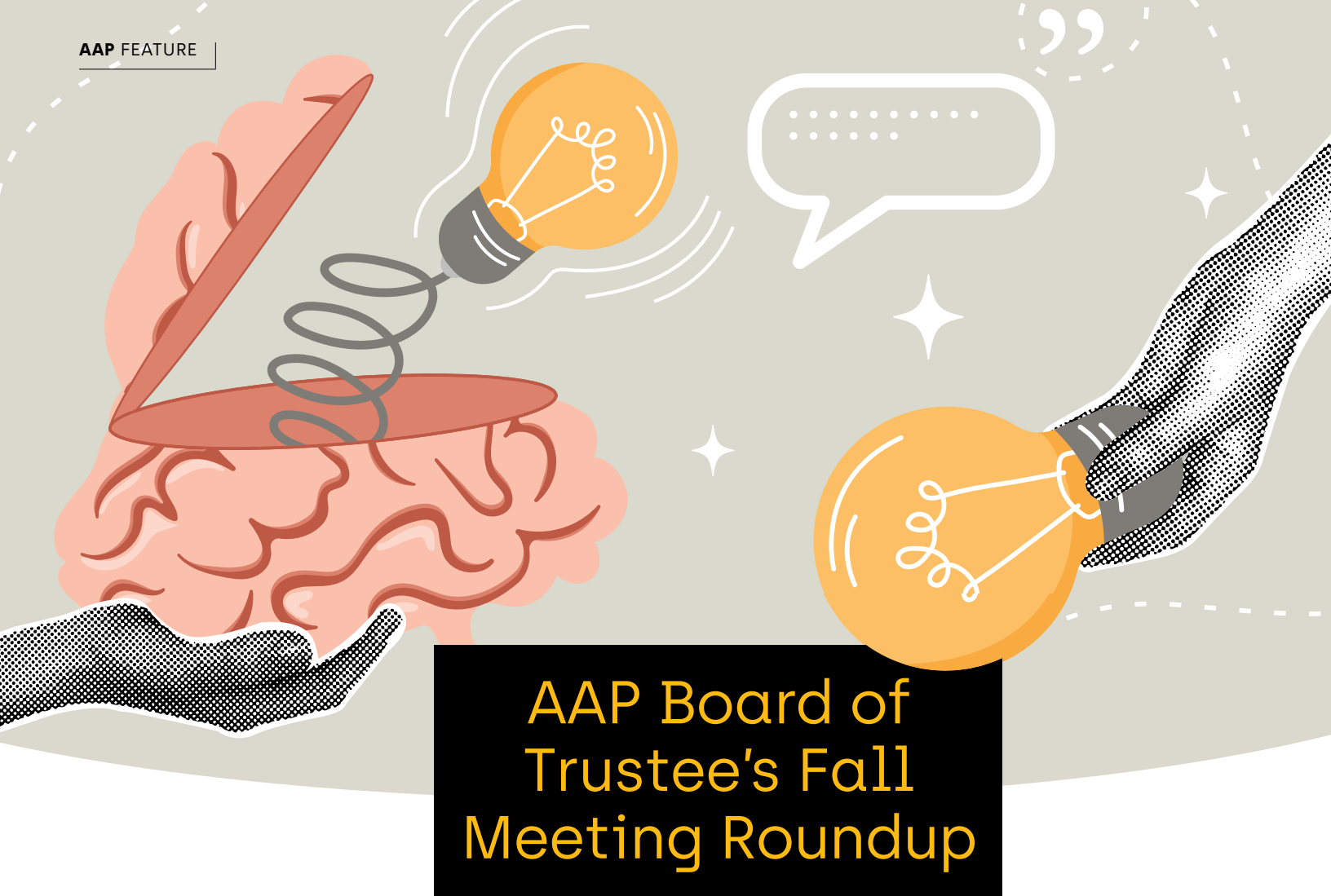
A blue ink handwritten signature of Christopher J. Visco.

Christopher J. Visco, MD

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President, Association of Academic Physiatrists



AAP Board of Trustee's Fall Meeting Roundup

The AAP Board of Trustees met this past September in Philadelphia to continue advancing our Strategic Plan—but it's not just the Board moving this work forward. Our dedicated councils, committees, working groups, and members bring the plan to life every day. Together, we're focused on empowering psychiatrists, educators, trainees, and all members to thrive. Conversations centered on expanding leadership opportunities, strengthening engagement and career pathways at every stage, raising the visibility of our specialty, and ensuring the AAP remains financially strong, strategically agile, and guided by our members.

The Board kicked off its meeting with updates from the Leadership Development and Recognition, Finance, and Governance Committees, each offering valuable insights into AAP's continued work to recognize leaders, maintain strong finances, and enhance how we operate as an organization.

- **Celebrating Excellence:** The Board approved the next round of AAP awards to recognize outstanding leadership, innovation, and contributions within academic psychiatry. Efforts are underway to ensure the awards process continues to reflect the breadth and diversity of our membership.

- **Strong Financial Stewardship:** AAP remains on solid financial footing, with continued positive performance and prudent management of resources to support future growth and innovation.
- **Enhancing Governance & Elevating Member Insight:** The Board is working to streamline governance and build stronger connections among councils and leadership groups so that member perspectives are better represented, ideas flow freely, and engagement benefits everyone in the AAP community.

Keep reading for more highlights from the meeting discussions and decisions:

STRATEGIC PLAN DEEP DIVE

At the midpoint of AAP's strategic plan, the Board reviewed progress and approved next steps for accountability and implementation.

- Committees will set measurable goals and share their progress each year with AAP leadership—and with you. This commitment to transparency helps ensure every member can see how AAP is delivering on its mission.
- Two major objectives received focused discussion:

1. Membership & Engagement

- To support members at every unique step—from training to leadership—the Board approved new programs focused on career transitions. Through upcoming workshops and networking opportunities, members can build skills in negotiation, contracts, financial literacy, and leadership to succeed throughout their careers.

2. Enhancing Recognition of Physiatry

- The Board discussed strategies to raise visibility of the specialty among peers, institutions, and the public.
- Ideas include re-launching the “I am a Physiatrist” campaign, collaborating with like-minded organizations, and creating a time-limited task force to execute targeted awareness initiatives.
- These efforts will complement the *Value of Physiatry* white paper under development by the Public Policy Committee, reinforcing AAP's efforts to highlight the specialty's impact and importance.

SUPPORTING PEDIATRIC PHYSIATRY

- The Board is taking steps to enhance AAP's value for pediatric physiatrists, beginning with a pre-conference workshop at Physiatry '26 dedicated to the pediatric physiatry community.
- Additional initiatives are being explored to ensure ongoing support and engagement for pediatric physiatrists within AAP.

EDUCATION AND INNOVATION

- The Board approved a new leadership in medical education program designed to build the next generation of clinician-educators.
- The AAP Resident Recruitment Subcouncil officially launched the AAP Standardized Letter of Evaluation (SLOE) for the 2025–2026 application cycle—designed to provide a more comprehensive and transparent assessment of an applicant's readiness to enter PM&R training. Following this year's application and selection process, the council will review outcomes and share recommendations for continued improvement.
- PhysiatryNXT, the new leadership summit for emerging early career leaders (residents, fellows, junior faculty), was well received in its inaugural year and will return in 2026.

- The Regenerative Rehabilitation Consortium (ARRC) and Regen Rehab meeting continue to grow, offering more ways for members interested in regenerative rehabilitation to connect, learn, and collaborate.
- The Virtual Campus and Question Bank continue to expand, and new residency curriculum modules are under development.
- Physiatry '26 in Puerto Rico is on track for record participation with a significant increase in abstract submissions and several new pre-courses, including Spasticity X, Skills for Inpatient Physiatrists & Medical Directors, and Pediatric Rehabilitation.
- Submissions for proposals and posters, as well as registration, are now open for ISPRM 2026! AAP is partnering with CAPM&R, the host society, to help manage the congress and support an outstanding 20th Anniversary ISPRM World Congress in Vancouver—one of the largest global PM&R meetings to date.

DIVERSITY, MEMBERSHIP, AND COMMUNITY

- The Diversity & Community Engagement Committee is advancing initiatives to promote equity and inclusion, including developing a DEI white paper, growing the speaker's bureau, and partnering with the Physiatry Foundation on a new diversity award.
- This past fiscal year, Membership grew by 6.3% to more than 3,200 members—doubling over the past decade!
- The Board discussed the potential for a Master Academician Award to recognize excellence including and beyond AAP service.
- Physiatry Connect, AAP's new forum, has launched to improve community engagement, with a new Mentor Match system relaunching soon.

RESEARCH & POLICY

- The *American Journal of Physical Medicine & Rehabilitation (AJPMR)* continues to thrive with over 1,100 expected submissions this year. The journal maintains a strong international presence, with manuscripts from 49 countries, and its impact factor remains steady. Upcoming highlights include two new supplements on neuromodulation and stroke, and adjustments to the



AAP Board of Trustees

paralympic sports section to better match submission trends.

- The Presidential Task Force on Strengthening PM&R Departments will publish a manuscript and follow-up educational series based on survey results.
- The Value of Academic Physiatry project continues to analyze data to define the specialty's measurable impact.
- Public Policy efforts included over 30 Hill visits, with continued advocacy on key issues affecting physiatrists and training programs.

LOOKING AHEAD

With laser focus and steadfast commitment, your AAP Board—diverse, welcoming of all perspectives, and representative of our membership—strives to create value for every member. By making bold decisions and fostering thoughtful dialogue, we are building a community that supports careers at every stage—from student to senior leader—while advancing academic physiatry worldwide.

We'd love to hear from you! If you have feedback, ideas, or anything else you'd like to share, please reach out to us at aap@physiatry.org.



AAP's Role in Improving Healthcare Engagement and Access for Persons with TBI

By: Randel Swanson, D.O., Ph.D., Risa Nakase-Richardson, Ph.D., Jessica L. Ryan, Ph.D., Sonia C. Arellano, Ph.D.



RANDY SWANSON ENGAGING IN HUMAN CENTERED DESIGN ACTIVITIES DURING I-HEAL'S KICKOFF MEETING IN TAMPA, FL, MAY 2024.



RANDY SWANSON ENGAGING WITH A LIVED EXPERIENCE PARTNER DURING I-HEAL'S KICKOFF MEETING IN TAMPA, FL, MAY 2024.

People with traumatic brain injury (TBI) morbidity such as memory problems experience challenges meaningfully engaging in healthcare. Recent research shows that people with cognitive disability from brain injury are less likely to be referred for evidence-based care, are less likely to follow through with treatment recommendations, and are at risk for loss to follow-up.

Drs. Risa Nakase-Richardson, Jolie Haun, and Megan Moore are leveraging methods from the field of implementation science, including community-based participatory research, to address quality of healthcare gaps for persons with brain injury. Improving Health Care Access and Engagement for Veterans and Service Members with TBI Morbidity (I-HEAL) was funded as a Focused Program Award by the Department of Defense via the Congressionally Directed Medical Research Program (CDMRP) in 2023 to accelerate translation of research as highlighted in the 2022 NASEM report on Accelerating Progress in TBI. I-HEAL consists of four individual projects and four supportive cores synergistically working to increase the quality of healthcare for people with TBI. The Community Engagement Core is comprised

of three robust panels of ten lived experience partners (LEPs), 15 individual project partners (IEPs, clinicians/administrators), and eight policy and professional organization partners (PPP), including the Association of Academic Psychiatrists (AAP).

While preparing for the I-HEAL grant for submission in 2022, Dr. Nakase-Richardson and colleagues reached out to the AAP requesting a member of the AAP serve on an advisory board for the I-HEAL grant. **Randel Swanson, DO, PhD, an active member of AAP's research committee and an RMSTP graduate**, was selected to represent the AAP for the I-HEAL project. Dr. Swanson is a Veteran and an Associate Professor of Physical Medicine and Rehabilitation at the University of Pennsylvania Perelman School of Medicine, a Physician-Scientist at the Michael J. Crescenz VA Medical Center, and the Associate Clinical Research Director for the VA's Complex Exposure Threats Center of Excellence (CETCE) at the Washington D.C. War Related Illness and Injury Study Center (WRIISC). As part of I-HEAL's PPP, Dr. Swanson attends quarterly virtual meetings alongside other professional organizations representing rehabilitation professionals and brain injury advocacy organizations and attends in-person meetings to engage with other stakeholders and the 77 member team supporting I-HEAL projects and cores.

As part of the PPP, Dr. Swanson is involved in providing key input for the four healthcare quality projects being developed in



RECENT RESEARCH SHOWS THAT PEOPLE WITH COGNITIVE DISABILITY FROM BRAIN INJURY ARE LESS LIKELY TO BE REFERRED FOR EVIDENCE-BASED CARE, ARE LESS LIKELY TO FOLLOW THROUGH WITH TREATMENT RECOMMENDATIONS, AND ARE AT RISK FOR LOSS TO FOLLOW-UP.



I-HEAL TEAM MEMBERS INCLUDING RESEARCH TEAM; LIVED EXPERIENCE PARTNERS; POLICY AND PROFESSIONAL PARTNERS; AND INDIVIDUAL EXPERIENCE PARTNERS, IN TAMPA, FL, MAY 2024.



MEMBERS OF I-HEAL'S COMMUNITY ENGAGEMENT COUNCIL DURING I-HEAL'S KICKOFF MEETING IN TAMPA, FL, MAY 2024.

I-HEAL. The four projects are described in detail on the I-HEAL website and leverage the use of implementation strategies to improve meaningful engagement in healthcare. Project One, led by Drs. Kristen Dams O'Connor, Marc Silva, and Mrs. Jill Coulter, is developing a nudge intervention to cue providers in a healthcare setting that an incoming patient may need accommodation for their cognitive disability and thus may require engagement of families or use of other accommodation strategies. Project Two, led by Drs. Jeanne Hoffman and Aaron Martin, is amassing strategies to populate a toolkit that will be used to accommodate people with cognitive disability in need of behavioral health interventions common in polytrauma populations (PTSD, sleep disorders, chronic pain, and depression). I-HEAL team members recently published that people with TBI are not referred to these front-line evidence-based treatments endorsed by guidelines because providers often perceive that their cognitive disability is a barrier to treatment participation. Similarly, people who suffer from challenging behaviors in the acute stages of brain injury may not be referred to or experience high-quality inpatient rehabilitation. Project Three, led by Drs. Jennifer Bogner and Tracy Kretzmer, is developing a training manual and implementation plan for workforce training in evidence-based behavior management for inpatient rehabilitation providers. Input from key stakeholders in the planning stages of I-HEAL identified the need

for evidence-driven policy to counter the universal telehealth mandates that administrators experienced during Covid. Project Four, led by Dr. Jolie Haun, is conducting secondary analyses of qualitative data regarding healthcare access during Covid to inform data-driven policy and practice recommendations of virtual healthcare for people with TBI.

To learn more about the projects and cores supporting them, please visit I-HEAL's website: iheal.tbndsc.org The "Get Involved" section will have focus group and survey opportunities for rehabilitation providers to inform the work.

References

- Randel Swanson, D.O., Ph.D., [1-3]
- Risa Nakase-Richardson, Ph.D., [4-5]
- Jessica L. Ryan, Ph.D., [6-7]
- Sonia C. Arellano, Ph.D. [6-7]
1. Physical Medicine and Rehabilitation, University of Pennsylvania Perelman School of Medicine,
2. Physical Medicine and Rehabilitation, Michael J. Crescenzo VA Medical Center
3. Complex Exposure Threats Center of Excellence (CETCE) at the Washington DC War Related Illness and Injury Study Center (WRIISC)
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5. Chief of Staff Office, James A. Haley Veterans' Hospital, Tampa, FL
6. Research, James A. Haley Veterans' Hospital, Tampa, FL
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THE POWER OF THE



PM&R Intern



By: Jacob T. Urbina, MD

Fall marks a critical rite of passage for the aspiring physiatrist: intern year. Confidence grows through long hours of hands-on training and difficult conversations. All the years of preparation finally come together, and you are becoming the doctor you always wanted to be. The pre-intern jitters fade as the days turn to nights, weeks, and months.

Intern year is a crucible of acute care management. Patients with undifferentiated problems land on your service, and you are entrusted to be their doctor. Your investigational skills are put to the test analyzing medication lists, tracking down families, and piecing together complex stories. You somehow find yourself gowned and gloved, pulling a dark fluid from someone's chest, and wonder: where's the PM&R?

No matter the program, interns train alongside residents and fellows from other specialties, many of whom have never heard of physiatry. While this year shapes physiatrists into better physicians, it also offers a chance to advocate for patients and demonstrate what PM&R brings to the table.

cont.

THE POWER OF THE PM&R INTERN IS **Presence**

IT LOOKS LIKE a young man with a cervical spinal cord injury. From the chaos of a rural motor vehicle accident to the cacophony of ICU machines breathing life back into him, this was only the beginning. After weeks in the ICU, he was discharged to a long-term acute care facility and finally accepted into inpatient rehabilitation. He proved to be a fighter, traveling hundreds of miles across state lines in a cramped ambulance. Nothing was going to stop him.

But recovery is not linear. While on the spinal cord rehab unit, his respiratory status worsened requiring ventilatory support through his tracheostomy, his Passy-Muir valve thrown on the floor as he was rushed to the emergency department.

I met him while serving on a pulmonology consulting service. His mother mentioned he hadn't been turned since arriving and asked me to tell the nurse. As an intern, you may often find yourself overwhelmed, but sharing your rehab experience with patients and families builds trust and becomes advocacy for quality care. It looks like taking a few extra seconds to help nurses turn a patient. It looks like praising families and patients for setting alarms to advocate for wound prevention. It looks like talking directly with the patient, prioritizing their voice regardless of audibility. It looks like dabbing tears from their eyes as they say thank you for just being there.



THE POWER OF THE PM&R INTERN IS **Patience**

IT LOOKS LIKE changing the narrative for our colleagues through evidence-based physiatry. Acute care physicians often see patients at their worst which can bias expectations for recovery. Whether in a Level I Trauma Center arranging a transfer, cases like these can cement in colleagues' minds that some patients may be beyond recovery. Hospitalists and surgeons focus on stabilization rather than recovery.

While understandable, this leaves an incomplete picture of injury and potential for recovery. For example, neurotrauma is often discussed in hushed tones with pity for what has been lost. While there is loss for many, physiatrists on the other hand celebrate and optimize what can be gained. Sharing recovery stories combats ability bias and reminds our colleagues that early action sets the pace for rehabilitation. Studies show that early mobilization and rehab goals improve outcomes and set patients up for success.

Additionally, the language we use matters. Historically, language has been used to stigmatize disability, yet remnants of this stigma still permeate today's healthcare system. We must reject dehumanizing language toward people with disabilities. Evidence-based terminology for disorders of consciousness such as "unresponsive wakefulness" and "minimally conscious" improves care because accurate staging guides recovery expectations. Proper classification educates families and connects them to resources. Physiatry gives us space to make these meaningful, incremental changes by advocating for equitable terminology, and our community deserves providers who improve the world one step at a time.

THE POWER OF THE PM&R INTERN IS **Perseverance**

IT LOOKS LIKE the alarm on the cracked screen of your iPhone 8 going off before sunrise. Today is the first day you didn't have to hit snooze. The streets are empty as you make your way to the hospital. It feels almost quaint.

They say the days are long, but the years are short. Intern year is inevitable but not impossible. Every resident, fellow, and attending was once in your same shoes. Your mentors trusted you to be a good physiatrist which means they knew you would be a good intern. And you're proving them right.

Advocacy in PM&R means showing up daily and giving your best. If perfection were expected, residency wouldn't exist. Advocating for your own wellness and preventing burnout ensures that you can care for your patients. Practicing self-care and self-compassion is essential as you navigate this next step in your career. By caring for yourself, you strengthen your commitment to caring for others because the best doctors are, above all, human. Patients don't ask of us to go through rehab ourselves; they ask for doctors who face problems head-on and find solutions. Knowing when to rest this year and spending time with loved ones keeps us moving forward.

You have come so far, and nothing is going to stop you.



PRACTICAL ADVOCACY TIPS FOR INTERNS

- Use person-first language in notes and handoffs
- Share positive rehab stories with colleagues
- Take time to acknowledge families' advocacy efforts
- Protect your own wellness to better serve your patients



BIO: Jacob T. Urbina, MD graduated from McGovern Medical School at UTHealth Houston and will complete his preliminary medicine internship at the same institution prior to his advanced PM&R training at Northwestern/ Shirley Ryan AbilityLab. As an amputee and biomedical engineer, he is passionate about disability advocacy, medical education, and building a more accessible world for all. He is committed to improving patient-centered care while empowering the next generation of physiatrists to champion innovation and equity in the field.

References/Resources

- Groah, SL et al. [2015]. Prevention of Pressure Ulcers Among People With Spinal Cord Injury: A Systematic Review. *PM&R*. 7(6):613-36.
- Needham, DM & Korupolu R. [2010]. Rehabilitation Quality Improvement in an Intensive Care Unit Setting: Implementation of a Quality Improvement Model. *Topics in Stroke Rehabilitation* 17:271-81.
- Wagner, A et al. [2003]. Physical medicine and rehabilitation consultation: relationships with acute functional outcome, length of stay, and discharge planning after traumatic brain injury. *American Journal of Physical Medicine & Rehabilitation*. 82(7):526-36.
- Gosseries, O et al. [2011]. Disorders of consciousness: What's in a name? *NeuroRehabilitation*. 28(1):3-14.
- Young, MJ et al. [2021]. The neuroethics of disorders of consciousness: a brief history of evolving ideas. *Brain*. 144(11):3291-310.
- Steinberg, D et al. [2023]. Burnout and Wellness Strategies Used by Academic Physiatry Programs: An Analysis and Perspective From the AAP Chairs Council. *American Journal of Physical Medicine & Rehabilitation*. 102(8):728-35.

PHYSIATRY '26



The future of physiatry happens here.



REGISTRATION OPEN

See you in
Puerto Rico
February 17-21, 2026

physiatry.org/annualmeeting



Association of Academic Physiatrists





FALL REPORT: HILL VISITS

Earlier this September, the first cohort of the AAP's Advocacy & Public Policy Leadership (APPL) program traveled to Washington, D.C. to participate in annual Capitol Hill visits. We joined

members of the AAP Public Policy Committee, to create a strong and coordinated team of physiatrists advocating for the future of rehabilitation medicine. Together, we met with lawmakers and their staff to highlight the critical role of Physical Medicine and Rehabilitation (PM&R) in improving the lives of patients with disabilities and chronic medical conditions.

Over the course of a packed day, we visited multiple Congressional offices, meeting with representatives from both the House and Senate. Each team was assigned a set of offices based on geography, ensuring broad coverage across the country. Our APPL cohort had the opportunity to both observe and actively participate in these meetings, working alongside experienced members of the Public Policy Committee.

The Hill Visits are designed to educate lawmakers on the critical role of physiatry in the U.S. healthcare system and to advocate for legislative priorities that directly impact our patients and profession. Each year, these visits amplify the voice of physiatrists and build relationships with policymakers, reinforcing the importance of rehabilitation medicine in national health discussions.

Beyond policy, there were lighter moments as well as we were able to share personal stories about the impact of physiatry on patients' lives and even hearing legislators staff at times recall personal experiences with rehabilitation care. These personal connections underscored the universal relevance of our specialty.

Our visits helped raise awareness of physiatry's central role in healthcare and generated interest among policymakers in co-sponsoring or supporting relevant legislation. By presenting a united front, we demonstrated that physiatrists are not only clinicians but also advocates for systems-level improvements in healthcare delivery.



HIGHLIGHTS AND KEY ISSUES

This year's advocacy centered on several pressing issues:

- **Graduate Medical Education (GME):** Addressing the national physician shortage by supporting legislation to expand residency positions.
- **Inpatient Rehabilitation Facilities (IRFs):** Protecting access to high-quality rehab for patients with complex medical needs.
- **Rehabilitation Research and Long-COVID:** Expanding research funding to improve outcomes and address long-term disability.
- **Telehealth Rehabilitation Services:** Supporting continued coverage and funding to ensure equitable access to care.
- **Climate Change and Disability:** Highlighting the disproportionate impact of climate-related health effects on people with disabilities.



APPL Perspective

For the APPL participants, the Hill Visits were a unique experience. The program is designed to train future leaders in advocacy and policy, and the opportunity to directly engage with lawmakers and their staff provided invaluable insight into how federal policy shapes patient care. It also offered a chance to work closely with the AAP Public Policy Committee, building mentorship connections and reinforcing our commitment to lifelong advocacy.

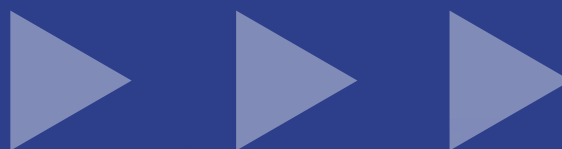
These visits reaffirm the importance of having physiatrists at the policy table. For those interested in learning more about the APPL program and how to get involved in future Hill Visits, please visit the AAP website. Advocacy is not only about legislation, but also about ensuring that the voices of our patients and our specialty are heard.

More information is available at
physiatry.org/APPL



Physiatry NXT

IGNITES INNOVATION
& CONNECTION



"NXT was a very beneficial experience.
I learned so much, met incredible mentors,
and left feeling genuinely inspired about
where my career is headed."

—CONFERENCE ATTENDEE

This past August, the AAP held its inaugural career-focused event: **Physiatry NXT**, a fresh in-person experience designed for early-career physiatrists, brought over 60 rising and established leaders in rehabilitation medicine together for two days of high-energy learning, mentorship, and inspiration.

Created by the AAP Education Committee and guided by top PM&R experts from across the country, the program traded lectures for conversation and theory for practice. Four small-group learning tracks set the stage for candid discussions and collaborative problem-solving, while two standout plenary sessions—"Planning Your Future" with Dr. Sara Cuccurullo and "Career Pearls" with Dr. Prakash Jayabalan—offered invaluable insight into professional growth and leadership in today's evolving landscape.

With Chicago's skyline gleaming in the background, the mood was collegial, forward-thinking, and full of promise. Attendees raved about the accessibility of the faculty, the depth of discussion, and the chance to connect across generations of physiatrists.

A Meeting that Made an Impression

Attendees left energized and inspired, calling the program a highly valuable learning experience. The sessions struck a perfect balance between education and application—offering real-world tools participants could bring straight back to their teams.

Faculty earned high marks for their engaging approach and depth of expertise, guiding conversations that strengthened essential skills in communication, professionalism, teamwork, and quality improvement.

The result? A meeting that didn't just inform—it elevated practice and leadership across the board.

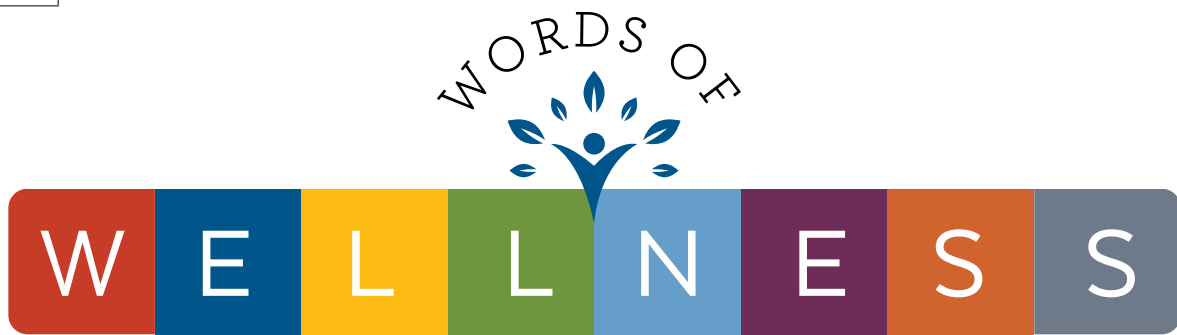
What's NXT?

Plans for next year's event are already taking shape, promising an even bolder, more dynamic experience for emerging leaders ready to shape what's next in the field. Keep a look out for more information in the coming months, and plan to save the date for Physiatry NXT '26!



"As a resident, AAP NXT provided me with strategies I will be able to use in teaching my peers, medical students and our patients. I thoroughly enjoyed the program and will look forward to the opportunity to return and participate in other tracks of the program to maximize the benefits and learning available!"

—CONFERENCE ATTENDEE



Welcome to your quarterly Words of Wellness, a column dedicated to giving you resources and inspiration to intentionally practice wellness and encourage your peers. These features are brought to you by the AAP's Resident/ Fellow Council (RFC) Well-being Subcommittee.

FEATURED WORKOUT

The Mighty Plank

AUTHOR: MELINA LANDRY DO

If you could do only one exercise every day, what would it be? To work your whole body efficiently, it's hard to beat the simple plank.

While the plank is simple, you can't underestimate how effective it is as a physical movement. A static hold is more than just a core exercise! In fact, it utilizes the body from head to toe. Think about your strong abs and obliques, as well as lower back, shoulders, arms, down to glutes and quads. Holding a plank position will build isometric strength, improve posture, and even reduce back pain!

You can do this exercise anywhere, and without a single piece of equipment. Hold a plank for 30 seconds or give yourself a longer goal! The plank is a great way to challenge stability, endurance, and build muscle tone. You can add challenges by lifting an arm or a leg to plank or switch it up entirely, using a side plank, for an even deeper core workout.

So next time you find yourself short on time and want to feel the burn and check the box for a challenge, get down and plank it out!



FEATURED RECIPE

Autumnal Comfort: Roasted Kabocha Soup with Warming Spices

AUTHOR: MELINA LANDRY, DO

SOURCE: WWW.SIMPLYRECIPES.COM

As it begins to feel like fall, there is nothing like a comforting bowl of velvety soup. The best part? It's much easier to make than you would think!

Kabocha Squash is known as Japanese pumpkin, is a type of winter squash.

INGREDIENTS

- 1/2 large kabocha squash, seeded (about 3 to 4 pounds for the 1/2 squash)
- 2 1/2 tablespoons extra virgin olive oil, divided
- Salt
- 2 cups chopped or sliced onions
- 2 ribs celery, sliced
- 3 cloves garlic (about 1 tablespoon)
- 1 (2-inch) piece fresh ginger, peeled and grated
- 1/2 teaspoon ground cumin
- 1 teaspoon ground coriander
- 4 cups chicken or vegetable stock
- 2 teaspoons kosher salt
- 1/4 teaspoon black pepper
- Lime juice, for serving
- Chopped fresh cilantro, optional for serving

INSTRUCTIONS

1. Preheat the oven 400°F.

2. Roast the squash:

Use a heavy chef's knife or cleaver (it helps if you have a rubber mallet as well) to cut the kabocha squash half into a few large pieces. (Kabocha squash is thick and meaty and can be a challenge to cut. So take care! Make sure the squash is stable on your cutting board before you start to cut it.)

Scoop out the seeds and stringy insides. Place the squash pieces on a foil or Silpat-lined roasting pan. Rub 1 tablespoon olive oil over all sides, and sprinkle with salt. Put the squash pieces skin side up on the pan. Roast for 45 to 60 minutes until completely cooked through. The pieces should be soft and caramelized at the edges. Remove from oven and let sit.

3. Sauté the onions, celery, garlic, ginger, and spices:

While the squash is cooling, heat the remaining 1 1/2 tablespoons of olive oil on medium-high heat in a large (4- to 6-quart) thick-bottomed pan. Add the onions and celery. Lower the heat to medium and cook until softened, 8 to 10 minutes. Add the garlic, ginger, cumin, and coriander and cook 2 minutes more.

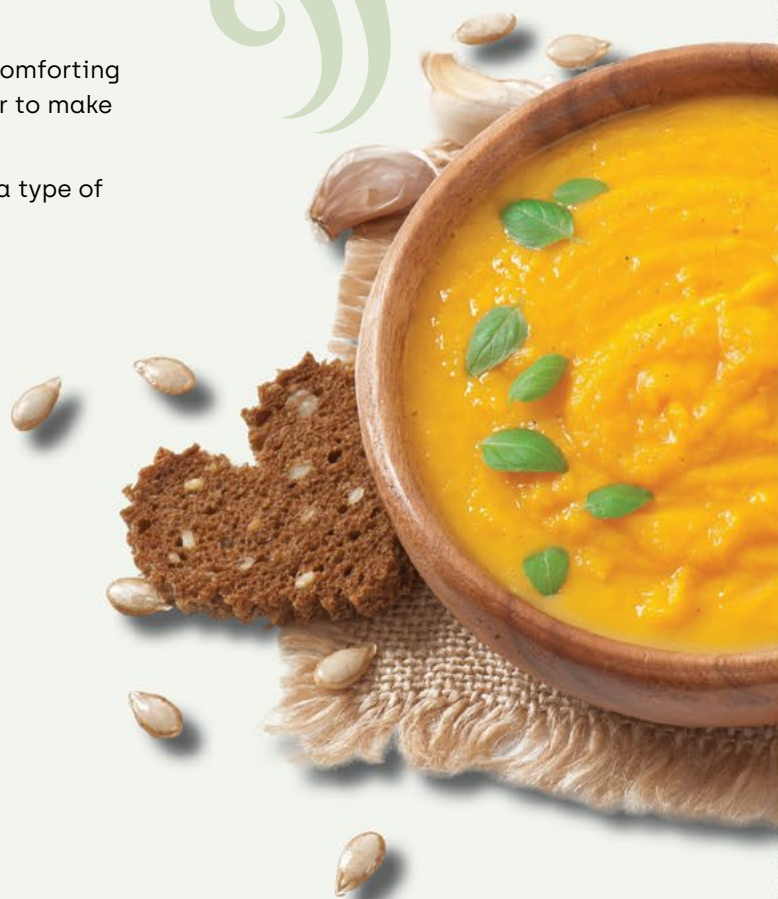
4. Add the squash, stock, salt, and pepper, then simmer:

Once the squash is cool enough to handle, remove and discard the skin. Place the roasted kabocha squash flesh into the pot with the onions and celery mixture. Add the stock, salt, and pepper. Increase the heat to high to bring the soup to a simmer. Then, lower the heat to low. Partially cover and cook 8 to 10 minutes.

5. Purée the soup:

Remove from the heat. Use an immersion blender (or work in batches with a standing blender, only filling the blender bowl 1/3 of the way each time) to purée the soup.

6. Add more salt to taste. Sprinkle with lime juice and chopped cilantro to serve.



RecFest 2025!

Celebrating Adaptive Sports and Recreation



By: Thiru Annaswamy, MD, Laura Snyder and Nancy Lokey

The Department of Physical Medicine and Rehabilitation at Penn State Health recently hosted RecFest 2025—an annual event that brings together individuals of all ages and abilities to explore the world of adaptive sports, fitness and recreation. RecFest '25 continued to break records with over 550+ pre-registrations and a record number of volunteers and staff.^{1,2}

The keynote speaker for this year's event was Maggie Redden, MPA, PLY, deputy director of communications, City of Falls Church, Virginia. Redden is a Paralympian [wheelchair track athlete] and Penn State alum, as well as an inspiration and role model to adaptive athletes worldwide. Her keynote address set the tone for this year's RecFestivities.³

A "celebration of ability," RecFest is free to the community thanks to the generosity of many local sponsors. Returning to Spooky Nook Sports in Manheim, PA for a third straight year, RecFest 2025 brought together over 90 exhibitors and 24 activity demonstrations for attendees to learn about and experience first-hand. The event offered a diverse range of adaptive sports that allowed participants to engage and get a taste of adapted cycling, tennis, power wheelchair floor hockey, field hockey, golf, sled hockey and soccer, alongside specialized wheelchair sports

such as basketball and rugby. Other adaptive sports included sit volleyball, adaptive drumming, adaptive gaming with neural earbuds, envision blind spots and adaptive dance. Featured demonstrations were presented by EKS0 exoskeleton, DPI Adaptive Boxing, UDS Service Dogs and JCWK Dance. Attendees had the opportunity to not only partake in these activities but also learn about resources tailored to individuals with disabilities, including service dog demonstrations and adapted driving programs designed to enhance mobility and independence.

For several years, Penn State Health's Department of Physical Medicine and Rehabilitation has championed the growth of adaptive athletics, resulting in the development of several adaptive sports and recreational programs including RecFest [since 2017]. Central Pennsylvania now offers youth wheelchair basketball and All Starz field hockey, only the second inclusive



field hockey team created in the U.S., and Penn State Adaptive Athletics Program is off to a great start fielding its first team of collegiate adaptive athletes since its 2024 reboot.

After experiencing a life-altering injury or illness, the initial focus is on restoration of health, followed by a course of rehabilitation. Rehabilitation's short-term goals and milestones focus on attaining independence in daily activities and functional mobility. These medical needs are typically met in traditional rehabilitation settings such as an inpatient rehabilitation hospital or an outpatient clinic. However, the ultimate goals for persons with disability often extend beyond household mobility and independence and the traditional boundaries of health care. They often face societal barriers, negative perceptions and discrimination. Stigma associated with a disability can lead to exclusion from education, vocation and recreation, depriving individuals of opportunities essential to their social development, health and overall well-being. Exclusion fosters inactivity, which may end up restricting mobility even further. Inclusion, on the other hand, builds bonds and fosters trust—in the health care community and society at large, as well as in their own ability.

Enter RecFest. Sports and recreational activities can help to reduce the stigma, discrimination and exclusion associated with having a disability because it naturally transforms community attitudes. Adaptive sports highlight an individual's ability. Assumptions about what a person can and can't do are reshaped for the positive. Participation in adaptive sports and recreation

changes the person with a disability in an equally profound way, empowering them to stay active and engaged in sports and in their communities. This leads to increased physical and mental strength, which further promotes independence and self-sufficiency. Adaptive sports provides the bridge that strengthens the bond and restores the trust between persons with disabilities and their communities.

A sample of a LinkedIn Post from Dr. Michael Kupferman, Penn State Health CEO and first-time RecFest attendee, speaks to this perfectly,⁴

"I can honestly say I did not have wheelchair basketball on my 2025 bingo card, but here we are! Each day I am here at Penn State Health, I am learning something new and inspirational about the people I work with and the patients we serve. The annual RecFest brings hundreds of people of all abilities, along with their families and caregivers, to explore new activities, build skills, and share joy. It even got me back on the basketball court in a way I did not expect! It was a blast."



Fueled by the desire to meet the needs of our patients and their loved ones, the Department of Physical Medicine and Rehabilitation at Penn State Health will continue advocating for and collaborating with our community to promote, celebrate and encourage ability for all. Stay Tuned for RecFest 2026!

**Additional
Media coverage
of RecFest 2025
can be found
by scanning the
QR code.**



***Adaptive sports
provides the bridge
that strengthens the
bond and restores the
trust between persons
with disabilities and
their communities.***

References

1. Penn State Health RecFest highlights range of recreational opportunities
2. Adaptive Sports continue to grow in Central Pennsylvania
3. https://www.linkedin.com/posts/maggieredden_penn-state-rec-fest-held-in-lancaster-county-activity-7365478920311287808-aD41/?utm_source=share&utm_medium=member_desktop&rcm=ACoAAAA096QBxkiEYLrrr-zg_EHUg_-ziPlhWRUc
4. https://www.linkedin.com/posts/mekupferman_from-wheelchair-basketball-and-adaptive-cycling-activity-7366514859330424833-VS13/?utm_source=share&utm_medium=member_desktop&rcm=ACoAAAA096QBxkiEYLrrr-zg_EHUg_-ziPlhWRUc



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Expanding Artificial Intelligence and Virtual Reality Multilingual Procedural Training to Global Physiatry Learners
- BRADFORD LANDRY, DO, ZUCKER SCHOOL OF MEDICINE
Improving Resident Continuity with a Longitudinal Patient Navigator/Advocate Experience
- CHLOE SLOCUM, MD, HARVARD MEDICAL SCHOOL
Mentorship, Meaningful Practice, and Making Each Moment Matter: An Activity Program to Promote Wellness in PM&R
- AARON YANG, MD, VANDERBILT UNIVERSITY
Wellness Retreat for Three PM&R Residency Programs (University of Louisville, University of Kentucky, and Vanderbilt University)

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A Sense of Belongings: Lucretia Wilson, M.S.



A behind-the-scenes look at the treasured belongings of one featured member



With over 25 years of dedicated service at Sinai Hospital of Baltimore, Lucretia A. Wilson brings a wealth of experience and leadership in graduate medical education. For the past 15 years, she has served as the Program Administrator for the Physical Medicine and Rehabilitation Residency, where she plays a key role in shaping the training and development of future physicians. She is passionate about mentorship, professional development, and building strong, supportive communities in and outside of the workplace.

1. **Family** - all that I do is for my family and I cherish every moment with them. The best time of year is family vacation.
2. **Coffee Mug** - I have worked in my department for 15 years and I cherish every gift ever given to me. And this mug is a great affirmation; reminds me I am awesome.
3. **Lanyard** - I am a true Baltimorean, and I love our football team. Win or lose....#GoRavens
4. **iPad** - I sometimes can fall into the category of a workaholic; therefore, I carry my iPad everywhere.
5. **Gummy Bears** - I am not a big eater, but I will snack all day. The organic gummy bears and worms by Black Forest are my favorites.
6. **Post-it Notes** - I am a little "old school", and I write down notes constantly. My office is covered with Post-It Notes.
7. **Straws** - I keep plastic straws on my desk and in my car. I just haven't adapted to the paper straws, they get soggy.
8. **Cake** - I have many hobbies that help me reduce stress and making cakes for loved one's special events is one of them.
9. **The Wiz** - I love musicals and Broadway shows. The Wiz was my first one I saw on Broadway in NYC and I sang the entire show.
10. **Dog** - My children begged for a dog, and I said no for many years. Now I can't imagine our family without Rocky. The only being in the house that jumps when I walk through the door



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