

# Perley Physiotherapy and Massage Clinic

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*Together, we improve the  
well-being of the people we serve*



**Perley Rideau**

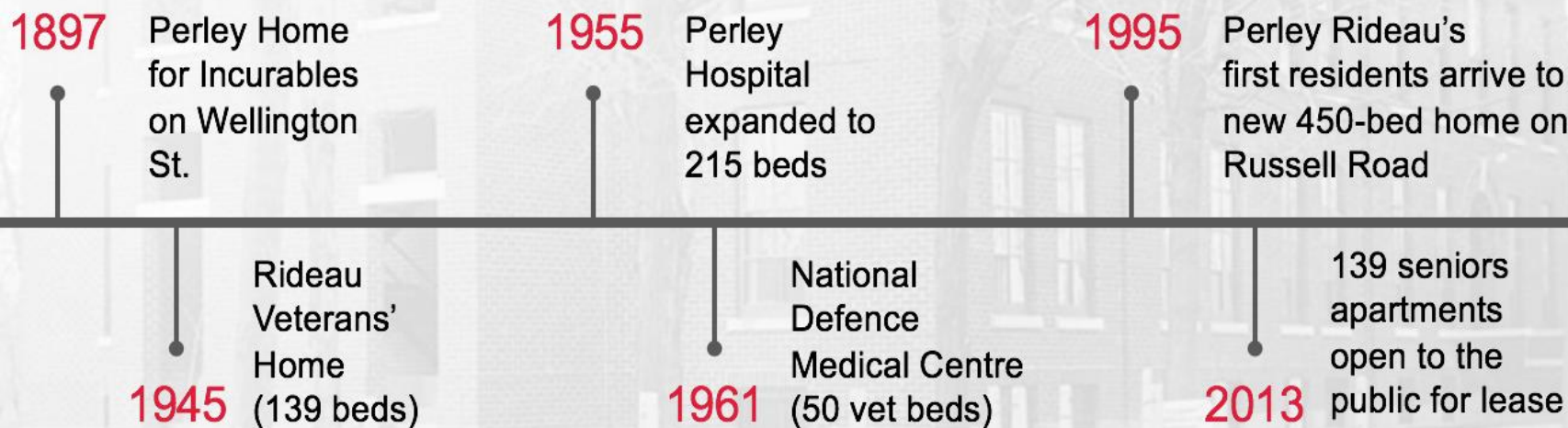
The Perley and Rideau  
Veterans' Health Centre

# Perley Rideau Physiotherapy and Massage clinic (PRPMC)

- Presentation Objectives
  - Perley Rideau Veterans' Health Centre
  - Perley Rideau Physiotherapy and Massage Clinic and its services
  - Why Physio First?
  - Interprofessional Clinic
  - Define professional roles at the IP clinic
  - Explain referral process and access to the Clinic's services
  - Fees



# A History of Adapting



# Physiotherapy at Perley Rideau and Veterans' Health Center

- Inpatient
  - 450 Beds Long Term Care
    - 250 Veterans (mostly WWII)
    - 200 Community residents
  - Physiotherapy for residents:
    - Ministry funded
    - Veteran Affairs
    - Private benefits



# Out-patient Orthopaedic Physiotherapy

Perley Rideau Physiotherapy and Massage Clinic



# Common Conditions

- Neck, back, hip and knee arthritis
- Degenerative disc disease of the neck and low back
- Hip and shoulder impingement
- Rotator strain or tear
- Knee and ankle sprains and strains
- Post-op rehabilitation
- Shoulder and hip bursitis
- Tennis and golfers elbow
- Back sprain/strain
- Disc bulges with and without neurological deficits
- Sciatica
- Piriformis syndrome
- Leg pain and numbness
- Plantar fasciitis
- Ect.



# Disc bulges ( middle back MRI study)

- 73 per cent of **asymptomatic** individuals had positive anatomical findings at one level or more.
- These findings included:
  - Herniation of a disc in 37%
  - bulging of a disc 53%
  - annular tears in 58%
  - deformation of the spinal cord 29%
  - end-plate irregularities or kyphosis 38%



# Degenerative disc disease

- 40% of individuals under 30 years of age had lumbar inter-vertebral disc degeneration (LDD)
- over 90% by 50 to 55 years of age.
- L5–S1 and L4–L5 were the most commonly affected levels.
- Lack of a direct link between degenerative MRI changes and low back pain
- Urges against surgical procedures based solely on MRI findings
- Patient knowledge of imaging findings do not alter outcome and are associated with a lesser sense of well-being.
- Conclusion: Try conservative therapy FIRST



# Rotator cuff tears

- Many MRI studies of asymptomatic volunteers have shown partial or full thickness tears of the rotator cuff muscles
- A study in particular looked shoulder MRIs of 20 overhead athletes and followed them for 5 years.
- Expectation was that because of their extreme use they would have more symptoms during the 5 year period.
- Results showed that 40% of the athletes had partial or full thickness tears of their dominant shoulder but they reported no more issues with their shoulders over the 5 year period than their healthy counterparts.
- Conclusion: MRI results of a tear do not necessarily indicate a surgical repair.
- Try conservative methods first!



# Why would more severe MRI results hurt one person more vs. another and how can PT help?

- We are all different
- We perceive pain and danger differently
- Pain is sometimes just a warning sign and not a sign of harm occurring
- A physiotherapy assessment can help to identify what and why a client is experiencing certain symptoms.
- They can then help normalize the symptoms and calm the central nervous system; which will then allow for work on the actual movement and function of a particular body part without the perception of pain and danger.



# Interprofessional Clinic

The clinic offers :

- Rehabilitation, prevention, and health promotion
- An interprofessional approach
- PT/OT/SLP/Audio pediatric and adult services
- Bilingual services (French and English)

We participate in :

- The clinical education of students from:
  - The School of Rehabilitation Sciences at uOttawa (OT/PT/SLP/Audio)
  - The School of Medicine at uOttawa (MD)
  - La Cité collégiale (OTA/PTA)
  - Other national and international schools
- Research and teaching at uOttawa



# Audiology (pediatric and adult)

## Assessments:

- Complete hearing assessment:
  - Functional integrity of outer, middle, and inner ear
  - Integrity of auditory pathways (ABRs)
- Assessments for Auditory Processing Disorder (APD)
- Decreased sound tolerance assessment (Tinnitus/Hyperacusis/Misophonia)
- Hearing screening in schools of JK and SK students

## Rehabilitation:

- Recommendations for hearing aids and FM systems
- Hearing aid/Assistive listening devices dispensing, fittings, and follow ups
- TRT (tinnitus retraining therapy – applicable to hyperacusis and misophonia)
- Communication and hearing preservation strategies
- Referral to other professions or specialized centers as needed
- APD rehabilitation focused on:
  - Recognizing communication break-downs and barriers
  - Auditory Training
  - Increasing awareness of, and modifying, the acoustic environment
  - Developing auditory, metacognitive, and metalinguistic abilities

## Other:

- Wax Removal



# Occupational Therapy (pediatrics)

## Assessments :

- Motor coordination, vestibular and oculomotor screening
- Attention, sensory processing, anxiety, visual and perceptual skills
- Handwriting and math skills
- Functional activities (tying shoe laces)

## Rehabilitation :

- Cognitive: problem solving, memorization (mental imagery), learning strategies
- Affect/Emotion: cognitive-behavioral and emotional/anxiety management strategies
- Body: sensory (self-regulation) and motor learning



# Occupational Therapy (adult)

## Assessments :

- Arm and hand motor function, fine motor dexterity, pinch and grip strength, sensory screening
- Cognitive screening, memory, attention, visual-perceptual, sensory processing & executive function
- Functional activities – writing, self care tasks, household tasks, leisure activities, home safety assessment

## Rehabilitation :

- Physical: motor learning, mirror therapy, LSVT BIG®
- Cognitive: stimulation activities, compensatory strategies for memory, executive dysfunction, cognitive fatigue
- Return to activity: activity remediation, assistive devices, work tasks, energy conservation/fatigue management, stress/symptom management, occupational scheduling, home safety and equipment recommendations



# Speech Language Pathology (pediatrics and adults)

## Assessments:

- Receptive and expressive language skills
- Cognitive-communication
- Reading (decoding, precision, comprehension) and writing skills (spelling, grammar, text production)
- Speech, oral motor difficulties (i.e. apraxia) and fluency
- Voice and resonance
- Dysphagia or swallowing difficulties

## Rehabilitation:

- Language, speech, and voice therapies
- Literacy and reading comprehension skills
- Spelling and writing skills
- Cognitive approach, visualization, and learning strategies
- Increase independence with assistive technologies
- LSVT LOUD® and LSVT eLOUD® intensive program for Parkinsons



# Stuttering and Fluency Disorders

## Assessments:

- Developmental stuttering: overt characteristics and psychosocial impact on function, activity, and community participation
- Acquired stuttering: neurogenic and psychogenic stuttering following trauma
- Cluttering
- Most common standardized assessment tools:
  - SSI-4
  - OASES

## Rehabilitation:

- Individual, small-group and intensive group treatment sessions
- Adults and adolescents (teen camp, summer 2018)
- Counselling on issues of communication
- Education and training of communication partners
- Partnership with The Ottawa Association of People Who Stutter, a local volunteer-run, self-help group



# Neurologic Physiotherapy ( The Inter-professional clinic)

Assess, and identify particular challenges with movement and/or function. Engage client in interventions designed to address each challenge to improve the outcome.

- Stroke (CVA)
- Head injury (ABI)
- Concussion
- Parkinson Disease
- Multiple Sclerosis (MS)
- Lou Gehrig's Disease (ALS)
- Spinal cord injuries (SCI)
- Other neurological conditions



# Physiotherapy (pediatrics)

## Assessments:

- Bruininks-Oseretsky Test of Motor Proficiency (coordination, balance, speed & agility, strength)
- Functional, play-based, skill-specific assessments
- Respiration and endurance

## Rehabilitation:

- Functional play-based therapy
- In-clinic hands-on treatment to improve movement patterns
- Core strengthening, balance, and gait training
- Sports-specific skills (i.e. bike riding, throwing and catching a ball)
- Education/activity recommendations
- Co-treatments with OT and/or SLP for posture and respiration



# Physiotherapy (adults)

## Assessments:

### Standardized and functional evaluations of:

- Strength & function (MMT, TUG, sit-stand, goniometry)
- Dynamic & static balance (BERG, CBMS, BESTest)
- Gait pattern & endurance (6 Minute Walk Test)
- Posture (Ottawa Sitting Balance Scale)
- Quality of movement (Chedoke McMaster)
- Vestibular function (Dix-Hallpike)

Patients will have regular re-evaluations to ensure progress.

## Rehabilitation:

- Hands-on approach, one-on-one with the physiotherapist for 1hr sessions
- PT works with the patient/caregiver to achieve functional goals (optimizing posture, alignment and quality of movement. Includes home exercise programs and education for families/caregivers).



# Who can refer?

- Self referrals
  - Your insurance may require a Dr referral for you to claim your benefits
- Nurses/physicians
- Other health professionals

## Self/Community Referrals

Referral forms available

Telephone: 613-526-7125

Fax: 613-526-7126

Email: [icadmin@prvhc.com](mailto:icadmin@prvhc.com)



# PRP Fee Schedule

## Physio

- Initial Assessment .....\$100
- Treatment..... \$80
- ADP Walker Assessment.....\$85

## Massage

- 30 minutes: .....\$55 + HST
- 45 minutes: .....\$70 + HST
- 60 minutes: .....\$80 + HST
- 90 minutes: .....\$115 + HST



## Fees Interprofessional Clinic

**Initial Intake**  
\$50

**Evaluation**  
\$130/hour

**Intervention / Consultation**  
30 minutes: \$70  
45 minutes: \$90  
60 minutes: \$110

**Complete Hearing Assessment**  
\$80

**LSVT LOUD® & LSVT BIG® (multi-session package)**  
\$1,750

**Report Writing**  
\$130/hour

**Missed Appointment**  
The rate of intended appointment

## Fee schedule – Mobility Assessment

Assessment	Price	Additional cost	Contact
Walker	\$85		The Perley Rideau Physio and Massage Therapy Clinic 613-526-7175
Standard wheelchair	\$300 (up to 3hrs.)	\$130/hr for each additional hour	Interprofessional Clinic at Perley Rideau Phone: 613-526-7125 Fax: 613-526-7126
Power wheelchair	\$350 (up to 4hrs.)	\$130/hr for each additional hour	
Scooter	\$300 (up to 3hrs.)	\$130/hr for each additional hour	



# Questions?

