Abbatiello, Marina Applicant ID 9999437317

**Application Status Verified** 

University of St. Augustine - Residential Program

### **BIOGRAPHIC INFORMATION**

# **PROFILE**

Title:

First Name: Marina Middle Name: Lynn Last Name: Abbatiello

Suffix:

Gender or Sex: **FEMALE**  Materials Under Another Name:

Nickname:

No

Alternate First Name: Alternate Middle Name:

Alternate Last Name:

#### **BIRTH INFORMATION**

Date of Birth: 06-23-1996 City: Westbury County: Nassau County State: **New York United States** Country:

#### **CONTACT INFORMATION**

Address Type: Current

Address: 1916 Plymouth Drive

Westbury, New York 11590

County: Nassau County Country: **United States** 

Valid Until Date:

Phone: Mobile +15166600670 Type:

+15169971956 Type: Home Type: Work

abbaml@udel.edu Email:

Address Type: Permanent

Address: 1916 Plymouth Drive

Westbury, New York 11590

Nassau County County: Country: **United States** 

# CITIZENSHIP STATUS AND RESIDENCY INFORMATION

# **CITIZENSHIP STATUS**

Citizenship Status: U.S. Citizen **United States** Country of Citizenship:

Other Citizenship: Length of stay in US: State of Residence: New York County of Residence: Nassau County Length of Residence: More than 10 years

### RACE/ETHNICITY

Do you consider yourself to be of Hispanic/Latino Origin? American Indian or Alaska Native

Asian Answer: No

Black or African American Native Hawaiian or other Pacific Islander —

White Yes

# OTHER INFORMATION

**English** Native Language:

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No

locality?

Answer:

BIOGRAPHIC INFORMAT	TON CONTINUED
SIOGRAPHIC INFORMAT	ION CONTINUED
OTHER INFORMATION	
Does your academic recor	d accurately reflect your capabilities? Yes
Your parent's family incom Answer:	ne falls within the table's guidelines and you are considered to have met the criteria for economically disadvantaged: No
What is your geographic a	rea?
Answer:	Large Town(population 10,000 to 49,999 population)
Have you ever been discipling school?	ned for student conduct violations (e.g. academic probation, dismissal, suspension, disqualification, etc.) by any college or
Answer:	No
Have you ever been discipling school?	ned for academic performance (e.g. academic probation, dismissal, suspension, disqualification, etc.) by any college or
Answer:	No
Have you ever been convict	ed of a Felony?
Answer:	No

Have you ever had any certification, registration, license or clinical privileges revoked, suspended or in any way restricted by an institution, state or

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### **ACADEMIC HISTORY**

# **STANDARDIZED TESTS**

#### **UNOFFICIAL GRE**

Date ETS Registration Code Verbal Quantitative Analytical Writing

07-12-2018 147 152

#### **COLLEGES ATTENDED**

#### 002823 SAINT JOHN'S UNIVERSITY (NY)

Start Date:09-2013Still Current:NoEnd Date:06-2014Primary:NoState:New YorkRegionally Accredited:Yes

Accredited By: Middle States Commission on Higher

Education

Major 2nd Major/Minor Status Degree Verified Degree Name Degree Date

No Degree Defined

#### 002847 SUNY-ONEONTA

Start Date:08-2014Still Current:NoEnd Date:05-2015Primary:NoState:New YorkRegionally Accredited:Yes

Accredited By: Middle States Commission on Higher

Education

Major 2nd Major/Minor Status Degree Verified Degree Name Degree Date

No Degree Defined

#### 002732 HOFSTRA UNIVERSITY

Start Date:09-2015Still Current:NoEnd Date:05-2016Primary:NoState:New YorkRegionally Accredited:Yes

Accredited By: Middle States Commission on Higher

Education

Major 2nd Major/Minor Status Degree Verified Degree Name Degree Date

No Degree Defined

#### 001431 UNIVERSITY OF DELAWARE - NEWARK

Start Date:08-2016Still Current:YesEnd Date:CurrentPrimary:YesState:DelawareRegionally Accredited:Yes

Accredited By: Middle States Commission on Higher

Education

Major2nd Major/MinorStatusDegree VerifiedDegree NameDegree DateExercise Science-/-Degree ExpectedNoBachelor of Science12-2018

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University of St. Augustine - Residential Program

# ACADEMIC HISTORY CONTINUED

#### COLLEGES ATTENDED

# 002873 NASSAU COMMUNITY COLLEGE

 Start Date:
 05-2017

 End Date:
 06-2017

 State:
 New York

Still Current: No

Primary: No Regionally Accredited: Yes

Accredited By: Middle States Commission on Higher

Education

Major 2nd Major/Minor Status Degree Verified Degree Name Degree Date

No Degree Defined

#### COURSEWORK

002823	SAINT	JOHN'S UN	VFRSITY	(NY)
002023	JAIINI		IVLICTIII	(141)

Prefix	Course Title	Subject	Special Class	Course Type	Credits	Ver. Credits	App Grade	CAS Grade	Ver. Grade
Freshman S	emester Fall 2013: Completed	I ✓ Verified							
ITA 2030C	CORE: ITALIAN LEVEL III	Foreign Languages	Not Applicable	Not Applicable	3.0		B+	B+	
Freshman Semester Spring 2014: Completed ✓ Verified									
ITA 2040C	CORE:INTERMEDIATE ITALIAN CONV	Foreign Languages	Not Applicable	Not Applicable	3.0		A-	A-	
002047 CH	NV ONFONTA								

#### 002847 SUNY-ONEONTA

**CHEM 112** 

General Chemistry II

0020-7 30	IVI ONLONIA								
Prefix	Course Title	Subject	Special Class	Course Type	Credits	Ver. Credits	App Grade	CAS Grade	Ver. Grade
Freshman S	Semester Fall 2014: Completed	d ✓ Verified							
CHEM 111	General Chemistry I	Chemistry	Not Applicable	Lab And Lecture Combined	4.0		B+	B+	
POLS 121	U.S. Government	Government	Not Applicable	Not Applicable	3.0		B+	B+	
PSYC 100	Introductory Psychology	Psychology	Not Applicable	Not Applicable	3.0		B+	B+	
PROF 120	College Learning Strategies	Special Topics	Not Applicable	Not Applicable	3.0		Α	Α	
STAT 101	Intro to Statistics	Statistics	Not Applicable	Not Applicable	3.0		B+	B+	
Freshman S	Gemester Spring 2015: Comple	ted Verified	ı						
ANTH 100	Intro to culturaal Anthropology	Anthropology	Not Applicable	Not Applicable	3.0		W	None	
ANTH 130	Intro to Biological Anthropology	Biological Anthropology	Not Applicable	Not Applicable	3.0		Α	Α	
BIOL 180	General Biology I	Biology	Not	Lab And	4.0		A-	A-	

Not

Chemistry

Applicable

Applicable

Lecture Combined

Lab And

Lecture Combined 4.0

B+

B+

CADEMIC HI	STORY CONTINUED								
COURSEWO	DRK								
Freshman S	Gemester Spring 2015: Comple	eted 🗸 Verified							
COMP 100	Composition	Composition	Not Applicable	Not Applicable	3.0		B+	B+	
002732 HC	FSTRA UNIVERSITY								
Prefix	Course Title	Subject	Special Class	Course Type	Credits	Ver. Credits	App Grade	CAS Grade	Ver. Grade
Sophomore	Semester Fall 2015: Complet	ed Verified							
BIO 103	Human Anatomy and Physiology I	Anatomy & Physiology	Not Applicable	Lab And Lecture Combined	4.0		A-	A-	
RHET 001	Oral Communication	Communications	Not Applicable	Not Applicable	3.0		A-	A-	
HPR 062	Personal & Community Health	Community Health	Not Applicable	Not Applicable	3.0		Α	Α	
HPR 011	First Aid for Activity Profsls	First Aid	Not Applicable	Not Applicable	2.0		Α	Α	
PESP 025	Fitness for Life	Physical Education	Not Applicable	Lecture Only	2.0		Α	Α	
SOC 004	Contemporary Society	Sociology	Not Applicable	Not Applicable	3.0		B-	B-	
Sophomore	Semester Spring 2016: Comp	oleted 🗸 Verifie	ed						
BIO 105	Human Anatomy & Physiology II	Anatomy & Physiology	Not Applicable	Lab And Lecture Combined	4.0		A-	A-	
WSC 002	Composition	Composition	Not Applicable	Not Applicable	3.0		A-	A-	
HPR 179E	Fitness Management	Health	Not Applicable	Not Applicable	3.0		Α	Α	
HPR 114	Appld Nutritn, Diet & Exercise	Nutrition	Not Applicable	Lecture Only	3.0		A-	A-	
PROF EXAM	WRITING PROFICIENCY EXAM	Writing	Other Tests	Not Applicable	0.0		NG	None	
001431 UN	IIVERSITY OF DELAWARE - NEW	ARK							
Prefix	Course Title	Subject	Special Class	Course Type	Credits	Ver. Credits	App Grade	CAS Grade	Ver. Grade
Junior Seme	ester Fall 2016: Completed	✓ Verified							
BISC 208	Introductory Biology II	Biology	Not Applicable	Lab And Lecture Combined	4.0		B+	B+	
PSYC 325	Child Psychology	Child Psychology	Not Applicable	Not Applicable	3.0		B+	B+	
KAAP 180	Intro to Exercise Science	Exercise Science	Not Applicable	Lecture Only	3.0		A-	A-	
KAAP 353	Pre-Professional Seminar	Kinesiology	Not Applicable	Lecture Only	2.0		Р	None	
MEDT 200	The Language of Medicine	Medical Technology	Not Applicable	Lecture Only	3.0		Α	Α	

CADEMIC HI	STORY CONTINUED								
COURSEWO	ORK								
Junior Sem	ester Spring 2017: Completed	✓ Verified							
KAAP 309	Human Anat and Physi I	Anatomy & Physiology	Not Applicable	Lab And Lecture Combined	4.0		B+	B+	
ANTH 344	Anthropology of Clothing	Anthropology	Not Applicable	Not Applicable	3.0		В	В	
KAAP 305	Fundamentals Sprt Hlth Care	Kinesiology	Not Applicable	Lab And Lecture Combined	3.0		B-	B-	
KAAP 400	Research Methods	Kinesiology	Not Applicable	Lecture Only	3.0		B+	B+	
HIST 102	Western Civ:1648-Present	Western Civilization	Not Applicable	Not Applicable	3.0		В	В	
002873 NA	ASSAU COMMUNITY COLLEGE								
Prefix	Course Title	Subject	Special Class	Course Type	Credits	Ver. Credits	App Grade	CAS Grade	Ver. Grade
Junior Sem	ester Summer 1 2017: Comple	eted 🗸 Verifie	d						
MAT 122	Calculus I	Calculus	Not Applicable	Not Applicable	4.0		C+	C+	
001431 UN	NIVERSITY OF DELAWARE - NEW	ARK							
Prefix	Course Title	Subject	Special Class	Course Type	Credits	Ver. Credits	App Grade	CAS Grade	Ver. Grade
Senior Sem	ester Fall 2017: Completed	✓ Verified							
KAAP310	Anatomy and Physiology 2	Anatomy & Physiology	Not Applicable	Lab And Lecture Combined	4.0		B+	B+	
KAAP430	Exercise Physiology	Exercise Physiology	Not Applicable	Lab And Lecture Combined	4.0		B+	B+	
KAAP440	Topics in Exercise Science	Exercise Science	Not Applicable	Lecture Only	3.0		A-	A-	
PHYS201	Introduction to Physics 1	Physics	Not Applicable	Lab And Lecture Combined	4.0		В	В	
Senior Sem	ester Spring 2018: Completed	✓ Verified							
KAAP428	Motor Control & Learning	Motor Control	Not Applicable	Lecture Only	4.0		В	В	
KAAP434	12-Lead ECG Interpretation	Exercise Science	Not Applicable	Lecture Only	3.0		A-	A-	
NTDT200	Nutrition Concepts	Nutrition	Not Applicable	Lecture Only	3.0		Α	Α	
PHYS202	Introductory Physics II	Physics	Not Applicable	Lab And Lecture	4.0		С	С	

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# ACADEMIC HISTORY CONTINUED

CALCULATED GPA				
Title	Туре	Quality Points	Graded Hours	GPA Score
GPA by School - HOFSTRA UNIVERSITY	School	111.0	30.00	3.70
GPA by School - NASSAU COMMUNITY COLLEGE	School	9.2	4.00	2.30
GPA by School - SAINT JOHN'S UNIVERSITY (NY)	School	21.0	6.00	3.50
GPA by School - SUNY - ONEONTA	School	104.8	30.00	3.49
GPA by School - UNIVERSITY OF DELAWARE - NEWARK	School	188.0	58.00	3.24
Anatomy & Physiology	Subject	56.0	16.00	3.50
Biology	Subject	28.0	8.00	3.50
Chemistry	Subject	26.4	8.00	3.30
English	Subject	21.0	6.00	3.50
Mathematics	Subject	19.1	7.00	2.73
Movement Science	Subject	76.5	23.00	3.33
Other Course	Subject	79.0	22.00	3.59
Other Sciences	Subject	59.1	15.00	3.94
Physics	Subject	20.0	8.00	2.50
Psychology	Subject	19.8	6.00	3.30
Social/Behavioral Science	Subject	29.1	9.00	3.23
Science	Subject	130.4	40.00	3.26
Science and Math	Subject	149.5	47.00	3.18
Cumulative Undergraduate	Year	434.0	128.00	3.39
Post-Baccalaureate	Year	0.0	0.00	0.00
Graduate	Year	0.0	0.00	0.00
Overall	Year	434.0	128.00	3.39

#### SUPPORTING INFORMATION

#### EXPERIENCI

EXTRACURRICULAR ACTIVITIES TOTAL HOURS: 86

**Experience Type:** Extracurricular Activities

Recognition Type: Volunteer
Title: Member

Employer: Chi Omega Fraternity

International United States

Supervisor:

Experience Dates: 02-20-2017/ Current

Status: Full-time

Hours per Week: 2
Total Weeks: 12
Total Hours: 24

**Experience Details:** Participated in and hosted philanthropy

events with all profits going to the Make-A-Wish Foundation. Attended weekly meetings discussing our core purposes of friendship, personal integrity, service to others, academic excellence, intellectual

pursuits,

community and campus involvement, and career development, while learning how

to implement them.

Permit to Contact: No

**Experience Type:** Extracurricular Activities

Recognition Type: Volunteer
Title: Member

**Employer:** Physical Therapy Interest Club

Delaware United States

Supervisor:

**Experience Dates:** 09-15-2016/ Current

Status: Part-time

Hours per Week: 1
Total Weeks: 30
Total Hours: 30

**Experience Details:** Attended weekly meetings. Went to

lectures held by physical therapists giving advice on the graduate school application process and current research being done

on patients with certain types of

disorders.

Permit to Contact: No

**Experience Type:** Extracurricular Activities

Recognition Type: Volunteer
Title: Member

Employer: Exercise Science Club

Delaware United States

Supervisor:

Experience Dates: 09-01-2016/ Current

Status: Part-time

Hours per Week: 1
Total Weeks: 32
Total Hours: 32

**Experience Details:** Attended meetings, some of which

included guest speakers giving presentations on current research being done in the exercise science field, or talking about possible job opportunities after receiving a bachelors degree in exercise science and graduate school

preparation.

Permit to Contact: No

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University of St. Augustine - Residential Program

# SUPPORTING INFORMATION CONTINUED

#### **EXPERIENCE**

EMPLOYMENT TOTAL HOURS: 448

Experience Type: Employment
Recognition Type: Compensated

Title: Aide

**Employer:** Reddy Care Physical Therapy

475 Northern Blvd Great Neck New York 11021

**United States** 

Supervisor: Patrick Leo

Physical Therapist +15168290030 plyo@reddycare.net Experience Dates: 12-21-2015/08-18-2017

Status: Part-time

Hours per Week: 14
Total Weeks: 32
Total Hours: 448

Experience Details: Worked under the direct supervision of licensed physical therapists by assisting

patients with exercises given by the therapist, setting patients up on electrical stimulation and exercise machines, cleaning and organizing the treatment rooms, managing the flow of patients from the waiting room to the treatment room, assisting patients with disabilities

move around the clinic.

Permit to Contact: Yes

University of St. Augustine - Residential Program

### SUPPORTING INFORMATION CONTINUED

#### VOLUNTEER/COMMUNITY ENRICHMENT

**TOTAL HOURS: 300** 

**Experience Type:** Volunteer Recognition Type: Volunteer

Title: Physical Therapy Volunteer

Employer: Parker Jewish Institute for Health Care

> and Rehabilitation 271-11 76th Avenue New Hyde Park New York 11040 **United States**

Supervisor: Pratima Bhagwandin

**Director of Volunteers** +17182892262

pbhagwandin@parkerinstitute.org

06-12-2018/08-24-2018 **Experience Dates:** 

Part-time Status:

Hours per Week: 20 **Total Weeks:** 11 **Total Hours:** 220

**Experience Details:** Observed physical therapists and physical

> therapist assistants working with patients in an inpatient setting. Brought patients in for physical therapy and assisted physical

therapists as needed.

Permit to Contact: Yes

Experience Type:

Volunteer Recognition Type: Volunteer Title: Aide

Employer: University of Delaware Physical Therapy

540 S College Ave

Newark

Delaware 19713 **United States** 

Supervisor:

**Experience Dates:** 02-15-2017/05-16-2017

Status: Part-time

2 Hours per Week: **Total Weeks:** 11 **Total Hours:** 

**Experience Details:** Performed BMI, blood pressure, waist circumference, pulse/ox tests on patients

before being seen by therapists, cleaned the treatment area before patients arrived, graded patient score sheets, such as DASH, LEFS, etc., set up obstacle courses for patients, washed all towels and heat pack covers, assisted patients complete exercises given by the therapists, observed patients with a variety of disabilities from sports injuries to neurological disabilities being treated

by licensed physical therapists.

Permit to Contact: Yes

**Experience Type:** Volunteer Recognition Type: Volunteer

Title: Volunteer at Physical Therapy Station Employer: Special Oympics at Walt Whitman High

School

301 W Hills Rd **Huntington Station** New York 11746 **United States** 

Supervisor:

04-02-2016/04-02-2016 **Experience Dates:** 

Status: **Temporary** 

Hours per Week: 8 **Total Weeks:** 1 **Total Hours:** 

**Experience Details:** Ran stations of strength, balance, stability

> and flexibility at the Special Olympics for disabled children of all ages. Different tests were performed on the children who volunteered to be evaluated in these different areas of fitness, such as measuring joint angles with a goniometer

and measuring grip strength with

dynamometers.

Permit to Contact: No

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University of St. Augustine - Residential Program

### SUPPORTING INFORMATION CONTINUED

#### **EXPERIENCI**

VOLUNTEER/COMMUNITY ENRICHMENT TOTAL HOURS: 300

Experience Type: Volunteer Experience Dates: 06-29-2015/07-31-2015

Recognition Type:VolunteerStatus:Part-timeTitle:InternHours per Week:10Employer:KidztherapyTotal Weeks:5

300 Garden City Plaz Total Hours: 50

Suite 350

Garden City

New York 11530

United States

Experience Details:

Promoted and enhanced the development of infants and young children (birth to five years) with special needs. Shadowed

Physical and Occupational Therapists and was exposed to a variety of disabilities

while learning how to assist them.

Permit to Contact: Yes

#### **ACHIEVEMENTS**

#### **HONORS**

Supervisor:

Name: Dean's List Description:

Organization: University of Delaware An honor presented to students of the University of Delaware for

Date: 12-22-2016 receiving a GPA of 3.50 or above.

#### **HONORS**

Name: Dean's List Description:

Organization: An honor presented to students of Hofstra University for receiving a

Date: 05-20-2016 GPA of 3.50 or above.

#### **HONORS**

Name: Dean's List Description:

Organization: Hofstra University An honor presented to students of Hofstra University for receiving a

Date: 12-20-2015 GPA of 3.50 or above.

#### **SCHOLARSHIPS**

Name: Academic Honors Scholarship Description:

Organization: Hoftra University Awarded to students for academic excellence.

Date: 09-02-2015

#### **SCHOLARSHIPS**

Name: Alumni Traditions Scholarship Description:

Organization: SUNY Oneonta Awarded to students for academic excellence.

Date: 08-25-2014

#### PERSONAL STATEMENT

The last patient I had the chance to work with, during my last shift at Reddy Care Physical Therapy Clinic, reassured me that I was delving into the right career path as an aspiring physical therapist. One humbling encounter with a single patient is all that it took to put things into perspective. My patient was aware that my return to college was near. During my last shift, the teary-eyed patient pulled me aside, as she handed me a gift box with a pair of earrings inside. Although the earrings were stunning, the token of gratitude that she had granted me was the real treasure. As I was

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Abbatiello, Marina Applicant ID 9999437317

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University of St. Augustine - Residential Program

PTCAS 2018-2019 Cycle

#### SUPPORTING INFORMATION CONTINUED

humbled by this experience, my perspective of my chosen career field was drastically altered.

Although I always knew that I wanted to make a difference in the medical field while pursuing my bachelor's degree, as well as gearing towards future degrees, my vision became centered around the field of physical therapy. I want to develop strong bonds with my patients, as I will be connecting with them more so than your average healthcare professional, on a daily basis. Patients who frequent physical therapy treatment become the therapist's individual projects that he or she may mold into stronger beings; aiding patients to become equipped in participating in dayto-day activities. Interacting with my patient who gifted me the earrings daily not only fostered my love for the field of physical therapy, but for being able to make a difference in the individual lives of my patients just by being present with them and passionate about perfecting my craft and theirs. After receiving the kind gesture from my patient, I realized that she had been thinking of me after her hours attending the clinic. Connecting with her to that extent has made everything come full circle, opening my eyes to how wonderful it is to have a positive impact on someone through practicing my chosen field.

The mindset that I have acquired whilst pursuing my degree of exercise science is to serve others; serve others meaning, to do everything that I possibly can to help another human being. Granting them the ability to get up on their feet, physically and figuratively, will allow them to be able to lead the normal life that they desire. The job opportunity that I was fortunate enough to receive at Reddy Care Physical Therapy has raised my awareness to the level of trust a patient has in their therapist. Becoming the individual that the patient relies on to facilitate their recovery is my ultimate professional goal. When the patient started tearing up on my last day working as an aide, I physically saw how much of an impact I had on her life. Although I was not the one directly treating her, I was able to comfort her in her time at the clinic and encourage her to progress every day. My last day was just as emotional for me as it was for her; I did not want to leave a patient feeling as though I could no longer be there to support and assist her through her recovery.

Out of every experience that I have had both in and out of the physical therapy clinic, becoming close with this patient and realizing my impact on her life is one that will reside with me forever. This is an experience that has changed my entire life, in that it has reassured me that I have chosen the perfect career path for myself that fits my professional goals and core values. Prior to my time serving at Reddy Care Physical Therapy Clinic, I had a passion for connecting with individuals that knew no bounds. As my service at that clinic came to an end, I left with the strong bonds that were created amongst my patients and I, especially with the woman who gifted me the earrings. My experience with this woman, as well as my time serving at Reddy Care as a whole is what reassured me in that the field of physical therapy is the only field worth delving into with my skillsets.

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# SUPPORTING INFORMATION CONTINUED

#### **OBSERVATION HOURS**

#### PARKER JEWISH INSTITUTE FOR HEALTH CARE AND REHABILITATION

Facility Address: 271-11 76th Avenue

New Hyde Park New York 11040 United States Experience Dates:

06-12-2018/08-22-2018

Recognition Type:

Volunteer

Status: Completed PT Also Evaluator: No

Verification Status:VerifiedSignature Type:Electronic Signature

Settings and Hours of Experience	HRS Completed	HRS Planned/IP
INPATIENT Settings		
Acute Care Hospital	0	0
Nursing Home/Skilled Nursing Facility/Extended Care Facility	0	0
Other Inpatient Facility	0	0
Rehabilitation/Sub-acute Rehabilitation	148	36
OUTPATIENT Settings		
Free-standing PT or Hospital Clinic	0	0
Home Health	0	0
Industrial/Occupational Health	0	0
Other Outpatient Facility	0	0
School/Pre-school	0	0
Wellness/Prevention/Fitness	0	0
Total Hours for All Settings	148	36

# Patient Diagnoses/Populations Observed

General Orthopedic (musculoskeletal)

Neurological (neuromuscular)

Cardiovascular / Pulmonary

Integumentary (wound management)

Geriatrics

PT Supervisor

Name: Hutokshi Goolcharran

Phone: 718 289-2100

Email: hgoolcharran@parkerinstitute.org

License Number:

License State: New York

SUPPORTING INFORMATION CONTIN	JED
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OBSERVATION HOU	RS			
UNIVERSITY OF DEL	AWARE PHYSICAL THERAPY CLINIC			
Facility Address:	540 S College Ave Newark Delaware 19713 United States	Experience Dates: Recognition Type:	02-15-2017/05-16- Volunteer	2017
Status:	_	PT Also Evaluator:	No	
Verification Status:	Verified	Signature Type:	Document Upload	
Settings and Hours of Expe	rience		HRS Completed	HRS Planned/IP
INPATIENT Settings				
Acute Care Hospital			0	0
Nursing Home/Skilled N	ursing Facility/Extended Care Facility		0	0
Other Inpatient Facility			0	0
Rehabilitation/Sub-acut	e Rehabilitation		0	0
OUTPATIENT Settings				
Free-standing PT or Hos	pital Clinic		21	0
Home Health			0	0
Industrial/Occupational			0	0
Other Outpatient Facilit School/Pre-school	У		0	0
Wellness/Prevention/Fi	tnoss		0 0	0 0
Total Hours for All Settings			21	0
Patient Diagnoses/Populati				, and the second
General Orthopedic (mu				
Neurological (neuromus				
Sports				
PT Supervisor				
Name:	Sarah Smith	License Number:	_	
Phone:	_	License State:	-	
Email:	_			

Application Status Verified

SUPPORTING INFORMATION CONTINUED
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#### **OBSERVATION HOURS**

**REDDY CARE PHYSICAL THERAPY** 

Facility Address: 475 Northern Blvd

Great Neck New York 11021 United States Experience Dates:

12-21-2015/08-18-2017

**Application Status Verified** 

Recognition Type:

Paid

Status: Completed PT Also Evaluator: No

Verification Status: Verified Signature Type: Electronic Signature

Settings and Hours of Experience	HRS Completed	HRS Planned/IP
INPATIENT Settings		
Acute Care Hospital	0	0
Nursing Home/Skilled Nursing Facility/Extended Care Facility	0	0
Other Inpatient Facility	0	0
Rehabilitation/Sub-acute Rehabilitation	0	0
OUTPATIENT Settings		
Free-standing PT or Hospital Clinic	502	0
Home Health	0	0
Industrial/Occupational Health	0	0
Other Outpatient Facility	0	0
School/Pre-school	0	0
Wellness/Prevention/Fitness	0	0
Total Hours for All Settings	502	0
5 11 15 15 15 15		

#### Patient Diagnoses/Populations Observed

General Orthopedic (musculoskeletal)

Neurological (neuromuscular)

Cardiovascular / Pulmonary

Geriatrics

Sports

PT Supervisor

Name: Patrick Lyo
Phone: 7183094867

Email: plyo@reddycare.net

License Number:

License State:

Application Status Verified

# **CUSTOM QUESTIONS**

#### **PTA EDUCATION**

\* 1. Have you graduated from a CAPTE-accredited physical therapist assistant (PTA) program?

Answer: No

#### PREVIOUS PHYSICAL THERAPIST EDUCATION

\* 1. Have you previously enrolled in a professional physical therapist (PT) program? If yes, you MUST list the institution in the Colleges Attended section of the application, enter all attempted and completed PT courses in the Transcript Entry section of the application and have an official transcript sent to PTCAS. Failure to report this institution and associated coursework may jeopardize your application.

Answer: No

#### **GENDER IDENTITY**

\* 1. How do you describe your current gender identity?

Answer: Female/Woman

#### PTCAS CERTIFICATION AND AUTHORIZATION STATEMENT

\* 1. I certify, as required in the application, that I have read and understand all application instructions, including the provisions which note that I am responsible for monitoring and ensuring the progress of my application.

I certify that I have read and will abide by all program-specific instructions for my designated physical therapist programs. I certify that I have read and understand the American Council of Academic Physical Therapy (ACAPT) Admissions Traffic Rules for Applicants.

I certify that all the information and statements I have provided in this application are current, correct, and complete to the best of my knowledge.

I certify that my personal essay and the information on my application represent my own work.

I understand that withholding information requested on the PTCAS application, or giving false information, may be grounds for denial of admission to a program participating in PTCAS or may be grounds for expulsion from the institution after I have been admitted.

I acknowledge that a program that makes an offer of acceptance to me will also know the number of offers I have received and accepted at other programs in PTCAS. While the admissions cycle is open, my designated programs will not know the total number of programs I selected on the application or other (non-acceptance) admission decisions made by other programs in PTCAS.

I acknowledge that if I start classes at a PT program, my other designated programs in which my application is still under consideration will be able to view matriculation status, if reported to PTCAS.

I acknowledge that in October after the end of the PTCAS admissions cycle, only my designated programs will be able to view to what other programs I applied via PTCAS and the final admission decision reported by each program.

I agree, understand and consent to PTCAS and the American Physical Therapy Association (APTA) releasing my de-identified application data that does not contain personally identifiable information, as set forth in the PTCAS privacy statement, and admission decisions submitted to PTCAS by my designated PT programs to third party health and education organizations for educational research purposes (including surveys). Such educational research is conducted for the purpose of improving PT education and admissions.

I acknowledge and agree that my sole remedy in the event of any proven errors or omissions related to the handling or processing of my application by PTCAS is to obtain a refund of my PTCAS application fee.

**Answer:** Indicate your understanding and acceptance of the terms described above by checking this box. Your certification of this statement serves the same purpose as a legal signature, and is binding.

# **DESIGNATIONS**

# DOCTOR OF PHYSICAL THERAPY - RESIDENTIAL (ST. AUGUSTINE CAMPUS)

Organization: University of St. Augustine - Residential

Program

Department: **Program Level:** 

**Enrollment:** Fall 2019

Campus:

**Program Start Date:** Submitted Date:

Abbatiello, Marina

Applicant ID 9999437317

09/09/2019 08-15-2018

**Completed Date:** 08-15-2018 Verified Date: 08-20-2018 **Application Status:** Verified

**Academic Update Status:** 

Last Updated: 08-20-2018

#### SUPPLEMENTAL QUESTIONS

#### RE-APPLICANT QUESTIONS

1 Have you previously applied to this education program?

2 If you are reapplying to this program, how have you strengthened your application?

Answer: Not Applicable

#### **CAMPUS AND TERM**

1 Applicants are allowed only one application to be reviewed by Admissions. Please select one campus and term.

Answer: St. Augustine, FL - Fall 2019

#### SECONDARY CAMPUS CHOICE

1 Should your campus choice reach capacity, are you open to attending a different USAHS location?

Answer: Miami, FL

#### AGREEING TO TERMS OF APPLICATION

1 By selecting "I Agree" you are acknowledging that you understand (1) only one application is allowed to be evaluated, (2) after submission through PTCAS you must follow through with an Enrollment Advisor to have your application reviewed as your application is not submitted automatically and (3) you have completed our required one-page online supplemental form. For

any questions, please email us at enroll@usa.edu.

Answer: I Agree

# **PREREQUISITES**

Prerequisite: **Prereq Description:** General or Upper Level Physics **Physics** 

Minimum Credits: 3 Minimum Grade: 2.0 Biomechanics or Anatomical Kinesiology

can be substituted for one course. 2 of 2

courses required.

Required.

No Courses have been matched to this prerequisite.

Prerequisite: **Prereq Description:** General or Upper Level Chemistry. 1 of 2 Chemistry

Minimum Credits: 3 Minimum Grade: 2.0

CAS Special Ver. Ver. App College Prefix Course Title Subject Credits Credits Class Grade Grade Grade

002847 SUNY-ONEONTA B+ B+ **CHFM 111** General Chemistry Not 4.0 Chemistry **Applicable** 

Prerequisite: **Prereq Description:** Knowledge of human body, structure and Anatomy & Physiology I

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Minimum Credits: 3 Minimum Grade: 2.0

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function. 1 of 2 courses required

University of St. Augustine - Residential Program

DESIGNATIONS CONTINU	JED									
DOCTOR OF PHYSICAL	_THERAPY - RES	SIDENTIAL (ST. AU	GUSTI	NE CAMPL	JS)					
PREREQUISITES										
College	Prefix	Course Title	Subj	ect	Special Class	Credits	Ver. Credits	App Grade	CAS Grade	Ver. Grade
002732 HOFSTRA UNIVERSITY	BIO 103	Human Anatomy and Physiology I		omy & iology	Not Applicable	4.0		A-	A-	
Prerequisite: Minimum Credits: Minimum Grade:	Biology / Biologic 3 2.0	cal Science		Prereq De	escription:	General of Must be knowled function, substitut	Human E ge of hun Exercise ed for or	Based Bio nan body Physiolo	ology; , structur ogy can b	е
College	Prefix	Course Title	Subj	ect	Special Class	Credits	Ver. Credits	App Grade	CAS Grade	Ver. Grade
002847 SUNY-ONEONTA	BIOL 180	General Biology I	Biolo	ogy	Not Applicable	4.0		A-	A-	
Prerequisite: Minimum Credits: Minimum Grade:	Social/Behaviora 3 2.0	al Science		Prereq De	escription:	Any com Sociocult Anthrop Developi (must sh Ethnicity See Direc	tural/Soc ology, Hu ment, Pu ow huma v or Gend	ioeconor Iman Beh blic Heal n relation er Studie	mic, navior and th, Huma nships), es course	d nities
College	Prefix	Course Title	Subj	ect	Special Class	Credits	Ver. Credits	App Grade	CAS Grade	Ver. Grade
002847 SUNY-ONEONTA	ANTH 130	Intro to Biological Anthropology		ogical oropology	Not Applicable	3.0		Α	Α	
Prerequisite: Minimum Credits: Minimum Grade:	Social/Behaviora 3 2.0	al Science	ence Prereq Descripti		escription:	Any combination of Psychology, Sociol Sociocultural/Socioeconomic, Anthropology, Human Behavior and Development, Public Health, Humaniti (must show human relationships), Ethnicity or Gender Studies courses can See Directory of more information.			d nities s can	
College	Prefix	Course Title	Subj	ect	Special Class	Credits	Ver. Credits	App Grade	CAS Grade	Ver. Grade
001431 UNIVERSITY OF DELAWARE - NEWARK	PSYC 325	Child Psychology	Chile	d Psychology	Not Applicable	3.0		B+	B+	
Prerequisite: Minimum Credits: Minimum Grade:	Biology / Biologic 3 2.0			Prereq Description:		General or Upper Level Biology Must be Human Based Biology; knowledge of human body, structure and function. Exercise Physiology can be substituted for one course. 2 of 2 courses required.				
College	Prefix	Course Title	Subj	ect	Special Class	Credits	Ver. Credits	App Grade	CAS Grade	Ver. Grade
001431 UNIVERSITY OF DELAWARE - NEWARK	BISC 208	Introductory Biology II	Biolo	ogy	Not Applicable	4.0		B+	B+	

University of St. Augustine - Residential Program

DESIGNATIONS CONTINUED	
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DOCTOR OF PHYSICAL THERAPY - RESIDENTIAL	(ST AUGUSTINE CAMPUS)
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PREREQUISITI	_~

Prerequisite: Physics

Minimum Credits: 3 Minimum Grade: 2.0 Prereq Description: General or Upper Level Physics

Biomechanics or Anatomical Kinesiology can be substituted for one course. 1 of 2

courses required.

College	Prefix	Course Title	Subject	Special Class	Credits	Ver. Credits	App Grade	CAS Grade	Ver. Grade
001431 UNIVERSITY OF DELAWARE - NEWARK	PHYS201	Introduction to Physics 1	Physics	Not Applicable	4.0		В	В	

Prerequisite: Chemistry Prereq Description: General or Upper Level Chemistry. 2 of 2

Minimum Credite: 2

Required.

Minimum Credits: 3 Minimum Grade: 2.0

Special Ver. adA CAS Ver. College Prefix Course Title Subject Credits Class Credits Grade Grade Grade **CHEM 112** 002847 SUNY-ONEONTA **General Chemistry** Chemistry Not 4.0 B+ B+

Prerequisite: Medical Terminology Prereq Description: Not Acceptable: Certifications on

Minimum Credits: 3 Minimum Grade: 2.0 Prereq Description: Not Acceptable: Certifications or noncredit classes, or CEUs. Must have transcript showing a minimum of 1

transcript showing a minimum of 1 semester credit/1.5 quarter credits in Medical Terminology.

CAS Special Ver. App Ver. Prefix College Course Title Subject Credits Class Credits Grade Grade Grade 001431 UNIVERSITY OF MEDT 200 The Language of Medical Not 3.0 **DELAWARE - NEWARK** Technology **Applicable** Medicine

Prerequisite: Human Growth and Development over

Lifespan

Minimum Credits: 3 Minimum Grade: 2.0 Prereq Description:

Human or lifespan development course that includes physical and psycho-social development from birth through end of life. Not Acceptable: Classes that are solely based on psychological/mental, or solely based on motor control.

No Courses have been matched to this prerequisite.

Prerequisite: Anatomy & Physiology II Prereq Description: Knowledge of human body, structure and

Minimum Credits: 3
Minimum Grade: 2.0

function. 2 of 2 courses required

Applicable

Special CAS Ver. Ver App Prefix Course Title Credits College Subject Class Credits Grade Grade Grade 002732 HOFSTRA **BIO 105** 4.0 Human Anatomy & Anatomy & Not A-A-

Physiology

UNIVERSITY

Document RequestedUploadedFile NameUploaded DateOtherYesOther08-08-2018OtherYesOther08-08-2018

Physiology II

# MARINA L. ABBATIELLO

1916 Plymouth Drive – Westbury, NY 11590

abbaml@udel.edu - (516) 660-0670 - https://www.linkedin.com/in/marina-abbatiello-34ba589b/

#### **EDUCATION**

University of Delaware, College of Health Sciences, Class of 2018

**Bachelor of Science, Exercise Science** 

GPA: 3.247

# SKILLS

Microsoft Office- Excel, PowerPoint, Word

# RELATED EXPERIENCE

PHYSICAL THERAPY VOLUNTEER (June 2018-Present)

### Parker Jewish Institute for Health Care and Rehabilitation, New Hyde Park, NY

Observed physical therapists and physical therapist assistants working with patients in an inpatient setting. Cleaned the treatment area before patients arrived, brought patients in for physical therapy and assisted physical therapists as needed.

PHYSICAL THERAPY AIDE (DECEMBER 2015- AUGUST 2017)

# Reddy Care Physical Therapy, Great Neck, NY

Worked under the direct supervision of licensed physical therapists by assisting patients with exercises given by the therapist, setting patients up on electrical stimulation and exercise machines, cleaning and organizing the treatment rooms, managing the flow of patients from the waiting room to the treatment room, assisting patients with disabilities move around the clinic.

PHYSICAL THERAPY AIDE (FEBRUARY 2017-MAY 2017)

#### The University of Delaware Physical Therapy Clinic, Newark, DE

Performed BMI, blood pressure, waist circumference, pulse/ox tests on patients before being seen by therapists, cleaned the treatment area before patients arrived, graded patient score sheets, such as DASH, LEFS, etc., set up obstacle courses for patients, washed all towels and heat pack covers, assisted patients complete exercises given by the therapists, observed patients with a variety of disabilities from sports injuries to neurological disabilities being treated by licensed physical therapists.

INTERN AT KIDZ THERAPY SERVICES, PLLC (JUNE 2015- AUGUST 2015)

# Kidz Therapy Services, PLLC, Garden City, NY

Promoted and enhanced the development of infants and young children (birth to five years) with special needs. Shadowed Physical and Occupational Therapists and was exposed to a variety of disabilities while learning how to assist them.

VOLUNTEER AT PHYSICAL THERAPY STATION AT SPECIAL OLYMPICS (APRIL 2016)

# Walt Whitman High School, Huntington Station, NY

Ran stations of strength, balance, stability and flexibility at the Special Olympics for disabled children of all ages. Different tests were performed on the children who volunteered to be evaluated in these different areas of fitness, such as measuring joint angles with a goniometer and measuring grip strength with dynamometers.

# **EXPERIENCE**

CATERER FOR PLATINUM PARTY EVENT PLANNING (JUNE 2017- PRESENT)

# Platinum Party Planners, Long Island, NY

Traveled to different locations around Long Island catering weddings, business events, as well as smaller events. Was in excellent communication with the host of the party, utilized strong organization and creative talent to make sure each event was successful.

# **ACTIVITIES AND HONORS**

Dean's List recipient, 2015 Fall Semester, 2016 Spring Semester, 2016 Fall Semester Member of American College of Sports Medicine

Member, Chi Omega Fraternity

Invited to join National Society for Leadership and Success

Academic Honors Scholarship, Hofstra University, 2015

Member, Physical Therapy Interest Club, University of Delaware (Fall 2016-Present)

Member, Exercise Science Club, University of Delaware (Fall 2016-Present)

#### Statement of Purpose

From my perspective, I am vastly different from the majority. The world is full of mediocrity; whereas, I give each task my all. I challenge myself in order to rise above the mediocre personalities and to better myself. I have a strong, growing passion for the field of physical therapy. I genuinely want to help others and receive nothing in return. Everybody that knows me, knows that they can count on me; I would do anything for anyone if they ever needed.

As an aspiring physical therapist, I feel that I have a purpose. I hope to help my patients grow and progress each day, for they look up to me for inspiration and encouragement. My unconditional love for other human beings fostered my involvement in the field of physical therapy.

In the future, I hope to establish my own physical therapy clinic. Presently, I am learning about the industry of health care as well as what it is to give each patient the quality treatment that they deserve. Gaining experience in a variety of locations, such as working as a physical therapy aide in a PT clinic, and working as a volunteer in a rehabilitation institution, has made me more well-rounded and knowledgeable about the field as a whole. Once I am a licensed physical therapist, I am confident that I will create a safe and comforting environment for my patients as they trust that my treatment will be equally ethical and beneficial to their recovery.

Abbatiello, Marina
Applicant ID 9999437317
Application Status Verified

University of St. Augustine - Residential Program

### ADVISOR RELEASE STATEMENT

By answering Yes, you authorize PTCAS to release selected information regarding your PTCAS application and admission status to the health professions advisor and the health professions advisory committee of the post-secondary institution(s) that you have attended. By releasing your information, your advisor is better able to assist you in the admissions process, as well as better guide other students in the future. You cannot make changes to this item after you submit your application to PTCAS.

Advisor Release Statement Answer: Yes

Abbatiello, Marina Applicant ID 9999437317

# PTCAS 2018-2019 Cycle

University of St. Augustine - Residential Program

PRESUBMISSION RELEASE

By answering Yes, you authorize PTCAS to release your name and contact information to your designated programs BEFORE you submit your final application. This will allow your designated programs to send you important information about the local admissions process before you complete your application.

Presubmission Release Answer: Yes

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Application Status Verified

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EVALUATIONS								
EVALUATOR II	NFORMATION							
Brian Sidiski						_		
Title: Occupation: Organization: Email:	Regional Director Physical Therapist Theradynamics Rehab Manabsidiski@parkerinstitute.org		Daytime Phone: Date Completed Status:	l: (	516 690-7434 08/13/2018 Completed			
I waive my right	of access to this evaluation:	YES						
	ou known the applicant?	Less than 1 year						
	ed Physical Therapist?	Yes						
	know the applicant?	Moderately						
If you are a phys	ical therapist, please sical therapy institution	SUNY Stony Brook						
	hat best describes your ion with the applicant:	Supervisor/Employer						
	ical therapist, please n state you are licensed	New York						
Major"; above, li	Professor" or "Professor in ist all courses in which you plicant (for example: Intronem 101)	_						
If you are a phys your PT licensur	ical therapist, please enter re number.	017372						
	now many references do ehalf of physical therapy year?	2						
REFERENCE R	RATINGS							
				Poor (1)	Below Average (2)	Average (3)	Good (4)	Excellent (5)
Commitment to	Learning							•
Critical Thinking	3							<b>✓</b>
Empathy								<b>~</b>
Ethics								<b>✓</b>
Interpersonal Sk	kills							~
Leadership							•	
Oral Communica								~
Professional De								•
Response to Crit	ticism							•
Responsibility								<b>✓</b>
Stress Managem	nent							•
Team Skills								<b>~</b>
Time Manageme								<b>~</b>
Written Commu	ınication							<b>~</b>
	DATION CONCERNING AI	DMISSION						
I highly recomm	mend this applicant							



August 13, 2018

To whom this may concern,

I am writing to provide a recommendation for Marina Abbatiello in support of her application to your Physical Therapy program.

I have come to know Marina Abbatiello through the time she has spent as a volunteer in the physical therapy department at Parker Jewish Institute for Health Care and Rehabilitation.

Ms. Abbatiello has been one of our most reliable and consistent volunteers. She always arrives on time and is engaged throughout the day. She quickly completes tasks and is always looking for additional ways in which she can support the therapists and the department as a whole.

Ms. Abbatiello has a very positive attitude and exudes energy and excitement in everything she does. She has quickly built a strong rapport with the therapists, aides, and patients. According to one senior therapist in the department: "It is almost natural the way that she way she engages the patients and the staff and spreads her positive attitude towards other people." "Residents who are brought to therapy by Marina always come down with a smile".

Marina has also demonstrated a thirst for knowledge as she has voluntarily attended student inservices, closely observes the therapy sessions, and asks appropriate thought provoking questions. It is clear that Ms. Abbatiello has a passion for her chosen path of Physical Therapy.

It is without reservation that I give my strongest recommendation to Marina Abbatiello. She will be a great physical therapist and an asset to our profession.

Sincerely Yours,

Brian Sidiski PT, MBA Regional Director – Theradynamics Rehab Management Director of Rehabilitation – Parker Jewish Institute for Health Care and Rehabilitation

SHORT TERM REHABILITATION • LONG TERM CARE • SOCIAL ADULT DAY CARE • HOME HEALTH CARE • HOSPICE INPATIENT AND OUTPATIENT DIALYSIS • MEDICAL HOUSE CALLS • MEDICAL TRANSPORTATION MANAGED LONG TERM CARE • MEDICARE ADVANTAGE PLAN • CENTER FOR RESEARCH AND GRANTS

FOR GENERAL INFORMATION, PLEASE CALL 1-877-727-5373

University of St. Augustine - Residential Program

EVALUATIONS CONTINUED						
EVALUATOR INFORMATION						
Janice Llamas						
Title: Physical Therapist Occupation: Physical Therapy Organization: Parker Jewish Institute Email: jdhipona@gmail.com		Daytime Phone: Date Completed Status:	– : 08/15/2018 Completed			
I waive my right of access to this evaluation:	YES					
Are you a licensed Physical Therapist?	Yes					
How long have you known the applicant?	Less than 1 year					
If you are a physical therapist, please indicate the physical therapy institution from which you graduated						
How well do you know the applicant?	Moderately					
If you are a physical therapist, please indicate in which state you are licensed	New York					
Select the role that best describes your primary interaction with the applicant:	Physical Therapist					
If you are a physical therapist, please enter your PT licensure number.	_					
If you selected "Professor" or "Professor in Major"; above, list all courses in which you have had the applicant (for example: Intro to Chemistry, Chem 101)	_					
Approximately how many references do you submit on behalf of physical therapy applicants each year?	1					
REFERENCE RATINGS						
			Poor Below (1) Average (2)	Average (3)	Good (4)	Excellent (5)
Commitment to Learning						<b>~</b>
Critical Thinking						<b>✓</b>
Empathy						<b>~</b>
Ethics						<b>✓</b>
Interpersonal Skills						<b>✓</b>
Leadership						<b>✓</b>
Oral Communication						<b>✓</b>
Professional Demeanor						<b>✓</b>
Response to Criticism						•
Responsibility						•
Stress Management						•
Team Skills						<b>~</b>
Time Management						•
Written Communication						<b>~</b>
RECOMMENDATION CONCERNING A	ADMISSION					
I highly recommend this applicant						

To whom it may concern,

It gives me great pleasure to write the letter of recommendation for Marina Abbatiello for admission into your Physical Therapy program.

Marina has been a volunteer here at Parker Jewish Institute for Health Care and Rehabilitation in the physical therapy department since June 12<sup>th</sup>, 2018.

As a devoted volunteer, she assists the therapists and residents with diverse tasks such as transporting wheelchair bound residents to their physical therapy appointments, observing patient evaluations under my direct supervision, and assisting our professional staff with tasks.

During the time that Marina has been here with us at Parker Jewish Institute, I saw her passion, compassion, and dedication in her steps towards becoming a physical therapist. I highly recommend her acceptance into a DPT program. She would deliver excellent professionalism, conduct, and ethical practice.

If you have any further questions, you may reach me at my work phone number at Parker Jewish Institute.

Sincerely,

Janice Llamas, PT (718) 289-2100 ext. 4494