



ARD Vision Statement

To improve the neuromuscular health of animals.

To promote the advancement of clinical practice in animal rehabilitation.

To increase the awareness of and access to animal rehabilitation by registered Physiotherapists.

ARD Mission Statement

The Animal Rehab Division of the Canadian Physiotherapy Association advocates that Registered Physiotherapists are the professionals of choice to provide animal rehabilitation. The ARD is a resource for the best practice of animal rehabilitation through education, professional development and communication within the animal health care industry.

Winter 2020-21 It's (mostly) politics!

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Course Calendar

Canine Home Study

Introduction to the
Canine Patient
Pre-requisite for
Introduction and
Advanced Canine Rehab
Available Anytime

Click here to register!

Equine Home Study

Introduction to the Equine Patient.

Pre-Requisite for Introduction to Equine Rehab

Available Anytime

Click here to register!

IN-PERSON COURSES

Due to COVID, the CPA has cancelled all in-person courses until further notice.

The ARD will resume in-person courses as soon as possible.

This is a great time to get your Home Study courses done!

A Word From the Chair

Kim Barrett, Co-Chair

Happy holidays!

I am counting down the days left in 2020. It has been an interesting year for everyone, including the ARD. It has been disappointing not to offer in-person courses this year. However, with the amount of Canadians that have been sick and have lost their lives, not being able to run courses is minor in the grand scheme of things.

All of our members have been affected one way or another with this virus. Having to close businesses, quarantines, having friends or loved ones who are ill, sweating in PPE all day, have been challenging. My heart goes out to all and my wish is that everybody stay safe and healthy in the upcoming year.

The ARD has been busy, particularly as it relates to advocacy. Laurie Edge Hughes and Sue Van Evra, as our advocacy team, have been working with issues related to animal rehab in Ontario and British Columbia. This newsletter has a lot of information on the work that's being done.

Technology was not on our side during the CPA virtual conference. Sue was scheduled to do a presentation about canine assessment; unfortunately, it didn't happen during the scheduled time to problems with the software of the conference. Sue has been able to record her presentation and it is available for CPA members.

We have also just realized that our combined newsletter entitled "Marchtember" was available on the website, but not sent out in an e-blast, so it has been added to the same e-blast as this newsletter, just below. You'll find that it is now in the Newsletter Archive section on our website.

This cold, socially distanced winter, may be a good opportunity to complete your canine and equine home study courses if you have not already done so.

In the meantime, take a deep breath, relax your shoulders, unclench your jaw. Hope is on the horizon.

Kim Barrett Co-Chair, ARD

The Student Perspective

Katie Wood, U of T, @thektwood

We're happy to welcome Katie to the ARD Executive as our new Student Rep. Katie wrote a recent blog about student life during COVID-19 times that we wanted to share with you.

Over the last few weeks, I've noticed many of my classmates (myself included) struggling a bit under the combined pressures of pandemic society, a graduate-level workload, exam stress, and the responsibilities of being in a professional program.

Throughout our education and undergraduate career, we've all been fed this narrative of high-stakes. That our "worthiness" or value to society is closely linked to our academic achievements. And, unfortunately, for a lot of us pursuing professional programs, this has been perpetuated even further. The heavy weighting of academic achievements in the admissions process for many professional programs produces in us this emotional investment in these arbitrary values. And I've been there too, a devastated and sobbing wreck sitting in my car, after receiving my third rejection in three years from a professional program.

But, through a lot of reflection and time, I've come to realize how counterproductive that mindset can be. Substantial emotional investment, to the point of loosing objectivity, makes it difficult to contribute to the world in the same way. We do not have the creativity to imagine new ideas, the courage to stand out, and the optimism and resilience to produce change or initiate debate. It's difficult to see the "big picture" when it's been constantly reinforced to us that our worthiness is correlated to a mark on a test.

And that doesn't mean emotional investment in an outcome is always a bad thing. Passion can help drive us to an action that is beneficial. But, unchecked, those emotions just burn our energy and leave us with less resources to produce results or change.

The first step to shifting this mindset it to recognize that your value as a professional or as a person is not linked to your mark on a test, or even whether you were accepted into the program on your first or fifth application, or not at all.



It's a hard mental shift (still a work in progress), and it won't come overnight. But a little emotional neutrality can help us to keep the big picture in sight and recognize value in ourselves.

Want a Diploma in Animal Rehab? Here's How!

Introduction to the Canine or Equine Patient Home Study Course

Covers anatomy, physiology, and common conditions. Please note this is a home study course with a physical manual, which is mailed. This is not an online course.

Pre-requisite for all other ARD courses, available anytime.

Register for all ARD courses online ard.rostertrack.com/

Introduction to Canine or Equine Rehab

Hands-on course covers anatomy, palpation, handling skills, basic orthopaedic and neurological assessment, and specific canine or equine conditions and pathologies.

Pre-requisite - Introduction to the Canine or Equine Patient Home Study Course.

In-person courses suspended during COVID-19.

Advanced Canine or Equine Rehab

Detailed joint by joint and spinal physical assessment, neurological evaluations and treatment, therapeutic exercise and sporting dog injuries, surgical review.

Pre-requisite - Home Study course and Introduction to Canine or Equine Rehab.

In-person courses suspended during COVID-19.

Diploma in Canine or Equine Rehab Requirements:

Completion of all ARD canine or equine courses.

Written examination, written case study.

Veterinary Clinic Observation (40 Hours).

Additional animal husbandry, handling, & safety considerations.

Laurie's Blog





Two for the Price of One - Aging, Weakness, & Patellar Luxation

In this week's blog, I want to talk about 'late onset patellar luxation'. Now, I bet some of you are thinking, 'late onset, what the heck is that?' Well, have you have seen a dog that is aging or who has suffered some rear end or rear limb weakness, who has a concomitant patellar luxation? I'm betting you have! Is the patellar luxation a primary problem? A secondary problem? Was it there all along? Let's discuss!

My first epiphany into this concept is a retired agility patient of mine. This little dog has been coming to the clinic since she was a pup. She conditioned on the underwater treadmill. She had regular physio check-ups and tune-ups. She was a solid little rock star.

Then she had puppies. Then she got soft. Then new dogs came into the picture. Then she was retired from sport. Now, because she wasn't practicing or trialing, the owner wasn't bringing her in for conditioning or physio on a regular basis. I can't say exactly how long it was after she was retired, but I want to say it was about a year and a half, when I noticed some patellar laxity in one leg.

It was subtle at first. Maybe a grade 2 minus. I went back through her entire chart looking for any indication of patellar luxation in the notes. Nothing! I wondered if I had missed it for all these years! However, it's been about three years since that time, and the patella mobility has worsened a wee bit, more to a grade 2+ or 3-. It is currently at a point that I KNOW I wouldn't have missed finding it all of those years before.

So, it made me wonder why.

The only logical conclusion that I can draw in this case is that she did have 'loose' patellae all along – maybe grade 1, but that she was fit and muscled enough that it was not a problem. However, as she deconditioned, so did the stability at the patellofemoral joint. Had I not known this dog for her entire life, I might not have recognized this phenomenon.

I've read comments from other rehab professionals on various Facebook groups eluding to this finding as well. So, I know I'm not the only one that has made note of this. What makes this significant, however, is that it leads to a number of different scenarios that you may need to be aware of as a rehab practitioner.

An older dog comes in with some rear end weakness stemming from the back, the neck, or the hips, as examples, but you also find a patellar luxation. Is the patellar luxation primary?

A neurologic dog also has a patellar luxation. Will it need patellar surgery?

ANY dog comes in with a patellar luxation and other issues that would affect strength in the rear limbs. Is the patella primary? Does it need surgery?

MAYBE NOT.

From a diagnostic perspective, it would be useful to question, "Is the patellar luxation a primary issue or is it the result of weakness caused by some other issue?"

From a treatment perspective, it would be valid to see if the patellar luxation could be treated with strengthening and conditioning or by correcting another related issue (i.e., back pain)?

From a maintenance perspective, there would be justification for continued conditioning of the retired sporting dog as well.

Just more things to think about in your problem solving and treatment planning, and another 'two for the price of one' set of conditions!

Laurie



Here's a great bit of news!

Stephanie Hassal submitted a video for our ARD Student Scholarship, "What is Animal Rehab?" several years ago. It has just been picked up by "Supreme Master Television," a non-profit internet-based television channel whose goal is to bring the most uplifting aspects of human culture to our international audience.

They have asked our permission to air it on the show "Animal World: Our Co-Inhabitants," which showcases the greatness of our animal friends - their intelligence, fun, love, and compassion. The show also features stories around animal rescue, animal rights, animal health, and more.

We said yes.

For a sample of their shows check out this link:

http://suprememastertv.com/en1/search/?
q&type=AW&date1=all&date2&sort=lastest&fbclid=lwAR2lo0ZGpoKqJIWxiZyNscUABYSGxEFgLhLC-DR77nldy46Nn3iAStoMD7c

To watch the "What is Animal Rehab?" video, click here!

https://www.youtube.com/watch? v=cFZoSdA4qSk&feature=emb_logo&fbclid=lwAR0XzA8AEexHbSyye3N1NRGeDhRYHd0pQbsMv0l3h3tRldA 0OzPaplfuqjo

News from Ontario

What's happening now!

In July 2020, the ARD became aware of a new Policy Statement released by the College of Veterinarians of Ontario. This statement indicated that the treatment of animals with forms of energy (laser and shockwave in particular) was to be re-classified. This re-classification would potentially mean that physiotherapists working on animals would no longer be able to use these forms of treatment, as only a licensed veterinarian would be qualified to use them.

You can imagine our response.

Since that time, the ARD and Laurie Edge-Hughes have been working diligently to make sure that this doesn't happen. We have decided to make this newsletter all about our journey and where we stand today.

Here is the initial Policy Statement released in July, 2020.



POLICY STATEMENT

Use of Forms of Energy in the Treatment and/or Care of Animals

It is the position of Council that the use of forms of energy in the practice of veterinary medicine poses a risk of harm to an animal(s) and/or providers, dependent on the application. Given this position, Council has approved a public statement that outlines the levels of regulatory oversight required to utilize forms of energy in the treatment and/or care of animals. This specific policy statement has been developed to expand on Council's position and to outline how it is to be implemented by veterinarians in their practice.

Definition

Forms of Energy: There is no specific definition of forms of energy that can be found across the professions who utilize them. Forms of energy generally refer to the use of a tool and/or equipment to create either ionizing or non-ionizing radiation designed to produce a specific outcome to aid or enhance the treatment and/or care of a patient. The particulars of the desired outcome vary based on the form and method used.

Classification Based on Risk

Whether the use of a form of energy in the treatment and/or care of an animal requires regulatory oversight is based on a risk analysis that considers both real and potential harm. This risk analysis is based on current research and is designed to evaluate each form of energy in an unbiased and consistent fashion. In particular, the risk analysis seeks to determine if:

- the use of the form of energy requires sedation;
- the use of the form of energy inflicts pain or discomfort;
- the use of the form of energy puts the patient and/or provider at risk of undue exposure or harm;
- the use of the form of energy requires a specific set of knowledge or training in order to be properly administered;
- · the use of the form of energy has been researched and validated; and
- the use of the form of energy has a high risk of adverse effect if improperly administered.

Note on Efficacy

This risk analysis does not consider the real or perceived efficacy of forms of energy. This is due in large part to the lack of research related to the overall efficacy of many forms. Given this, it is recommended that the real or perceived efficacy of a form of energy be included as part of the conversation that occurs between the veterinarian and/or provider and their client.

Levels of Classification

Based on the aforementioned risk analysis, three categories have been developed that oversee the use of forms of energy in the treatment and/or care of animals. These classifications have been created in accordance with the Veterinarians Act and its associated regulation, and are designed to provide clarity related to their oversight.

Category One – High Risk

The first category of regulatory oversight has been designed to oversee forms of energy that have been determined to have high levels of real or potential harm associated with their use in animals. In particular, these forms of energy have characteristics and/or uses that associate them with:

- surgery;
- diagnostics;
- the requirement for sedation;
- below the dermis procedures;
- high levels of potential harm and/or injury;
- requirements for advanced knowledge or training in order to be properly administered;
- high level of risk of harm if improperly administered; and
- varying degrees of clinical research.

Given these characteristics, forms of energy that fall under this category are to be used only by a veterinarian, or an auxiliary working under a veterinarian's delegation with immediate or direct supervision.

At this time, the following forms of energy fall under this category:

- any forms of energy that employ or produce ionizing radiation;
- magnetic resonance imaging;
- laser therapy (class 4 and 3B lasers);
- any forms of energy used in surgery (laser surgery, lithotripsy, cryosurgery, radiosurgery, etc.);
- electrical muscle stimulation (below the dermis); and
- diagnostic ultrasound when performed below the dermis (i.e., transvaginal, transrectal, etc.).

Category Two - Moderate Risk

The second category of regulatory oversight has been designed to oversee forms of energy that have been determined to have moderate levels of real or potential harm associated with their use in animals. In particular, these forms of energy have characteristics and/or uses that associate them with:

- specific forms of diagnostics;
- varying requirements for sedation;
- above the dermis procedures; and
- moderate risk of potential harm and/or injury.

Category Three - Low Risk

The third category of regulatory oversight has been designed to oversee forms of energy that have been determined to have low levels of real or potential harm associated with their use in animals. In particular, these forms of energy have characteristics and/or uses that associate them with:

- above the dermis procedures;
- low levels of risk of potential harm and/or injury;
- limited to low requirements for advanced knowledge or training in order to be properly administered;
- low levels of risk of harm if improperly administered; and
- varying degrees of clinical research.

Given these characteristics, forms of energy that fall under this category may be used by a veterinarian or a non-veterinarian. Non-veterinarians cannot represent themselves as practicing veterinary medicine.

At this time, the following forms of energy fall under this category:

- pulsed electromagnetic field therapy;
- therapeutic ultrasound;
- laser therapy (any class of laser that falls below 3B); and
- electrical muscle stimulation (above the dermis).

This was truly a call to arms for all physiotherapists in Ontario who were practicing animal rehab! Under the expert guidance of Laurie Edge-Hughes (Advocacy Lead for ARD), we responded in multiple ways:

- 1. A formal follow-up letter from the ARD.
- 2. A letter-writing campaign to the CVO from Physiotherapists, animal owners, and Veterinarians.
- 3. Legal guidance from multiple sources (including lawyers and judges).
- 4. The creation of safety documents with respect to laser and shockwave.
- 5. The creation of an "Ontario Animal Owners Association".
- 6. Regular updates to the Ontario Animal Physio group.

We are happy to report that the CVO was inundated with hundreds of outraged letters from our supporters. This got their attention very quickly and they arranged for a video conference call with us...

August 10, 2020

College of Veterinarians of Ontario 2106 Gordon Street Guelph, Ontario N1L 1G6

To:

Jan Robinson, Registrar & CEO: jrobinson@cvo.org Sarah Kirby, Policy & Project Specialist: skirby@cvo.org

Follow-Up Regarding: CVO Policy and Position Statements on Forms of Energy

Dear Jan & Sarah,

I would like to thank you for hosting and inviting me to participate in the virtual meeting regarding Forms of Energy on July 30th, 2020. The Animal Rehab Division appreciates the opportunity to provide both written and verbal feedback on the Policy and Position Statements.

Further to the discussion on July 30th in regard to animal-specific literature as it pertains to the safety of therapeutic laser and radial shockwave, I have conducted an additional literature search specific to the concerns highlighted in the meeting. As well, I have highlighted the animal-specific literature that was already presented in my first letter as Appendix 1 and 2, and have included them here again for your perusal.

The new Addendum to Appendix 1 & 2 that I have provided covers the topic of laser therapy and the concern of an underlying cancer. According to the literature it would appear that laser is safe to use over cancerous lesions. Furthermore, laser therapy may have a beneficial effect on shrinking cancerous lesions. In regard to the literature on radial shockwave, I have provided links to two review papers that cite both animal and human literature that facilitate a better understanding of this modality. In Appendix 2 (SHOCKWAVE Safety), I had previously included references for shockwave and it's use in fractures (Wang CJ et al & Wang L et al). These citations are now highlighted for easier reference. Literature in the new Addendum provides additional animal studies regarding radial shockwave and fracture healing. The literature suggests that radial shockwave is not a concern in bone fractures, but rather may be of benefit. Three studies were found that commented specifically on the safety of radial shockwave in animal models. Four studies on radial shockwave were identified that discussed minor adverse events that occurred within their studies as well as tolerance to treatment. There is also a relevant concluding statement regarding use of shockwave before equine competition events.

In regard to the comfort of radial shockwave, please refer to a compilation of videos here included from various canine rehab practitioners across North America to show how unsedated animals respond to this therapeutic tool.

https://www.youtube.com/watch?v=rnuUcAwd6Ps&feature=youtu.be

We believe that 'evidence-informed' practice should be the goal in clinical practice as well as in the creation of policy. In areas where species-specific literature is non-existent, it is prudent to utilize non-species-specific literature or fundamental research as the best 'available evidence' to guide practice and policy. Unreasonably strict adherence to the 'evidence-based' concept would result in may animals (or humans) not being treated at all.

Thank you once again for taking the time to meet with me and other non-veterinarians who practice animal rehabilitation on the matter of forms of energy in animal care.

I look forward to further engagement with the CVO. Please direct your correspondence to me at physio@fourleg.com.

Sincerely,

Æsfillighe.

Laurie Edge-Hughes, BScPT, MAnimSt (Animal Physiotherapy), CAFCI, CCRT Advocacy Lead,

The Animal Rehab Division of the Canadian Physiotherapy Association

C.C.

Dr. Susan Warren, President & Council: president@cvo.org

By the way, the CVO had never even HEARD of radial shockwave. SHOCKING.

Access Laurie's safety documents on the CPA/ARD website under "Resources".

https://physiotherapy.ca/sites/default/files/safety_of_laser_therapy.pdf

https://physiotherapy.ca/sites/default/files/shockwave_safety.pdf

The following pages are Laurie's response to follow-up questions from the CVO about how physiotherapists assess and treat animals in general.

Level of assessment to determine appropriateness for shockwave?

When any new patient is presented for rehabilitation, a physiotherapist conducts a full assessment. This would start with communication with the veterinarian (i.e., obtaining medical records, reviewing the veterinary referral or medical clearance, and/or speaking with the veterinarian). The subjective evaluation would ask the client about the past medical history, medications, supplements, activity level, veterinary diagnostic test(s) findings, veterinary diagnosis, the history of the present injury, activity level/social history, as well as what other therapies have been tried.

The physical evaluation is always a full body evaluation: evaluating gait, joint ROM, muscle/ tendon extensibility, and tenderness of bone, joint, and soft tissue structures. Special tests are conducted at the area of primary concern to identify specific conditions. Neurologic testing is conducted as a screen at first or in greater detail if suspected of an issue. Axial skeleton joint functioning is also evaluated. **This is standard for every new patient.** A physiotherapist will make a *pathofunctional* diagnosis / *physical* diagnosis / *clinical impression* prior to treating any patient as a complement to a veterinary medical diagnosis that might be provided by the patient's veterinarian. Should a physiotherapist have any concerns that the patient has a sinister or serious pathology (i.e., cancer, fracture, infection, medical condition, bleeding disorder, etc.) or doubts about the patient's suitability for physiotherapy or a particular treatment modality, or if the physical findings are unusual for conditions typically treated by physiotherapy, then the veterinarian is consulted. As an example, Canadian research has shown that physiotherapists and orthopaedic surgeons have a 91.8% agreement rate in hip and knee cases, and in discordant cases, physiotherapists tend to refer for consultation (MacKay et al. 2009).¹

It is also important to note that physiotherapists consistently perform a re-evaluation of the problematic area on a patient with each and every appointment. This allows for an evaluation of the response to treatment and appropriateness of the previous treatment(s) administered. This is standard physiotherapy practice. Simply because shockwave (or any modality) was utilized in a previous session does not mean it is indicated in the next session. Therapists routinely check with the owner to inquire about how the patient felt after the last treatment in order to monitor progress, understand individual responses to treatment, and make decisions on the treatment plan for the current session.

Shockwave is only one of a number of available options for any patient. It is not treated any differently than anything else. There are contra-indications for all modalities and manual therapies, so all of those would be addressed.

Is the assessment consistent across all potential energy modalities?

The physiotherapy assessment is what guides a physiotherapists choice of therapy – be it modalities, exercise, or manual therapies. There is no physiotherapy treatment (modality, manual therapy, or exercise) for which an abbreviated assessment is appropriate. Physiotherapists do a full assessment (30-60 minutes) prior to determining what modality (if any) would be appropriate for the problem. There are contraindications for everything.

As noted above, a therapist would pay special attention to the medical records, unusual signs, or atypical findings that would suggest that the patient had a condition that was not appropriate for radial shockwave therapy (or any other therapy for that matter). See listing above. All treatment options are discussed with the owner and any contra-indications would be addressed during the assessment.

In addition to a detailed assessment as described above, a physiotherapist would also explain what to expect with each modality or therapy. For radial shockwave specifically, a therapist would ask about noise sensitivity and/or the animal's typical response to novel stimuli, as these would be non-physical reasons that could impact a therapist's decision to use this modality. As mentioned above, a re-evaluation is done before every treatment session to determine if a continuance of the previously selected therapies is appropriate.

Informed consent

Informed consent prior to the assessment and application of any treatment is standard practice for physiotherapists. The College of Physiotherapist of Ontario website states, "The physiotherapist must be sure that patients understand what is going to happen before the treatment begins by providing information about the nature of the treatment, its benefits, risks, side effects, the alternative courses of action, and any possible consequences of not having the treatment. The physiotherapist must also answer any questions the patient may ask about the treatment." The expectation is the same when a physiotherapist works with an animal patient; the owner is informed and provides consent before their animal is assessed or treated.

All treatment options are discussed with the owner and any contra-indications would be addressed during the assessment. And if the owners are not comfortable with it we would not do it.

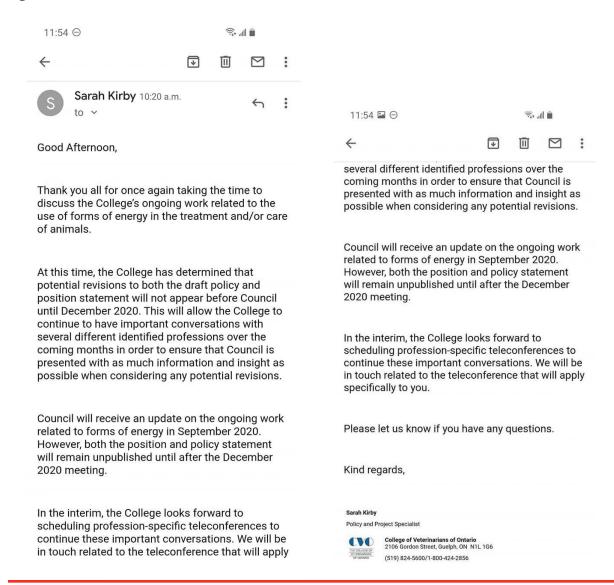
References:

- MacKay, C., Davis, A.M., Mahomed, N., et al. (2009). Expanding roles in orthopaedic care: a comparison of physiotherapist and orthopaedic surgeon recommendation s for triage. J Eval Clin Pract, 15 (1), pp 178 – 183.
- 2. College of Physiotherapists of Ontario. (2019). Requirements for Physiotherapists Obtaining Consent from Patients. Retrieved from: https://www.collegept.org/rules-and-resources/consent

CVO Zoom Call Highlights

Several ARD Executive members sat in on the Zoom calls with the CVO. Overall, we were happy with how the conversation progressed, and the CVO has gone back to the drawing table about "forms of energy". We continue to be involved in the process and will be advocating for our members. At this point in time, it sounds like laser will be changed to the classification "in the public domain", meaning that anyone can perform laser and we would not require a veterinarian referral or supervision.

We would also like to thank Dorianne Sauvé from the OPA for joining us in our meetings with the CVO. She has been included in all of our teleconferences with the CVO and has been a calming, influential voice. It's nice to have the backing of the OPA and CPA behind us as we negotiate with the CVO.



Ontario Animal Owners Facebook Group





Laurie Edge-Hughes has created a new group and Facebook page (and logo):

Ontario Animal Owners Association https://www.facebook.com/groups/300674274383880

We are asking all our Ontario members to join in and invite your clients to join! We want to keep owners aware of what the CVO is proposing.

From Barbara Lee's Post (Group Admin) Sept. 5/20 Update on LASER and Shockwave Therapy

Some of us were invited back to meet with the CVO along with new guests from the Chiropractic Association and College.

Your support and letters made a difference, thank you. The CVO agreed for Class 3B LASER's to be in Category 3, enabling those of us that are Certified in Canine/Equine Rehab to continue to treat animals with our 3B LASER's. Class 4 LASER's will be in Category 2 (higher risk), therefore, they will have to be used under supervision of a veterinarian or by referral from a veterinarian.

At this time, they are not recognizing the difference between Focal and Radial Shockwave. At our first meeting we explained to them that animals do not have to be sedated for Radial Shockwave and that many therapists were using it as part of their treatment protocols with great success. They were sent many research papers to support our request but that did not make a difference. However, they did agree to get their experts together with experts from the physiotherapy and chiropractic fields to discuss this further. Thank you all for your support.

Hot Off The Press!

Just as we were putting the finishing touches on this newsletter, a breaking story has emerged! Our ARD correspondent Barbara Lee from Niagara, reports in from her Facebook account on Dec. 17/2020:

I have just received a letter from Sarah Kirby at the CVO informing me of the outcome of the meeting and the amendment Council made to the Policy on Forms of Energy. The changes Council made are:

- Focused shockwave therapy be reclassified to Category Two Part A;
- Radial shockwave therapy remain classified in Category Two Part B; and
- That the position and policy statements be published as amended.

I have attached the document she sent me. It will be published in January. She has also mentioned that she will be contacting my partner and I in the New Year in regards to the creation of an inter-professional working group designed to assist in the development of strategies and/or resources to encourage collegiality and cooperation between different animal care providers.

Overall, this has ended positively; we didn't win everything, but we certainly made a huge difference and made the CVO stand up and take notice. Thank you Laurie Edge-Hughes and all others that participated. Everyone made a difference.

Now its time to comment on the policy/position statement regarding Alternative Therapies!

The actual document is 27 pages long, so we're not going to re-print it here. The ARD will keep you well informed of what is happening.

Watch for our e-blasts and our next newsletter!

Physio's Gone Quackers!

Carrie Smith, BScPT, CCRT, CAFCI

This newsletter has been a pretty heavy political issue, so it's time for a little levity!! I was recently treating one of my human patients, and we were chatting about her farm animals. She has pet ducks, and she was telling me about a duck that had just hatched. This duck hatched out the side of the egg (which is very unusual), and was born with a very crooked neck. His head was stuck to the left, he couldn't lift his head and he couldn't swim, because his face was underwater if he tried to swim. Now, a duck that can't swim is not really a duck, is it?

Of course, as an animal rehabber I jumped at the chance to treat a duck! No, I've never treated a duck before, but I was game to try (at the very least, for the photo opportunity!). Our clinical reasoning skills will work on any animal so I was anxious to assess this duck.

We arranged for the duck to come into the clinic. His name is McQueen. At this point, McQueen was still quite small and easily transportable. I put a big plastic sheet down on the floor (in case of any accidents) and proceeded to assess him.

His neck was deviated in two places, one around C3/4 and one around C6/7 (although, honestly, I don't actually know how many cervical vertebra a duck actually has!). He was stuck in what I am calling a "Duck-i-collis" or a scoliosis of the C-sp.

I could passively straighten his neck out completely, so it wasn't a bony fusion. At the two levels of deviation, there was a definite restriction in side gliding. Since we obviously did not take an x-ray, I don't know if there was an underlying bony deformity like a hemi-vertebrae.

Here's what I did to treat McQueen:

- 1. Side glides into the restricted end feels at both levels of deviation.
- 2. Manual traction and passively taking his neck into a full stretch (by the way, those necks can stretch a LONG way).
- Passive range of motion into flexion, extension, right and left side bending, and right and left rotation. He had full passive range of motion in all directions and seemed to be painfree in all directions.
- 4. Laser to the affected spots on the neck.
- 5. Myofascial release to the cervical spine (he LOVED this).
- 6. Home exercises: I taught the owner to do PROM in all directions and manual traction. by the other birds.



McQueen lying in his travelling crate. Because he can't lift his head, he doesn't rest in a sitting position. He can only rest by lying down.

When he's up and walking, his head is flopped over to the left and resting on his wing.





McQueen LOVES treatment!!

If he was a cat he would be purring!

His favourite is manual traction but also really liked myofascial release.

He was the easiest duck I've ever treated :)

For the first few weeks of his life, McQueen had to be separated from the other ducks. Poultry have this instinct where the flock will attack and kill any weak members; it's literally survival of the fittest. In order for McQueen to survive, he had to have his own private residence (which ended up being the garage!).

I treated McQueen three more times, but after the initial assessment I traveled out to the farm because he was getting much bigger and harder to transport. I also added some hydrotherapy exercises - putting McQueen on his back in his bathtub made him actively stretch his neck to avoid getting water up his nose! The owner had to bathe him regularly since he didn't have the neck strength to preen his own feathers.

Each week, there was some improvement and by the last treatment, McQueen was able to stretch his own neck actively, was able to swim without drowning, and was able to join the flock without fear of death. I would say that was a successful rehab!

Even though our rehab training focuses on dogs and horses, don't be afraid to try out your skills on other species! To date, I have treated dogs, cats, rabbits, squirrels, guinea pigs, llamas, and now I can add ducks to my resume! Oh, and I have a turtle coming in next week!



Trupanion Update

History:

Trupanion is one of the common insurance carriers for pet insurance, and several of our members have had to deal with them over the years. On more than one occasion, a rehab claim has been denied because the professional carrying out the treatment was a rehab therapist, not a veterinarian. To help our members and clients of our members, Sue Van Evra and Laurie Edge-Hughes (ARD Advocacy Team) have been addressing this issue.

The ARD sent an official letter to Trupanion addressing our concerns and explaining the amount of background and experience that physiotherapists trained in animal rehab actually have. Here is their response...

We are happy to share the good news!!

Excerpt from Trupanion's response:

"Thank you for the letter that you sent and for giving us the opportunity to address your concerns. We found that the credentials provided by the Animal Rehab Division of the Canadian Physiotherapy Association meet our requirements for coverage by a qualified professional.

While the wording of the current policy does state that "All Veterinary Treatments and care must be provided by a licensed veterinarian with the necessary training and expertise or by a staff member at the authorization of and under the Veterinarian's Direct Supervision", the wording of the Recovery and Complementary Care Rider (which is an additional, optional rider that provides coverage for rehabilitation) states that treatment must be provided by a veterinarian or a qualified professional. Because we have found that the credentials provided by the ARD meet our requirements for coverage by a qualified professional, we will continue to provide coverage provided by practitioners credentialed as such, under the current policy, and we have updated our processing guidelines accordingly as of July 2020."

Tracey Schmidt, Senior Manager

Next time you see Laurie, give her a big thank-you as she spent her entire summer working on all of these advocacy projects for the ARD :)

Canada Wins Gold!

A HUGE congrats to our very own Laurie Edge-Hughes



And the first inaugural International Veterinary Rehabilitation Therapist of the Year Award goes to....LAURIE EDGE-HUGHES!!!!

WOW! This is a massive international accomplishment and we want to send a huge congrats Laurie's way. We all knew that Laurie deserved this award due to the huge contribution she has made to animal rehab, but how nice is it that she is recognized internationally?

And, in Laurie's humble way, she thanked everyone and noted that this was also a huge gain for physiotherapists and for Canada! Laurie has led us every step of the way, from the formation of CHAP (Canadian Horse and Animal Practitioners, our pre-cursor to the ARD) to where we are today. We could not have done this without her, so next time you see Laurie (either teaching a class, lecturing at a congress, or at the bar afterwards...), give her a big pat on the back and say "Well done!"

Laurie was up against some stiff competition, and if you'd like to listen to her interview with the IAVRPT president, here it is: https://www.facebook.com/lavrpt/videos/363445894924666/

Canine Assessment - CPA Virtual Congress

Sue Van Evra, BSc, MSc, BHSc(PT), Dipl.Canine Rehab

The Animal Rehab Division's 'Assessment of the Canine Patient' presentation was one of 18 chosen to be included in this year's CPA Virtual Summit 2020. Sadly, just as the presentation was about to go live, there was an internet issue and I was not able to present! A little disappointing after getting all psyched up to give a fabulous presentation, but what can you do?

The CPA was eventually able to record the presentation, and even though it's no longer live, it's still fabulous!

The presentation gives physiotherapists who are interested in canine rehab an idea of what it is like to assess a dog, and how it compares to assessing a human! This is also a great review video for those of you who are already practicing with animals. It goes over how to do an initial meet and greet, subjective questions, objective signs, and special tests.

To view the presentation, follow this link: <u>CPA Virtual Summit 2020 I Canadian</u> <u>Physiotherapy Association</u>, hit 'view recordings' and log in to CPA to watch! You can find us on Saturday, Nov. 21 recordings.

The CPA has already announced that the 2021 Congress will also be virtual, so we will keep you informed of any ARD contributions to next year's Congress.

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THE NEW ARD STUDENT SCHOLARSHIPS

The Animal Rehab Division is promoting student involvement in both animal rehab and our Division by introducing a new student scholarship program.

The ARD will award up to four (4) scholarships per year to Canadian Physiotherapy students. Successful submissions have a choice of the following two (2) scholarships:

Scholarship 1

Canine or Equine Home Study Program (\$317)

Scholarship 2

 \$250 pre-paid Visa card, copy of Successful Practitioners in Canine Rehabilitation and Physiotherapy

Requirements

- Successful completion of ONE of the following tasks.
- Currently enrolled in a Canadian University
 Physiotherapy Program or new Physiotherapy graduates
 who have completed their course work in the last year.
 Maximum of one award per applicant.



Completed electronic applications should be submitted to: carriephysio@bellnet.ca

Deadline for submission: Annually on Jan. 31

Applications will be scored on content, style, use of video/You Tube (if appropriate), pictures, and originality.

Successful applications will be published in the ARD newsletter.

Choose 1 of the following tasks; be creative and have fun!

- 1. Create a YouTube Video about Animal Rehab.
- 2. Shadow a practicing ARD member and create a video or article about your experience.
- 3. Complete a summary of two (2) veterinary research papers related to rehabilitation.
- 4. Perform a literature review on anything related to canine or equine rehab.
- 5. Develop hand-outs for owners illustrating at least five (5) commonly used exercises for a variety of conditions (canine or equine), in conjunction with videos of the same exercises available to ARD members via YouTube.
- 6. Write a 2-3 page article for the ARD newsletter on any topic of your choice. Article must be referenced, have corresponding photographs, and may have a YouTube link.

ARD BROCHURES!



For ARD Members!

The ARD has new, personalized, Canine Rehabilitation Brochures available for purchase.

A professional and informative way to introduce canine rehab to your clients. This brochure is designed to give information to the public about your rehab services. Printed in colour, on high quality paper, these individualized brochures can help to promote your practice.

Your name, contact and clinic information included.

Cost:

25 Brochures - \$40 + applicable tax

50 Brochures - \$60 + applicable tax

100 Brochures - \$100 + applicable tax



Canine Rehab Brochure Order Form

Name:		
Name and Credentials as you want them to appear or	n the brochure:	
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Large or small animal, general or specialty practice, we can configure a SpectraVET system to best suit your particular clinical and budgetary needs. We even cater for exotics, and can customize our probes' powers and wavelengths to accommodate unique clinical, research and OEM requirements.







Are you like so many of the rest of your canine rehab colleagues out there?

- You took the courses.
- You obtained your certification.
- You had good intentions of applying your knowledge, but then daily life and routines got in the way!
- You forgot what you learned.
- You wonder if there was more you should have learned.

Thus, leaving you with the realization that you now have more questions than answers!

If this describes you, or you are someone simply looking for more canine rehab educational resources, on a regular basis, and from the convenience of your own DON'T THROW THIS AWAY! home...



Then I have a resource for you!

(Pssst... Ask around! You'll find others who are members!)

You will find a blog, some open access educational materials & most importantly a place to sign up to receive e-blasts of educational information delivered weekly. For those craving more, there is a membership side to the website (to access tons of information that I have created and/or presented in the past (and present) and weekly educational 'programming' - videos, audios, articles, and a regular newsletter), plus opportunity to purchase additional informational / educational products, and for members; discounts on FourLeg products and some discounts on products from select vendors (with more to come).

Let me know what you WANT to see, and I'll do my best to create it for you! Laurie Edge-Hughes, BScPT, MAnimSt(Animal Physio), CAFCI, CCRT



SPRING 2021 Newsletter

Here's hoping 2021 is a better year than 2020! We are gathering ideas for our next series of newsletters, so if you have an idea about what you would like to see in upcoming newsletters, we would love to hear from you!

Our spring newsletter will be all about Clinical Reasoning.

Newsletter Editor: Carrie Smith

carriephysio@bellnet.ca

Animal Rehab Insurance

BMS is our CPA insurance company for animal rehab practitioners. Information on policies can be found on the CPA/ARD website.

http://www.cpa.bmsgroup.com/en/coverage-for-animal-rehabilitation-therapists

A BIG THANK-YOU!

The ARD would like to say a big thank-you to our ongoing course and newsletter sponsors.

FourLeg Rehab Inc. and SpectraVet Lasers.

FourLeg and SpectraVet have graciously donated to our Intro and Advanced Canine Rehab courses, which allows us to continue to run courses for our members.

Follow us on Facebook

For all kinds of great clinical ideas and to keep up with what's happening in the ever evolving world of animal rehab, follow us on Facebook.

https://www.facebook.com/pages/Animal-Rehab-Division/305488696135603?ref=hl