

July Historical Perspective

In this issue celebrating the 50th anniversary of the Academy of Cardiovascular/Pulmonary Physical Therapy, we take the opportunity to recognize the evolution and creation of two awards: the Merit Award and the Mentor Award. We will provide the complete list of recipients of each award and highlight a few awardees. All recipients have made significant contributions to the Academy and the practice of cardiovascular/pulmonary physical therapy (CVP PT). Recognition of these individuals is just a small way the Academy can honor their tireless commitment to CVP PT.

Merit Award

In 1982 the Executive Committee of the CVP Section discussed the importance of honoring section members who demonstrated outstanding support and service to the Section, thus establishing the Merit Award. The first Merit Award from the CVP Section was given to Scot Irwin in 1983.

More recently, this award was expanded to recognize an individual who has contributed to the advancement, knowledge, and/or recognition of the Academy of Cardiovascular & Pulmonary Physical Therapy. Contribution can be in the specific categories of practice, scholarship, or service. The award is presented at the Academy's Annual Membership Meeting during Combined Sections Meeting. An announcement celebrating their award is also placed in various Academy media.

CVP Academy Merit Award Recipients

- | | |
|--------------------------------------|-------------------------------------|
| · 2025 Angela Campbell | · 2002 Tamara Burlis |
| · 2024 Jennifer Sharp & John Connell | · 2001 Tanya LaPier |
| · 2023 Ashley Poole | · 2000 June Marble |
| · 2022 Morgan Johanson | · 1999 Jane Wetzel |
| · 2021 Chris Wells | · 1998 Steve Tepper |
| · 2020 Joe Adler | · 1997 Sue Mihans, Alexandra Sciaky |
| · 2019 Richard Gach | · 1996 Susan Butler-McNamara |
| · 2018 Chris Wells | · 1995 Sandra Cassady |
| · 2017 Pam Bartlo | · 1994 Bill Temes |
| · 2016 Kristin Lefebvre | · 1993 Larry Cahalin |
| · 2015 Ann Fick | · 1992 Catherine Certo |
| · 2014 Dawn Stackowicz | · 1991 Ellen Hillegass |
| · 2013 Christine Wilson | · 1990 Joanne Watchie |
| · 2011 Ethel Frese, Bobby Belarmino | · 1989 Linda Crane |
| · 2010 Anne Swisher | · 1988 Donna Frownfelter |
| · 2009 Dan Malone | · 1987 Bob Huhn, Marcia Pearl |
| · 2008 Jane Eason | · 1985 Cynthia Zadaï, Ray Blessey, |
| · 2007 Alexandra Sciaky | · Pam Caitlin |
| · 2006 Dianne Jewell | · 1984 Colleen Kigin |
| · 2005 Mike LaMothe | · 1983 Scot Irwin |
| · 2003 H. Steven Sadowsky | |

Mentor Award

The CVP Academy Mentor Award was first awarded in 2007 to David Nelson. It recognizes members of the Academy whose distinguished careers have resulted in the mentoring of professionals who have gone on to serve others through their teaching, scholarship and/or clinical practice. These mentors may assume leadership roles within the Academy or serve as faculty members or clinical instructors, clinicians, or scholars.

The primary criterion for the award is demonstrated excellence in mentoring. This can be demonstrated by serving as a positive role model, demonstrating professional behavior, developing an effective environment for high quality clinical practice, teaching, research skills, presentation and/or writing skills, or by fostering the development of talents of others in these areas.

CVP Academy Mentor Award Recipients

- | | |
|--------------------------|--------------------------|
| · 2025 Stephanie Kotsuca | · 2016 Paul Ricard |
| · 2024 Bryan Lohse | · 2015 Christiane Perme |
| · 2023 Traci Betts | · 2014 Neeti Pathare |
| · 2022 Melissa Bednarek | · 2013 Rebecca Crouch |
| · 2022 Kathy Lee Bishop | · 2011 Dianne Jewell |
| · 2021 Meryl Cohen | · 2010 Annie Downs |
| · 2020 John Lowman | · 2009 Donna Frownfelter |
| · 2019 Michael Shoemaker | · 2008 Colleen Kigin |
| · 2018 Gail Huber | · 2007 David Nelson |
| · 2017 Alex Sciaky | |

This month we would like to highlight recipients of the Merit and Mentor awards.

Joanne Watchie



I completed my B.S. and certificate in Physical Therapy from the University of California at San Francisco in 1975 and my master's degree in physical education with an emphasis in exercise science in 1984. My professional career has focused on the practice of cardiovascular and pulmonary PT. While working at UCSF in 1976-79, I developed their inpatient cardiac rehab and pre-op vascular amputee programs, as well as a cancer rehab program. Next, I served as a temporary instructor in the DeAnza Community College PT Assistants Program and served as lab. assistant & research associate in that school's Exercise Physiology Laboratory. Here I conducted the exercise testing portion of my research evaluating the cardiovascular effects of the treatment for Hodgkin's disease, which was published in the *International Journal of Oncology, Biology & Physics* in 1987. Then I took over the inpatient and outpatient cardiac rehab and exercise testing programs at Santa Clara Valley Medical Center in San Jose, CA, which was instrumental in expanding my knowledge and experience in the care of patients with cardiovascular disease.

After having my son in 1982, I performed exercise testing for the SF Fire Department as part of a cardiovascular risk factor reduction program they had instituted and I worked per diem at Stanford University Medical Center, expanding my experience in treating patients with heart and lung transplants. In 1985, I moved to Bethesda, MD and worked half-time in the chest PT department at George Washington University Hospital, and in 1988, I moved on to working as the cardiopulmonary clinical specialist (CCS) in the PT department at the National Institutes of Health, which exposed me to several less common causes of cardiovascular and pulmonary dysfunction. After moving to the Los Angeles area in 1992, I worked as a CCS at the USC University Hospital and taught courses in exercise physiology and cardiopulmonary pathology and assessment in the PT program at Mount St. Mary's Comy my 14 years there.

I was certified as a CCS by the American Board of Physical Therapy Specialties in 1988. I have authored chapters in Hillegass and Sadowsky's *Essentials of Cardiopulmonary Physical Therapy Textbook*, as well as two volumes of my own book, *Cardiovascular and Pulmonary Physical Therapy - A Clinical Manual*. I also created the CVP Section's *Monitoring Clinical Responses to Exercise* booklet in 2003.

Over the years I have offered numerous continuing education courses on the management of patients with cardiopulmonary dysfunction and presentations at several APTA Combined Sections Meetings. My most fun presentations were those on the health benefits of laughter, including *Laugh and Live Longer*, which were offered at several CSMs from 1994–2008. In addition, my alter ego, CRAYOLA the Clown, has appeared at the Opening Receptions at two Combined Sections Meetings and at the White House on a few occasions.

When did you first get involved in the Cardiopulmonary Section/Academy of CV&P?

I joined the CVP Section at its first meeting at CSM in 1975 as a student and became active in the Section in 1979, serving on the Membership and Program committees and the Task Force on Specialization. Subsequently, I served as the Co-Editor-in-Chief of the *Cardiopulmonary*

Quarterly, an item writer for the CVP Specialists examination, Co-Chairperson of the Legislative Committee, and a manuscript reviewer for the *Physical Therapy Journal*.

In 1991, I was awarded the Cardiopulmonary Section's Merit Award and won 1st place in the APTA's 1991 Public Relations Awards contest for my ECG Valentine's Day cards promotion, which were available at the annual Combined Sections Meetings for several years.

My biggest role was serving as the Chairperson/Co-Chairperson of the Public Relations committee from 1987-1999 and continuing as a member of the committee until 2009, during which time I created a new logo for the Section and designed Valentine's cards that were personalized with each individual's ECG strip, which were sold at CSMs for several years. I also served as Chairperson of the Section's Dance/Fundraising Committee from 2000 to 2006 and on the Nominating Committee from 2010 -2013.

Who were some of your mentors?

In the early years of my CP practice, my most important mentors were Joe Asturias, a local cardiopulmonary PT in San Francisco; Scott Irwin who was in southern CA, and Dr Ronald Freeman, a cardiologist at Santa Clara Valley Medical Center.

Then throughout my career, I benefited from the expertise of so many of my colleagues in the CP Section, but especially Ellen Hillegas, Larry Cahalin, Donna Frownfelter, Nancy Ciesla, Anne Mejia-Downs, Cindy Zada, and Steve Sadowsky.

How have you practiced cardiopulmonary PT and what are your proudest achievements?

I was first introduced to cardiopulmonary PT as a student through my internships at Oakland Children's Hospital, where I treated a number of children with cystic fibrosis, and at UCSF Medical Center.

The majority of my practice has been in acute care hospital settings, where I performed chest PT on postop surgical patients and started a stage 1 cardiac rehab program and a preoperative vascular amputee program at UCSF, was in the Chest PT service at George Washington University Hospital, and saw a variety of cardiopulmonary patients at the National Institutes of Health Clinical Center, Stanford University Hospital and USC University Hospital. At Santa Clara Valley Medical Center, I worked both inpatient and outpatient cardiac rehab and performed exercise tests on these patients. I became involved in education students in the PT program at Mount St. Mary's College in Los Angeles, where I taught exercise physiology and cardiopulmonary assessment and treatment courses. My late career was focused on health and wellness through my involvement at a local YMCA in southern California, including the creation of a Funny Bone Fitness class, where participants gained the health benefits of laughter as they laughed while exercising on large exercise balls – talk about a great core muscle and stress relief workout!

My proudest professional achievements are my certification as a Cardiopulmonary Clinical Specialist in 1988 and recertification in 1998, the completion of two editions of my book, *Cardiovascular and Pulmonary Physical Therapy - A Clinical Manual* (2010, 1999) and chapters on the Cardiopulmonary implications of specific diseases in three editions of Hillegass E (Ed): *Essentials of Cardiopulmonary Physical Therapy* (2011, 2001, 1994).

My biggest accomplishments for the CVP Section that I am proud of are being awarded the Cardiopulmonary Section's Merit Award in 1991, winning 1st place in the APTA's 1991 Public Relations Awards contest for her ECG Valentine's Day cards promotion and creating the Section's *Monitoring Clinical Responses to Exercise* booklet (2003).

What is your advice to give someone to keep updated in our field, and what worked for you?

My biggest recommendations are becoming actively involved in the Academy of CV&P PT, where you can get to know and benefit from the expertise of the leaders in our field, and attending national APTA conferences, particularly the Combined Sections Meetings. It is also important to read pertinent research studies and articles that are published in our field and to discuss them with our Academy members if you have questions. Finally, develop a presentation on an important topic for a local or national conference, so you are stimulated to do more in-depth study of the topic.

What is the most important issue for the CVP Academy to address in the future?

I think it is critical that we expand the knowledge of PTs in all areas of practice on the importance of the cardiovascular and pulmonary systems to their goals of promoting optimal function and wellness for clients with any and all diagnoses. This is important in academic settings, clinical settings and through continuing education.

Sue Butler McNamara



Susan Butler McNamara received a BS and Certificate in Physical Therapy from Simmons College in 1972 and a Masters in Medical Science from Emory University in 1984. She was employed at Clinton Hospital in Massachusetts and Beth Israel Hospital in Boston in the 1970s. She worked at Clayton General Hospital in Riverdale, Georgia while attending graduate school. She was employed at the Maine Medical Center in Portland, Maine from 1984 until her retirement in 2016.

When did you first get involved in the Cardiopulmonary Section/Academy of CV&P?

- My first involvement was in 1980 when I was at Graduate School at Emory University.
- My first CSM was in 1980 in New Orleans.
- I have served multiple roles in the Section: member of Nominating Committee twice; Vice President and delegate to Annual House of Delegates at least twice.
- I served as a member of 2nd Cardiovascular/Pulmonary Specialty Council with Pam Catlin, Linda Crane, and later Betty Protas and Larry Cahalin.
- I also served on the ABPTS Specialty Board, including a term as Chairperson.

Who were some of your mentors?

- Cyndi Zadai who encouraged me to go to graduate school and supported my move to Atlanta.
- Scot Irwin ... pushed me to become a more all-round therapist by adding to my cardiac education.
- Marcia Pearl: could not have had a better and more supportive advisor in graduate school. And we had fun.
- Sharon Coffman Ellis: Another person who helped me learn how to teach. Her example of bringing therapists to Cardiopulmonary aspect of care with her Home Health work.
- Pam Catlin: teaching-learning process and support when I was a Teaching Assistant. And how to do research...
- Linda Crane: she mentored me on how to be a leader and educator.
- Ellen Hillegass: who always includes me ... Her teaching skills are outstanding.
- Mark Felberg, MD and Paul Cox, MD: who allowed PT to be in the critical care settings and supported PT.

How have you practiced cardiopulmonary (what types of settings) and what are your proudest achievements?

- Primary area of practice was Acute Care, the last 35 years at Maine Medical Center.
 - Loved intensive care and being in the forefront of early mobilization of critically ill patients

- Cystic Fibrosis: Loved not only treating these patients at clinic but also seeing the changes in CF care which allowed these patients to age.
 - One of my proudest moments was the parents and patient who came and spoke at my Retirement celebration.
- Proudest Achievements:
 - Presentation of thesis at 1984 CSM
 - Becoming the 4th cardiovascular and pulmonary clinical specialist.
 - Being a member of the Cystic Fibrosis Foundation Education Committee as the PT representative
 - Presenting at the annual CF conference on several occasions.
 - Being a member of the ABPTS
 - Being a supervisor and mentor to members of the staff who rotated on my Team during my years at MMC, including the OTs who worked with me.

What is your advice to give someone to keep updated in our field, and what worked for you?

- Keep advocating for the cardiovascular/pulmonary aspect to any patient's treatment plan, including always taking vital signs. Be a role model and incorporate looking at the cardiovascular/pulmonary component.
- Keep doing clinical research....

What is the most important issue for CVP Academy to address in the future?

- Stay relevant within the PT profession
- Make sure that the PT Academic programs keep cardiopulmonary as an essential part of the curricula.
- Ensure that clinical instructors serve as role models with their inclusion of a cardiovascular and pulmonary assessment whether inpatient or outpatient.

Jane Wetzel



When did you first get involved in the Cardiopulmonary Section/Academy of CV&P?

In the 1980s I developed an interest in pulmonary function in people with Spinal Injuries. I did team presentations during inservices on ventilators which supervisors at Rancho Los Amigos spearheaded. From 1980 - 1990 I worked at Rancho Los Amigos Medical Center and wrote several book chapters as a follow up to an article written by Susan Alvarez, Brenda Lunsford and Margery Peterson published in Physical Therapy in 1981.

Who were some of your mentors?

Many therapists at Rancho were my mentors. I transferred to the Cardiopulmonary service in the mid-1980s while pursuing a master's degree. Chuck Toman trained me to perform Exercise stress testing and Bill and Marion Schoenberger Provide training in metabolic cart analytics and cardiac rehab. Dr. Jacqueline Perry was a huge influence to my interest in research and analysis of movement. I followed her and saw many ventilatory issues in the post-polio and muscular dystrophy survivors. Helen Hislop was my advisor at USC where I completed a master's Thesis on Body Composition In Persons with Spinal Cord Injury.

How have you practiced cardiopulmonary (what types of settings) and what are your proudest achievements?

In 1990 I accepted a teaching position in Western Pennsylvania and taught at Slippery Rock University. Jan Richardson encouraged me to pursue the PhD and found financial assistance. I worked on ventilatory support for exercise on children with cystic fibrosis with Bob Robertson, Pat Nixon and David Orenstein for my Dissertation at University of Pittsburgh. I am most proud of the article "Six Minute Walk in Persons with Mild to Moderate Disability from Multiple Sclerosis." Lucinda Pfalzer and Donna Fry were important co-authors and mentors for this paper published in Physiotherapy Canada. We were honored with the Silver Quill award for scientific writing.

What is your advice to give someone to keep updated in our field, and what worked for you?

My advice for physical therapists is to continue advocacy for each individual case. Many of the principles that were effective in the past (prone positioning for ventilatory function in acute brain injury) may be useful to other populations with similar impairments (covid survivors). We must learn the process of disseminating knowledge. I found the process difficult to complete on many levels. So many papers did not find their way to publication. If you know the process, then help others build these skills. Publish what you do. Finding ways to collaborate, demonstrate and translate knowledge is what matters.

What is the most important issue for CVP Academy to address in the future?

The CVP Academy will need clear priorities and support what matters most. What is the impact we want to have and how much does it matter?

Tammy Burlis



Credentials: Doctor of Physical Therapy, APTA Board Certified Clinical Specialist in Cardiovascular and Pulmonary Physical Therapy-Emeritus, Credentialed Clinical Trainer-APTA CCIP Level 1 and 2,

Dr. Tamara L. Burlis, PT, DPT, CCS-Emeritus, is a professor in the Program in Physical Therapy at Washington University School of Medicine in St. Louis, MO. She has extensive experience in clinical practice and administrative roles in the acute care, cardiopulmonary, and vascular divisions of Barnes-Jewish Hospital and Washington University in St. Louis.

Dr. Burlis currently serves as the Director of Clinical Education and Associate Director of the Professional Curriculum at Washington University. Her teaching emphasizes clinical education and the management of patients with systemic illness across physical therapy settings. Dr. Burlis has held numerous leadership positions at both the state and national levels. She was appointed to Missouri's Professional Physical Therapist Advisory Commission by the governor in 2011. Nationally, she has been actively involved with the Academies of Cardiovascular and Pulmonary Physical Therapy, Education and Acute Care, the Task Force for Governance Review, the APTA Choosing Wisely initiative, and has served on the American Board of Physical Therapy Specialties' Cardiovascular and Pulmonary Specialty Council. Additionally, she has contributed to the American Board of Physical Therapist Residency and Fellowship Education for the accreditation of residency and fellowship programs. Her current research focuses on interprofessional education and the integration of assessment of entrustable professional activities within clinical education.

When did you first get involved in the Cardiopulmonary Section/Academy of CV&P?

I first got involved with the Cardiovascular and Pulmonary Section of the American Physical Therapy Association (APTA) back in 1989. Initially, I joined as a member, eager to learn and contribute to the specialty and section. Section meetings were fun, engaging and filled with members who wanted to advance our small portion of practice. I learned about the role of PT in this area and the regional differences of our country. In 1992, Dr. Ellen Hillegass and Joanne Watchie recruited me to serve as the Program Chair for the section. This led to new experiences serving the board and a fantastic opportunity to shape the direction of our

initiatives. After serving as the Program Chair, I spent many years on the Programming Committee, served as the Section Secretary from 2005 to 2011 and continue to review manuscripts for the Cardiopulmonary Physical Therapy Journal. Each role has helped me grow professionally and stay engaged with the community.

Who were some of your mentors?

Surrounding oneself with informal and formal mentors is invaluable in any professional journey. I have been fortunate to have exceptional mentors like Dr. Ethel Frese, Dr. Ellen Hillegass, and Dr. Cynthia Zadi. Their expertise, encouragement, and commitment to the field of cardiovascular and pulmonary physical therapy have been instrumental in my development. They have challenged me to push the boundaries of my knowledge and skills, always inspiring me to strive for excellence. The insights and perspectives they have shared have helped me navigate complex professional landscapes and achieve a deeper understanding of my work in education, clinical practice and leadership within APTA.

How have you practiced cardiopulmonary (what types of settings) and what are your proudest achievements?

My practice in cardiopulmonary and vascular physical therapy has been in inpatient and outpatient settings. Beginning in 1988 at the Irene Walter Johnson Institute of Rehabilitation which provided therapists for Barnes Jewish Hospital, I provided direct care to patients with cardiovascular and pulmonary conditions in the intensive care unit and acute care floors. I served as a Senior Physical Therapist and Supervisor of Cardiopulmonary PT, overseeing the cardiovascular and pulmonary physical therapy division. Upon transfer to a faculty member at Washington University Physical Therapy Program, I began seeing patients in the outpatient faculty practice and home health settings.

Throughout my career, I have remained dedicated to improving patient outcomes through innovative treatments, evidence-based practices and education of future generations of physical therapists. My board certification as a Cardiovascular and Pulmonary Specialist since 1994, with recertifications in 2004 and 2014, underscores my commitment to this specialty. Presently, I hold emeritus certification in cardiovascular and pulmonary specialization, reflecting my enduring dedication to the field. My proudest moments were upon achieving board certification and working with Dr. Joel Cooper and physicians at Barnes Jewish Hospital developed a center for cardiac and pulmonary transplantations.

What is your advice to give someone to keep updated in our field, and what worked for you?

Staying updated in the cardiopulmonary field is crucial for providing the best patient care and advancing professional growth. Here is some advice for keeping abreast of developments in this specialty and activities that helped me during my career:

1. Continuing Education: Regularly attend workshops, seminars, and continuing education courses to stay informed about the latest research, techniques, and best

practices. Focus on topics such as mechanical ventilation, oxygen therapy, and EKG interpretation, among others.

2. Professional Organizations: Engage actively with professional organizations like the American Physical Therapy Association (APTA) and the Academy of Cardiovascular and Pulmonary. Membership provides access to journals, conferences, and networking opportunities that are invaluable for staying current.

3. Certifications: Pursue and maintain relevant certifications. Board certifications, such as the Cardiovascular and Pulmonary Specialist certification, reinforce your expertise and signal commitment to ongoing education in the field.

4. Literature and Research: Regularly read scientific journals, clinical studies, and reviews to keep up with emerging evidence and advancements. Being a manuscript reviewer can also offer insights into cutting-edge research.

5. Networking: Build and maintain a network of colleagues and mentors within the field. Engage in discussions, share experiences, and collaborate on projects.

6. Teaching and Lecturing: Get involved in teaching or lecturing to stay on top of your knowledge and share it with others. Preparing for teaching keeps you sharp and exposes you to new thinking and questions from students.

7. Clinical Practice: Continue to work with patients in cardiopulmonary settings. Direct patient care ensures you apply the latest techniques and understand real-world challenges and solutions.

8. Professional Conferences: Attend and participate in conferences such as the APTA Combined Sections Meeting and the Educational Leadership Conference. These events are excellent for learning about the latest advancements and networking with fellow professionals.

By following these steps, you can ensure that you remain knowledgeable, skilled, and innovative in the cardiopulmonary field.

What is the most important issue for CVP Academy to address in the future?

One of the most important issues for the Cardiovascular and Pulmonary Academy to address in the future is the integration of innovative technologies and evidence-based practices to enhance patient outcomes and streamline care. Rapid advancements in medical technology, including telemedicine, wearable devices, and personalized medicine, are reshaping how cardiovascular and pulmonary care is delivered. Addressing this issue involves several key components:

1. Technological Integration: The Academy should focus on the adoption and effective utilization of new technologies that can improve diagnosis, monitoring, and treatment of cardiopulmonary conditions. This includes promoting the use of telehealth for

remote patient monitoring, which can increase access to specialized care and may reduce hospital readmissions.

2. Evidence-Based Practices: Staying at the forefront of research and ensuring that clinical practices are grounded in the latest evidence is crucial. The Academy should support ongoing research and the dissemination of findings to clinicians to foster the best practices in patient care.

3. Education and Training: As technologies evolve, continuous education and training for healthcare professionals become essential. The Academy should develop and offer educational programs that equip practitioners with the skills to implement new technologies and treatments effectively.

4. Interprofessional Collaboration: Enhancing collaboration between different healthcare professionals can improve patient outcomes. The Academy should continue to encourage interprofessional education and practice, fostering teamwork among physical therapists, physicians, nurses, and other healthcare providers.

5. Regulatory and Policy Advocacy: Engaging in policy advocacy to influence healthcare regulations that support innovative practices and technologies is critical. The Academy should work to shape policies that facilitate the incorporation of advancements in cardiopulmonary care.

By focusing on these areas, the Academy of Cardiovascular and Pulmonary can lead the way in transforming care delivery, improving patient outcomes, and ensuring that students and practitioners are well-equipped to meet future challenges in the field.

Christiane Perme



Christiane Perme, PT, CCS, FCCM, is the founder of Perme ICU Rehab Seminars, INC and serves as a Rehab Education Specialist at Houston Methodist Hospital, where she has dedicated more than 30 years of her career as a physical therapist exclusively in the ICU.

She is a Board Certified Cardiovascular and Pulmonary Clinical Specialist and holds the prestigious title of Fellow of the American College of Critical Care Medicine, the first physical therapist in the world to receive such recognition. In 2025, Mrs. Perme received the Safar Global Partner Award, awarded to an individual, hospital, or organization that expands the global reach of the Society of Critical Care Medicine.

Mrs. Perme specializes in early mobility in the ICU, focusing particularly on patients requiring mechanical ventilation. With 25 published articles and contributions to 10 book chapters, she is recognized as a leading authority in her field. Her expertise is emphasized by her authorship of the "Perme ICU Mobility Score" and the "Perme ICU Physical Therapy Competency".

As a world-renowned speaker, Mrs. Perme has presented hundreds of courses and lectures in different countries, including the United States, Peru, Ukraine, Brazil, United Arab Emirates, Chile, Colombia, Puerto Rico, Germany, Denmark, Russia, Nigeria, Netherlands, Canada, and Spain.

When did you first get involved in the Cardiopulmonary Section/Academy of CV&P?

I got involved with the CV&P Section when I became a member of the APTA in 1999, but I really wish I could have joined earlier. During the CV&P Section meetings at the APTA Combined Sections Meeting, I vividly remember the amazing feeling of being in a room with all leaders in the CV&P physical therapy field, and my dream was to be like them...

Who were some of your mentors?

When I began working in the U.S. in 1986, my ability to communicate in the English language was very limited. My initial mentors were three books, which I completely memorized: "Chest PT and Pulmonary Rehab" by Donna Frownfelter, "Chest PT in ICU" by Nancy Ciesla, and "Cardiopulmonary PT" by Scott Irwin. Around 1990-1991, I worked with two pulmonologists who had a vision about early mobility in ICU and how it would positively impact patient outcomes. Since I did not have any training or clinical experience in ICU, they helped me to start mobilizing intubated patients on mechanical ventilation and helped me understand how critical my work as a physical therapist in the ICU was. Ultimately, I am extremely grateful to Donna Frownfelter, Elizabeth Dean, and Ellen Hillegass for inspiring me throughout my career with their CV&P knowledge and professional journey ...

How have you practiced cardiopulmonary (what types of settings) and what are your proudest achievements?

I have worked in acute care for my entire career as a physical therapist, and exclusively in the ICU for more than 30 years.

I am extremely grateful to have had so many achievements in my career as a physical therapist, and it is impossible to name just one. Here are some achievements that I am extremely proud of:

- 2005- Became the fourth physical therapist in the state of Texas with a CV&P Clinical Specialist certification.
- 2013- Started my own business, Perme ICU Rehab Seminars, INC, a very scary decision since I had no idea about running a business.
- 2014- Perme ICU Mobility Score publication, now translated into 9 languages and used by colleagues all over the world.
- 2018- First physical therapist in the world to be inducted as a Fellow of the American College of Critical Care Medicine.
- 2021- Linda Crane Memorial Lectureship Award, presented virtually due to the covid-19 pandemic.
- 2023- Selected by Society of Critical Care Medicine (SCCM) to go to Ukraine and participate in the ICU Liberation training of 400 Ukrainian physicians.
- 2024-Perme ICU Physical Therapy Competency publication, which I sincerely hope can help establish the foundational knowledge and skills for Physical Therapy in the ICU setting.
- 2025 - Received the SCCM Safar Global Partner Award, awarded to an individual, hospital, or organization that expands the global reach of the SCCM.

What is your advice to give someone to keep updated in our field, and what worked for you?

Staying updated in the cardiopulmonary physical therapy field is the key to deliver best practice, evidence-based care, adapt to evolving clinical guidelines, and achieve best patient outcomes. My advice to colleagues is:

- Seek mentorship by identifying a professional you admire and learn from their clinical approach and career path.
- Make sure to join professional associations (e.g., APTA Academy of CV&P, AACVPR) and take full advantage of their resources.
- Read articles from peer-reviewed journals on a regular basis to improve your clinical practice.
- Attend continuing education courses and learn from expert CV&P colleagues.
- Teaching encourages ongoing learning... Start by offering in-service training or presenting posters/platforms, and work toward presenting lectures at conferences.
- Collaborate with interdisciplinary teams and look for opportunities to learn from colleagues in other disciplines such as medicine, respiratory therapy, and nursing.

What is the most important issue for CVP Academy to address in the future?

There are several pressing issues for the CVP Academy to address in the future, including the rising burden of cardiovascular disease, limited access to cardiac and pulmonary rehabilitation, the development of best practices, and others. While each of these is important, I am particularly passionate about advancing the practice of physical therapy in the ICU. It is imperative that the CVP Academy prioritizes education and staff development

specific to the ICU setting since the complexity of critical illness continues to evolve and physical therapists are expected to be part of the multidisciplinary ICU team. By doing so, we can ensure that physical therapists are adequately prepared to manage complex cardiopulmonary cases across diverse ICU settings. From my perspective, this is the most critical issue the CVP Academy should focus on moving forward, without a doubt.