

Interview Assessment #2

Name of Professional: Maggie Marshall

Profession/Title: Physical Therapist

Business/Company name: Institute for Orthopaedic Sports Rehabilitation at The Carrell Clinic

Date of Interview: September 26, 2017

My second interview, was conducted with Maggie Marshall, a physical therapist at the Institute for Orthopaedic Rehabilitation. Coming into the interview I hoped to gain knowledge about the treatment of patients and the relationship aspect of physical therapy. Through the interview I got exactly that because she was in the process of working with a patient towards the end of the interview so I got to see how towards the end of the process after a couple of months what it looked like. I became really excited about the field of physical therapy coming from the interview because I got to see how it was and I have always loved forming close relations with others especially when later I can see results of how they have grown. Also, she said her favorite part about being a physical therapist is the relationships that get formed with patients.

Regarding documentation, I learned how much physical therapists have to document and why most say that is the worst part about being one. First, through the initial examination that is when they learn where to start with the patient, as well as what progress has been made through the time period from the initial visit. In between each visit, physical therapists have to document everything they did with the patient, in regards to the patient's performance. Documentation seems like a lot, although it will be not the hardest part for me because I find it easy to document everything I have done in regards to progress of the patient if I took good notes on the specific visit. From this I want to learn what processes are used to see progress from the initial. I have

heard of the point system in progress, although I am wondering if there is an easy way or other ways to take note on progress.

Mrs. Marshall said that in her opinion a hard part about physical therapy is what specific area to treat that day. She said that no day is the same, and every visit with a patient is a different take on the injury. From this, I want to know how to specify what area to work on that day. In regards to the anatomy of the injury and based on the body type of the patient. Also when they get farther in the process, what to do with the patient in regards to are the exercises the same based on when the patient can do more and is getting towards the end of the visits? During the interview, one of her patients that she was working with was getting towards the end of the recovery process and the patient was more independent towards the end of the visit. She had an injury with the knee and worked with a band on the ankles and walking. Also, she worked on the quads and did weight on each leg. Another type of exercise was running, I did not see where she did this but it was not on a treadmill from what Mrs. Marshall told her to do. From this experience of seeing an encounter between her and the patient, I had an idea of what the visit looked like towards the end, but wondering how they started the visit.