Acute Care Physical Therapy

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What is Physical Therapy?

- American Physical Therapy Association (APTA) Vision Statement
  - Transforming society by optimizing movement to improve the human experience
- Provides services that:
  - Help restore function
  - Improve mobility
  - Relieve pain
  - Prevent or limit permanent physical disabilities in patients with injury or disease
  - Help individuals return to productive lives

Hayhurst C. *A Vision to Transform Society*. PT in Motion; 2014.
How are PT and OT Different?

- “Physical therapy helps you get places. Occupational therapy helps you do what you need to once you get there.”
- OT focuses more on ADLs.
- PT focuses more on functional mobility.
- Both are necessary rehabilitation teams!
The Movement System

- PTs are experts in the *movement system*.
- Acute care PTs want patients to move to prevent:
  - Deconditioning
  - Pneumonia
  - Pressure ulcers related to bed rest
  - DVTs
  - Bone demineralization
  - Depression

Analyzing the Movement System

- PTs assess movement regarding:
  - Bed mobility
  - Transfers
  - Ambulation
  - Stair negotiation
  - Static and dynamic balance

- Focus on quality of movement:
  - Level of assistance required
  - Compensation and/or substitution
  - Assistive devices required
  - Verbal, visual, tactile cueing needed
Looking at the Full Picture

- Patients need to be viewed from a holistic perspective.
- Aside from the movement system, PTs take into consideration a patient’s:
  - Social support
  - Home set-up
  - Previous level of activity
  - Personal goals
  - Work requirements
  - Motivation level
PT Considerations

- Many things to keep in mind while working with a patient:
  - Pathophysiology
  - Symptoms and findings related to red flags
  - Treatment precautions and contraindications
  - Pharmaceutical benefits
  - Normal versus abnormal physiological responses to movement

Acute Care PT: Discharge Planning

- PTs play a large role in the discharge planning process.
- Guided by four constructs when determining appropriate discharge recommendation:
  - Patient’s functional and disability levels
  - Patient’s wants and needs
  - Patient’s ability to participate in care
  - Patient’s life context

Acute Care PT: Discharge Planning

- A retrospective study looked at the discharge recommendations of 40 acute care PTs for 762 patients in a large academic medical center.
- The frequency of mismatch between the PT’s recommendation and the patient’s actual location and services calculated.
  - PTs discharge recommendations were implemented 83% of the time.
  - Patients were 2.9 times more likely to be readmitted when the PT’s recommendation was not implemented.

Readmission Risk

- Functional Deficits Associated With Readmission Risk:
  - Low pre-admission physical function
  - Low pre-admission ADL function
  - Low functional status at hospital discharge
  - Low physical activity after hospitalization
  - Slow gait speed before inpatient surgical admission
  - Impaired functional mobility prior to surgery
  - Muscle weakness during hospitalization

- PTs can address these risk factors to lower readmission rates.

PT: Skilled Services

- Physical therapy is a skilled service that encompasses:
  - Screening
  - Examination
  - Evaluation
  - Diagnosis/Prognosis
  - Plan of Care
  - Interventions
PT: Skilled Services

- In order to provide this skilled service, a patient must:
  - Be able to follow commands and participate in therapy
  - Have lab values in a safe range (I.E. Hemoglobin less than 7.0 is considered a hold)
  - Not be on bedrest
  - Have activity orders
Misconceptions about Acute Care PT

● Physical therapists are the only ones who can follow activity orders.
  ○ Wrong!
  ○ If a patient needs to get out of bed and has an appropriate activity order, other care providers can implement the order, too.

● Physical therapists just “walk” patients.
  ○ Wrong!
  ○ PTs analyze a patient’s gait and give appropriate cues and techniques to help patients become more independent with ambulation.

● Physical therapists provide unskilled services.
  ○ Wrong!
  ○ PTs can teach other care providers unskilled tasks, such as PROM, but a PT’s plan of care consists of skilled services that only a PT can provide.

● Physical therapists are the only people that get patients out of bed.
  ○ Wrong!
  ○ PTs are not a hoyer lift. They provide skilled functional mobility to improve functional independence.
Tips For Collaborating With PT

- Place PT orders in the morning. Patients typically don’t get seen the same day if an order is placed in the afternoon.
- PT does not see patients every single day. We triage patients so that they will have an appropriate amount of sessions per week based on rehabilitation prognosis.
- **Minimize interruptions** while patients are working with PT. PT is important, so please respect our time with patients just as we respect yours.
Any Questions?