

>> TELEREHAB PROVIDED A SAFE PLACE DURING COVID-19

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A forklift backed up, pinning Toni C. against metal shelving while she was stocking warehouse shelves in March 2019.



>>> TONI'S STORY

The serious crush injury left her with a fractured tailbone, dislocated pelvis and separated pubic bones as well as a hand injury.

Due to the type of fractures and severe swelling, conservative care including injections and nerve blocks along with physical therapy—was the first method of treatment. Lumbar surgery was performed in March 2020 to address ongoing pain from nerve compression in the lower lumbar/upper sacrum. The surgeon told Toni that the surgery could worsen her slight leg length discrepancy from underlying scoliosis.

Six weeks post-surgery, she donned a mask and gloves and headed to start PT in a clinic that was not in MedRisk's network. Because she has a teenage daughter who is a cancer survivor with severe immune deficiencies, exposure to COVID-19 was a huge concern.

Toni was appalled to see that none of the clinic staff wore masks nor were they sanitizing equipment. Instead of taking a seat as they suggested, she walked out and called her nurse practitioner who insisted, "get out of there now!" Her nurse case manager quickly arranged for her to see MedRisk's Supervisor of Telerehab Services Jill Carnahan, PT, DPT.

Jill started the evaluation by asking what hurt the most and Toni started crying. The severe trauma to her pelvis had left the soft tissue swollen and painful and the orthopedic providers she'd seen dismissed these concerns. She was frustrated and depressed.

"Jill was the first person who listened to me, understood what I was going through and knew what I needed," Toni said. "I knew my back would get better eventually, but I had gone a year without being able to be intimate with my husband and was afraid I'd never recover." Jill's reassurance and treatment plan helped lift her depression.

Therapy started with very gentle stretching for the lower extremities and low back and progressed to a gentle mat core program. Bands and thera-ball core strengthening exercise came next followed by a walking program. After every session, Toni received an email with links to videos of the exercises so she could practice on her own between telerehab visits.

When starting telerehab with MedRisk in April, Toni could not stand for longer than 5 minutes





or shower alone. She struggled with mobility and had to wear a back brace. She also had trouble trying to bend or squat, which were major aspects of her job.

Unfortunately, the surgeon's prediction was right; the surgery left one leg 11/2 inches shorter

Toni progressed from being unable to stand for more than 5 minutes to standing during the whole session and was eventually able to lift 10-15 pounds.

than the other, creating significant pain in her legs and ankles. Toni needed shoe lifts before she could stand for any length of time and start the walking program.

During the 36 telerehab visits between April and September, Toni progressed from being unable to stand for more than 5 minutes to standing during the whole session and was eventually able to lift 10-15 pounds. As her core strength increased, she could move around more easily. Plus, her pelvic floor issues improved along with her spirits. By late summer she could take her dogs on 20-minute walks.

Because Toni's job involves standing, walking, squatting, kneeling, and lifting at least 25 pounds, Jill recommended work conditioning in a clinic. "To ensure she could perform job-related tasks safely, she needed a therapist by her side as she knelt and lifted," Jill explained.

After completing the work-hardening program, Toni received a functional capacity evaluation and was cleared for light duty and returned to work part time. She says her employer has been "wonderful, letting me work in the mornings because I get tired in the afternoons." Toni can also move between the warehouse and a desk job during her shifts.

When asked what she liked best about telerehab, Toni was quick to say, "I felt safe." In addition to avoiding coronavirus exposure, it was easier to talk about sensitive issues when it was just Jill and her.

Like other patients who experience good outcomes through telerehab, Toni put in the time and effort. She continues her exercises and looks forward to expanding her work hours and tasks.