

SECTION ON PEDIATRICS FACT SHEET

Frequency and Duration of Physical Therapy Services in the Acute Care Pediatric Setting

Ongoing Assessment of Frequency of Physical Therapy Services				
Consult (1-2 Visits Total)	Occasional (1-2 Visits Per Week)	Regular (3-4 Visits Per Week)	Frequent (5 Visits Per Week)	Intense (6 ≥ Visits Per Week)
<p>Patients who present with:</p> <ul style="list-style-type: none"> Chronic impairments, known developmental delays, medical conditions, and/or nonrehabilitation-based needs. No new documented loss of skill or new impairments, with little foreseeable potential for progress toward functional goals. Little to no risk for loss of skills due to presumed length of stay. A discharge status that is not dependent upon PT training, intervention, or clearance. A possible need for assistance with referral to outpatient services or clinics to meet long-term needs, eg, family/caregiver education, equipment recommendations, home modifications, referrals to resources in the community. 	<p>Patients who present with:</p> <ul style="list-style-type: none"> Chronic impairments, known developmental delays, medical conditions, and/or limited ability to participate in functional activities for those who are admitted for nonrehabilitation needs. A potential for weekly/monthly progress toward functionally based goals. A risk for loss of skills due to prolonged hospitalization if not followed/progressed by a skilled PT. A discharge status that is not dependent upon PT training, intervention, or clearance. Currently receiving or will most likely be recommended for early intervention or outpatient services in the community upon discharge from the hospital. 	<p>Patients who present with:</p> <ul style="list-style-type: none"> New or chronic impairments, medical conditions, and/or functional limitations. A potential for daily/weekly progress toward functional goals. A risk for complications associated with immobility and decreased physical activity due to hospitalization, requiring a skilled PT to achieve functional goals. A discharge status that is not dependent on PT training, intervention, or clearance. Currently receiving or will most likely be recommended for outpatient services. 	<p>Patients who present with:</p> <ul style="list-style-type: none"> Acute loss of functional skills due to new illness/injury and are making significant gains in functional status. Good to excellent potential for daily progress toward functional goals and risk losing skills if seen at a lower frequency. A high risk for deconditioning and loss of mobility without direct, skilled PT intervention. A need for extensive family education on newly acquired loss of functional skill. A discharge status that is not dependent upon achievement of physical therapy goals; but rather, their medical status. A potential to be recommended for inpatient rehabilitation, day hospital, or high-frequency outpatient services upon discharge from the hospital. 	<p>Patients who present with:</p> <ul style="list-style-type: none"> Acute loss of functional skills due to new illness/injury and are making significant gains in functional status. Excellent potential for daily progress towards functional goals, recovery of functional mobility skills, and/or risk losing skills if seen at a lower frequency. A high risk for deconditioning and loss of mobility without direct, skilled PT intervention. A need for extensive family education on newly acquired loss of functional skills. A discharge date from the hospital that is dependent upon PT clearance and/or patient/family training. A potential to be recommended for inpatient rehabilitation, day hospital, or high-frequency outpatient services upon discharge from the hospital.

Common Considerations for All Patients in Determining Need for and Frequency of Physical Therapy Services:

- Patient's level of endurance and tolerance for activity
- Equipment and/or resource needs
- Patient's cognitive level and ability to participate in and benefit from therapy sessions
- Patient and family education needs
- Caregiver's ability and or willingness to follow through with PT recommendations while patient is admitted to the hospital and/or at home
- Need for communication with community/local therapists
- Patient's involvement with other disciplines (eg, occupational therapy, speech-language pathology, therapeutic recreation, child life)
- Potential barriers with home environment and/or transportation



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FOR MORE INFORMATION:

If you have additional questions, would like to order additional copies of this fact sheet, or would like to join the Section on Pediatrics, please contact the Executive Office of the Section on Pediatrics of the American Physical Therapy Association at: APTA Section on Pediatrics, 1111 North Fairfax Street, Alexandria, VA 22314, 800/999-2782, ext 3254, Fax: 703/706-8575. Or visit the Section's website at www.pediatricapta.org.

