

## **CURRICULUM: PHYSICAL MEDICINE AND REHABILITATION**

PM&R involves the management of disorders of the neuro-musculoskeletal system that have resulted in residual disability.

### **Goal and Content**

Provide residents with knowledge, skills and attitudes to:

- assess patients' needs for rehabilitation
- select the appropriate modalities (PT, OT, ST, exercise, et cetera)
- understand the advantages, limitations and contraindications of various rehabilitative interventions
- appropriately refer patients with common neuro-musculoskeletal problems to the appropriate rehabilitative health care team member.

### **Patients**

Patients with common neuro-musculoskeletal system problems that have resulted in residual disability include strokes, post orthopedic operative interventions and recovery from traumatic injuries.

### **Teaching Method**

1. Active participation in "bedside" teaching rounds and patient care in:
  - Geriatric rotations and neurology electives especially
  - Ward and ICU rotations
  - Senior Consultation Service rotations (2<sup>nd</sup> & 3<sup>rd</sup> year)
  - Ambulatory orthopedic electives
  - Resident continuity practices
  - Rheumatology electives
  - Elective rotation: Cleveland Metro General Hospital
  - Physical therapy rounds
2. Conferences:
  - Physical medicine treatment modalities - indications and expectations
  - Rehabilitation health care team members and their roles
  - Preventive measures in rehabilitation medicine
3. Suggested references for self study
  - Geriatric Review Syllabus (current edition)
  - Ham & Sloan Primary Care Geriatrics (pgs 137-159: stroke, hip fx, amputation, deconditioning, arthritis)
  - Basic Internal Medicine text (Beeson, Harrison)
  - Granger CV, Albrecht GL, Hamilton BB: Outcome of Comprehensive Rehabilitation: Measurement by PULSES profile and Barthel index. Arch Phys Med Rehab 1979; 60: 145-154.
  - Goroll's Primary Care Medicine (cardiac Rehab pp183ff)

### **General patient characteristics**

See Introduction

### **Evaluation of rotations and of residents**

See Introduction

## Competencies for Physical Medicine and Rehabilitation

Competency	Learn in a seminar or conference (specify)	Learn as part of clinical rotation (specify)
Know the differences among impairment, disability, and handicap	X	OCC Med, Continuity
Know how to diagnose and manage the common musculoskeletal disorders, including fibromyalgia, myofascial pain, repetitive motion disorders, and overuse syndromes	X	Continuity Practice
Know how to recognize the complications of prolonged bed rest (contractures, pressure sores, deep venous thrombosis, osteoporosis, muscular deconditioning, and others)	X	Geriatrics, Wards, ICU
Be able to describe various physical medicine treatment modalities, including diathermy, ultrasound, electrical stimulation, and others	X	CORE
Know the physiologic effects of aerobic exercise	X	Cardiology, Geriatrics
Know the various types of therapeutic exercise	X	Geriatrics, Neuro
Be able to describe the health care team for rehabilitation medicine and the roles of allied health professionals (for example, physical therapist, occupational therapist, psychologist, speech and language pathologist, prosthetist, orthotist, and others)	X	Geriatrics, NH, physical therapy rounds
Know when to use the various assistive devices that may reduce disability, including wheelchairs, prosthetics, orthotics, and others	X	Neuro, Wards
Know the principles of evaluation and management of chronic pain	X	All rotations
Know the methods for minimizing long-term disability from acute illnesses (for example, prophylaxis against venous thrombosis, bed sores, contractures)	X	All rotations
Be able to assess the effects of impairment on a patient's daily function	X	All rotations

**Illustrative Clinical Settings:** Nursing homes, geriatric unit, rehabilitation center, neurology rotation, rheumatology rotation, and cardiopulmonary rehabilitation unit.