



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 2017 Onboard Employees:

Professional Discipline	All Cost Centers
Occupational Therapy	1,359
Physical Therapy	2,228
Kinesiotherapy	323
Physiatry	697

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 or through direct scheduling in some clinics, but regardless of the origin of the rehabilitation referral, the patient will be evaluated for the most appropriate rehabilitation

individualized treatment plan of care throughout the continuum of care focusing on therapeutic exercise, reconditioning and patient and caregiver education. Kinesiotherapists emphasize the psychological as well as physical benefits of therapeutic exercise for rehabilitation and wellbeing. See KT Scope of Practice: <https://akta.org/professional-development/scope-of-practice>

In FY 2017, PM&R providers (physicians and therapists) treated over 1 million unique patients, which accounted for nearly 6.3 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 42 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

More than 4,300 inpatients are admitted annually to acute rehabilitation units, with 87% of patients discharged to the community for ongoing care.

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.

