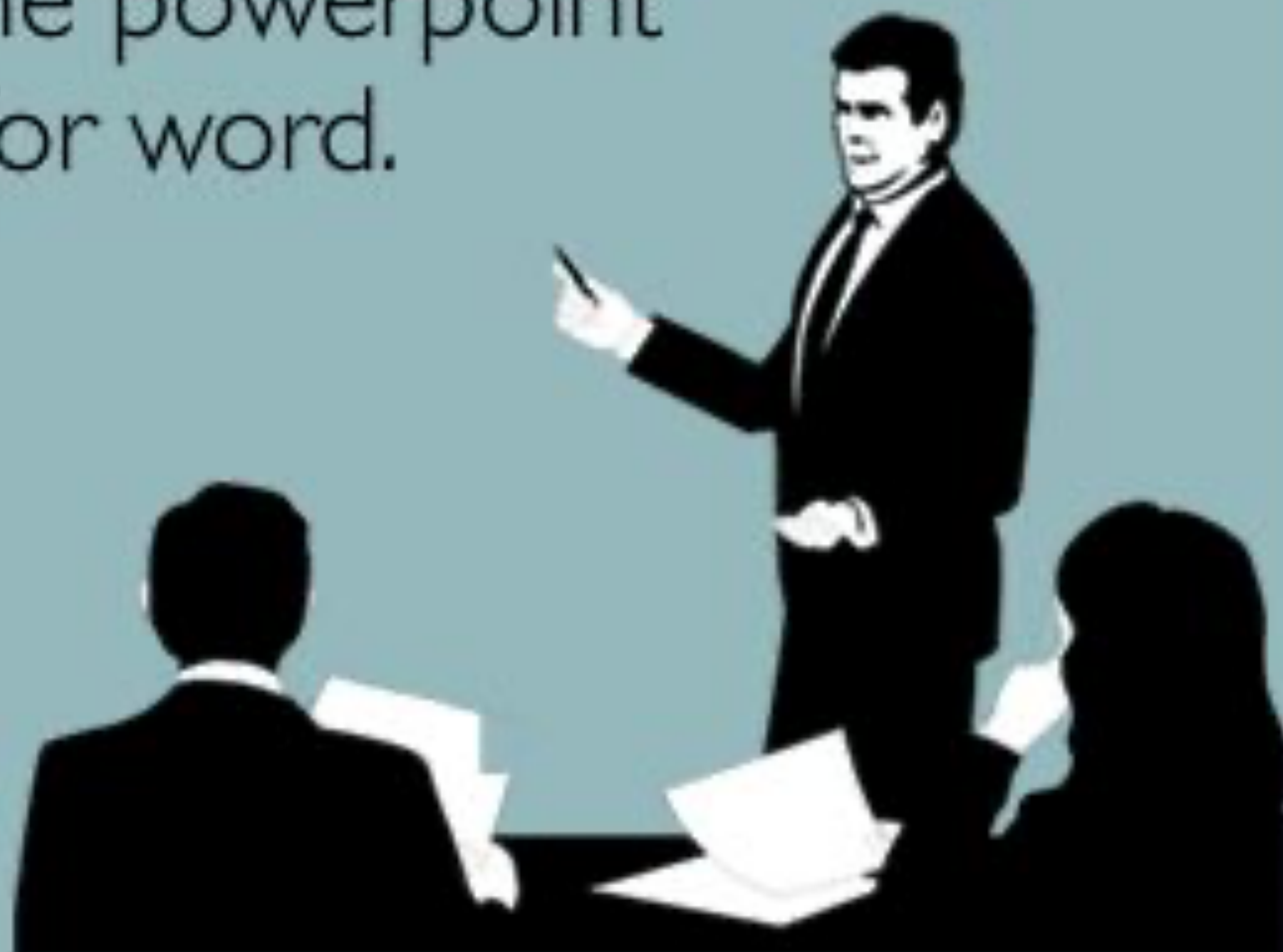


PHYSICAL ASSESSMENTS

AN OVERVIEW AND BREAKDOWN

By Adam Trimble

For my presentation today, I'll
be reading the powerpoint
slides word for word.



GOALS FOR TODAY

- Outline different types of physical assessments in the rehabilitation world today
- Explain what occurs in each assessment
- Describe what the test is actually evaluating
- Discuss the pros and cons of each assessment

TYPES OF ASSESSMENTS

- Multidisciplinary Assessment (MDA)
- Rehabilitation Assessment (RA)
- Activation Assessment (AA)
- Functional Capacity Evaluation (FCE)
- Functional Abilities Exam (FAE)
- Independent Medical Exam (IME)
- Medical Assessment (MA)

Picking The Correct Assessment

In order for an assessment to be successful, what has to be considered?

- What do you want to know?
- What outcomes are you looking for?
- How soon do you want the information?
- What will my client agree to?

MULTIDISCIPLINARY ASSESSMENT

- Typically involves a Physician, Athletic Therapist or Physiotherapist, and an Occupational Therapist
- Detailed history with AT or PT, medical exam with physician, functional work-related testing with an OT
- Average time in clinic is two hours

Information gathered as a result of the assessment:

- Detailed history
- Diagnosis, Prognosis, Treatment recommendations and possibly restrictions and limitations for a return to work with physician approval
- Overview of functional abilities

- Pro's - detailed assessment, medical opinion, overview of functional abilities, provides ideal information to set up for proper rehabilitation
- Con's - functional data is somewhat limited, medical opinion (you could get more information than you want)
- Best used for cases where a medical opinion is required for direction/clarification along with the need for some functional data regarding the client, this is typically used to set up for further physical rehabilitation (reconditioning/work hardening), and/or to start the RTW process

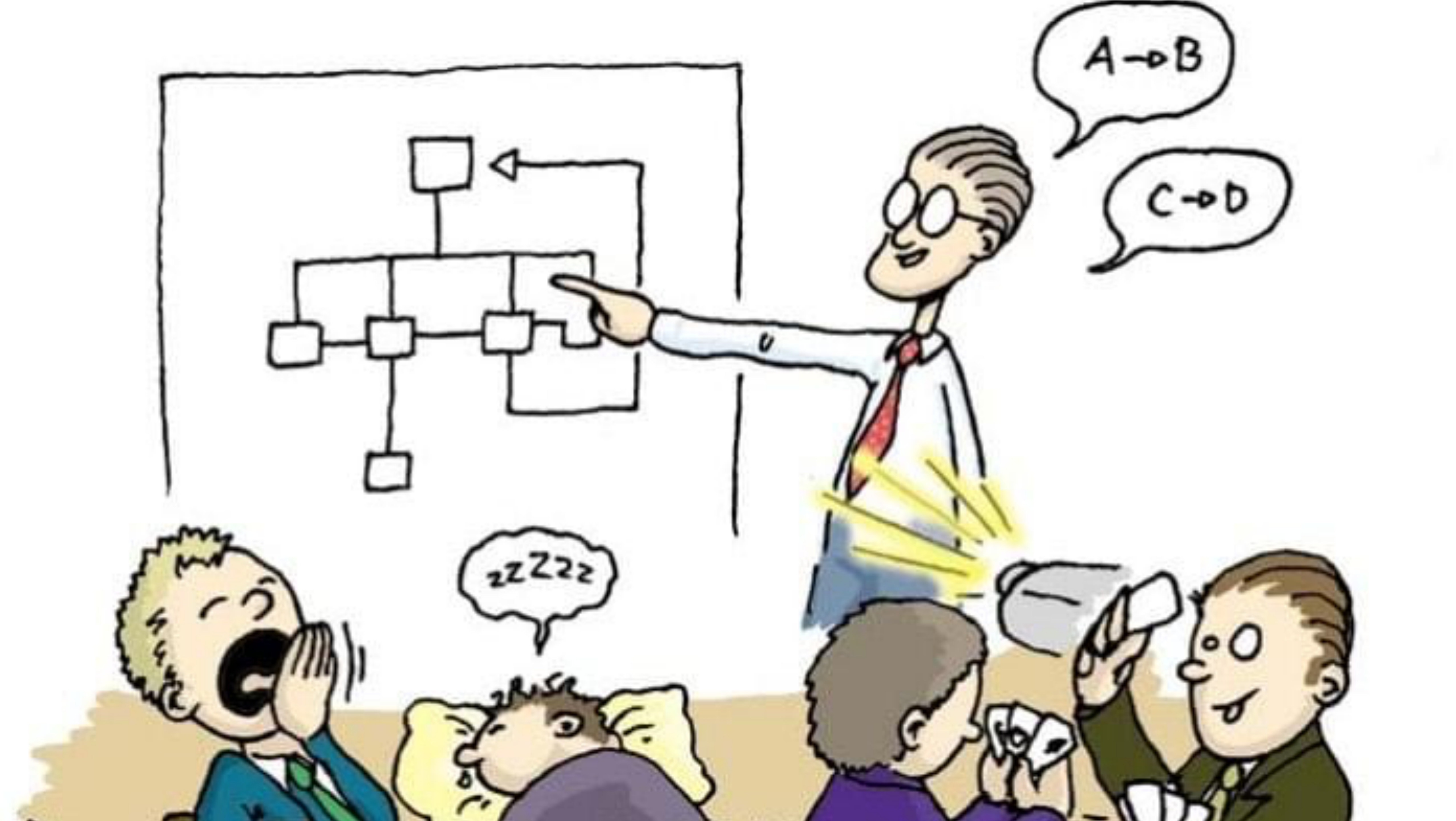
REHABILITATION ASSESSMENT

- Typically involves an Athletic Therapist or Physiotherapist and an Occupational Therapist
- Detailed history with AT or PT, orthopaedic exam with the AT or PT, functional work-related testing with an OT
- Average time in clinic is two hours

Information gathered as a result of the assessment:

- Detailed history
- Diagnosis, Prognosis, Treatment recommendations and possibly restrictions and limitations for a return to work
- Overview of functional abilities

- Pro's - detailed assessment, overview of functional abilities, provides ideal information to set up for proper rehabilitation ie. reconditioning or work hardening programs or return to work planning
- Con's - functional data is somewhat limited, no medical opinion
- Best used when there is a fairly clear opinion that rehabilitation or a return to work is warranted and you want to set up a physical rehabilitation plan or GRTW plan



ACTIVATION ASSESSMENT

- Typically involves a Athletic Therapist or Physiotherapist,
- Detailed history with AT or PT, orthopaedic exam with AT or PT, general fitness testing with AT or PT
- Average time in clinic is one hour

Information gathered as a result of the assessment:

- Detailed history
- Diagnosis, Prognosis, Treatment recommendations
- Overview of the client's general abilities and fitness level (functional work-related testing not normally completed in this assessment)

- Pro's - general assessment to help to ensure good knowledge for the team about the clients overall ability, provides ideal information to set up for activation/exercise programs, relatively inexpensive, provides client with structure and routine to their day/week with less intensive programming
- Con's - no functional data, no medical opinion, not a good assessment for return to work readiness
- Best used for clients that are in need of support in improving some function and adding structure and routine to their week, client's may have both a physical and non-physical ailment and the activation program can help with both issues. Can also be used as a precursor to reconditioning.

Functional Capacity Evaluations (FCE)

- A FCE is a systematic method of measuring an individuals' ability to perform meaningful tasks on a safe and dependable basis
- Different types or systems on the market, Matheson, Arcon, Metriks, Blankenship, etc.
- Takes place over 6 to 7 hours per day
- 1 day and 2 day FCE's are most common (occasionally 3 to 5 days)

A “typical” FCE will contain the following parts. Arrangement of these parts will vary depending upon the examiner and the client

- 1) Intake/History
- 2) Musculoskeletal Screening
- 3) Reliability of Pain and Disability Reports
- 4) Dexterity Testing
- 5) Metabolic Endurance Testing
- 6) Mobility
- 7) Physical Effort Testing
- 8) Material Handling
- 9) Work simulation/Work Circuit

THE BIG PICTURE

An FCE can be broken down into 3 parts:

- 1) Observable Function and Extrapolated Function
- 2) Physical Effort
- 3) Reliability

- Pros - detailed assessment of client's overall total function, provides information on maximum strength, endurance, and positional tolerances, statements about clients ability to return to the workforce at a specific level, specific restrictions, may be more defensible than some other assessments (IE - MDA, FAE, Medical Assessment)
- Cons - lengthy assessment, clients can have difficulty performing activity for an entire day, could provide more information than what you need
- Best used when determining return to work readiness and at what level, sometimes used to determine if they qualify for long term disability

FUNCTIONAL ABILITIES EXAM (FAE)

- A FAE is a systematic method of measuring an individuals' ability to perform meaningful tasks on a safe and dependable basis
- Takes place over 3 to 4 hours per day
- Both 1 day and 2 day FAE's are available

- The typical FAE includes most of the same components of an FCE but occludes a work simulation
- Parts of testing can be emphasized if there are concerns about certain aspects of a clients function such as dexterity, mobility, gripping, etc.

- Pros - detailed assessment of client's function, provides information on maximum strength and general function, shorter assessment which should equal better client agreeability
- Cons - limited information on endurance and positional tolerance, more extrapolation required to determine client's ability for full day work, less defensible?
- Best used when wanting to confirm return to work readiness for a client or tolerance for a specific task

STAY STRONG

IT'S ALMOST OVER

INDEPENDENT MEDICAL EXAM

- Thorough medical assessment used when trying to clarify a diagnosis or determine the reason for prolonged recovery
- Helpful when the medical history is complicated and requires deciphering or someone to “pull it all together”
- Generally speaking these are larger files and take a significant amount of time to review
- Assessment times range from 1 to 2 hours
- Usually answers a number of questions such as diagnosis, prognosis, current level of function, restrictions and limitations, the ability to return to the work force, if any tests should be ordered and if so what, rehabilitation goals and plan suggestions etc.

- Pro's - provides answers or directions to the majority of inquiries that someone may have about a client and how to help them move forward
- Con's - can be expensive (Large file, Legal File), limited functional information
- Best used for complicated and/or large files that require multiple medical questions to be answered to help with rehabilitation planning

MEDICAL ASSESSMENTS

- Assessment with physician to provide some further clarity or an opinion about a singular issue
- Normally a relatively straight forward file that has minimal documentation, up to an inch thick depending on medical
- Typically 3 to 4 questions, the insurer hopes to learn the diagnosis, prognosis, do they require other testing, rehabilitation plan, and/or if they can undergo reconditioning/work hardening or functional testing

- Pros - can be a useful tool as it can be tailored and modified to fit the insurer's needs and provide a medical opinion at a relative modest cost
- Cons - less extensive examination and opinion as an IME, limited functional data
- Best used when there are a few questions that should be answered by a physician

Questions/Comments?