



## The Bare Bones

Clinical Integration of the K3 Model

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12/14/2020

**Video Link:** [https://youtu.be/lyvt\\_ZOy7FY](https://youtu.be/lyvt_ZOy7FY)

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- This presentation does not involve the unlabeled use of a product or product under investigational use.
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## Disclosures

- I have the following financial relationship to disclose:
  - I am creating and recording this as part of my responsibilities to Mercy. This falls under my normal Mercy job duties and reimbursement plan.

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## INTENT

**Provide the minimal didactic information for you to begin implementing the K3 Model into patient care.**

**CEU's will be provided –upon completion of a quiz and course review- by Outlaw Movement Systems, LLC (OMS).**

**This does NOT:**

- Provide the technical skills, and there is a high level of technical skill required for this.

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## Objectives:

1. Identify when the K3 techniques are **not** appropriate for patient care.
2. Identify clinical presentations that will have positive adaptations from the K3 techniques.

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## What is the K3 Model?

- Dr. Mark Cheng and Dr. Jimmy Yuan
- K3 Combat Movement Systems



- Restorative/Regenerative side of warrior culture



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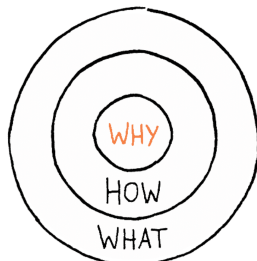
## Clinically “Why”?

### • Integrated Motor Control

- **Feedback stabilization** strategy
  - Shoulder
  - UE
  - Trunk
  - Pelvis
- All the fascial lines

### • Redirect Focus

- Decreased pain
- Increased ROM



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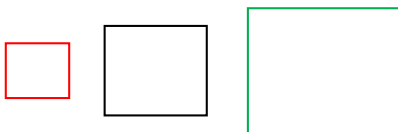
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## Contraindications:

- Acute Fractures\*
- Clinical boundaries set by physicians that exclude *this*



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## Benefits:

- Vibration through the palm
  - Same side/contralateral side
  - Neck/trunk
- Manipulation of the UE
- Exercise creates a chemical response
- Contralateral activation from perturbations
- Feedforward vs. feedback
  
- UE vs. LE vs. Trunk

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## Requisites:

- 1. Understand your physician's limitations (ROM, Strengthening, Sling, etc.)**
- 2. Understand the surgical procedure.**
3. No ACUTE pain.
4. "Enough" ROM for the chosen technique
5. No swelling\*
- 6. Ground based (Prone/Quadruped/"supported") work**
- 7. Self Technical proficiency in seeing and teaching the K3 techniques**
- 8. An integrated plan of tissue work, corrective exercise, and strengthening.**

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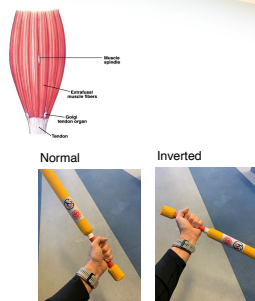
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## Techniques

### Static

- Tissue percussion
- Static Perturbations
  - Any STATIC upper body position within physician's ROM limitations
- Grip switch
  - Normal to reverse
- Vary Stances (Shapes)
- Contralateral work with static surgical limb



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# “Tension”

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# Techniques

## Dynamic

- **Patterns 1-6**
  - Can be done with NO shoulder movement
  - Biceps pathologies
- **Patterns 7-24**
  - No H. ADD
  - No active ER
- **Heaven 6/Umbrella 6**
  - No H. ADD
  - No active ER
  - No Flexion >90°

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# Things we struggle with that this will work aid:

- Intrinsic Foot/Ankle Motor Control → *integration of this*
- Integrated Hip Extension Motor Control → *integration of this*
- Integrated Knee Extension Motor Control → *integration of this*
- Shoulder/elbow fear avoidance → *integration of this*
- Integrated UE Motor Control → *ACTUAL integration of this*
- Systemic Dissociation Capacity/Conditioning → *integration of this*
- Transitioning from Feed-Forward Tension to Feed-Back → *integration of this*

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## Documentation/Billing

### Documentation

- “K3 Patterns x-x”
  - “Shape,” “Posture,” or stance
  - *K3 Patterns 1-8 in Open Standing*
- NOT:
  - Bunal sticks
  - Indian Clubs/Clubs
  - Stick work



### Billing

- **INTENT**
- **Neuro Re-Education 97112**
  - reeducation of movement, balance, coordination, kinesthetic sense, posture, and proprioception
- **Therapeutic Activity 97530**
  - Dynamic activities to improve functional performance
  - “ing” such as carrying, lifting, handling, reaching, transferring and transporting to improve overall function.
  - “Striking Progression”
- **Therapeutic Exercise 97110**
  - improve mobility, stretching, strengthening, coordination, control of extremities, dexterity, range of motion, or endurance as part of activities of daily living training, or re-education

## Next Steps

### BEFORE USING ON A PATIENT:

- **Experience each**
  - Static (grip switch, percussion, perturbations)
  - dynamic
- **Technical Proficiency**
  - Patterns 1-6



### To receive CEU's

- Use the QR's codes at the end of this to take the quiz and fill out the course assessment
- Upon successfully passing the quiz and completing the eval email me at [brandon.hetzler@mercy.net](mailto:brandon.hetzler@mercy.net) and request your CEU certificate.



How can we help?  
Contact us:

Brandon.Hetzler@mercy.net

*If you want more information and more CEU's (an expanded version of this lecture that includes a deeper dive into research as well as patient example and protocols, email the address above to receive the private link to that resource.*

Quiz Link



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Course Review Link



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