

talk about touch

WITH MARY KATHLEEN ROSE AND MARY ANN FOSTER

BODYWORK IN A MEDICAL SETTING



We need to know how to adapt our hands-on skills and body patterning to work effectively with someone where *they* are most safe and comfortable.



MARY KATHLEEN ROSE: Recently, I spoke with a program coordinator for a hospital-based massage program. She shared her challenge in finding massage therapists with the skills necessary to work in a medical setting. Irene Smith, a pioneer in hospice massage, voiced similar concerns: “I am alerted to hospice programs taking on massage practitioners who have no training in adaptations from working with healthy people on a massage table to working with seriously symptomatic persons in beds.”

MARY ANN FOSTER: Mary, you’ve practiced massage and taught students to work in hospitals, hospice home care, and skilled nursing facilities for many years. Why is it that many bodyworkers who are confident working in wellness clinics, spas, or private practices seem unprepared to work with medical patients?

MKR: Possibly because the information needed to practice safely and effectively in medical settings is usually found outside the core massage curriculum.

MAF: What about medical massage courses?

MKR: These classes contribute a greater understanding of pathologies and contraindications to conventional massage, but they tend to be held in the school’s classrooms and clinics, where students practice on each other or on generally healthy clients.

MAF: The first time a regular client asked me to give him a massage during a hospital stay, I felt awkward working in this unfamiliar setting and became aware of the limitations of massage training. Apprehensively, I worked cautiously to avoid jarring my fragile client.

MKR: Fortunately for me, I taught in a massage program where we shared a classroom with the physical therapy and

nursing programs. It was an ideal setup for teaching massage in the medical setting, as the classroom had hospital beds and other medical equipment.

MAF: What were the primary skills you taught in this unusual but practical setup?

MKR: Number one—attend to the safety of the setting. For example, moving a vulnerable, frail patient creates serious liability concerns. Because we rarely use a massage table in a medical setting, we need to know how to adapt our hands-on skills and body patterning to work effectively with someone where *they* are most safe and comfortable.

MAF: I can just imagine a naive bodyworker lifting an ill client off a bed and disconnecting the IV tube or tripping over the catheter and spilling urine.

MKR: That leads to point number two—know your scope of practice. It is unacceptable to lift or turn an infirm patient or to make medical assessments. Our primary role as complementary therapists is to help our patients relax, enhancing their well-being during the course of their stay.

MAF: Medical patients have such a broad array of conditions. If we can’t make medical assessments, how do we determine contraindications?


MKR: By recognizing basic precautions in the use of touch. For example, avoid working on the lower body in postsurgical patients. Here’s a story that illustrates this point: a massage therapist was giving massage to a postsurgical client who reported sharp pain in her lower leg. In an attempt to alleviate the pain, she applied deep petrissage. Unbeknownst to them both, the patient had a deep vein clot that was released and


traveled to her lung, causing sudden coughing, sharp chest pain, and rapid breathing. Fortunately, she was already in a hospital and received immediate medical attention, therefore surviving the pulmonary embolism.

MAF: Whew! With all the training we have in contraindications, it’s easy to become absorbed in medical complexities and lose sight of our primary purpose—helping the client. The reality of working with seriously ill people is sobering and quite different from the typical classroom experience. How can we deal with this intensity?

MKR: Seek out a teacher or mentor who has actual experience working in medical settings, to learn techniques that are safe, appropriate, and effective in meeting the needs of clients. When in doubt, don’t be afraid to ask nursing personnel for assistance. Also, to gain other practical skills and boost your confidence, consider training as a certified nursing assistant.

MAF: Working with people in these vulnerable situations can be very humbling. After all, at some point in our own lives, we may all find ourselves in a hospital bed and benefit from the expertise of a skilled and thoughtful massage therapist. **m&b**

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