



INODAYA Hospitals - Kakinada

Documentation code:

INH/COP .Doc.No:36

Policy on Rehabilitative Services

Issue date: 05/09/2023

Reference: COP.18.NABH Standards – 5th Edition

Issue No:01

Prepared Date: 05/09/2023

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- A. Purpose:** The purpose of the Physiotherapy Department is to provide an expert physiotherapy service, with systematic methods of assessing musculo-skeletal, cardiovascular, etc disorders of function including pain and those of a psychosomatic origin and dealing with or preventing these problems by natural methods based essentially on movement, manual therapy and physical agencies.
- B. Scope :** Include staff and patients involved in the rehabilitative process.
- C. Definitions and Abbreviations:**

1. Postural Drainage

Postural drainage consists of positioning the patient according to the anatomy of the bronchial tree in order to use gravity to assist drainage of secretions.

2. Positioning and transferring of patient

Training begins by teaching transfers to the bed, and their wheel chair, then improving standing balance on the affected limb. Patients are encouraged to practice with or without obstacles.

3. Vertigo

Vertigo, or dizziness, is a symptom, not a disease. The term vertigo refers to the sensation of spinning or whirling that occurs as a result of a disturbance in balance (equilibrium). It also may be used to describe feelings of dizziness, faintness, and unsteadiness vertigo usually occurs as a result of a disorder in the vestibular system (i.e., structures of the inner ear, the vestibular nerve, brainstem, and cerebellum). The vestibular system is responsible for integrating sensory stimuli and movement and for objects in visual focus as the body moves.

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4. Abbreviations

ABBREVIATIONS	FULL FORM
GAT	Gait training
MBZ	Mobilization exercise
CPT	Chest physiotherapy
SPN	Spinal exercise
PVF	Pelvic floor exercise
ROM	Range of motion
MS	Muscle Strengthening
CR	Cardiac rehabilitation

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D. Inpatient Work Process:

Patient in ward

Doctor refers the patient for physiotherapy services

Nurse informs physiotherapist / sends request form to Physiotherapy department

Assessment and evaluation of the patient

Physiotherapy treatment starts after obtaining the consent

Entry Made in Patients' case sheet

Order entry

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E. OUT PATIENT SERVICE: NOT APPLICABLE

F. Treatment modalities

1. Electric Stimulation:

Procedure:

Electrical stimulation is the use of electricity to stimulate nerves and muscles. It is used to accomplish a variety of therapeutic purposes, such as effect on de innervated muscles, innervated muscle and decreased spasm

a. Preparation of the patient:

- i. The part to be treated must be cleaned and free from cuts, rashes or infections
- ii. Inform the patient about the treatment and sensation to be experienced – mild pricking sensation

b. Treatment:

- i. Explain the procedure to the patient
- ii. Place the dispersive electrode on an antagonistic muscle surface and active electrode over area being treated
- iii. Set the intensity based on the muscle contraction

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iv. Duration of the treatment 10 – 20 minutes

c. Precautions:

- i. Use correct type of current for de innervated and innervated muscles
- ii. Equipment should be over mackintosh sheet
- iii. Make sure the intensity knob to be turned to zero prior to turning on the machine

d. Infection control:

- i. Use a new cotton padding for every treatment

2. Exercise Therapy:

Procedure:

Exercise is physical activity in order to improve one's health. Physicians, and physical therapist, have found that exercise plays an important role in the maintenance of brain, nerve and muscle function in the human body. Therapeutic exercises have been designed to enhance a variety of aspects of physical fitness in patients suffering from diseases and dysfunctions. New research suggests that exercise may delay mental deterioration with age and disease.

a. Goals of Exercise therapy

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- i. To improve blood circulation
- ii. To improve co-ordination
- iii. Maintain balance
- iv. To increase muscle power
- v. Joint mobility
- vi. To improve flexibility
- vii. To strengthen the muscles
- viii. To increase respiratory capacity

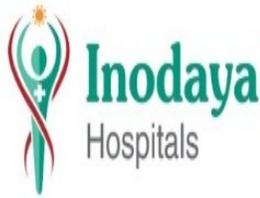
b. Preparation of the patient:

- i. Positioning the patient
- ii. Explanation and demonstration of the exercise

c. Various types of exercise are

- i. Active exercise
- ii. Active Assistive exercise
- iii. Resistive exercise
- iv. Passive exercise & Mobilization
- v. Independence in mobility
- vi. Spinal exercise
- vii. Respiratory exercise
- viii. Strengthening exercise

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- ix. Co-ordination exercise
- x. Postural drainage
- xi. Pre operative exercise
- xii. Post operative exercise
- xiii. Pelvic floor exercise
- xiv. Ambulation exercise

G. Departmental Policy:

1. Qualifications of physiotherapists:

All Physiotherapists should have completed MPT/ bachelors Degree(BPT).

2. Initial Assessment of patient:

An initial assessment of every patient will be entered by a physiotherapist in the patient's case sheet, for inpatient initial assessment must be recorded in the patient's case record.

- a. Initial assessment will include information gathered by the physiotherapist as follows:
 - i. Past medical, surgical history, present history and forms of treatment
 - ii. Doctor provided primary and secondary diagnosis, with onset
 - iii. Patient's current clinical condition
 - iv. Pain assessment

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- v. Muscle power
- vi. Range of motion
- vii. Functional limitations
- viii. Problems of dysfunction
- ix. Activities of daily living (ADL)
- x. Splints used or anticipated
- xi. Treatment plan

- b. All assessment and evaluation must be performed by the physiotherapist. Patient's progress is entered in patient's case sheet as applicable and will exhibit overall response to the initial treatment plan.

2. Safety Measures :

Department Precautions:

1. The physiotherapist is responsible for maintaining safety standards, developing safety rules, supervising and training staff in departmental standards
2. The physiotherapist is responsible for informing facility management services in case of any safety hazard
3. All physiotherapy employees shall report defective equipment, unsafe conditions and acts, or safety hazards to the head of the department
4. Safety measures include:

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- a. Keeping electrical cords clear of passage ways. Avoid using electrical extension cords.
- b. Proper storage of all equipment and supplies. Do not store heavy items on top shelves. Scissors, knives, pins, razor blades and other sharp instruments must be safely stored and used.
- c. Turning off all electric machines with heat producing elements when not in use.
- d. Notification to facility management services immediately of improper illumination and ventilation
- e. Arrangement of furniture and equipment must be arranged to allow passage and access to exit at all times
- f. Giving information regarding minor spills (such as water) to cleaning team by the employee who discovers the spill immediately.
- g. Reporting faulty equipment to the clerk In-charge for equipment maintenance or vendor as per policy.
- h. Obey warning signs.
- i. Usage of appropriate personal protective equipment.
- j. Safety precautions such as closing file drawers and cabinet doors when not in use. Open only one drawer at a time. Even distribution of material to prevent the file cabinet from being unbalanced and tipping over

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- k. Frequently inspect cords, plugs, switches, sockets and outlets for damage. Report any defects such as frayed cords, broken plugs, etc. immediately.
5. Not leaving equipment standing in traffic lanes. Return equipment to its proper location when not in use.
6. Do not obstruct fire equipment. Know location of firefighting equipment and how to use it. Know evacuation routes and what to do in case of fire.

H. Patient Safety:

1. Patient's safety is at all times given highest priority. No action should be undertaken which would knowingly be harmful or potentially harmful to patient
2. All patients shall receive the utmost care and attention from the physiotherapy staffs. All patients shall be assured of their privacy and dignity while on their treatment
3. Explanation of the procedure is provided to the patient regarding their treatment
4. No In patients will be shifted to the physiotherapy department for treatment without an accompanying hospital staff
5. Patients will be lifted correctly, get help when needed. Use mechanical aids when necessary

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6. Be sure that disc and pads are wrapped with towels to prevent accidental burns to the patient
 7. Obtain the necessary assistance to safely aid the patient in ambulating and exercise therapy
 8. Do not leave elderly, pediatric or confused patients unattended on therapy tables
 9. When transporting a patient to the treatment area by wheelchair, take the following safety precautions.
 - a. Lock the wheel brakes or otherwise secure the vehicle in place before moving patient to/from transport
 - b. Prevent the patient from falling by using safety belts or side rails
 - c. Position yourself at the patient's head, push slowly, steadily
- I. **Maintenance of patient's confidentiality:**
1. In the course of performing work responsibilities all information with regards to patient, their family, their physician and / or the hospital will be kept confidential.
 2. Causal comment with fellow co-workers in the hallways, lobby or other place may be overheard and violate the trust others have placed in physiotherapist
- J. **Maintenance of Equipment:**

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1. The following aspects of equipment maintenance are to be ensured :
 - a. Periodic servicing: Service to be conducted by Qualified company Service personals
 - b. Proper technical care to be taken during the maintenance.

Periodic Servicing:

- a. Periodic servicing must be done as instructed by the respective instrument's manual or by the company person. Mention in the equipment history card the date of equipment commissioned and break down during warranty period.
- b. Equipment not working must be tagged "OUT OF ORDER"
- c. Any work carried out by the instrument / equipment's technician or engineer should be recorded in Instrument History card as follows:
 - i. Time spent for servicing.
 - ii. Description of service being carried out
 - iii. Status of equipment after servicing
 - iv. Name of the technician / engineer attended

Logging complaint during Breakdown

- a. First switch off the equipment.

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- b. Inform the clerk in-charge of equipment maintenance and higher authorities.
- c. Raise the work order.
- d. Log complaint to Facility Management Services Department
- e. Display out of order board near the machine.
- f. Log the incident in the History card with time.
- g. Once the engineer has diagnosed the problem inform authorities.

Reports / Register:

Physiotherapy Notes in the case sheet

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