

Communication

Subjective vs Objective Information

- Subjective
 - info that is given to you by the patient during interview and health history intake process
- Objective
 - Info that the RMT gathers from the assessment and health history intake process

Subjective Information

- What the Client tells you
 - Opinions
 - Perceptions
 - “that technique feels good on that area”
 - “I have been really stressed lately”
 - “I have been battling a cold”
- Requires
 - Listening to the Client
 - Keeping them focused with relevant information
 - Asking questions to obtain more info the RMT may need
 - OPEN ENDED questions
 - “How have you been feeling lately?”
 - CLOSED ENDED questions
 - Specific information
 - Yes/no questions
 - “Have you had surgery on your back?”
 - “Have you taken any meds to help with the pain?”

Objective Information

- Info you as the RMT obtain from your skills, education, and senses
- What YOU see, hear, smell, what your intuitive senses tell you
 - Examples?
- Requires
 - RMT attentiveness
 - Postural abnormalities?
 - Visible abnormalities?
 - Use your senses, and knowledge!

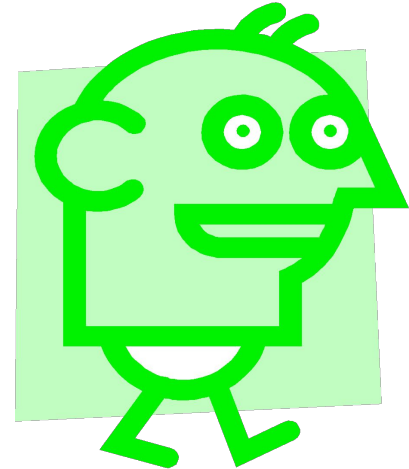
3 topics that do not have to be discussed in the treatment room

- Politics
 - Why?
- Religion
 - Why?
- Sexuality
 - Why?

Client Communication

Components of Clear Communication:

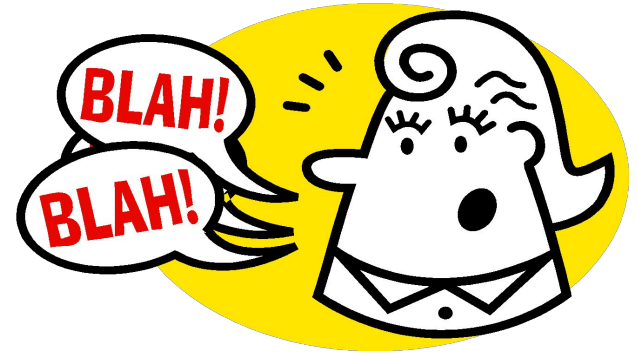
- Calm confident neutral voice
- Non-judgmental, Neutral
- Accessible vocabulary
- Good listening skills
- Open ended questions



Client Communication

Clear Communication:

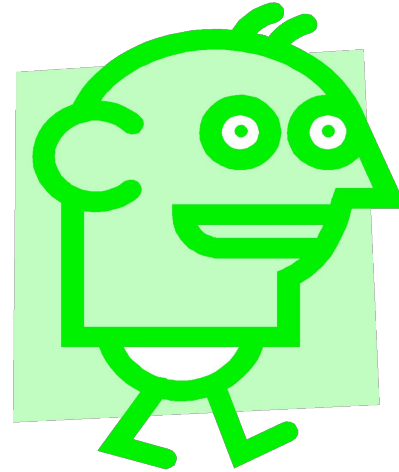
- negative stereotypes
(ie: uses a wheelchair)
- double meanings (good leg)
- redirecting information (too much, too little, not applicable)
- Confidential by law
- Gather information without leading client



Client Communication

Communication to client:

- Dressing/Undressing
- Positioning/Covering
- Getting on/off the Table
- Comfort before, during/after treatment



Client Communication

Informed Consent Includes:

- Goal of treatment
- Position of client –supine /prone/seated/side-lying
- Client covered except for area being treated
- Client is between sheets
- Pillow positioning
- Areas to be treated and why

Client Communication

Informed Consent Includes:

- Client is to undress to comfort level once the therapist leaves the room
- What kind of pressure client prefers
- Risks of treatment
- Alternatives to treatment
- Potential benefits of treatment
- Hydrotherapy and stretching

Client Communication

Dressing /Undressing:

- Undress to their comfort level
- Client reminded they will be covered at all times
- Only area uncovered is area being treated



Client Communication

Getting on/off Table:

- Client gets on/off the table in privacy
- Assistance offered getting on/off the table as appropriate



Client Communication

Informed Consent Includes:

- Contraindications if present
- Cost and duration
- Everything said in the treatment room is confidential.
- Client questions
- Client understands what was said
- Do you have their consent



15 points of consent

Goals of treatment

Risks/Side effects/Benefits

Contraindications

Position of client/Draping (Only area that will be undraped)

Stop and modify the treatment at anytime

Confidentiality

Area of body being treated/ Pillow positioning

Clothing removed to client's comfort level

Amount of pressure can be adjusted at any time

Pain scale

Alternatives to plan

Cost/duration of treatment and treatment plan

Assistance getting onto the table

Understand the treatment/Questions

Special Consent obtained for GLUTES, CHEST, BREAST, GROIN

Obtained consent for the treatment

Quiz 3 Next Class