

## Clinical Practice of United States Pelvic PT's

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### SPECIFIC AIM

Has ultrasound (US) imaging use by United States Pelvic PTs changed within the past 10 years?

Have educational methods for pelvic floor muscle US imaging changed within the past 10 years?

### METHODS

United States Pelvic PTs completed an internet-based survey, modified from a similar study conducted in 2007. (1) Recruitment occurred through social media, professional organizations and journal clubs. Students, PT assistants and internationally trained PTs were excluded.

The survey queried PFM assessment training method (discussed vs performed) at various levels of training

- First professional
- Post-professional
- Residency (category adding in 2017)
- Continuing education
- On-the-job training

The survey also asked the type of PFM assessment techniques utilized in current Pelvic PT practice.

Preliminary analysis included descriptive statistics of key constructs. These results are presented alongside a similar study conducted 10 years ago for reference. (1)

### RESULTS

403 PT's trained in the United States initiated survey with 322 completing the entire survey.

**Discussion of US** imaging occurred in continuing education courses (51.2%), post-professional university education (39.9%) and on-the-job training (21%) in 2017.

**Psychomotor skills training** increased throughout all categories especially in residency and on the job training. (Table 1)

**The self-reported usage** of US imaging in patient care has not changed from 2007 to 2017. (Table 2)

In 2017, 9.4% of United States pelvic PTs surveyed felt **confident** in their skills in using the US imaging in comparison to 85.9% who felt confident in their skills in examining the PFM through vaginal palpation.

### US Imaging Psychomotor Skills Training

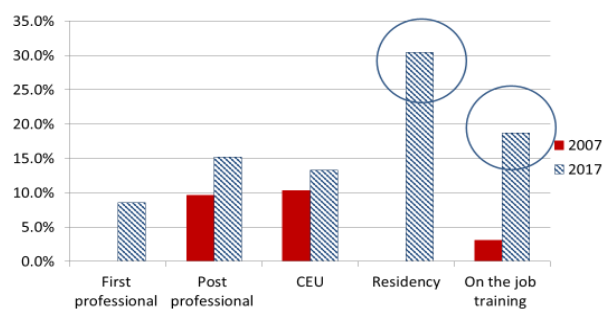


Table 1

### Self Reported Usage of US Imaging in United States PT Clinics

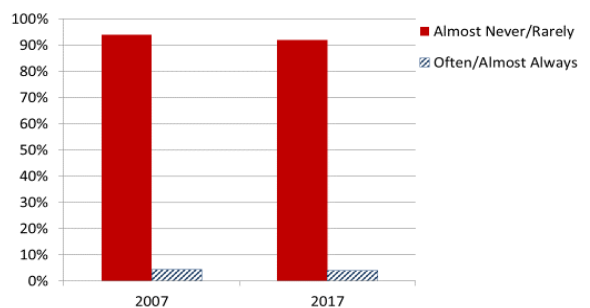


Table 2

### DISCUSSION/CONCLUSIONS

**US imaging has good clinical utility** alongside vaginal palpation in the assessment of PFM function.

- Good intra- and inter-rater reliability (ICC 0.81 to 0.88) (2).
- More sensitive than digital vaginal palpation to assess the lifting function of the PFM (3).
- Many professionals suggest a complete PFM assessment would include more than one type of test.

Despite an increase in US imaging education over the past 10 years, United States Pelvic PTs report low utilization of it in the clinic.

#### Future research on WHY?

- Lack of education
- Confidence of application
- Cost of equipment
- Lack of reimbursement

These findings should inform future education and training of Pelvic PTs.

### REFERENCES

1. Shelly E, Krum L. Methods used by physical therapists to learn pelvic floor muscle examination NeuroUrol and Urodynam, 2009;28(7):821-822
2. Sherburn M, Murphy CA, Carroll S, Allen TJ, Galea MP. Investigation of the transabdominal real-time ultrasound to visualize the muscles of the pelvic floor. Australian J of Physiother 2005; 51:167-170.
3. Frawley HC, Galea MP, Philips BA, et al. Reliability of pelvic floor muscle strength assessment using different test positions and tools. NeuroUrol Urodynam 2006;25(3):236-242.