

SCPT Practice Guideline #11
Pelvic Floor Retraining and Treatment of Urogenital and Rectal Dysfunctions

Background

The SCPT Regulatory Bylaws define specialized physical therapy procedures to include invasive techniques for the treatment of urogenital or rectal dysfunction, and section 18 of those bylaws prohibits members from performing invasive techniques for the treatment of urogenital or rectal dysfunction, unless they have completed an educational program recognized by the council.

The College considers non-invasive techniques for the treatment of urogenital or rectal dysfunction to fall within the provision of basic physical therapy services.

The SCPT Code of Ethics provides:

3. Physical therapists must respect the clients or surrogate's rights to be informed about the effects of treatment and inherent risks.

4. Physical therapists must give clients or surrogates the opportunity to consent or decline treatment or alterations in the treatment regime.

19. Physical therapists shall maintain an optimum standard of practice by exercising competent professional judgment and by continually striving to improve knowledge and professional skills.

Recognized Educational Programs

The following educational programs are recognized by the council:

- Pelvi-Perineal Re-Education for Female Urinary Incontinence instructed by Claudia Brown and Marie Jose Lord, or recognized instructors.
- Treating Urinary Incontinence in Women: Pelvic Floor Muscle Re-Education and Behavioural Techniques instructed by Dianna MacDonald, or recognized instructors.
- Treating Fecal Incontinence - A Practical Approach instructed by Judy Fox or recognized instructors.
- Continence Therapy Using Biofeedback Techniques instructed by Judy Fox or recognized instructors.
- Level I: The Physical Therapy Approach to Female and Male Urinary Incontinence instructed by Nelly Faghani, or recognized instructors.
- The Council recognizes the courses included in a recognized educational program provided by Canadian Universities as providing the education and training necessary to perform invasive techniques for the treatment of urogenital or rectal dysfunction taught in these programs

Practice Guidelines

1. Physical therapists who have successfully completed a recognized educational program and are practicing invasive techniques for the treatment of urogenital or rectal dysfunction are expected to use professional judgment and act within their level of competence.

2. The physical therapist should:

- a) treat only the patient population for which the physical therapist has had training;
- b) adhere to all protocols generally accepted within the practice; and
- c) use only assessment/treatment equipment that is medically approved by the d) Canadian Standards Association and maintained on an ongoing basis.