Clinical Observation Reflection

Due to my full time work scheduled, plus the extra work hours I had to put in so I could leave for my PTA 1010 class during my work hours, I managed to find time to observe and fulfill my twenty hour observation requirement for the class. At first I thought it would be difficult seeing as I work 9-5 and that’s usually the main hours for all clinics, but then I realized that there are people out there that work 9-5 that still need Physical therapy. I made a few calls and was set up with several different clinics to fulfill my observation time.

 There were a total of four different settings I went to, to observe. I wanted to start as soon as possible to make sure I had enough time to get all my hours in before the end of the class. My first setting was with a Home Health Physical therapist, next I went to an outpatient clinic called Performance west, another outpatient clinic called Sportsmed and then an orthopedic rehab called Orchard Cove. At first I got a little overwhelmed with so many clinics, but in the end I was grateful. I saw four different settings where I’m sure most of my peers only saw one. I learned something new at each different location. I noticed how the different environments affected the patients and employees. I spent most of my time at Performance West and Sportsmed, I would alternate these two clinics by going in the morning to one and going to the other in the afternoon. I took a full day off work and spent the day with Mike PTA at Orchard Cove Rehabilitation who also graduated from Salt Lake Community College’s PTA program.

 I have always had the mind frame of working with a Home Health company as soon as I graduated as a PTA, but now I’m not quite so sure. I do love the fact that I can go into a patients’ home and treat them where they feel safe and comfortable. I thought it was very interesting the different ideas, David PT, came up with to test the patients balance and gait training. At my first visit with David, the patient had been recovering from a total knee replacement, he was walking great but he was still using a walker and David’s goal was to get him walking by a certain time, without the walker. We warmed up with a walk up and down the street, next we did some stretching and home exercises. David didn’t coach much, but rather worked the patients’ memory to see if he could remember what the exercises were, so that the patient could do them when he is on his own. After that, David had the patient do some step-ups with his new knee. This was difficult for the patient as he didn’t have much strength with his new knee, but this exercise helped with the motion and regain strength. One thing that I did notice, is that David didn’t do as much stretching and working with the joints as the other therapist did in the other clinics. At our second visit, which I thought was very interesting, was his gait training. We started out with a walk again, to warm up, then in the patients’ home, David put a gait belt around the patient and with an exercise band tied to the gait belt, David would pull the exercise band from side to side as the patient would walk. Next, David would walk behind the patient while adding resistance to the exercise band, pulling the patient as he tried to walk, then he would have the patient walk backwards all while trying to keep his posture straight. The patient wanted to look down at his feet as he would walk sideways, and back and forth, David would correct this by saying “that was great, but keep your head up and look straight”, David told me to watch what you say to the patients, if they do something incorrect, you tell them great job for doing what they did, but make little corrections to help with posture or motion. I thought David was very cleaver to carry out his exercises with such little equipment that he had.

 Orchard Cove Rehab I enjoyed very much. I liked the fact that the patients are staying there and you see them on a day-to-day basis rather than twice a week. This clinic contained more elderly people whereas the other two clinics had an array of ages. While I observed Mike PTA for the day, we dealt mostly with total knees. I also liked this clinic because Mike showed me the care plans for each patient whereas the others did not. Mike uses the SOAP acronym to chart, which we talked about in class. Mike was kind and very involved with his patients. He was the only PTA I observed and he definitely made me realize that PTA is the place for me. It was nice to see his side of things instead of a PT’s. Mike did a lot of balance exercises, he would have the patient stand on a foam pad and throw bean bags into a crate. He would have the patient change foot positions; feet together, feet apart and feet staggered. I watched as Mike performed manual therapy on a patients’ knee. The knee was swollen, he told me it was to activate the muscles and move the fluids around. Unlike the visits I observed with David, Mike did more measuring with a goniometer as well as stretching.

The last two clinics, I’d say, had more in common with each other than Orchard Cove and Home Health. At both clinics they had patients starting as young as 16 years old to 50 or older. Sportsmed had little to no equipment compared to Performance West. As I was discussing my observation with Bob Larsen PT at Sportsmed, he said because the movements and motions they have their patients do at Sportsmed recreate movements that a person would do in a sport, it is more sports illustrated. At Performance West, if a patient wasn’t on a machine, they were getting worked on by the PT or receiving ice or heat. As I would go between Sportsmed and Performance West, I noticed that at Sportsmed would always use Electrical Stimulation with ice, where at Performance West they used a lot of Laser Light Therapy and little Electrical Stimulation. Stu PT, told me he didn’t use E-Stim very often because it doesn’t rid of the pain. The patient may have little to no pain while receiving ice and Electrical stimulation, but once off of the therapy, the pain returns. He sees little use for it and Bob PT at sportsmed, thinks it is a great way to help heal the patients’ injury, Bob uses this on all of his patients.

The day we learned about the APTA and had our assignment on it, it got me interested more about the APTA. I asked the Therapists at Performance West if they were members, and of course they are. Stu PT told me that it was a requirement to have it to work at Performance West, where one of the owners, Cutis B. Jolley is the President of the UAPTA. Stu mentioned that he has been to several conferences and one of them he was able to share some of his research he had been working on, which I thought was pretty cool!

Doing these observation hours and spending time in O.P., Orthopedic rehab. and Home Health has reaffirmed my decision to become a PTA. I love being hands on with patients and building a relationship with them where they trust me and I help them return to their pre-surgical or pre-injury state. To be completely honest, at times it seemed a little boring because I wasn’t hands on at the clinics, mainly because I didn’t want to get in the way, I didn’t want to injure a patient or ruin their equipment, and the PT and Performance West said it would be best just to watch. However, I got more interested and had more fun the more I learned in class, I could take my questions to the clinics and they would either how me or discuss my questions with the patients. I thought everyone, at all of my settings, were very professional and ethical. No patient was left unattended or mistreated. There was a little problem at Performance West, where a patient was assigned to a specific PT. Well that PT had a student that helped her with her patients and this specific patient wasn’t happy with that. Once the Complaint was made, the student acted very calm and understanding, he got the PT and they both, as a team, talked with the patient and told her why the student was working with this specific patient. The patient wanted the PT, so the student and the PT worked it out to make the patient happy and the patient was to see only the PT. They handled this situation with professionalism and maturity.

I’m grateful I was able to observe and get a little more intake of what I’m getting myself into. It also made me realize how much other components play a part of the profession as well as experience.