



A Physical Therapist's Role in Industry





Lowcountry Therapeutic Consultants

- We are a mobile Physical Therapy company that can provide onsite or clinic first aid and/or therapy services. Our mission is to work cooperatively with your health and safety team to decrease your health care expenditures by limiting the use of your worker's compensation insurance.

Why a Physical Therapist?

- We can reduce a companies' medical costs by reducing their work-related injury rates
 - OSHA recordable events and worker's compensation claims.*
 - Less events = lower EMR
- We are musculoskeletal experts!
- We can provide First Aid.
- We can provide preventative services. It is a win-win for the workers and their companies.
 - EARLY INTERVENTION

*The average work comp injury cost for a back injury is around \$39,424 (NCCI 2015-2016)

What is Early Intervention?

- Addressing early signs and symptoms of a musculoskeletal disorder
 - “catching” the problem before it becomes a problem

Aching and
Fatigue
Symptoms go
away with rest

Pain, ache, fatigue
Symptoms present
at work and home
Sleep disruption

Pain, ache,
fatigue; even at
rest
Not able to work
Difficulty Sleeping

Signs of Musculoskeletal Injury

- Tenderness at a specific point
- Swelling or warmth
- Bruising
- Reduced range of motion
- Comparative weakness (right vs. left)
- Special tests associated with body part (i.e., Tinel Sign, Phalen Sign, Finkelstein Test)

What is NOT First Aid?

- Physical therapy such as prescribed exercise, use of most modalities, manipulation, or mobilization unless it is part of your diagnostic assessment.
- However, if your company has a preventative stretching or exercise wellness program in place, we can refer them to that for exercises.

LIST OF FIRST AID TREATMENTS: 1904.7 (5)(ii)(A)-(N)

Using a non-prescription medication at nonprescription strength

Administering tetanus immunization

Cleaning, flushing or soaking wounds on the surface of the skin

Using wound coverings; bandages, Band-Aids™, gauze pads, etc.; or using butterfly bandages or Steri-Strips™

Using hot or cold therapy

Any non-rigid means of support, such as elastic bandages, wraps, non-rigid back belts, etc.

Temporary immobilization devices while transporting an accident victim (e.g., splints, slings, neck collars, back boards, etc.)

Drilling a fingernail or toenail to relieve pressure, or draining fluid from a blister

Using eye patches

Removing foreign bodies from the eye using only irrigation or a cotton swab

Removing splinters or foreign material from areas other than the eye by irrigation, tweezers, cotton swabs, or other simple means

Using finger guards

Using massage

Drinking fluids for relief of heat stress

So what can a PT do?

- Full evaluation
- Provide ice or heat
- Use soft supports and finger splints. Braces with any metal stays will trigger an OSHA recordable.
- **Massage, Myofascial Release or Active Release, Astym or Graston**
- **Use of taping – Kinesio, McConnell, athletic, ace....**
- **Education: Anatomy, Precautions, Self Help Care, Ergonomics, Posture etc.**
- Refer client back to preventive workplace stretches if company has it in place

So what can a PT do?

- Recommend use of OTC medications like Ibuprofen, if appropriate
- Perform first aid wound care
- **Recommend self-limiting precautions to worker and safety representative**
 - We can counsel a worker and the safety professional/company contact on what activities will aggravate the injury and recommend the worker avoid those activities.
 - Example: We don't give lifting restrictions – but we can recommend the worker avoid lifts that involve forward bend.

How are our treatments different?

- Hands on treatment such as massage or active release technique is very effective in reducing muscle tightness, improving ROM, and reducing pain.
- Ergonomic training is effective in preventing further injury and allows the worker to continue at full duty
 - Onsite workstation evaluation
- Kinesiotaping is highly effective in reducing inflammation and providing support to an area without impeding motion.





This is NOT kinesiotaping!



Injured Worker presents with musculoskeletal concerns

Screening Assessment

Work Station Evaluation

Mild Symptoms with no Positive Physical Findings

Proceed with First Aid

Work Conditioning

**NON
RECORDABLE**

Moderate/Severe Symptoms OR
Symptoms with Positive Findings

Plausible Injury

Proceed with
First Aid

**NON
RECORDABLE**

Refer for further
treatment

RECORDABLE

Early Intervention Example

- Wielder started complaining his wrists get fatigued throughout the day. Reported it's better once he gets home. Says it doesn't stop him from doing his job or working, but it is bothersome and he is worried it will get worse.
- EARLY INTERVENTION – Workstation assessment
 - Due to height of table, worker has to frequently over flex his wrists to hold tool at right angle to perform job
- Work conditioning – Work on wrist strengthening and changing height of table and/or position of tool to decrease wrist flexion
- NOT a recordable incident and injury was prevented

PT License Restrictions

- In SC, a Physical Therapist can treat a client for 30 days without a doctor's referral.
- There are no restrictions for performing preventative assessments, work conditioning programs, etc.
- The Labor Commission requires "First Notice of Injury" be recorded and turned in by the employer.

HIPPA

- We are required by law to protect peoples privacy. If it is a workplace injury – we are allowed to tell the workplace contact the following:

1. The diagnosis
2. Whether the worker would benefit from first aid services
3. Whether the person is improving or not as visits progress.
4. Self-limiting activity recommendations

No other personal or medical history can be discussed with the employer (exception is if there is a medical staff), unless we are authorized by the employee.

Recordable vs. Non-Recordable

● Recordable

- Days away from work
- Restricted work or transfer to another job
- Medical treatment beyond first aid
- Significant injury or illness diagnosed by a licensed health care professional, even if it does not result in any of the above

● Non Recordable

- For assigned work restrictions or transfer to another job
- – No if the following are met:
 - The employee experiences minor musculoskeletal discomfort, and
 - **A health care professional determines that the employee is fully able to perform all of his or her routine job functions, and**
 - The employer assigns a work restriction to that employee for the purpose of preventing a more serious condition from developing
- For customized/specific stretching or strengthening for an individual
 - Work conditioning – “pre-injury”

OSHA guidelines

- Steroid injections are commonly used for strains/sprains *RECORDABLE*
- Prescription for medication *RECORDABLE*
 - OTC meds taken at OTC strength *NON-RECORDABLE*
- X-rays are *NON-RECORDABLE*
- If someone appears to have a strain or sprain with no neurological symptoms and are able to perform normal activities, a PT can probably treat them with first aid care *NON-RECORDABLE*

Preventative Programs

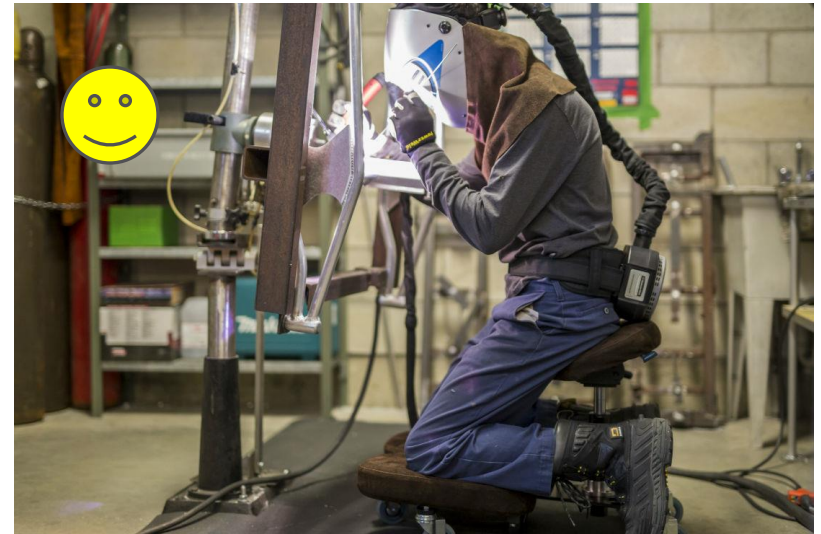
- Ergonomics Assessments – simply put, WE KNOW FORM! It's our job!
 - We can perform assessments in the workplace and determine if set-ups and work stations create high injury risk.
 - We can educate on ergonomics – lifting, reaching, carrying, push/pulling, etc.



“Suspending your keyboard from the ceiling forces you to sit up straight, thus reducing fatigue.”

Ergonomic Assessments

- Some things we look for
 - Heights of workstations, body mechanics, fall hazards, efficiency of set-ups, repetitive motion
- Some cost effective solutions
 - Raising monitor heights, altering body mechanics, changing positions of set-ups to reduce twisting, alternating tasks to reduce repetitious movements



Preventative Programs

- Workshops/Lunch and Learns*
 - We can provide education on many health related topics that are injury risks
 - Heat/Cold Stress
 - Preventing Low Back Pain
 - Body mechanics
 - General wellness/nutrition
 - Establish Exercise/Stretch programs

These can reduce insurance rates

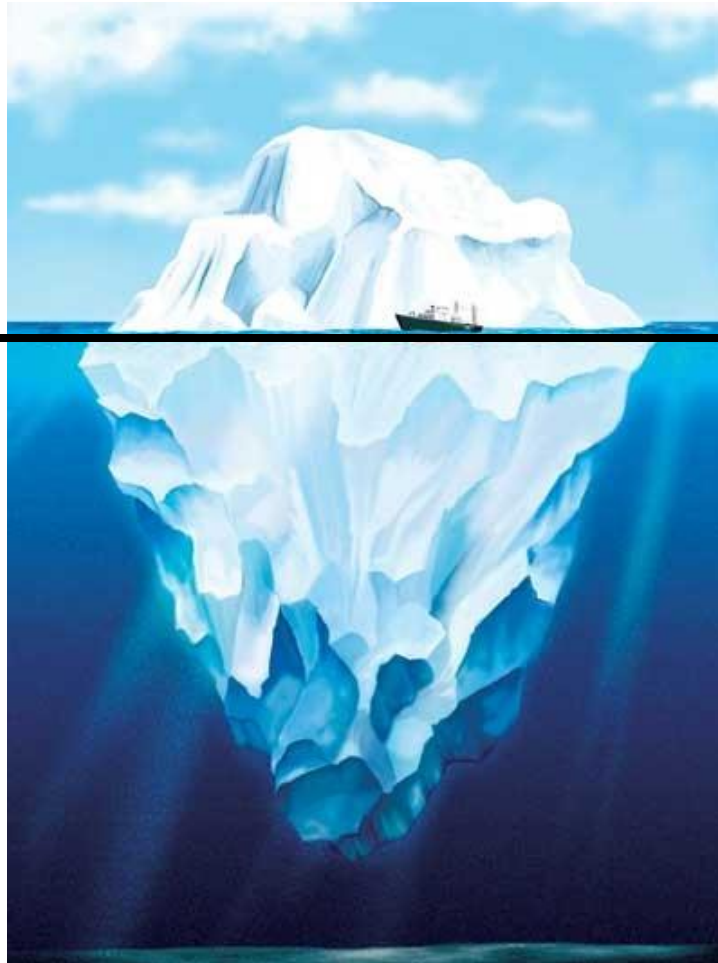
Preventative Programs

- Post Offer Employment Physical Function Screens
 - PTs can assess perspective employees on their physical abilities
 - We can screen individuals to see if they will be able to perform assigned duties as outlined on job description
- Ensures a more thorough screening process

The Cost of An Injured Worker

Direct Costs

- *Medical Costs
- *Indemnity Costs
- *Insurance Costs



Indirect Costs

- *Lost Time
- *Efficiency
- *Production delays
- *Re-hiring costs
- *Quality Costs

Indirect Costs

- *Harm to morale
- *Disgruntled employees
- *Property damage
- *Investigation
- *Litigation
- ***REPUTATION**

Case Study

- Provided by our Workability Collaborators
 - Large Plant – average WC costs per incident \$8225 (company data)

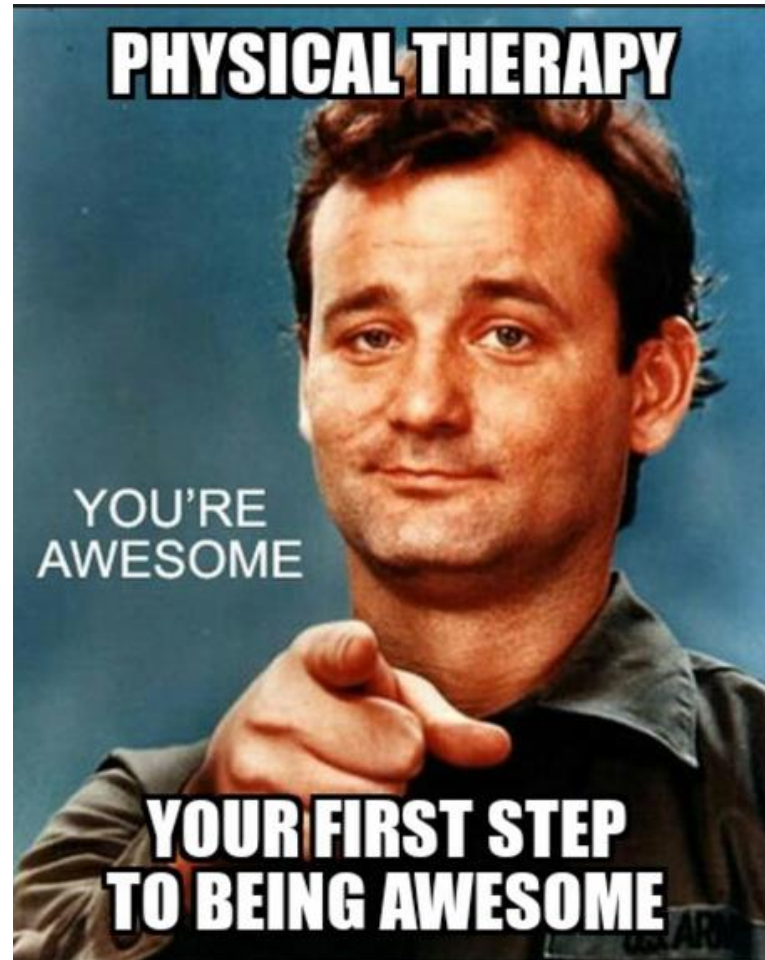
Work Related Incidences	60
First Aid Visits	125
OSHA non-recordable incidents	55
Total services cost	\$43,903
Total Direct Costs	\$452,375
Total Indirect Costs	\$497,612
Total Cost Savings	\$906,084

Case Study

- Provided by our Workability Collaborators
 - Company 2 – average WC costs \$29,400 (2014 national average)

Work Related Incidences	14
First Aid Visits	25
OSHA non-recordable incidents	11
Total services cost	\$10,351
Total Direct Costs	\$323,400
Total Indirect Costs	\$355,740
Total Cost Savings	\$668,788

Questions?





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References

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- NCCI www.ncci.com
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Employment Law for Safety Managers – Fisher & Phillips LLP