



Canadian College of **MASSAGE** and Hydrotherapy

CLINICAL PRACTICUM POLICIES AND PROCEDURES ONTARIO CAMPUSES

UPON REGISTRATION EVERY STUDENT IMPLICITLY AGREES TO ABIDE BY
THE POLICIES AND PROCEDURES OF THE COLLEGE.

TABLE OF CONTENTS

TABLE OF CONTENTS	2
INTRODUCTION TO CLINICAL PRACTICUM	3
1.0 INTRODUCTION	3
1.1 ADVANCING TO CLINICAL PRACTICUM.....	3
STUDENT CONDUCT	4
2.0 PROFESSIONALISM.....	4
2.1 CONFIDENTIALITY	4
2.2 DRESS CODE	4
CLINICAL INTERNSHIP	6
3.0 CLINIC HOURS	6
3.1 CLINIC SCHEDULE.....	6
3.2 CLINIC ATTENDANCE.....	6
3.3 ABSENCES	7
3.4 CLINIC MODULE ADVANCEMENT	7
3.5 VOLUNTEER CLINIC SHIFTS	7
3.6 CLINIC APPOINTMENTS.....	8
3.7 TEAM LEADER (TL) DUTIES.....	8
3.8 STUDENT INTERN DUTIES	8
3.9 CLIENT HEALTH RECORDS.....	9
3.10 BLOOD PRESSURE.....	9
Precautions & Contraindications	9
3.11 INAPPROPRIATE CONDUCT IN CLINIC	10
3.12 EVALUATION	10
HYDROTHERAPY	11
4.0 CONTRAINDICATIONS TO HYDROTHERAPY	11
4.1 NEGATIVE REACTIONS TO HYDROTHERAPY.....	11
4.2 HYDROTHERAPY MAINTENANCE.....	11
OUTREACH PROGRAM	12
5.0 OUTREACH REQUIREMENTS.....	12
5.1 OUTREACH PARTICIPATION	12
5.2 OUTREACH SPECIALIZATIONS.....	12
NOTWITHSTANDING CLAUSE	13
SCHEDULE A - CONTRAINDICATIONS FOR HYDROTHERAPY	14
SCHEDULE B - NEGATIVE REACTIONS TO HYDROTHERAPY	15
SCHEDULE C - HYDROTHERAPY MAINTENANCE	16
SCHEDULE D – CLINIC REPORTS AND FORMS	16
SCHEDULE E – HOW TO MEASURE BLOOD PRESSURE	18
<i>Attached - Clinic Forms (i.e. Student Evaluation Form, Team Leader Checklist, Change Shift Form etc.)</i>	

INTRODUCTION TO CLINICAL PRACTICUM

1.0 INTRODUCTION

Generally speaking, clinical internship hours are completed onsite after classes, within our Student Intern Clinic. After completing the first Term of their program, students begin to gain the valuable hands-on experience provided in our Clinic by treating general members of the public. Throughout their time in the Clinic, students are given the opportunity to reap the benefits of integrating their clinical skills with their practical and academic studies while under the mentorship and supervision of a Registered Massage Therapist.

CCMH also provides their students an exceptional opportunity to practice their massage and client care skills by taking part in our on/off campus Outreaches. These unique events may occur on any particular day or night to provide students various opportunities to take part in providing care for different groups, organizations, companies and specialized populations within the community under the mentorship and supervision of a Registered Massage Therapist.

1.1 ADVANCING TO CLINICAL PRACTICUM

Students will be scheduled on a regular weekly shift as an Intern Student Therapist in the Clinic after they have successfully completed all Term 1 courses. Any student who does not successfully complete all requirements of Term 1 will not be eligible to start their Clinic Internship.

In addition, to participate in the Student Intern Clinic or Outreach Program, students may be required to obtain a recent criminal record check for vulnerable persons, complete AODA certification, provide proof of vaccinations and/or immunizations, be mask fit and tested, and hold a valid First Aid/CPR Certificate (minimum level – Standard C).

Prior to starting Clinic in Term 2 all students must submit their current email address to the Clinic Coordinator as this will be used as the primary means of communication between the Coordinator and every student. Should a student change their email address it is their responsibility to inform the Clinic Coordinator immediately. Further, the student must also immediately notify the Student Services Coordinator of these changes. Should any such email change result in a loss of information the student will be deemed responsible.

STUDENT CONDUCT

2.0 PROFESSIONALISM

Student Therapists working in the CCMH Student Intern Clinic or attending Outreaches must present themselves with a professional, well-groomed appearance and are expected to promote massage therapy in a positive and professional manner at all times. Any student who arrives for Clinic and/or Outreaches unprepared will not be permitted to participate in that event and the grade allocation for that event will be considered as an absence and will be subject to penalty as outlined in section 3.2 Clinic Attendance, 3.3 Absences and 5.0 Outreach Participation respectively.

Students are obligated to treat any client assigned to them throughout their internship, regardless of the age, race, culture, creed, sexual identity, gender, ability and/or health status of the client, yet in consideration of the student's cultural background. Students are not permitted to reassign or trade clients amongst themselves. The Clinic Supervisor or Coordinator will do all necessary assignments and reassignments.

Please note that it is prohibited by the College of Massage Therapists of Ontario (CMTO) for students to receive any money, gift or other form of consideration in exchange for performing a massage.

2.1 CONFIDENTIALITY

Students are not permitted to discuss any of their clients with anyone other than employees and/or agents of CCMH. Under no circumstance should a Student Therapist discuss matters about any client in the presence of another client. Students must not engage in any conversation topics with client that might yield a confidential response in any public area of the College. CCMH abides and strictly adheres to all privacy legislation and expects its students to do the same at all times.

Students may not, under any circumstance, remove a client's file, a student's file, or any part of either from the premises.

2.2 DRESS CODE

Students must wear the CCMH uniform during Clinical Practicum. This uniform must be clean, free of rips, free of holes and not overly restrictive. It may be worn with a neat and clean, blue or black professional sweater on cool days. Students may not alter the school uniform in any way. Student ID tags must be worn on the shirt while in Clinic and attending Outreaches so that they are visible. Student ID tags are not to be worn on the hip or lotion holster.

Black, brown or white soft-soled, closed-toed supportive shoes with socks must be worn.

Additional aspects of a student's presentation:

- Jewelry is to be kept to an absolute minimum (i.e. single pair of earrings only; no rings; necklaces must be tucked under shirts). Any jewelry that is deemed to potentially interfere with a treatment must be removed
- Hair is expected to be clean and tidy at all times. No extreme hairstyles or colours. Hair must be tied back, if shoulder length or longer, for the entire Clinic shift
- Nails must be kept as short as possible and polish, decals or decorations are not permitted
- Noticeable body and facial piercings must be removed and/or covered
- Men must be clean-shaven or have a neatly trimmed beard/moustache
- Perfumes or colognes are not permitted
- Use of deodorant or anti-perspirant is required
- All students are required to maintain proper hygiene using a toothbrush, toothpaste, and mouthwash
- Students who choose to smoke during their Clinic shift must have a change of shirt available to change into to ensure they do not smell of smoke
- Gum chewing is not permitted

- No hats. White, black or dark blue sweatbands can be worn in the Clinic cubicle only
- Cell phone, personal electronic devices and/or laptop use is not permitted therefore must be turned off and put in the student's locker during the entire Clinic rotation
- Students must provide their own timepiece for their Clinic shift
- Students are responsible to provide and bring a lotion bottle, holster, blood pressure cuff, reflex hammer, tape measure, thermometer and thermometer covers and a clean, full set of linens for personal use to every Clinic shift

CLINICAL INTERNSHIP

3.0 CLINIC HOURS

The Student Intern Clinic operates after classes Monday to Friday. Every student completing their internship is required to participate in Clinic during its hours of operation.

Students will remain in Clinic until the final appointment is finished, all paperwork has been completed and signed-off by the Supervisor, and all rooms have been arranged for class the next day.

Also note that Clinic hours are subject to change. Students will be given notice of any change to Clinic schedules as soon as possible.

3.1 CLINIC SCHEDULE

Term 1 students are not eligible to participate in the Clinical Practicum. Eligibility begins in Term 2 and assuming successful completion of subsequent Terms they will continue through to the end of Term 4. Each student is scheduled to work in the Clinic one evening per week. Each week of clinic will have a particular focus for evaluation in accordance with the Inter-Jurisdictional Practice Competencies and Performance Indicators for Massage Therapists at Entry-To-Practice Document, June 2012.

Each Clinic shift is approximately five (5) hours in duration and consists of three (3) client appointments. Each appointment is scheduled to be one (1) hour long and an appropriate amount time is scheduled between appointments. Clinic does not run during the last two weeks of any given term, due to final oral practical and written examinations. Additional Clinic hours may be assigned as necessary.

Prior to beginning Clinic in Term 2, students will be given the opportunity to request the evening on which they would prefer to work in Clinic. The Clinic Coordinator will attempt to accommodate the requests however, this is not always possible. Students will be notified of their Clinic Schedule when the schedule is completed.

The Student Intern Clinic is typically closed for all Statutory/Public Holidays. Occasionally the Clinic may also close due to inclement weather. For those students who are regularly scheduled to work on a night when the Clinic is closed for a Statutory/Public Holiday those students are required to reschedule the respective shift on an alternate night of the same week that the Statutory/Public Holiday occurs. In the event that clinic is closed due to inclement weather they will be required to reschedule this shift at some point during the same Term in which the same focus night occurs for evaluation. This rescheduled shift will be scheduled depending on availability and at the discretion of the Clinic Coordinator.

Should there be insufficient time (i.e. end of Term) to complete the rescheduled shift, the student will be required to do so upon the first presentation of the respective focus night in clinic of the subsequent Term.

3.2 CLINIC ATTENDANCE

Prior to the commencement of Clinic it is expected that students **must** attend a mandatory three (3) hour Clinic and Treatment Plan Orientation Seminar as well as the mandatory four (4) Outreach Orientation Seminar. During first week of the Term 2 Clinic Module students will participate in a mentoring shift shadowing a senior student.

It is expected that the only reason a student would not be in attendance for Clinic is due to illness or personal emergency. It is the student's responsibility to show-up on time and fully prepared for all aspects of Clinical Practicum.

Arriving late or leaving early from Clinic is unacceptable.

The Clinic Coordinator in conjunction with the student will determine the day on which the student will be scheduled, it is imperative to ensure there are no conflicts with prior personal obligations. Once assigned this weekly shift becomes a commitment made by the student to their clients and to CCMH.

If a student must change a shift it can only be changed to a night within the same week (evaluation focus) of the originally scheduled shift. Students may change a scheduled shift up to a maximum of two times per Term. Shift changes are not automatic and must be approved in advance by the Clinic Coordinator. To change a shift; the request, must be documented using the appropriate form. This form must first be submitted to the Reception Administrator for confirmation of availability at least twenty-four (24) hours prior to the affected shift. Once confirmed, the student must immediately submit this form to the Clinic Coordinator for authorization. Therefore both of these steps must be completed no less than twenty-four (24) hours prior to the affected Clinic shift.

Clinic hours are not transferable to subsequent Term Modules under any condition.

3.3 ABSENCES

- a) Two absences may result in the student being placed on Academic Probation.
- b) Any student missing a total of three (3) Clinic shifts in any one Term Module may be dismissed from the Student Intern Clinic.

In the case of unforeseen circumstances such as emergency or illness resulting in the inability to attend a scheduled clinic shift, the student must provide the school as much notice as possible. Any absence will result in a zero grade allocation for the respective night's focal evaluation.

On a case by case basis and upon receipt of valid documentation such as but not limited to a medical doctors note or notice of jury duty, etc. a student may be permitted to reschedule the missed shift on an equivalent focal night within same term upon approval of the Clinic Coordinator. This documentation must be submitted to the College within twenty-four (24) hours of return from the absence.

3.4 CLINIC MODULE ADVANCEMENT

All knowledge & skills learned in class is used and applied within the Clinic Practicum, therefore, one of the evaluation criteria qualifying a student to successfully complete a Clinical Practicum Term Module is the requirement of the successful completion of all in-class courses within the same term.

Students who are repeating a class or classes in Term 2, 3 or 4 are required to also participate on a weekly basis in the Student Intern Clinic and will therefore not earn a passing grade for the respective Clinic Term Module.

The Clinic Coordinator in conjunction with the student will determine the day on which the student will be scheduled. Once the entire Term has been repeated and upon the successful completion of the respective term courses a Clinic mark will be allocated for that Term Module.

3.5 VOLUNTEER CLINIC SHIFTS

When a student wishes to work extra Clinic hours, they may do so by completing a Volunteer Shift form. The form must be submitted to the Clinic Coordinator a minimum of twenty-four (24) hours prior to the date they wish to volunteer. Volunteer shifts may or may not be granted based on the number of students already scheduled during that Clinic shift. Students will be notified in a timely manner if their request will be granted. Once a student has been put on the schedule for a volunteer shift they are subject to all Clinic Policies. Volunteer Clinic hours cannot be carried forward from one Term to another, nor does the completion of them cancel any previously scheduled Clinic shifts.

Any student who volunteers for additional shifts in order to gain extra practical experience as part of their educational training will have these hours counted towards a Certificate of Recognition. Any student who achieves an additional forty (40) hours by way of volunteering will qualify for this Certificate of Recognition.

3.6 CLINIC APPOINTMENTS

Students may book appointments for free massages in the Clinic on a first come first served basis. Students must use their own linen for their appointment. Reception and/or the Clinic Coordinator reserve the right to reschedule student appointments if necessary for public patrons.

Students may use their school issued coupons to ensure they will be guaranteed an appointment. Appointments will be scheduled with the next available therapist and requests for a specific therapist are not possible.

Any appointments performed as part of the Case Study and Report project (assigned in the Term 3 Research Literacy course) are scheduled during one of the student's regularly scheduled Clinic shifts.

Students are prohibited from massaging their family members or significant others in Clinic.

If a client does not arrive within fifteen (15) minutes of their allotted time and they have not called to notify Reception that they are going to be late, they will be considered a "no show" and at that time the Student Therapist must begin rounds with a Supervisor, treatment exchange with another student and/or assigned to other duties.

If two students do not have clients booked during the same appointment slot, they are required to complete a treatment between themselves. Students must supply their own linens during exchanges and complete the appropriate documentation relative to what occurs. The Clinic Supervisor will organize such student treatments and inform students of who will be providing/receiving the treatment. If there are no other students to exchange with, the student will go on rounds with the Supervisor. In the event a student does not bring their linens with them to Clinic they will be required to rent CCMH linen with a \$5.00 rental fee to complete the treatment exchange payable at the time of use.

3.7 TEAM LEADER (TL) DUTIES

A TL acts as the communication link between Reception and the Clinic Supervisor and is responsible, among other things, for preparing client files for fellow students in Clinic that day. Team leaders may also be expected to treat clients if necessary.

One student in the group is designated as TL for each shift and the role is rotated among all students in each group throughout the Term Module.

Please see the attached Schedule '*Team Leader Duties Checklist*' for a description of duties specific to your campus location.

3.8 STUDENT INTERN DUTIES

All students must be prepared and in their clinic room twenty (20) minutes before the first massage begins in order to prepare their cubicle, read the necessary files and ask any questions regarding treatment, home care, assessment, etc. during the pre-shift group meeting with the Supervisor. All students must remain on Clinic premises for the full duration of their shift.

Students must ensure that their clients' Health History Form is less than one year old. If this form has not been updated in the previous twelve months, it is the Student Therapist's responsibility to review the form with the client and update accordingly.

Students are to use a “Hypo-allergenic Lotion” only in clinic. The use of coloured and/or scented oils, gels, baby oil, nut-based oils (i.e. peanut, almond, grapeseed, coconut, etc.) and vegetable based oils are **not permitted under any circumstances**. These products may pose a problem for those people with allergies or sensitivities and scents often linger in the room after the massage.

Students are to be waiting in their cubicle five minutes before the start of the each appointment time. The TL will advise them when their client has arrived and then the student will greet their client in Reception and escort them to the cubicle.

Every student is to greet their client with a generic salutation such as “Hello” or “Good afternoon”, followed by an introduction, “My name is --- and I will be your Student Intern today.”

Once the treatment has concluded the Student Intern is to escort the client back to the waiting area and the Clinic Receptionist will book the client’s next massage treatment.

3.9 CLIENT HEALTH RECORDS

CCMH adheres to the College of Massage Therapists of Ontario’s Standards of Practice for Health Record Keeping. All clients must have a up-to-date and complete Health Record. At no time are any files to be removed from the school premises. They are to be secured at all times and locked-up when not in use.

While participating in Clinic, students are required to document all treatments for each client and keep all treatment forms in chronological order and filed on the right side of the health record folder. This will provide subsequent students who treat a given client the background on their previous treatments and concerns. Should a client provide additional medical documentation, such as X-Ray or MRI report for example, these too should be dated and inserted behind the health history form on the left side of the health record folder for quick access.

Please see the attached Schedule D ‘*Clinic Reports and Forms*’ for a description of procedures specific to your campus location.

3.10 BLOOD PRESSURE

Students are required to bring their own aneroid sphygmomanometer (BP cuff) and stethoscope to Clinic. All first-time clients must have their BP taken prior to their first massage. Pregnant clients and those with a history of high or low blood pressure must have a reading taken at the beginning and end of each treatment. All clients with normal range BP must be checked annually.

Please see the attached Schedule E ‘*How to Measure Blood Pressure*’ for a description of procedures specific to your campus location.

Precautions & Contraindications

A systolic BP reading above 140 – 150 mmHg or below 90 mmHg requires the student to consult with the Clinic Supervisor who will discuss modifications to the hydrotherapy and/or massage therapy treatment with the student.

A diastolic BP reading above 90mmHg or below 60 mmHg requires the student to consult with the Clinic Supervisor who will discuss modifications to the hydrotherapy and/or massage therapy treatment with the student.

Any client with a systolic BP reading greater than 180mmHg and/or a diastolic reading greater than 100mmHg or whose BP is considered unstable will be referred to their medical doctor to have written consent for student massage therapy treatments and must have a consultation with the Clinic Coordinator prior to entry for treatment within the Intern Clinic.

Any client with a systolic BP reading greater than or equal to 140mmHg and a diastolic reading greater than or equal to 90mmHg will not be permitted to participate in “full body” hydrotherapy treatments.

3.11 INAPPROPRIATE CONDUCT IN CLINIC

Students are not expected to remain in the cubicle if a client is behaving inappropriately. This can include any unnecessary movement such as kicking off the sheets because they are “too warm”; thus exposing themselves; touching the Student Therapist; continuing to ask the therapist personal questions after the student has asked them not to, etc..

If this occurs, the student is expected to leave the cubicle, find the Clinic Supervisor and carefully explain the circumstances. The Supervisor will assess the situation and determine the appropriate course of action. Written, signed documentation outlining the objective details of any such incident must be submitted to the Clinic Coordinator within twenty-four (24) hours of the occurrence. No other action, legal or otherwise, may take place unless there is an “Incident Report” document on file complete with the student’s name, the date of occurrence and the attending Supervisor’s name.

Inappropriate language and/or behavior will not be tolerated in Clinic. This includes the use of endearing terms when referring to clients, defamatory remarks against staff, students or clients. Any perceived inappropriate language and/or behavior will result in a loss of professionalism marks as well as potential suspension from the College.

The following is grounds for immediate suspension from Clinic and/or the College:

- Abuse of a client in any verbal, physical, or sexual manner
- Practicing massage while impaired by any substances
- Breach of client confidentiality
- Removing a client’s file from CCMH premises or removing any document from client’s file
- Engaging in conduct or performing an act that would reasonably be regarded by others as disgraceful, dishonorable or unprofessional
- Failing to obtain informed consent, or proceeding with any manipulation or treatment outside of the Massage Therapy Scope and/or when a client has withdrawn consent

3.12 EVALUATION

Each student is evaluated by a Clinic Supervisor. A minimum grade of seventy (70%) must be attained in each Term Module of Clinic. If a student does not attain seventy (70%), they will be required to repeat that Term Module of Clinic before they progress to the subsequent Term Module.

Please refer to the Clinic Practicum Subject Module Outline for specific evaluation criteria for each Clinic Term Modules.

In the event a student wishes to review their evaluation marking forms, this must be done with their Supervisor and/or Clinic Coordinator by appointment only.

Students will be required to submit two (2) “Self-Assessment” Forms, one (1) at the beginning and one (1) at the end of each Clinic Term Module. Both must be submitted to be eligible to advance into subsequent Term Modules.

HYDROTHERAPY

The hydrotherapy component of Clinic is designed to allow students to use the skills they've acquired in their hydrotherapy course and apply those skills to clients of the Clinic. Strict protocol is necessary to ensure the safety of all clients. At any time, the Supervisor may be called upon to oversee and guide a student through a hydrotherapy treatment.

4.0 CONTRAINDICATIONS TO HYDROTHERAPY

All students are required to know and understand the contraindications to Hydrotherapy treatments as outlined in **Schedule A** attached.

4.1 NEGATIVE REACTIONS TO HYDROTHERAPY

All students are required to know and understand the negative reaction symptoms and signs for Hydrotherapy treatments as outlined in **Schedule B** attached.

4.2 HYDROTHERAPY MAINTENANCE

It is the student's responsibility to ensure that cleanliness of the hydrotherapy room and all equipment is maintained. Please refer to **Schedule C** for a list of maintenance protocols.

OUTREACH PROGRAM

5.0 OUTREACH REQUIREMENTS

The Outreach Program is designed to give students the opportunity to apply the skills they have learned in the classroom to specific client groups in diverse settings. Students begin participating in the Outreach Program in Term 2.

Prior to graduation, all students must complete a minimum of eighty (80) hours in the Outreach Program. Of these eighty (80) hours, sixty (60) hours must be allocated to the hospital/hospice category. The remaining twenty (20) hours can be distributed amongst the other categories as per availability and/or student preferences.

Prior to commencing any hospital/hospice Placement students may be required to obtain a recent criminal record check for vulnerable persons, provide proof of vaccinations and/or immunizations, be mask fit and tested, and hold a valid First Aid/CPR Certificate (minimum level – Standard C). Further, students may be required to receive Hepatitis and Influenza vaccinations.

It is the student's responsibility to ensure all Outreach requirements are met prior to graduation.

5.1 OUTREACH PARTICIPATION

Any student who participates at an Outreach that is scheduled during class time will not adversely affect their attendance standing. However, exams and quizzes will not be rescheduled to accommodate Outreach participation. It is the student's responsibility to ensure that they are no scheduling conflicts with class evaluations and Outreach participation. Further, students are responsible to acquire all information and material missed in their absence.

All Outreach events are posted in an accessible location in the campus that allows students to sign up for the events of their choice. The Clinic Coordinator will post each event's Final List of participants at least one week prior to the scheduled event (when possible). Once a student's name is placed on the final list, they are committed to that Outreach. If a student's name does not appear on the Final List but they attend the event, credit is not awarded for the event hours, and they will not be permitted to participate.

For all Outreaches, every participating student is responsible for signing out, transporting and returning said items to the event as notated on the Final List. It is the student's responsibility to ensure that all items signed-out are returned to the school in a timely manner and in the same condition as when they were signed out.

As with Clinic, all Outreaches are supervised by a Massage Therapist. It is expected that all policies pertaining to the Clinical Practicum are adhered to when participating in the Outreach program. Specifically, expectations for professionalism, confidentiality, dress code and attendance remain the same, regardless of whether the student is participating in the Student Intern Clinic or an Outreach event.

Students who arrive at an Outreach unprepared, arrive late or leave early, will be marked as absent for that Outreach. Should this occur; the hour value for that Outreach will not be counted and will subsequently be deducted from the student's previously accumulated Outreach hours.

5.2 OUTREACH SPECIALIZATIONS

All graduates will receive a Hospital/Hospice Specialization Certificate for the fulfillment of the mandated sixty (60) hour requirement.

To recognize students who choose to exceed the twenty (20) hour minimum requirement and accumulate forty (40) hours in any one (1) particular area of the other Outreach categories (Sport, Corporate, and Community), CCMH will award a Specialization Certificate for that focal area upon graduation.

NOTWITHSTANDING CLAUSE

Notwithstanding the policies set out herein, CCMH reserves the right to amend any policy, without notice, which amendment it believes is necessary. Furthermore, notwithstanding the policies set out herein CCMH may use its discretion to make decisions it believes is necessary for the proper functioning of the College.

SCHEDULE A - CONTRAINDICATIONS FOR HYDROTHERAPY

General Contraindications:

- Fear of treatment
- Client is unconscious
- Client's condition is unclear or unknown therefore refer out
- Extremes of temperature in the seriously ill

Contraindications to hot hydrotherapy:

- Peripheral vascular disease (eg. Buerger's Disease, thrombophlebitis, varicose veins)
- Athlerosclerosis, Arteriosclerosis Obliterans
- Cardiac insufficiency (eg. Angina, post M.I., valve or bypass surgery)
- Kidney disease, pitted edema
- Diabetes
- Hypertension or Hypotension
- Sensory or motor deficiency
- Multiple Sclerosis
- Acute inflammation
- High fever
- Recent burns
- Skin lesions
- Significant tissue dystrophy
- Directly over heart area
- Hyperthyroidism
- Metal pins or plates (use caution)
- Malignancies
- Hemophilia

Contraindications to cold Hydrotherapy

- Client is chilled or cold
- Bony areas
- Reynaud's Disease or Syndrome
- Skin lesions or open sores
- Significant tissue dystrophy
- Pitted edema
- Sensory or motor deficiency
- Severe hypertension or hypotension
- Abdominal contraindications – diarrhea
- Previous frostbite in the area
- Malignancies

Contraindications to Contrast Hydrotherapy

- Any CI for either hot or cold
- Vascular flush is too strong a treatment for client safety and/or comfort
- Tendency to hemorrhage (i.e. hemophilia)
- Malignancies

SCHEDULE B - NEGATIVE REACTIONS TO HYDROTHERAPY

Symptoms of a negative reaction may include:

- Increased sensation of pain
- Headache
- Hyperventilation
- Weakness, Dizziness and/or fainting
- Nausea
- Vomiting
- Shivering
- Skin irritations

Signs which may precede a negative reaction include:

- Client may begin to squirm or pull away before they verbally complain
- Client may be slow to respond to verbal questions or directions
- Client may show a glassy stare and/or pallor (or blotchy white/red) on their face

Upon occurrence of the last two reactions, immediate communication and preparation for weakness, dizziness and/or fainting is of paramount importance.

Sometimes the impending risk can be minimized with prompt hydration of the client and assisting them to a recumbent position.

Many negative reactions can be avoided by:

- Properly preparing the client (i.e. hydration, knowing their vital signs)
- Checking the Health History Form for CI's
- Adjusting the variables to suit their concern and present physical condition

Student Therapist's response to negative reactions:

- a) Stop the treatment
- b) Assist the client to a comfortable recumbent position, away from further thermal stress
- c) Check vitals & observe signs and symptoms
 - i) If their face is **red** or they feel hot (or they complain of pressure headache- High BP) elevate head, administer water and apply cold compresses to the head and posterior cervical region
 - ii) If their face is **white**, or complain of dizziness (Low BP) elevate the feet
 - iii) If they feel **chilled**, cover them with blankets and apply warm compresses to the trunk
 - iv) If they are **weak** and have a history of hypoglycemia or present a risk of low blood glucose, recommend diluted juice (available at Reception)
- d) Reassure the client that the body usually corrects itself in less than ½ hour
- e) Document reaction and corrective measure (if applicable)
- f) Do not administer treatment for 3-4 hours, (according to CMTO guidelines)
- g) For skin irritations, wash the area using a clean towel

SCHEDULE C - HYDROTHERAPY MAINTENANCE

Ensure no standing water is on the floor anywhere in the hydrotherapy room at any time and ensure the safety sign is in place as necessary

Steam Shower/ Shower

- i) Pre-Treatment – Spray the ceiling, walls and floor with water to remove cleaner from the night before
- ii) Post-Treatment – Spray the ceiling, walls and floor with appropriate cleaner

Meridian Bath

- i) Pre-Treatment – Spray the entire tub area with water to remove cleaner from the night before
- ii) Post-Treatment – Spray the entire tub area with appropriate cleaner, wipe with a clean towel.

Continuously mop the hydrotherapy floor to ensure no standing water remains anywhere Mats are to be swept and mopped each night and rolled up, then stored upright in the shower stall.

Hydrocollator

Daily: Top up with water

Weekly (every Friday): Drain and refill with fresh water

Monthly:

- i) Drain water and soak packs in fresh water (Do not allow packs to dry out)
- ii) Clean tank with table disinfectant and rinse well.
- iii) Install Hydrocollators packs and refill with fresh water

Paraffin Wax Bath

Daily: Top up with fresh wax
Remove hardened spillage (do not put back into bath, discard it)

Monthly (Last Friday of every month):

- i) Unplug unit and allow wax to solidify
- ii) Discard old wax
- iii) Fill bath to marked lines with water and plug in for several hours (please label out of service for the period)
- iv) Drain off hot water and wipe inside of unit with table cleaner and paper towel while unit is warm
- v) Refill unit with wax and heat overnight to melt wax and stabilize temperature

Hot Tub

Daily: Record the water temperature of the hot tub on the master listing in the Hydrotherapy Room every morning and evening. * **Do not adjust any settings** *

SCHEDULE D – CLINIC REPORTS AND FORMS

a) *When reporting on client assessment:*

- i) Adhere to protocols covered in Assessments class. The protocols being: postural assessment and palpation, followed by Active ROM, Passive ROM, Resisted ROM, followed by orthopedic and neurological testing.
- ii) Ensure when assessing that all structures that could be producing the client's primary concern are assessed according to the protocols. There is no specific number of procedures that must be performed to meet this responsibility.
- iii) Students must use a methodical approach that incorporates their knowledge and experience to substantiate and validate the assessment of a given client.
- iv) All documentation for assessment must be written in such a way as to be measurable, reproducible and accurate. For example, terminology such as "within normal limits/WNL" is not acceptable as it cannot be reproduced or compared with previous findings to provide information on changes in any given condition or assessment results.
- v) Document the client's words in quotations. If they describe pain in a certain area, conduct a thorough interview to determine the cause, severity, etc. This will give you an idea of where to begin your assessment and treatment. Always remember to take as much time (within reason) as you need for your initial interview and assessment.
- vi) Document any possible contraindications or precautions.
- vii) When palpating, the primary focus is on the "Four T's": Tone, Texture, Temperature, and Tenderness.
 - i) **Tone:** When documenting areas of elevated tonicity, specifically document the affected muscles.
 - ii) **Texture:**
 - a. Document areas of dry skin, scratches, contusions, warts, scars, calluses, unusually smooth skin.
 - b. Document size, colour and height of moles. Note unusually hairy areas or an unusual absence of hair.
 - c. Document any lumps (contraindicated if undiagnosed).
 - iii) **Temperature:**
 - a. Document areas that had been subjected to trauma and are still in an acute stage. They are expected to feel warm when compared to unaffected tissues. Areas in a chronic stage are expected to feel cooler.
 - b. Document any areas of inflammation, or fluid retention (aka "congestion").
 - iv) **Tenderness:** Document characteristics of pain (eg., sharp, dull, achy) and any radiation patterns. Document any contusions, rashes or discoloration, as well as postural deviations. No need to report on anything that does not affect treatment (i.e. tan, freckles, fine white hair over the body, tattoos etc.).

b) *The following guidelines are to be followed when completing the Treatment Form:*

- i) The Student Therapist's name, the client's name, and the date (including day, month and year) must be on the Treatment Form.
- ii) Students must indicate if informed consent was obtained and a list of the agreed areas and type of treatment.
- iii) A correlation between symptoms, observations and treatment should be evident in the Treatment Form.
- iv) Document the use and time frame of any techniques including but not limited to hydrotherapy, cross fibre frictions including the depth, repetitions and duration applied, joint mobilization, etc. If in doubt about the appropriateness of any techniques to be used, please check with the Clinic Supervisor.
- v) Always try to include some home care and/or remedial exercises such as stretches, hydrotherapy, etc. for your client. Stretches should include; the name of the muscle(s), a description of the stretch, the hold duration, the number of repetitions, the number of sets, rest period, and the number of times per day or per week. Also chart that the client should stop if pain is experienced and that the exercise has been demonstrated. The instructions should be relevant to their area of concern. If the client is not showing any improvement with the stretches they have been given, it may be necessary to review and modify treatment and/or the homecare.
- vi) Approved CCMH abbreviations for specific manipulations are acceptable.
- vii) Avoid personal comments like "talks a lot", "really nice person", "snores", etc.

SCHEDULE E – HOW TO MEASURE BLOOD PRESSURE

- i) Take your client's blood pressure in the cubicle, ideally after they have sat quietly for a few minutes. Make sure there is not any restrictive clothing around their arm.
- ii) The deflated cuff should be placed around the upper arm 2-3 cm above the cubital fossa. It should be wrapped to fit snugly around the arm, with the bladder over the brachial artery.
- iii) Make sure you are at eye level looking straight at the gauge to ensure an accurate reading.
- iv) Palpatory systolic pulse
 - Place cuff around brachium with arrow aligned to the brachial artery.
 - Palpate the radial artery pulse.
 - Inflate the cuff until the radial pulse is no longer palpable.
 - Make a mental note of the pressure reading on the gauge.
 - Deflate the cuff fully and let blood re-enter the arm
- v) Place the stethoscope earpieces in your ears and the bell of the stethoscope over the brachial artery.
- vi) Pump up the cuff to 30 mmHg past the palpatory systolic pulse that you just made a mental note of.
- vii) Slowly (~5mmHg per second) deflate the cuff and listen for the first thumping sound.
- viii) Note the pressure when the first thump is heard – this is the systolic pressure.
- ix) Continue to deflate the cuff noting when the thumping sounds ceases – this is the diastolic pressure.
- x) Fully deflate the cuff.
- xi) Wait a couple of minutes and repeat.

If for any reason, an accurate reading cannot be measured, the contra-lateral arm should be used. The procedure should be tried again after two minutes. Repeatedly re-inflating the cuff on the same arm may be harmful to the client and will produce inaccurate readings or potential collapse of an artery.

Ensure the proper cuff size is being used. It should be twenty (20%) wider than the diameter of the extremity. The bladder length should be twice the recommended width. If a small or extra-large cuff is required, please speak to the Clinic Supervisor who can obtain either from Reception. If an accurate reading still cannot be taken, the Clinic Supervisor should be consulted.