Novel Model of Care for the Person with Multiple Sclerosis: Physical Therapist in the Neurology Office

Allyn Danni PT, NCS, ATP, MSCS
Lehigh Valley Health Network, Allyn.Danni@lvhn.org

Sandra M. Tremblay PT, MS, CWS, MSCS
Lehigh Valley Health Network, Sandra.Tremblay@lvhn.org

Follow this and additional works at: http://scholarlyworks.lvhn.org/medicine
Part of the Medical Sciences Commons, and the Physical Therapy Commons

Published In/Presented At

This Poster is brought to you for free and open access by LVHN Scholarly Works. It has been accepted for inclusion in LVHN Scholarly Works by an authorized administrator. For more information, please contact LibraryServices@lvhn.org.
Novel Model of Care for the Person with Multiple Sclerosis: Physical Therapist in the Neurology Office

Allyn Danni, PT, NCS, ATP, MSCS; Sandra Tremblay PT, MS, CWS, MSCS
Lehigh Valley Health Network, Allentown, Pennsylvania

Description:
In support of the multidisciplinary care provided in our Multiple Sclerosis (MS) Center of Excellence, Lehigh Valley Health Network (LVHN) Rehabilitation Services has introduced a Physical Therapist (PT) as a member of the Neurology office team.

The PT partners with the Neurologists and physician extenders to provide direct patient care, consultation, education, and facilitation of referrals to all Rehabilitation Services disciplines and providers.

Model:
The PT interacts with the Neurology Team and patients in a variety of ways, depending on the needs of the provider, patient and family:

- At the office visit, either before, during or after the provider interaction
- Resource for patient phone inquiries or follow-up
- Communication liaison between the Neurology office team and Rehab Services providers
- Integral part of multidisciplinary events and meetings

Referral Patterns to LVHN Rehab Services

Utilization Chart

<table>
<thead>
<tr>
<th>Presenting Problem</th>
<th>Screen</th>
<th>Intervention</th>
<th>Possible Referral</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gait dysfunction</td>
<td>Fall risk assessment, Gait analysis</td>
<td>Gait training, Assistive device trial, Safety education</td>
<td>PT, OT, OTT, PWS</td>
</tr>
<tr>
<td>Functional mobility deficit/stepping issues</td>
<td>Wheelchair mobility screen</td>
<td>Education, Communication with DME supplier, Wheelchair clinic</td>
<td>OT, OTT</td>
</tr>
<tr>
<td>Swallowing/speech dysfunction</td>
<td>Interview/patient/family</td>
<td>Education</td>
<td>OTT</td>
</tr>
<tr>
<td>ADL dysfunction</td>
<td>Dressing, Grooming, Bathing, Housework tasks</td>
<td>Education, Adaptive equipment trial, Home safety evaluation</td>
<td>OTT</td>
</tr>
<tr>
<td>Pain</td>
<td>Orthopedic evaluation</td>
<td>Education, HEP</td>
<td>PT, OTT, OT</td>
</tr>
<tr>
<td>Newly diagnosed</td>
<td>Lifestyle, Fitness presenting deficits</td>
<td>Education, HEP</td>
<td>PT, OTT, OT</td>
</tr>
</tbody>
</table>

![Utilization Chart](https://example.com/utilization_chart.png)

Benefits of Novel Model Of Care

**PROVIDER:**
- Can focus on medical management
- Has resources for all rehab questions
- Has improved communication with rehab providers

**PATIENT:**
- One office visit can address both medical and functional issues/changes
- Encourages establishment of therapeutic partnership

**REHAB SERVICES:**
- Improved utilization of rehab services
- Improved provider/rehab communication
- Ability to chronic disease progression and provide early intervention

Conclusion:
The multidisciplinary team caring for the MS patient population functions most effectively in an integrated model of care. The physical therapist has proven to be a valuable part of the medical office team.

Per qualitative feedback, use of the Novel Model of Care has resulted in:

- Improved physician satisfaction
- Improved patient satisfaction
- Improved, more appropriate utilization of Rehabilitation Services with partner facilities.

© 2013 Lehigh Valley Health Network