



Uploaded to the VFC Website

▶▶▶ November 2014 ◀◀◀

This Document has been provided to you courtesy of Veterans-For-Change!

Feel free to pass to any veteran who might be able to use this information!

For thousands more files like this and hundreds of links to useful information, and hundreds of "Frequently Asked Questions, please go to:

[Veterans-For-Change](#)

If Veterans don't help Veterans, who will?

Note:

VFC is not liable for source information in this document, it is merely provided as a courtesy to our members & subscribers.





PHYSICAL MEDICINE AND REHABILITATION FACT SHEET

Physical Medicine and Rehabilitation Services (PM&RS) is a direct service provider and a consultative service that provides medical and rehabilitative preventative strategies and acute and chronic management of disorders that alter functional status. This treating specialty emphasizes restoration and optimization of function through physical modalities, therapeutic exercise and interventions, adaptive equipment, modification of the environment, education, and assistive devices.

ORGANIZATIONAL STRUCTURE

The organizational structure of PM&RS varies system-wide. Physiatry (PM&R) physicians typically lead core rehabilitation services. Physiatrists specialize in diagnosing, treating, and directing an interdisciplinary rehabilitation plan for individuals with acute and chronic disability and pain to maximize the patient's functional status.

Other core PM&RS disciplines include physical therapy (PT), occupational therapy (OT), and kinesiotherapy (KT).

Physical therapists diagnose and manage movement dysfunction and enhance physical and functional abilities.



(Photo Courtesy of Ann Hamilton)

Movement disorders physical therapists treat include impairments of the musculoskeletal, cardiovascular/pulmonary, neuromuscular and integumentary (skin) systems.

Occupational Therapists provide evaluation and treatment in areas of self-care, work and productive activities, and play/leisure activities to achieve outcomes that support Veterans' participation in their everyday life occupations.



(Photo Courtesy of Mitch Mirken)

Kinesiotherapists provide services to Veterans and Servicemembers through the application of

scientifically based exercise principles adapted to enhance the strength, endurance, and mobility of individuals with functional limitations.

NATIONAL STAFFING LEVELS

FY 2011 Onboard Employees:

Professional Discipline	All Cost Centers
Occupational Therapy	1,065
Physical Therapy	1,553
Kinesiotherapy	347
Physiatry	600

POPULATION SERVED

The population served by PM&RS consists of Veterans and Active Duty Servicemembers who range from young adult to geriatric, with a wide spectrum of neurological, orthopedic, medical, psychological, and surgical conditions.





Special populations include age-related disability, stroke, spinal cord injury, brain dysfunction or traumatic brain injury (TBI), orthopedic injury and dysfunction, and amputation.

Services are provided in PM&R based clinics and inpatient units, including specialized programs for Drivers Training, Polytrauma, Brain Injury, Assistive Technology, Pain Management, Telerehabilitation and Amputation care.



(Photo Courtesy of Ann Hamilton)

OUTPATIENT AND RESIDENTIAL REHABILITATION PROGRAMS

Patients throughout the continuum of care settings often need rehabilitation services, including outpatient and residential services, to improve their functional status.

Referrals to rehabilitation services may originate from a range of sources, but regardless of the origin of the rehabilitation referral, the patient will be evaluated for the most appropriate rehabilitation

treatment plan of care based on their specific needs.

In FY 2011, PM&R providers (physicians and therapists) treated over 850,000 unique patients, which accounted for over 4.5 million total encounters.

INPATIENT REHABILITATION PROGRAM

Patients who require the intensity of medical and rehabilitation services that can only be provided at an inpatient facility are admitted to a Comprehensive Integrated Inpatient Rehabilitation Program (CIIRP).

The CIIRP services are goal oriented, comprehensive, patient-centric inpatient care designed to optimize functional recovery after an acute illness, injury, or exacerbation of a disease process.

Structured, interdisciplinary, inpatient rehabilitation care is provided at one of 43 VA Commission on Accreditation of Rehabilitation Facilities (CARF) accredited facilities nationwide.

While the delivery of expert and compassionate care by the rehabilitation team working in concert with the patient and their family is the mainstay of rehabilitation, inpatient care offered in the VA also includes high technology monitoring, complex diagnostic procedures, and state-of-the-art evidence based

treatment protocols. A second level of inpatient services, subacute rehabilitation is also available at multiple sites (special parts of acute care hospital and CLCs), specifically designed to provide rehabilitation therapies for individuals who have a lower level of tolerance for exercise and activity, but still require the holistic, interdisciplinary approach in an inpatient setting.

Subacute rehabilitation care is generally more intensive than traditional nursing facility care and less intensive than acute inpatient rehabilitation care.

- Nearly 4600 inpatients are admitted annually to acute rehabilitation units
- Average length of stay for inpatient is 19 days, with 85% of patients discharged to the community for ongoing care.

