Osteopathic Manipulative Medicine
Protocol

**Introduction:**

This Clinical experience in Osteopathic Manipulative Medicine for the third- and fourth-year student is designed to assist the student in integrating the Osteopathic philosophy, methods, and application in a clinical setting. Having been exposed to preparatory training in manipulative medicine in the first two years of Osteopathic education, Unit III students will be expected to have a working knowledge of nomenclature, diagnostic skills, and facility in one or two methods of manual therapy.

The rotation is designed to help the student explore in greater depth selected structural and functional considerations which may produce symptoms in patients or compromise patient’s homeostasis in a variety of disease states. This service exposes the student to a wide variety of patient types and problems both in an inpatient and outpatient setting.

At this stage in training, the student is expected to reexamine familiar medical information, anatomy, and physiology in the light of the clinical experience. Patients present with problems, and the student is asked to work from the patient’s history, physical findings, and spectrum on problems and apply them to the knowledge base he/she has gained. In any specialty, there is a need to integrate what one knows with the patient’s needs. Osteopathic Physicians view the patient as a unique individual with unique concerns and problems. In Osteopathic Manual Medicine, the focus is the patient in the context of his/her illness. Incorporating Osteopathic philosophy, the patient’s inherent capacity to improve his/her health is encouraged through the use of manual therapy. The Osteopathic Philosophy gives D.O.s a perspective that is more of a functional, dynamic, and interactive view of the patient rather than a static reductionistic view characteristic of the biomedical model.

Our own frame of reference is often taken for granted, but the unique way the osteopathic philosophy prepares us to look at our patients creates opportunities to diagnose more accurately and treat more effectively disorders that often defy less well-integrated practitioners. Perspective makes a difference.

**Hours:**

Monday through Friday, 8:00AM – 6:00PM. Weekends: rounds on inpatients until work is completed. The length of this rotation may vary, but three or four weeks is suggested.

**Goals:**

1) To improve diagnostic and treatment skills.

2) To broaden the student’s recognition of the use of manual medicine in the spectrum of disorders presenting to the osteopathic physician.
3) Ability to diagnose and effectively treat somatic dysfunction in the pelvis, sacrum, lumbar spine, thoracic spine, rib cage, cervical spine, cranial base and extremities. This includes knowledge of the mechanics, coupled motions, and common clinical correlations of somatic dysfunction with other disorders.

The student is also expected to learn and understand the walking cycle, the effect of postural balance on mechanics, basic physiological and anatomic principles in sensory motor retraining, and specific knowledge of upper and lower extremity movement patterns. The role of exercise as adjunct to OMM will be stressed.

4) The student will be expected to continue his/her pursuit of improving communication skills in his/her interaction with patients. Consultation on inpatients and outpatients in Osteopathic Manipulative Medicine includes a history and physical exam. The development of rapport with the patient is intrinsic to effective osteopathic care.

5) The student will be given the opportunity to perform initial consultation in terms of history and physical examination of patients. The ability to perform a musculoskeletal screening examination and neurologic examination will be evaluated. Emphasis will be placed on teaching subsequent scanning and segmental evaluation. The student will be instructed in the clinical decision making process of determining the dose, sequencing, and frequency of treatment for a variety of acute and chronic disorders. The ability to be accurate and specific in arriving at a diagnosis will be stressed. In addition, he/she will have the opportunity to treat patients with a variety of techniques.

6) It is hoped the student will increase his/her ability to develop a working differential diagnosis and recognize clinical correlations between somatic and visceral disease states.

7) The student will be exposed to literature in the field of Manual Medicine and given the opportunity to spend time collecting information and becoming aware of resources available for learning in this field during the rotation.

8) It is hoped the student will gain an appreciation for the process that occurs in treatment using manual medicine. Specifically, the relationship of the time that is involved with treatment of the patients, education of the patients, and participation in the process of recovery that the physician engages in with the patient over time.

**Reading Assignments:**

See attached reading list. A reading list will be provided and the student will have the opportunity to pursue his/her area of interest in the field. Since this specialty is often used in conjunction with another field, it is appropriate for the student to follow his/her interest with regard to application of manual medicine in his/her chosen field. The resources of MSU-COM and the medical libraries at the hospitals and University will be available to the student to support him/her in this pursuit.
Lectures:

There is a didactic session every Monday afternoon from 1-5pm that is regularly attended by OMM residents, faculty, students, interns, and residents in other fields who are participating in the service. In addition, hospital and University presentations often occur. The student is requested to attend. The student will also be given an assignment of doing an integrative case presentation on one of the patients seen on the service during the month. This can be either an inpatient or outpatient. This will occur toward the end of the rotation and will be at the didactic session or at a time determined by the clinical faculty.

Patient Care:

The student will be given the opportunity to evaluate and treat patients in the office and hospital. The Osteopathic Manipulative Medicine Department at MSU-COM maintains a referral-based multi-physician practice at the Lansing Medical Office Building adjacent to Ingham Regional Medical Center’s Pennsylvania Campus, Suite 202, 2815 S. Pennsylvania, Lansing, MI 48910. In addition, there is an OMM Service for inpatients at both the Pennsylvania and Greenlawn Campuses of Ingham Regional Medical Center. These provide the student with opportunities to see a wide variety of patients and problems. The student will work with many of the department physicians during the course of the month, allowing him/her to see a variety of practice styles and methods.

Charting:

Charting is done in the SOAP note format. Many of the physicians use the department’s standard forms for intake H&Ps, as well as follow-up visits. The student is expected to be familiar and conversant with the nomenclature of Osteopathic examination, diagnosis, and treatment.

Methods of Treatment:

The student will be expected to have facility in at least one form of OMT and gain facility in another form during the course of the rotation. He/she will be encouraged to develop a broad spectrum of skills from direct to indirect treatments, from treatment which utilizes operator induced forces, to procedures that utilize patient induced forces.

Ancillary Services:

The student will be exposed to the integration of OMM with ancillary services including Physical Therapy, Occupational Therapy, and Social Services. It is hoped the student will develop an appreciation for the integrated use of ancillary services in the total care of the patient.

Radiology:

During the course of the rotation, the student will be given the opportunity to improve skills in interpretation of radiologic studies including Magnetic Residence Imaging, Computed Tomography Scanning, Plain Film Studies, myelography, and CT myelography. Many of the patients on the service have had multiple radiographic studies. The way in which this information can be utilized and interpreted in the context of total patient care from an Osteopathic perspective will be part of the student’s clinical experience.
Selected References

Manual Medicine is an interdisciplinary field that requires its practitioners to be multilingual, so-to-speak. There is a strong need to be able to understand the language of other disciplines and integrate what you know with other ways of thinking and knowing.

The list is presented alphabetically by author.


*Gray’s Anatomy*. 137th Ed.


Sutherland, William G., *The Cranial Bowl*. Free Press Co., Mankato, MN, 1939. Other Writings by Dr. W.G. Sutherland, the founder of Cranial Osteopathy, are available from the Cranial Academy, Indianapolis, IN 317-594-0411.


**Journals:**

American Journal of Physical Medicine and Rehabilitation (W&W)
Archives of PM & R
JAOA
Journal of Back and Musculoskeletal Rehabilitation (Butterworth)
Journal of Clinical Biomechanics
Journal of Manual and Manipulative Therapy
Medicine and Science in Sports and Exercise (Official Journal of the American College of Sports Medicine)
Physical Therapy
Physiotherapy
Spine
The AAO Journal
The Journal of Orthopaedic and Sports Physical Therapy
The Journal of Trauma