PERSONAL PROFILE

Name: Ayman Ashry Age: 28

Mobile Number:: +601128978627

E-mail Address: ayman.a.ashry@gmail.com &&& dr.ayman.cpt@gmail.com &&&&

Address: HL Alexsakn 12, Amor bin Khatab street, Buridah, 3453 Qassim, Saudi Arabia.

Marital Status: Single

Note: Work permit is entitled up on request.

EDUCATION/QUALIFICATIONS

Qualification Obtained	Name of University/College & Location
BSc (HONS) Physiotherapy	Northembria University (United Kingdom)
Certified fitness instructor	American Council on the exercise (USA)
Certified Sports Conditioning Specialist	American Council on the exercise (USA)
Certified -ABC (AGILITY, BALANCE, COORDINATION) FITNESS TRAINING SPECIALIST	American Council on the exercise (USA)
Certified weight loss specialist	National Academy of sport Medicine (USA)
Certified Orthopedic exercise Specialist	American Council on the exercise (USA)
Certified CPR practitioner	S audi Commission of Health S pecialists

REGISTRATION WITH PROFESSIONAL BODIES

Registration Body	Registration Obtained	Registration No.
Malaysian Physiotherapy Association	Physiotherapy specialist	OM(I) 1031
S audi Commission of Health S pecialists	Physiotherapy specialist	13-R-A-0048513
Australian Physiotherapy Association	Physiotherapy specialist	13/00300
American Council on exercise	Certified fitness Instructor	T165408
American Council on exercise	Certified Sports Conditioning Specialist	CEP58251
National Academy of sport Medicine (USA)	Certified weight loss specialist	1449780
American Council on exercise	Certified -ABC (AGILITY, BALANCE, COORDINATION) SPECIALIST form the American Council on the exercise (USA).	CEP58251
American Council on exercise	Certified Orthopedic exercise Specialist	At the final stages of obtaining the registration number

EMPLOYMENT HISTORY LAST 4 YEARS

Current Employment

Date Employed	:	current
Position	:	CPT of physiotherapy and sports Rehab department
Unit	:	Multidiscipline Unit & sport conditioning center
Hospital	:	Qassem National Hospital
No. of beds in Hospital	:	100

Description of Unit: The Pt Department is a mixed providing care for patients including: trauma Gastrointestinal, Orthopedic, Gynecology/Cardiorespiratory and Neurology in addition to a state of the art sport conditioning center

Duties & Responsibilities:

Ensures the higher standard of patient care is maintained by utilizing a systematic approach to staff.

- > Provides clinical guidance, direction and coordination of activities for staff personnel allocated to the area.
- Provides direct patients care and on-going supervision of care, ensuring consistent, accurate, legible, signed documentation of records.
- Monitors and evaluates the Physiotherapy rehabilitation process and ensures the physiotherapy plan of care is carri ed out
 - Strategies for designing and types of sports conditioning drills (Hypertrophy Training, Weight Loss. Weight Gain, endurance training, cardiovascular training for tournaments and marathon, rip 60, metabolic resistance training, power training aerobics and anaerobic exercise programs) that will challenge all levels and incorporate them into workouts based on client's level of ability.
- > Design exercise programs and general dietary information (based on United States Department of Agriculture (USDA) and the Department of Health and Human services) specifically for clients trying to lose w eight.
- > Administer an individualized, safe, effective and appropriate program of basic exercise by applying current recommended
- guidelines (F.I.T.T. Formula, CSEP, and NFLA. Ensures that infection control practices are being adhered to as per hospital infection control PPG's
- Ensure all agreed policies and procedures are correctly implemented and maintained.

Achievements:

Achievements: I have invented new treatment techniques using one of a kind new design of 80-100% painless needles that Treat all the Musculoskeletal Conditions even the most complicated conditions that the only hope was surgery (sciatica, LMN foot drop, Wrist drop, first and second stage of Hip and Knee osteoarthritis) as it results in 70-100% pain relief and improvement of the joint function and mobility level from the first within 5 minutes after insertion, without the NEED FOR ANY PHARMACEUTICAL TREATMENT OR SURGERY.

Mechanism of Work

I have identified certain points in every single joint for every Musculoskeletal Condition which are considered to be the source of pain where the needles will be inserted and as a result of the needles insertion, pain will reduce by 80-100 % and improvement in the physical function will be noted on the spot without the NEED FOR ANY PHARMACEUTICAL TREATMENT OR SURGERY

.(The patients wont have to go through X- ray or MRI) as the points have been proven to be accurate to allocate the source of the pain and the physical disability. Therefore, the first advantage will be saving the government a and the patient a fortune and without the need to expose the patient to risks of rays and radiation.

This technique is tailored to every patient based on the condition and the symptoms exhibited by the patient. Therefore, providing the patients with an individualized treatment ensuring faster recovery without the risk of going into chronic stage .

So for example I had a competitive body builder who sustained a supraspinatus strain (Limited ROM), and his competition was due in 3 days. The patient can't afford to go through the RICE protocol and 3 weeks of intensive rehab and this delay will cost his reaming muscles (lats, pects, biceps, triceps) to atrophy as he wont be able to perform any of the heavy weight RT exercises during the rehab until his shoulder recovers.

. The patient came for consultation (without the need for X- ray or MRI) the source of pain (points were marked) and the needles were inserted and within five minutes after insertion we were able to gain full ROM and Resisted EET) and then on the same day the patient was instructed to perform his shoulder resistance training exercise in my rehab center Gym using 80 % percent of the pre injury weight (shoulder press 110 kg, Shrug :205 kg and rear , front and middle deltoid exercise in the same pattern with 80 percent of pre injury weight) . Patient was able to perform all the exercises pain free with no complications at all. On the next day he came and the rest of the points were targeted and was able to preform his pre – injury weight and was able to perform all the exercises pain free And he was able to go to the competition on the third day as scheduled.

As second example, patients with meniscus tear usually exhibits symptoms of pain, limited ROM and locked knee. Most of the patient complain form sever pain during squatting and full kneeling on the knees and they will undergo an intensive rehab programme that ranges in the period from 2 weeks to 4 weeks based on the severity of the condition

When I implement my technique on patients even the ones with bucket handle meniscus tear the range of improvement is as follows

A:During first session, full pain free weight bearing with terminal knee extension as well as 70-90 % of flexion ROM and squatting ability up to 90- degree (pain free) based on the severity of condition and the location of tear.

B: Full squatting as well as full kneeling on the knee will be achieved in the period of 2-7 days based on the severity and the location of tear.

In addition, recent studies have shown high recurrent rate of ACL tear after undergoing **ACL reconstruction**, and thus has prevented a lots of athlete form returning to their beloved sports. I have designed a new protocol that has been successful with chondral defects. ACL, meniscus tear patients in QNH. All the components (endurance power, balance, coordination perturbation, eccentric control, SSC cycle and how the exercises are been progressed based on the based on the stage of healing and with least amount a compression on the joint with highest amount of muscles co-contraction and MI as well as neuromuscular control being addressed This protocol focuses on muscle Power , strength, endurance, balance as well as the 4 phases of cardiovascular training in a synchronized manner is a ways that has not been addressed before. This protocol cuts the rehabilitation duration and produces an athletic ready clients. Additionally, it has been tested on the 50 patients with partial ACL tear of (5-7.5 mm), they did not undergo surgery and it has resulted in an outstanding results and full ability to return to the preinjury condition and they were able to get back to their high performance sports. . This protocol has been tested over 200 athletes and so for no recurrent ACL tear has been recorded. Recurrent rate of ACL rupture rate is zero %

As can be seen from examples above , my intervention has the following advantages :

My treatment advantages over any PHARMACEUTICAL TREATMENT OR SURGERY or traditional Physiotherapy treatment (I,e TENS MS STR)	Benefits
It does not require any pharmaceutical treatments or surgical intervention.	Eliminating the risk of exposing the patients to the risks of medications side effects or post-operative complications in case of surgery
.(The patients wont have to go through X- ray or MRI) as the points have been proven to be accurate to allocate the source of the pain and the physical disability	 Eliminating the need to expose the patient to risks of rays and radiation. Saving the patients , governments , and insurance companies billions of dollars
The technique itself does not require any equipment's only the needles and the skill of the therapist to identify points	 Saving the patients ,governments , and insurance companies billions of dollars Saving Therapist a fortune
It results in 70-100% pain relief and improvement of the joint function and mobility level from the first within 5 minutes after inserting the needles at the designated points	 Reducing the rehabilitation time by 70% This technique is tailored to every patient based on the condition and the symptoms exhibited by the patient. Therefore, providing the patients with an individualized treatment ensuring faster recovery without the risk of going into chronic stage.
	Reducing the rate of disabled people in the community.
	Saving the patients , governments , and insurance companies billions of dollars

Courses attended:

Year attended	Course
2011	Dry Needling, Anterior Knee Pain, Headache or Facial Pain by
2011	Back to Life& UKM Medical Center
2012	(Malaysia)
2012	Corrective Exercise Specialist Workshop conducted by the
2012	National Academy of Sport Medicine (USA) Youth Exercise specialist Workshop conducted by the National
2012	Academy of Sport Medicine (USA).
2012	Basic Life Support conducted by Fitness Innovation Malaysia
2013	Weight Loss techniques from theory to practice workshop
2013	conducted by National Academy of Sport
	Medicine (USA).
2014	Designing Sports Conditioning Workouts for Personal
	Training Clients and Group Fitness Classes
	conducted by American Council on Exercise (USA)
2014	Fitness Professionals' Guide to Sports Nutrition and
	Weight Management conducted by American
2014	Council on Exercise (USA)
2014	Sport Strength-Legs and Shoulders conducted by
2014	American Council on Exercise (USA)
2014	Sport Strength-Back and Chest conducted by American
	Council on Exercise. (USA)
2014	Thermoregulation and Hydration in the Body - Keys to
2011	Performance Success conducted by American
	Council on Exercise (USA)
2014	SPORT CORE conducted by American Council on Exercise.
2014	Fitness Professionals' Guide to Sports Nutrition and Weight
	Management conducted by American
2015	Council on Exercise
2015	Your Clients FrameWork - 7 Steps to Healthy Muscles, Bones and Joints
2015	Practical Pointers for Group Fitness
2015	Framework for the Knee: A 6-Step Plan for Preventing Injury and Ending
2015	Post-Orthopedic Rehabilitation for Personal Trainers
2015	Framework for the Lower Back: A 6-Step Plan for a Healthy
2015	Frame Work for the Shoulder: A 6-Step Plan for
	Preventing Injury and Ending Pain
2015	Framework for the Knee: A 6-Step Plan for Preventing Injury and Ending
2015	Post-Orthopedic Rehabilitation for Personal Trainers
2015	Framework for the Lower Back: A 6-Step Plan for a Healthy
2015	Frame Work for the Shoulder: A 6-Step Plan for
	Preventing Injury and Ending Pain
	r revending injury and Enaming rain

REFERENCES

Date Attended	Name of Course/Seminar/W orkshop
2011	Dry Needling, Anterior Knee Pain, Headache or Facial Pain by Back to Life& UKM Medical Center (Malaysia)

2012	Corrective Exercise Specialist Workshop conducted by the National Academy of Sport Medicine (USA).
2012	Youth Exercise specialist Workshop conducted by the National Academy of Sport Medicine (USA).
Basic Life Support conducted by Fitness Innovation Malaysia	Basic Life Support conducted by Fitness Innovation Malaysia

2013	Weight Loss techniques from theory to practice workshop conducted by National Academy of Sport Medicine (USA).
2014	Designing Sports Conditioning Workouts for Personal Training Clients and Group Fitness Classes conducted by American Council on Exercise
2014	Fitness Professionals' Guide to Sports Nutrition and Weight Management conducted by American Council on Exercise
2014	Sport Strength-Legs and Shoulders conducted by American Council on Exercise
2014	Sport Strength-Back and Chest conducted by American Council on Exercise.
2014	Thermoregulation and Hydration in the Body - Keys to Performance Success conducted by American Council on Exercise
2014	SPORT CORE conducted by American Council on Exercise.
2014	Fitness Professionals' Guide to Sports Nutrition and Weight Management conducted by American
	Council on Exercise
2015	Your Clients FrameWork - 7 Steps to Healthy Muscles, Bones and Joints
	Practical Pointers for Group Fitness
2015	
2015	Framework for the Knee: A 6-Step Plan for Preventin g Injury and Ending Pain
	Post-Orthopedic Rehabilitation for Personal Trainers
2015	
2015	Framework for the Lower Back: A 6-Step Plan for a Healthy Lower Back 2nd Edition
2015	Frame Work for the Shoulder: A 6-Step Plan for Preventing Injury and Ending Pain

REFERENCES

Provided up on request (please contact me through email only)