



Prevention: Designed specifically to help reduce the risk and occurrence of musculoskeletal injuries in the workplace. Services include post-offer employment testing, drug testing, task observation, ergonomic assessments, job demands analysis, and pre-shift stretching.

Early Intervention: First step for employees with any work or non-work-related musculoskeletal complaint. Services consist of wellness, health & ergonomic consults (WHE consults), wellness/prevention screens, and OSHA First Aid consults. Early intervention visits happen either virtually, on-site or in the clinic as a near-site consultation.

OSHA First Aid Consultation: For Work Related injuries claimed by EE and agreed upon by ER. We document and review complaint history of incident. We offer MSK assessment of injury location and severity. We document the negative or normal findings. OSHA First Aid consults are 100% shared with the employer, and intervention follows OSHA First aid guidelines. We make acute temporary work adjustments to supervisors and follow weekly through a normal course of healing typically 6-8 weeks. Provided by an ATC, licensed PT, licensed OT or Physical Therapy Assistant.

Wellness / Prevention Consultation: For incidents not deemed work related document and review complaint history and negative impacting performance on the employee in their work setting. We offer MSK assessment, identify MSK impairments contributing, locate involved tissue, and if possible, address the impairment immediately. We offer extensive instruction and education, often reviewing workstations, body mechanics, and ergonomic set up. We typically offer return consults up to 5-6 visits if recovery is occurring. Providers include ATC, licensed PT, licensed OT, or Physical Therapy Assistant.

First Aid: As stated in §1904.7(b)(5)(ii), **first aid** means only the following treatments (any treatment not included in this list is not considered **first aid** for recordkeeping purposes): (a) Using a nonprescription medication at nonprescription strength; (b) Administering tetanus immunizations; (c) Cleaning, flushing or soaking wounds on the surface of the skin; (d) Using wound coverings such as bandages, Band-Aids?, gauze pads, etc.; or using butterfly bandages or Steri-Strips?; (e) Using hot or cold therapy; (f) Using any non-rigid means of support, such as elastic bandages, wraps, non-rigid back belts, etc.; (g) Using temporary immobilization devices while transporting an accident victim; (h) Drilling of a fingernail or toenail to relieve pressure, or draining fluid from a blister; (i) Using eye patches; (j) Removing foreign bodies from the eye using only irrigation or a cotton swab; (k) Removing splinters or foreign material from areas other than the eye by irrigation, tweezers, cotton swabs or other simple means; (l) Using finger guards; (m) Using massages; or (n) Drinking fluids for relief of heat stress. Medical treatment does not include visits to a healthcare professional for observation and counseling, or diagnostic procedures.

Post-Injury Care: Not all musculoskeletal complaints can be resolved or prevented during early Intervention. Post-Injury Care requires formal PT evaluation and episode of care following WC or CMS guidelines. We continue formal Physical Therapy medical treatment for the injured WC employee. Our communicated goal is always 100% recovery to prior injury capacity. Identification of the root cause, formal physical therapy care, functional recovery testing, work hardening/conditioning is essential to measure consistent recovery during the medical treatment journey.

Formal Physical Therapy Episode of Care: This is a formal medical treatment offered by a licensed DPT or MPT provider. More comprehensive MSK evaluation, objective measuring, medical assessment, goal setting, outcomes measuring and an execution of a formal therapeutic prescription. **Entering a formal PT episode of care triggers a WC case.**

Criteria for Formal Physical Therapy:

- a. **Referral by Medical Provider**
- b. **Injury Prevention (Non-Work Related) care that fails to improve.**
- c. **Injury Prevention (Work Related OSHA) fails OSHA First Aid management. Then employer agrees it's a formal recordable WC claim.**
- d. **Therapeutic exercise prescribing beyond employer's prevention stretching program.**
- e. **Any therapeutic prescribed treatment, examples dry needling, ultrasound, E Stim, etc.; this immediately requires formal PT evaluation and becomes formal PT medical treatment.**
- f. **Chronic issues that flare up but settle down quickly within 6 visits of Injury Prevention and maintain for 2 months are NOT considered formal PT.**