



## ptaviewpoint

by Sarah Olson, PTA, LAT

### Get Wet!

*How one PTA took the plunge to advance her career options.*

**A**fter graduating from Gustavus Adolphus College in Minnesota with a degree in athletic training, my life's path took me to the Mojave Desert. Having grown up in Wisconsin, I found that to be an extremely warm environment for a Midwestern girl! Swimming pools were wonderful places to beat the heat. While living in the Southwest, I took water aerobics classes. Little did I realize then that I was dipping my toes into my future career setting.

I later went back to school in La Crosse, Wisconsin, to become a physical therapist assistant (PTA). After graduating, I was hired to fill a PTA position at a sports medicine clinic that included aquatic therapy. I quickly discovered that my knowledge of exercise, anatomy, physiology, and the properties of water provided the background I needed to get started working in the aquatic environment. Soon I was implementing physical therapy aquatic exercise programs, under the supervision of a physical therapist (PT), for athletes who'd had surgery and needed to stay conditioned for their specific sports. Thanks to the buoyancy of water, the athletes with whom I worked could get a head start on exercise at a cardiovascular conditioning level while maintaining weight-bearing restrictions.

In 2001, I changed jobs and began working at a rural hospital that just had built an aquatic therapy pool. After the PT completed the patient evaluation and plan of care, many patients would begin their rehabilitation in the pool with me. At first, I was the only PTA in the water, working 5 half-days a week, working with a new patient every 45 minutes. Depending on the diagnosis, some

patients were seen only in the water. Others were assigned a combination of water and land exercises. Eventually, the "water" patients, if able to tolerate, were permitted to increase their activities and begin the transition to land exercise.

Over the next few years, I took a variety of specific courses to enhance my aquatic skills, loading my aquatic therapy toolbox with hydrodynamic principles and introductions to therapeutic exercise specific to aquatic therapy that included deep-water running, trunk stabilization, as well as elements of other aquatic techniques found in Bad Ragaz, Halliwick, and Ai Chi.

Working in a rural health care setting, one sees a variety of diagnoses, including orthopedic injuries, chronic pain, fibromyalgia, and general weakness. Aquatic therapy is an ideal environment in which to treat patients with nonspecific symptoms and is billed under CPT code 97113 for aquatic therapy with therapeutic exercise.

This is a timed code; PTAs should report one unit for every 15-minute interval of aquatic physical therapy.

The more experience I've had working with the properties of water and taking continuing education courses specific to aquatic techniques, the more I've learned about the value of water beyond its role in un-weighting exercise and serving as an alternative venue for activities that typically are land-based. Water can be used, for instance, as a floating table and as a three-dimensional medium.

### Aquatic Therapy Techniques

Through exposure to these different experiences and concepts, I was led in the direction of Watsu® and completed all the requirements to obtain a certificate as a "Watsu practitioner."

**continued on page 44** ▶▶▶



Olson works with a patient, using the facilitated aquatic therapy technique known as Watsu.



## OPEN DOOR

APTA's Portal to  
Evidence-Based Practice

### New In Open Door:

#### Joanna Briggs Institute (JBI)

**JBI Evidence Summaries** include 1,600+ standardized summaries of existing evidence on health care interventions and activities. Each summary covers one intervention and includes: the question, the clinical bottom line, evidence characteristics, best practice recommendations, and references. Access: 2006 to date.

#### JBI Best Practice Information

**Sheets** provide access to key issues and recommendations culled from systematic reviews and presented in 4-page information sheets. Access: 1997 to date.

**JBI Systematic Reviews** focus on the feasibility and effectiveness of health care interventions. Published in the *Journal of Evidence-Based Healthcare* (JBI Reports), each peer-reviewed entry is regularly updated. Access: 1998 to date.

#### How do you access JBI?

Go to Open Door, access ProQuest, click on the Publications tab, and type in "Briggs" for a list of these JBI databases, OR run your search as usual and look for the JBI resources in your results.

Bookmark [www.apta.org/opendoor](http://www.apta.org/opendoor) for online access to vital clinical research, whenever and wherever you need it. Visit often for full-text access to research and articles from more than a thousand leading clinical and academic publications on topics critical to clinical practice.

Questions? E-mail [opendoor@apta.org](mailto:opendoor@apta.org)  
or call 800/999-2782 (ext 8534).

*Open Door is an APTA members-only benefit.*

### continued from page 42

**Watsu.** This technique—the name is an abbreviation of water shiatsu—is facilitated aquatic therapy that incorporates the stretches and principals of Zen shiatsu while using the properties of water. Since its conception in 1980, it has evolved into one of the most recognized somatic therapies and is offered at clinics and spas throughout the world. It promotes neuromuscular reeducation, using gentle movement of joint and soft tissue.

During a Watsu session, the patient is held and supported while being moved, floated, and gently stretched in 94-degree water. The buoyancy and hydrostatic pressure of water helps to support and increase circulation as the body is continually moved. Each move flows smoothly into the next.

Holistically, Watsu emphasizes trusting the body to seek its own natural balance. During a session, the practitioner's awareness is drawn to the patient's breath and natural movement. The concept is that the experience of deep relaxation and nurturing can facilitate a meditative/intuitive state that helps alleviate pain and facilitate restoration. Those who can benefit from Watsu include people who are experiencing stress/tension, muscle spasticity, muscle guarding, limited range of motion, and chronic pain. Evidence on Watsu can be found on APTA's Hooked on Evidence and Open Door links at [www.apta.org](http://www.apta.org).

**Aquatic Integration.** AI is an approach to hydrotherapy that combines eastern meridian and point work with myofascial release, proprioceptive neuromuscular facilitation, and breath work. The concept is that by helping the patient relax the body and mind through stretching and breathing awareness, the resulting deep relaxation and movement in the water creates an environment that promotes the patient's development of inner awareness and potential for positive change. AI employs water's buoyancy, warmth, and resistance to address both

general conditions and physical-emotional traumas. To learn more, visit [www.aquaticintegration.com](http://www.aquaticintegration.com).

The PT and I both currently use both Watsu and AI with our patient population to meet specific goals related to pain management and relaxation. People in pain tend to avoid physical activity, but this can limit their range of motion and hasten muscle tightness, weakness, and emotional stress. As time goes, patients who don't exercise will experience muscle spasms and muscle guarding. Use of aquatic therapy can interrupt this pain cycle.

### Just a Sampling

Techniques such as Watsu and AI offer PTAs opportunities to compassionately support and cultivate patients' ability to tap positive resources within themselves. Other aquatic therapy techniques may provide additional options for relaxation and therapeutic exercise in an environment that can maximize the benefits of both Eastern and Western concepts of treatment and healing.

Aquatic therapy is an environment in which PTAs can successfully develop focused skills while providing directed interventions. Those who are looking for an opportunity to develop new and innovative alternatives for therapeutic exercise would do well to take a close look at this practice area, which benefits a range of patients spanning from athletes, to people who've had total joint replacements, to individuals who are experiencing chronic pain. **PT**

*Sarah Olson, PTA, LAT, is employed at Vernon Memorial Healthcare in Viroqua, Wisconsin.*