

## **Physical Medicine and Rehabilitation at Harborview Medical Center, PGY-3**

Length: One month of PGY-III year  
Location: Harborview Medical Center, Seattle Washington  
Primary Supervisor: Teresa Massagli, M.D.  
Contact Telephone #: 206-685-0936 (Karen Ennes)

### **Rotation Objectives: HMC Inpatients and Clinics for Orthopedic Residents**

#### **1. Patient Care**

Perform a comprehensive psychiatric evaluation for inpatients and outpatients

#### **Objectives:**

##### **Traumatic Brain Injury**

Name predictors of prognosis

Treat complications including spasticity, aspiration, agitation, cognitive deficits, and common psychological conditions

Determine need for prophylaxis or treatment of post-traumatic seizures

##### **CNS disorders, including stroke and SAH**

Differentiate syndromes based on location of disease or clinical presentation

Recommend medical interventions to minimize the risk of primary and secondary stroke

Treat complications including bowel, bladder, spasticity, aspiration, DVT, depression, shoulder problems, or skin breakdown

Recognize possible effects of physical impairment on sexual function

##### **SCI**

Differentiate clinical syndromes and classify neurologic status using ASIA standards

Predict level of independence with mobility and ADLs based on level of injury

Identify appropriate conservative care (e.g. dressings, debridement) for pressure ulcers

Identify appropriate beds, mattresses or mattress overlays, and cushions to prevent or manage skin breakdown

Manage post operative care and remobilization after flap surgery

Utilize urodynamic or cystometric data to formulate a plan for bladder management

Differentiate between UTI and colonization

Differentiate sources of pain for patients with SCI

Prescribe preventative and/or treatment measures for bowel, bladder, respiratory, syring, spasticity, skin breakdown, autonomic dysreflexia, thromboembolic disease, heterotopic ossification, erectile dysfunction and pain

Manage ventilator weaning, tracheostomy care and prescribe GPB

Prescribe appropriate assistive devices and upper limb orthoses for ADLs and for communication and computer interfaces

Cite possible effects of SCI on sexual response and fertility

### **Pulmonary, cardiac, medical conditions, and Geriatric population**

Assess cardiovascular and pulmonary systems for effects on impairment and disability

Describe the physiologic responses to immobility, including cardiovascular and musculoskeletal

Identify contraindications or precautions for exercise in patients with cardiac or pulmonary conditions

Prescribe appropriate immunizations to prevent pulmonary infections for patients with restrictive or obstructive lung disease or in geriatric patients

Prescribe medications for prevention and treatment of DVT and PE

Identify risk factors for aspiration

Assess causes of acute change in mental status

Identify common physiological changes related to aging, including postural, neurological, integumentary, urological and cardiopulmonary

### **Burns**

Describe the natural history of wound healing after burns and grafting procedures

Prescribe medications and other treatment for heterotopic ossification

Predict complications of burns including skin breakdown, contractures, and heterotopic ossification

### **Amputation**

Prescribe physical therapy for post-op patients incorporating precautions identified by the operating surgeon

Describe residual limb healing after lower extremity amputation

Describe the role of rigid dressings in the post-operative management of transtibial amputations

Prescribe basic components of upper and lower extremity prostheses

Describe common post-amputation pain syndromes

Describe treatment principles for chronic pain and phantom limb pain and formulate a plan for management of pain after amputation

### **Acquired myopathies and peripheral neuropathies**

Identify appropriate anatomy in traumatic neuropathies

Distinguish among acute weakness syndromes in critically ill patients

Prescribe medications for neuropathic pain

### **Hands On Experiences: the resident should spend time in therapy areas participating in:**

Manual stretch	Serial casting	Goniometer measurement
Manual muscle testing	Mechanical measures of strength	Balance
Gait training	Transfers	Wheelchair set-up/use
Tests of hand function	Assistive devices for ADLs	Dressing training
Hand splint fabrication	Observe/review videofluoroscopic swallowing study	

## **2. Medical Knowledge**

### **Objectives:**

- Review laboratory data and imaging data and identify normal and abnormal findings
- Name expected effects and side effects for commonly used oral or injected medications
- Generate a differential diagnosis for medical or PM&R problems
- Integrate and apply knowledge to manage complex medical problems
- Integrate and apply knowledge to manage complex PM&R problems

## **3. Practice Based Learning and Improvement**

*See: Rotation Objectives: All rotations*

## **4. Interpersonal and Communication Skills**

### **Objectives:**

- Lead the team under supervision of attending
- Formulate goals and a rehabilitation plan in conjunction with the team to provide patient focused care
- Participate (hands-on) in rehabilitation therapies and interventions

## **5. Professionalism**

### **Objectives:**

- Demonstrate ethical behaviors in provision of care, patient relationships, withholding of care, and interactions with insurance or disability agencies
- Consider effects of personal, social, and cultural factors in the disease process and patient management

## **6. Systems Based Practice**

### **Objectives:**

- Participate in M&M conference and identify methods to improve system of care if scheduled on this rotation
- Use effective strategies when working with medical directors/case reviewers

# Objectives for All Rotations

## 1. Patient Care

- Modify history to obtain data about physical and psychosocial impairments and function
- Perform a general and specific psychiatric examination, including (as appropriate): mental status evaluation, gait evaluation, manual muscle testing, ASIA exam
- Diagnose physical, cognitive, and psychosocial impairments and disabilities
- Formulate a problem list, prioritizing medical and rehabilitation issues
- Integrate facts and data to make clinical decisions
- Formulate a rehabilitation treatment plan and prescribe/ consult PT, OT, SLP, TR,
- Vocational counseling, psychology, SW as appropriate; include precautions as appropriate
- Assess patient progress and change treatment as indicated
- Employ preventive strategies to minimize: falls; contractures; skin breakdown
- Identify barriers for return to work, incorporating vocational assessments
- Review (or assign) scores on commonly used measures of function or disability
- Prescribe appropriate: orthoses; modalities; wheelchairs; ambulatory devices
- Minimize risk and discomfort to patients

## 2. Medical Knowledge: see specific rotation goals

## 3. Practice Based Learning and Improvement

- Identify strengths, deficiencies and limits in own knowledge and expertise
- Incorporate formative evaluation into daily practice
- Use information technology and other resources to optimize learning
- Attend and participate in teaching conferences and rounds
- Instruct, supervise and evaluate students under supervision of attending physician
- Counsel patients and families and caregivers about the plan of care
- Counsel appropriate patients in end of life care or withdrawal of care

## 4. Interpersonal and Communication Skills

- Present material clearly and accurately to patients using effective verbal and non-verbal skills, utilizing interpreters if needed
- Utilize effective listening skills
- Communicate with physicians, staff/team, and insurers in respectful, responsive manner
- Complete dictations and chart notes in a timely manner
- Document clinical findings in accordance with service requirements
- Use information technology to access and manage patient information

## 5. Professionalism

- Exemplify respect, compassion, reliability, punctuality, integrity and honesty
- Demonstrate responsiveness to patient needs that supercedes self-interest
- Accept responsibility for own actions and decisions
- Maintain patient confidentiality and respect patient autonomy
- Apply ethical principles in obtaining informed consent
- Demonstrate sensitivity and responsiveness to age, culture, disability, race, religion,

sexual orientation and gender of patients and colleagues

**6. Systems Based Practice**

Collaborate with and maintain appropriate professional attitudes and behaviors toward other medical professionals and allied health personnel

Assess how own actions affect others

Integrate care of patients across settings and ensure appropriate hand off

Evaluate risks, benefits, limitations, and costs of patient care

Advocate for patients in dealing with system complexities

Advocate for quality patient care

Work effectively with other services, health care agencies, and case managers

Work to improve the system of care