

Name: Ryan Kinnaman
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Clinical Specialty

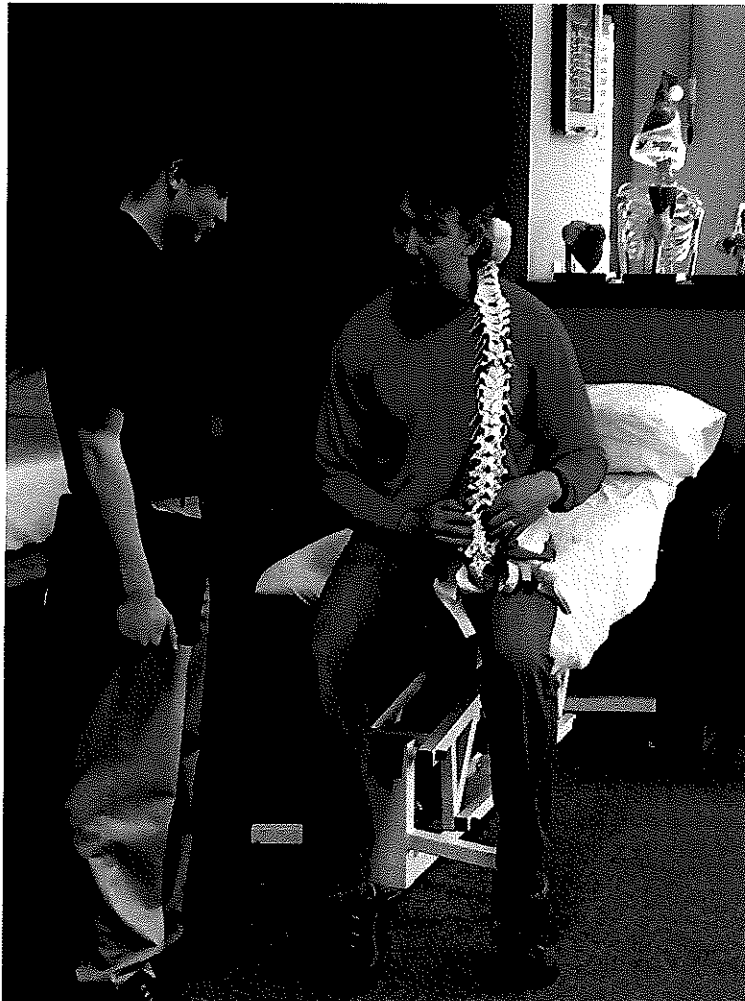
Physical Therapist

Secondary Division

Meridian Medical Arts Charter High School

Idaho, United States of America

Ryan Kinnaman



Career Summary

Physical therapy is a growing part of the medical industry. Physical therapists are key to recovery for many patients who are recuperating from injuries, illnesses, and surgery. They work with patients to help them regain movement and manage pain. This can occur in a hospital or in a clinical setting. Physical therapists must be fully licensed to practice therapy and provide treatment to patients, and in doing so often help patients reclaim their lives, their momentum towards recovery, and a commitment to healthy living.

Key job duties of physical therapists include diagnosing, improving movement dysfunction and enhance physical abilities to allow patients to function at the best level possible. Physical therapists restore, maintain, and promote not only optimal physical function, but optimal wellness and fitness; in pursuit of optimal quality of life for patients as it related to movement and health. They seek to prevent the onset, symptoms, and progression of impairments, functional limitations, and disabilities that may result from diseases, disorders, various conditions, and injuries (American Physical Therapy Association, 2017).

Physical therapists must be well organized and detail oriented in order to successfully complete a variety of job requirements such as gathering patient histories, conducting systems reviews, performing tests and measures to identify potential and existing problems, providing interventions, conducting re-examinations, modifying interventions as necessary to achieve anticipated goals and expected outcomes, and developing improvement discharge plans (American Physical Therapy Association, 2017; Physical Therapy Aide, 2017).

In addition to formal training on delivering physical therapy treatment, desired employment characteristics of physical therapists include strong communication skills, a kind bedside manner, and an ability to relate to people including being empathetic and understanding of their pain and struggles. Physical therapists should be determined individuals as often times patient recovery can be over a long period of time. It is up to the physical therapist to stick with the patient through the long and painful process of healing. Physical therapists should also be supportive and compassionate when a patient is going through a tough time physically in order to also support them emotionally. A physical therapist has to be prepared to be engaged in the patients emotional life and be completely supportive and compassionate. They also need to be confident in their treatment decisions and in dealing with people that may sometimes be difficult. No matter how difficult the situation is, confidence is a must for a physical therapist. Finally, a physical therapist has to be sociable so the patient feels truly comfortable with them as a care taker with their best interests in mind. It may be painful, but a physical therapist with good social skills can give the patient something to look forward to.

Education, Training, Credentialing Professional Association, and Career-related Data and Statistics

The education and training required for one to become a physical therapist is considered post-professional. Candidates must have high school diploma and a bachelors degree with particular requirements completed prior to entering a physical therapy degree program. These programs in the United States offer the Doctor of Physical Therapy (DPT) degree. There used to be two other options for getting a physical therapist degree, but the Master of Physical Therapy (MPT) and Masters of Science in Physical Therapy (MSPT) degrees are no longer offered to any new students in the United States. In order to practice physical therapy in the United States, you must earn a physical therapist degree from a program accredited by the Commission on Accreditation in Physical Therapy Education (CAPTE) and also pass a state licensure exam (American Physical Therapy Association, 2015).

Doctor of Physical Therapy programs typically take three years to complete and cover things such as biology, anatomy, cellular histology, physiology, exercise physiology, biomechanics, kinesiology, neuroscience, pharmacology, pathology, behavioral sciences, communication, ethics, management sciences, finance, sociology, clinical reasoning, evidence-based practice, cardiovascular and pulmonary, endocrine, and metabolic, and musculoskeletal. About 80% of the program is complete in the classroom and conducting lab studies. The other 20% is dedicated to clinical experience (American Physical Therapy Association, 2015).

There are also additional opportunities to extend your education after graduating with a DPT degree. Residency and fellowship programs offer physical therapists opportunities to enhance their knowledge and practice in specific areas. Specialty certifications are also available through the American Board of Physical Therapy Specialties (ABPTS) in areas such as cardiovascular and pulmonary, clinical electrophysiology, geriatrics, neurology, orthopedics, pediatrics, sports physical therapy, and women's health (American Physical Therapy Association, 2015).

The American Physical Therapy Association has completed a model to project the supply and demand of physical therapists. Based on a 3.5% projected attrition rate, it is forecasted that there will be a significant demand for physical therapists in the future. By 2025, it is projected that there will be a shortage of 18,350 physical therapists. Therefore, it looks positive for current students in physical therapy programs, and those intending to enter programs in the near future (American Physical Therapy Association, 2016).

Professional Interview

What are some of the benefits of being a physical therapist?

It is very rewarding to help people get back to doing what they want to do. You also have to practice what you preach, so it forces you to live a healthy lifestyle. The relationships you get to make with patients of all ages is also a great part of it.

What are some of the drawbacks to being a physical therapist?

It can be hard on your own body (joints). It can also be stressful at times. If you don't protect yourself it can make time for your own physical lifestyle very short.

When is a time you had to overcome a challenge as a physical therapist?

The competition getting into school and getting the job was very difficult. I didn't get into school at first so I had to retake some classes.

What is your greatest accomplishment as a physical therapist?

The reason why I do this job is to help people be able to do the things that they love. There was a person with a totaled knee who had to give up a lot when he was injured. He was injured in December and after rehabilitating his knee he came back the next October and showed me an elk the he had shot and told me thanks for making that possible.

What is your most humorous experience as a physical therapist?

We were treating this old lady and we were walking her to check and see how she was doing. I was walking behind her and she said, "Ohhh I got myself a man!" That dirty old woman!

What is your motivation as a physical therapist?

Being able to learn as much as I can to be able to help my patients. It is amazing how much a physical therapist can help. Sometimes the patients only option is surgery, but I do all I can to prevent that and I want to be the one to help the patient, not surgery.

How does insurance coverage influence how you treat a patient?

It sucks. They determine how you treat the patient. We had a lady who had a bulging disc and the insurance cut us off because the insurance said she should be better by now. It doesn't necessarily impact how we treat a patient, but it impacts how many sessions we get with a patient. It tends to turn into us educating them what they have to do at home instead of more sessions to help them in the moment.

What would you tell someone considering a career in physical therapy?

I would tell them to visit different hospitals and practices to explore as much as possible. All the different fields have such a wide variety. Find out the school you want to go to and figure out the pre-requisites (S. Yuly, personal communication, February 9, 2018).

Work-based Learning Summary and Outcomes

For my work-based learning experience I volunteered at Eagle Physical Therapy under the direction of a physical therapist named Steve Yuly. I volunteered on February 2, 9, and 14 for a total of 10 hours job shadowing Steve Yuly. During this time I observed Steve providing a variety of treatments to patients. By observing Steve, I learned how to evaluate patients and treat them physically, but I also learned about the importance of how you interact with patients socially and verbally in order to emotionally support them, make them feel comfortable, and to let them know you are their number one fan in their recovery process.

My primary goal was to learn about the physical therapy profession as a whole, and to specifically focus on the evaluation and correction of pelvic mobility. I have a health condition called Ehlers Danlos Syndrome (EDS), which is a hypermobility disorder that causes my joints to frequently dislocate and be in the wrong positions. It can be very painful and I have often been on the receiving end of physical therapy treatment, including having my pelvis position corrected to increase mobility. This made the experience very personal and meaningful to me.

In addition to learning a lot about how to evaluate a patient and the process a physical therapist uses to correct the pelvis to increase mobility, I also learned a lot from watching the way that Steve interacts with people. I really appreciate this aspect of the job of a physical therapist since I know first-hand how painful it usually is for a patient to experience a physical therapy treatment. I know how much it has meant to me in the past when a physical therapist engages in conversation with me about things I am interested in to try and take my mind off the treatment and the pain as much as possible. I enjoyed being a part of these conversations with patients and building relationships with them as a participant in their recovery process.

The following is a list of my primary learning outcomes from this experience:

- How to greet and welcome patients to the physical therapy experience.
- How to evaluate patients who are having pelvic pain.
- How to correct the location of the pelvis to put it into the correct place.
- An assortment of exercises to help patients recover from a wide variety of injuries and challenges with various parts of the body.
- How to approach patients with a supportive and friendly attitude.

Physical therapy is a career field that I would consider as a possibility for my future. I know it would require a lot of work and school, but I think the rewards of being a part of helping patients through their recovery process to live the healthiest life they can would be incredibly rewarding. I know that every time I was on the table as a patient, I was one hundred percent confident that Mr. Yuly not only would do his best job to evaluate and adjust my body correctly, but that he would also do so as comfortably as possible for me as the patient. I hope to do that myself someday.



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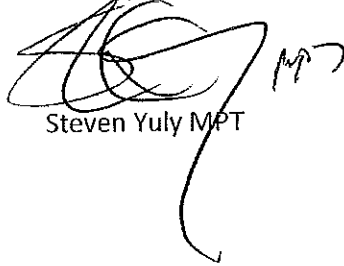
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I have known Ryan Kinnaman for many years both personally and professionally. He has been a patient of mine being treated for many orthopedic problems over the years. This gives him a unique perspective of the skill he is performing because he suffered from the same dysfunction in his pelvis. He was on the receiving end of the treatment but when this HOSA project opportunity presented itself he contacted me to get into the assessment part of it. Knowing Ryan I was more than happy to mentor him through this learning process.

Throughout this project I have been impressed with Ryan's organization. He always has what he needs and shows up on time. Not once have I had to ask him for anything or had anything to clarify because he has it all lined out. Each week he has showed up he tells me what we need to get done and how it needs to be done. He is always open to other ideas of how to do things and is very teachable.

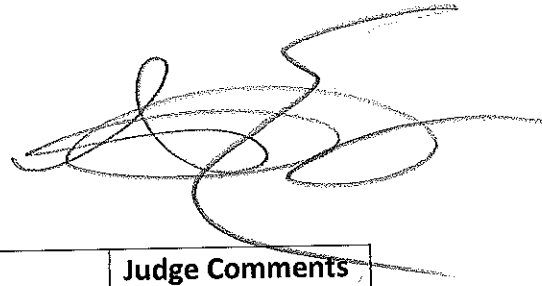
Part of the project is him observing me treating patients. He interacts with the patients so well, always introducing himself and explaining why he is there. Ryan always has a smile and strikes up conversations with the patients asking them what happened and how they are responding to treatment. He also shows empathy when they are going through certain treatments because he has gone through them himself and knows that it's uncomfortable. If Ryan continues on his healthcare career path he has the hardest part already nailed. He has a great bedside manner and is able to make the patient feel comfortable earning the trust of the patient. If he has this part figured out now the rest is going to be a breeze. He will be a great asset for healthcare field.

Thank you,



Steven Yuly MPT

Skill Checklist



Skill: Evaluation and Correction of Pelvic Mobility	Judge Comments
1. Greet the patient with a welcoming and friendly attitude.	
2. Have the patient sit on the treatment table.	
3. Ask the patient to describe their physical challenge.	
4. Ask the patient to rate their pain.	
5. Ask additional questions of the patient about their condition as appropriate and necessary.	
6. Ask permission of the patient to conduct a physical evaluation and assessment.	
7. Have the patient stand with their back to the physical therapist (who will be seated) and evaluate the iliac crest for symmetry.	
8. Evaluate current greater trochanter location by placing hands on either side of the greater trochanter at the hip area.	
9. Move hands down the hips to evaluate the level of gluteal folds.	
10. Have the patient bend forward to measure SI joint mobility and check for symmetry by having the patient bring each knee to their chest.	
11. Have the patient lay on their back on the treatment table to check for ASIS height and medial malleolus symmetry.	
12. After a baseline is established, move into the corrective exercises.	
13. To perform the sacral self correction exercise, have the patient cross one leg over the other and push the knee out into the therapist's hand away from the body.	
14. Hold for 5 seconds and conduct 3 repetitions on the side that is out of position.	
15. To perform the ilial self correction exercises have the patient push their left knee into the therapist's hand and their right foot into the table.	
16. Hold for 5 seconds and conduct 3 repetitions on the side that is out of position.	
17. Re-assess the patient to make sure the pelvic position has self corrected into the right location, looking to see that the medial malleolus is level and symmetrical.	
18. Have the patient stand to re-assess the iliac crest height, looking to see that the therapist's hands are level. Also re-assess the height of the greater trochanter and gluteal folds, looking to observe symmetry.	
19. Re-assess the SI joint mobility by having the patient bend forward, looking to see both thumbs moving in an upward position. Have the	

patient bring each knee to their chest to provide assurance that the SI joint is moving correctly.	
20. Advise the patient to repeat these exercises 3 times a day if they continue to have pain.	
21. Walk the patient to the door, provide them with encouragement, and assist them in rescheduling for another appointment if needed.	

(Mageel, 1997)

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