



Effective OMM in the Hospital

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Objectives



- ▶ Review Osteopathic principles for OMM and how they apply to the hospitalized patient
- ▶ Use models of circulatory, structural and neurologic concepts as a way to organize treatment of the hospitalized patient
- ▶ Learn a sample sequence of OMT for your hospitalized patient



Historical Perspectives

- ▶ OMT was primary system of treatment
- ▶ OMT now can complement care of patients
- ▶ Enhance structure and function to promote healing
- ▶ The body is capable of self-healing
- ▶ The body seeks homeostasis
- ▶ Structure and function are related
- ▶ Treatment of hospitalized patient should combine both



What are the goals of treatment?

- ▶ Circulation
- ▶ Eliminate waste
- ▶ Improve oxygenation
- ▶ Relieve congestion
- ▶ Reduce pain
- ▶ Enhance well-being

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Osteopathic treatment research for hospitalized patients

- ▶ MOPSE

- decreased length of stay

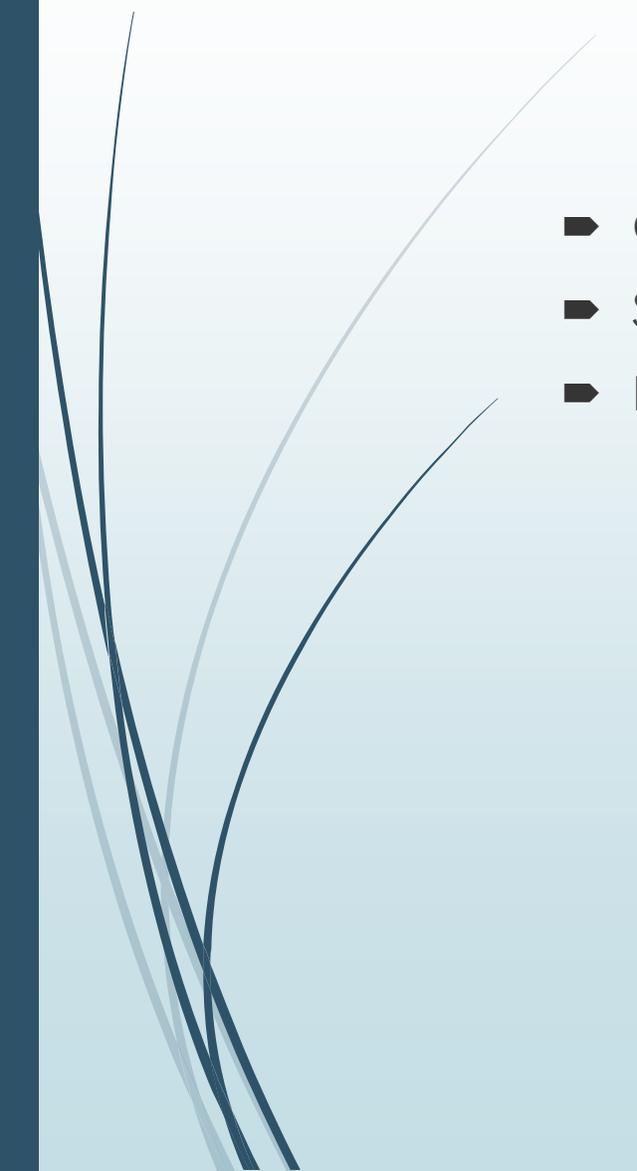
- decreased IV AB duration

- decreased mortality

Other studies



Models of treatment

- ▶ Circulatory Respiratory- including lymphatics
 - ▶ Structural –osseous, fascia and muscles
 - ▶ Neurological- autonomic nervous system
- 



Circulatory

- ▶ Respiratory system has impact on the movement of fluids
- ▶ Skeletal muscle, diaphragm

Consider- improvement in thoracic cage function

Goal – assist removal of metabolic waste

Pelvic, abdominal diaphragm

Thoracic inlet

Rib motion



Structural

- ▶ Skeleton
- ▶ Ligaments and fascial connections
- ▶ Muscles

Restore range of motion

Balance muscle tone

Fascial layers and respiration



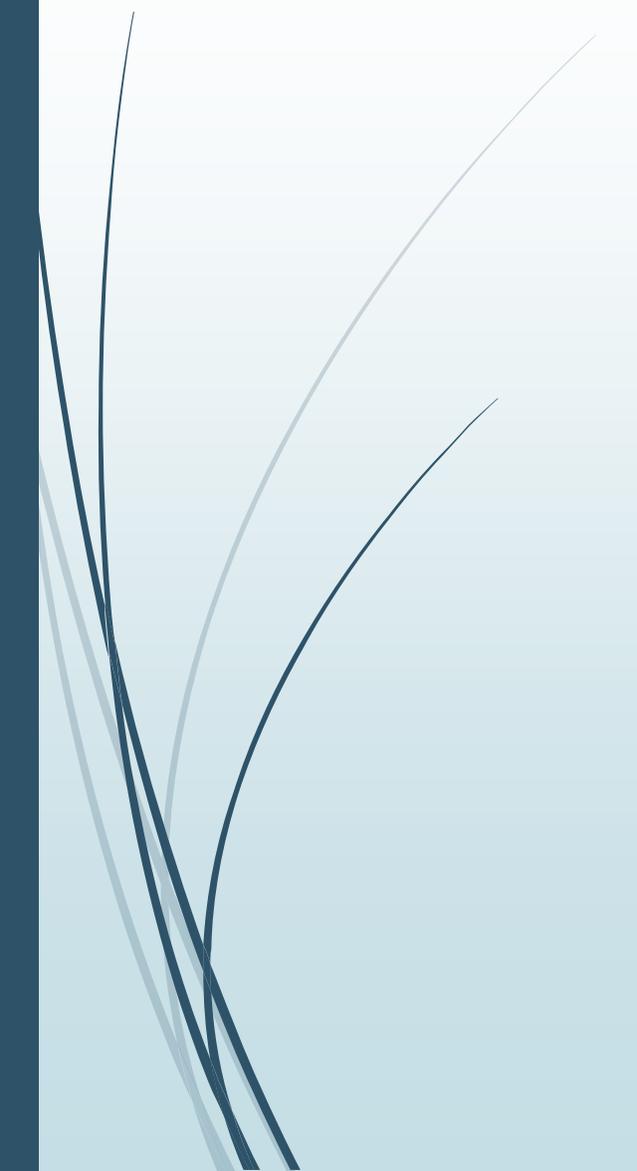
Neurologic

- ▶ Autonomic dysfunction is part of every disease process
- ▶ Sympathetic NS- autonomic to musculoskeletal and visceral
- ▶ Parasympathetic NS- visceral

Address treatment so that the body can regulate itself



Somatic Dysfunction



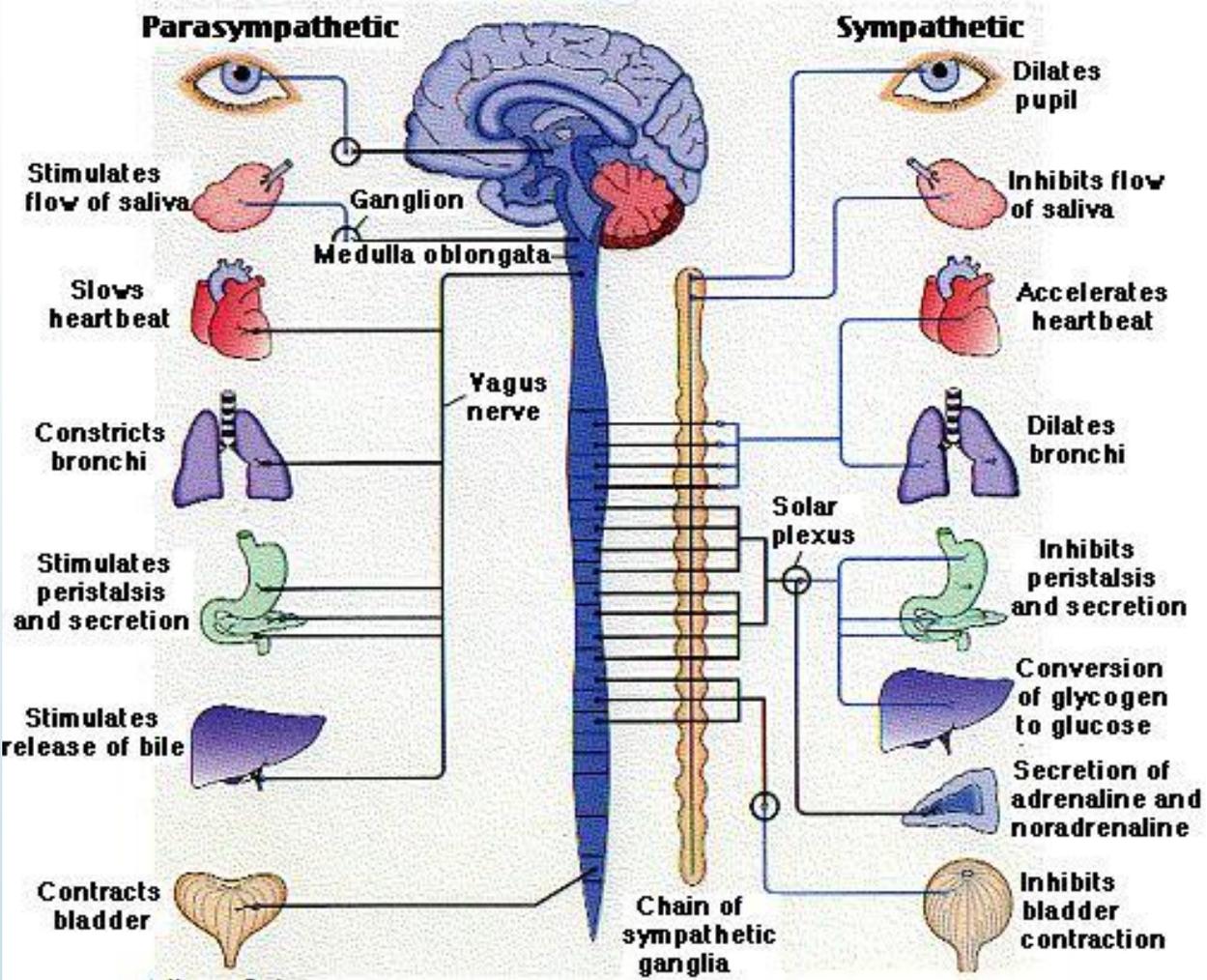
Impaired or altered function of related components of the somatic system including skeletal, arthrodiar and myofascial structures and their related vascular, lymphatic and neural elements. Somatic dysfunction may be evaluated and treated by Osteopaths or Osteopathic Physicians using Osteopathic Manual Technique (OMT)



Somatic dysfunction and the Sympathetic nervous system

- ▶ Thoracic and upper lumbar areas affect visceral function (somato-visceral)
- ▶ Anatomic relationships of the ribs to sympathetic ganglia
- ▶ Para spinal tissues show visceral dysfunction (viscero-somatic)

Autonomic nervous system



OMT



Parasympathetic nervous system



Cranial Nerves III, VII and S 2,3,4

Check the cranium, sacrum and sub occipital region

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Neuroendocrine response to OMT treatment

- ▶ OMT may cause release of endorphins and enkephalins which reduce pain perception
- ▶ Adjuvant to caring for patients with pain syndromes



Considerations with OMT treatment

Cardiovascular T1-T6

bradycardia, arrhythmias

hypertension

Pulmonary T1-T6 and Vagus

sympathetics

COPD, Asthma, Pneumonia

Gastrointestinal

Vagus, sacral plexus

esophagus

colon



Post-operative patient with pneumonia

Osteopathic treatment using OMT



OMT use post op

Circulatory-Respiratory

- ▶ Facilitate diaphragm movement
- ▶ Assist inspiration
- ▶ Lymphatic movement
- ▶ Ribcage movement
- ▶ Volume airflow
- ▶ Muscles of inspiration

Autonomic NS

- ▶ Vasomotor tone
- ▶ Sympathetic bronchial dilation
- ▶ Parasympathetic

Balance systems to assist with the ability of the body to heal itself



Treatment sequence

OA

Rib raise to thorax

Diaphragmatic release

C-T spine

Thoraco-Lumbar region





Billing considerations

Documentation somatic dysfunction

25 modifier

Osteopathic diagnosis

Treatment used and result

Billing codes

AOA has resources to support billing

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Cautions

First, do no harm

Dose and Frequency

acute illness

goal to promote balance

small amounts 2-3 treatments 2-3 times a day 2-3 minutes

titrate to tolerance

Applications



Review Techniques

- ▶ Thoracic inhibition
- ▶ Thoracic inlet
- ▶ First Rib
- ▶ Thoracic lymphatic pump
- ▶ Pectoral traction
- ▶ Rib raise
- ▶ Diaphragm doming
- ▶ Pedal pump
- ▶ Cervical soft tissue
- ▶ Suboccipital release
- ▶ SI articulation