

International Experience of Physical Therapy Internship

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After graduating from the University of Hawaii with a degree in Asian Studies, I was able to experience three years of living in Japan as an English teacher. I learned many things about another countries culture and way of daily life. When I returned home to America, I went to school to study massage and physical therapy. At that time, I knew I wanted to see how the health care system of Japan compared to America. My reasoning is to understand how culture in health care practice affects the patient. I wanted to observe the different techniques of physical therapy treatments in a foreign country.

When I first visited the Japanese hospital, seeing a shoe rack to change outdoor shoes for indoor slippers at the entrance of a room, when I was already indoors was a very Japanese concept. This is Japanese cultural recognition of a different space with a special purpose. In this case, it was the space for physical therapy.

In the physical therapy room, the same type of equipment as in America could be seen. There were gym and modality equipment, treadmills, exercise bikes, parallel bars, and treatment mats and tables. The floor plan of the room was a slightly different. Treatment mats were grouped into four, touching to form a big rectangle. This way, four patients could be treated in close proximity of each other. I believe this is part of the cultural and social aspect of Japan. It is acceptable for people in similar situations to share space. In situations where Americans would feel more comfortable with a treatment area separate from other patients, or in a private

treatment room, Japanese are comfortable in a group setting.

The traction unit is another example of this. It has a cervical and lumbar unit attached to each other. The person receiving cervical traction would be looking at the feet of a lumbar traction patient. This doesn't change the effectiveness of the treatment; it is just a difference of cultural views on personal space and privacy. There are curtained treatment areas that are used when exposure is required for treatments such as electrotherapy or ultrasound.

Another difference is addressing activities of daily living (ADLs). Part of the therapy room includes an area set up in the style of a traditional Japanese style house, with tatami mats. There is a low table at which you need to be on the floor to sit at. This is something that therapists must be aware of and be mindful that a person may be required to perform bending and floor sitting activities to live there normal lifestyle. Adaptive living equipment and assistive devices must be made with these ideas in mind. A Japanese PT understands this, but a foreign PT treating a Japanese patient my not know to consider these types of living situations, where floor sitting or floor mobility training may be needed. ADLs must reflect the true world and a therapist must be aware of their patient's needs individually and culturally.

When observing the physical therapy in Japan, there is no occupation of physical therapy assistant (PTA). Therefore, it was important for me as a PTA student to understand what my

duties are and what types of treatments I could and couldn't perform. Using the skills forms of clinical internship evaluation of my school aided in sharing information about what a PTA can perform. The other resource was the American Physical Therapy Association, which defines a PTA.

In the hospital for my clinical practicum, PTs performed a lot of manual therapy and joint mobilizations. As a PTA, this is out of my scope of practice. I observed a lot and assisted where it was appropriate. Transfers, modalities and gait training were some of the more obvious times when I could perform my required skills. Because there is no PTA in Japan, PTs spent a greater amount of time with their patients than their American counterparts. Japanese PTs are able to see their patient continuously throughout the plan of care and do not need to refer to documentation from the patient chart as much. They have closer contact with patients than most American PTs.

The use of contemporary concepts and continuing education were present in my experience. I observed the use of state of the art equipment during my clinical. Laser therapy, computer programmed gait and dynamic balance analysis, and standing training were some of the things I saw. I was also able to attending a staff meeting where new information from professional journals was discussed. The desire to keep standards high through continuing education is evident.

From this clinical experience, I observed that cultural values are important in patient care and that the international profession of physical therapy is interested in performing quality service and expanding the knowledge available to them. I am grateful to have had this opportunity to participate in this clinical experience.

The Physical Therapist Assistant

As Japan does not currently have the profession of physical therapist assistant (PTA), the following is provided as an example of the courses taken in the education curriculum of a PTA in the United States.

Expository writing	1
Communication and public speaking	1
Psychology or human development	1
Medical terminology	1
Mathematics	1
Physics	1 with lab
Human anatomy and physiology	2 with labs
Kinesiology	1 with lab
Neuropathology techniques	1 with lab
Introduction to physical therapy	1
Transfers and positioning	1
Thermal agents	1
Electrotherapy	1 with lab
Therapeutic exercise	1
Physical therapy measurements (MMT, ROM)	1
Aging and rehabilitation	1
Pediatric PT	1
Disease and disability	1
PT employment, legal and ethical issues	1
PT technical writing and documentation	1
PT quality assurance	1
Clinical practicum	4 total of 560hours

A PTA earns an associates degree in science. Licensing for the PTA profession is decided by each state individually. Some require the PTA to take an examination. There is a national exam for the PTA, which is available to any graduate of a PTA program. The PTA program of study takes two years to complete.

The American Physical Therapy Association, Standard of Ethical Conduct for the Physical Therapist Assistant is the guide used for PTA services. The standards state that a PTA provides service only under the supervision of a physical therapist. The PT is not required to

give direct supervision, only to be available if needed. The PTA follows the treatment plan made by the PT, and is not allowed to change that plan independently. A PTA does not perform initial patient evaluations, problem identification, physical therapy diagnosis, or physical therapy discharge summary and documentation.

The types of services a PTA can perform depend on their specific education, and do not cover all the services a PT provides. For example, PTAs cannot perform joint mobilization or perform and sharp debridement of wounds. State and federal laws and regulations, and the governing bodies further regulate the services provided by a PTA. The PTA usually performs treatments with physical agents and modalities. They also teach and monitor therapeutic exercise and patient education.

Clinical Internship

The PTA Mastery and Assessment of Clinical Skills (PTA MACS) was used for this clinical internship. Skills include categories of

professionalism, safety, communication, critical thinking, and technical skills. The ability to perform these skills is expected to have been learned through the course work of the students program of study.

The MACS require the student to do self-evaluation and preparation prior to receiving evaluation from the clinical supervisor. When the student is confident they can perform a skill, they receive evaluation and approval from the supervisor. If the performance of a skill is not satisfactory, the skill needs to be performed until approval is received.

In addition to the individual skills, a midterm and final evaluation report is made by the supervisor to give a 0 to 10 rating on categories with comments added on student performance. Upon completion of the MACS, they are given to the coordinator of clinical internship from the student's school. The MACS help to standardize the system of student evaluation of students who are being supervised by many different PTs or PTAs. The MACS system is available for PT and other fields of study as well.