

# PHYSIATRY - DEFINED



REHABILITATION OF NEUROMUSCULOSKELETAL DISORDERS

# PHYSICAL MEDICINE AND REHABILITATION 'PHYSIATRY' EVALUATE AND TREAT NON SURGICALLY

- spine
- brain
- nerve
- muscle
- soft tissue
- joint
- Amputations
- Burns

# ‘PHYSIATRY’

## EVALUATION

- Detailed history to define mechanism of injury
- Examination
- MSKUS
- MRI
- X-ray
- EMG
- Clinical data from PT, OT, ST
- Clinical data from specialists

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## ACCURATE DIAGNOSIS

- Effective treatment depends on defining the pain generator
- Analysis of the mechanism of injury

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## TREATMENT

- Multidisciplinary - PT, OT, ST, AC, MT, TherEx, Yoga, Pilates, Modification of home and work activities
- Interventional treatments- EDSI, RFL, SIJ
- Pharmacological - NSAID's, Acetaminophen , neuroleptics
- Return to activity



# SPINE CLINIC vs PAIN CLINIC

- Spine clinic - evaluated and treated in a multidisciplinary team approach
- Pain clinic - can be Physiatry or Anesthesiology directed clinic to manage pain medications and direct and perform interventional procedures as well as direct long term management of chronic pain

# SPINE CLINIC

- Initial intake review by RN or coordinator
- Reviewed by Physician (Spine Surgeon)
- Directed to either Surgery, Physiatry or Pain Man
- Majority non surgical
- 80% physiatry
- Psychology

# PAIN CLINIC

- Evaluate and manage pain medications
- Perform interventional procedures
- Referral to therapy and post injection treatment
- Spinal cord stimulators



# GOALS

- Treat the correct diagnosis
- Find a treatment program that does not include narcotics
- Successful treatment - Reduced desire for narcotics
- Return of function - ability vs disability mentality
- Regain self esteem



THE ROAD TO SUCCESS  
IS RARELY EASY

