



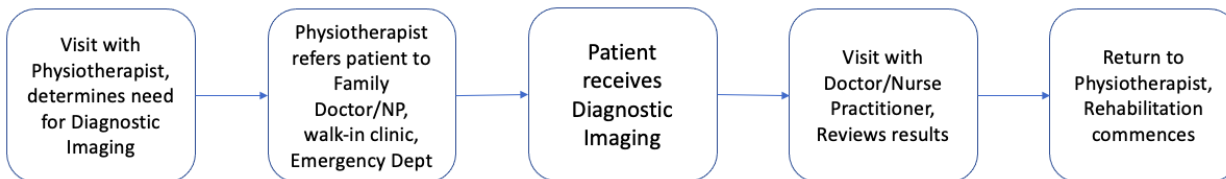
Timely Access to Radiology for Nova Scotians

Physiotherapists

Physiotherapists are direct access clinicians providing care to Nova Scotians and are currently underutilized resources in improving access to needed radiological studies. When optimized to full scope of practice, Physiotherapists play a key role in alleviating the burden on the Healthcare System. Diagnostic imaging (DI) is already within a Physiotherapist's scope of practice in Nova Scotia by virtue of their training and [regulations](#).

Allowing physiotherapists within the private sector to refer for DI will improve efficiency by decreasing the time spent verifying diagnosis and initiating a rehabilitation plan. It would result in public health-cost savings by reducing visits to Family Physicians, walk-in clinics or Emergency services for the >100,000 Nova Scotians without a Doctor/Nurse Practitioner.

As primary healthcare practitioners, physiotherapists, within their scope of practice, formulate and confirm diagnoses, and carry out physical treatment and planning according to these diagnoses. However, the currently system impedes rapid access to care. The following process must take place after a physiotherapist has determined the need for DI:



Timely access to testing allows for proper diagnosis and facilitates appropriate treatment by the most qualified professional. In fact, because Physiotherapists have advanced skills in the assessment and treatment of musculoskeletal conditions diagnostic imaging is often not required. There is a high level of agreement of diagnosis between Physiotherapists and physicians.¹ When it comes to diagnostic imaging, physiotherapists order an amount similar to, and in some cases less, than physicians. In a study conducted in a Quebec ED, patients who were assessed by an emergency physician were prescribed about 40% more diagnostic imaging tests than what was recommended for those who saw a physiotherapist.² These results are consistent with others found in the literature.^{3,4}

Our goal is to remove barriers within the Health Authority to allow physiotherapists in both the public and private healthcare settings to work to their full optimized scope of practice and refer for diagnostic imaging. We would like to see physiotherapists working in private practice able to refer to the public sector for diagnostic imaging. The current barriers in place include limitations around who radiologists can receive referrals from and the funding models.



The following directives are taken from the Action for Health strategic plan:⁵

- “The scope of practice is being expanded for other healthcare professionals to support team-based care and reduce the burden traditionally placed on physicians.”
- “Address barriers and optimize the ability of health providers to work to their full scope of practice.”

Physiotherapists are your partners in Health. Physiotherapists have advanced assessment and diagnostic skills that are being underutilized in current healthcare models. As the population continues to age and the burden of chronic disease continues to rise, optimizing roles becomes that much more imperative. In addition to assessment skills, Physiotherapists are crucial in preventative healthcare as they are uniquely trained in rehabilitation and promoting active lifestyles.

The challenges within our health care system are complex and require innovative solutions. The NSPA asks that our current government and decision makers utilize existing regulated health professionals, like physiotherapists, to their full scope of practice.

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- 2) Gagnon, R., Perreault, K., Berthelot, S., Matifat, E., Desmeules, F., Achou, B., Laroche, M.-C., Van Neste, C., Tremblay, S., Leblond, J. & Hebert, L. J. (2021). Direct-access physiotherapy to help manage patients with musculoskeletal disorders in an emergency department: Results of a randomized controlled trial. *Academic Emergency Medicine*, 28, 848-858.
- 3) Matifat, E., Méquignon, M., Cunningham, C., Blake, C., Fennelly, O., & Desmeules, F. (2019). Benefits of musculoskeletal physical therapy in emergency departments: a systematic review. *Physical Therapy*, 99(9), 1150-1166.
- 4) Sutton, M., Govier, A., Prince, S., & Morphett, M (2015). Primary-contact physiotherapists manage a minor trauma caseload in the emergency department without misdiagnoses or adverse events: an observational study. *Journal of Physiotherapy*, 61(2): 77-80.
- 5) Province of Nova Scotia (2022, April). *Action for Health: A Strategic Plan 2022–2026*. <https://novascotia.ca/actionforhealth/>