PD-appropriate Allied Health referrals by specialty — OHSU-Parkinson Center

	PT	OT	ST
SPECIALTY AREAS	• Education about disease • Mobility • Gait/Balance • Pain management • Energy Conservation • Equipment • Posture • Fall Prevention • Fitness • Transfers • Home Safety • Caregiver Training	• Self-Care / ADLs: (dressing, grooming, eating, shopping, bathing, etc) • Energy Conservation • Home Management & Safety • Adaptive Equipment • Vision • Education • Stress Management & Relaxation • Leisure • Cognitive/ Memory Deficits • Caregiver Training	• Communication Effectiveness • Speaking Difficulties (reduced loudness; short phrases; breathy, hoarse voice quality; imprecise articulation) • Language Processing • Augmentative/Alternative Communication • LSVT (Lee Silverman Voice Therapy) • Swallowing Problems • Cognitive/ Memory Deficit • Cognitive: speed of processing, initiation, memory • Caregiver Training

Most commonly used **ICD-9s** for PD pt referrals:

Abnormality of Gait	781.2 for PT
Parkinson's Disease	332.0 for OT/ST

Social Worker: Resources: • Financial. • Disability. • Psycho-social support. • Counseling. • Long term care planning. • Assessment of home care/respite needs.

RN: • Liaison w/ Doctor between visits. • Rx management and education. • Referral requests and guidance to appropriate Allied Health provider. • Disease education, information, questions.

PD-appropriate Allied Health referrals by stage — OHSU-Parkinson Center

	Initial Dx (Stage I):	Stage II – III:	Stage IV – V:
INDICATIONS	• Stretching & exercise program • Instruct in energy conservation • Education about PD and preventing secondary complications • Refer to community resources • Fit young onset w/ orthotics • Instruction in compensatory cognitive strategies	When begin to see signs of change to Stage II and Stage III : • Movement strategies to combat hypokinesia, postural instability, dyskinesia, fall prevention. • Reinforce exercise program & community involvement strategies • Energy conservations • Pain management strategies • Home modifications • Referral to community resources • Instruction in environmental modifications/memory aides • Instruction in communication clarification strategies • Speech training in rate control, respiration and phonation • Explore voice amplification system • Instruction in compensatory swallowing strategies	When disability is increasing to final staging: • Care partner training for PT, OT, ST at home. • Prevention strategies for pressure ulcers, swallowing and communication difficulties, falls and mobility restrictions • Ongoing assessment of safety/home modifications • Address equipment needs – wheel chair, augmentative communication systems • Instruct in use of pacing boards/ alphabet supplementation • Development of partner support communication techniques • Referral to community resources

Social Work and RN as needed across all stages for resources and education.