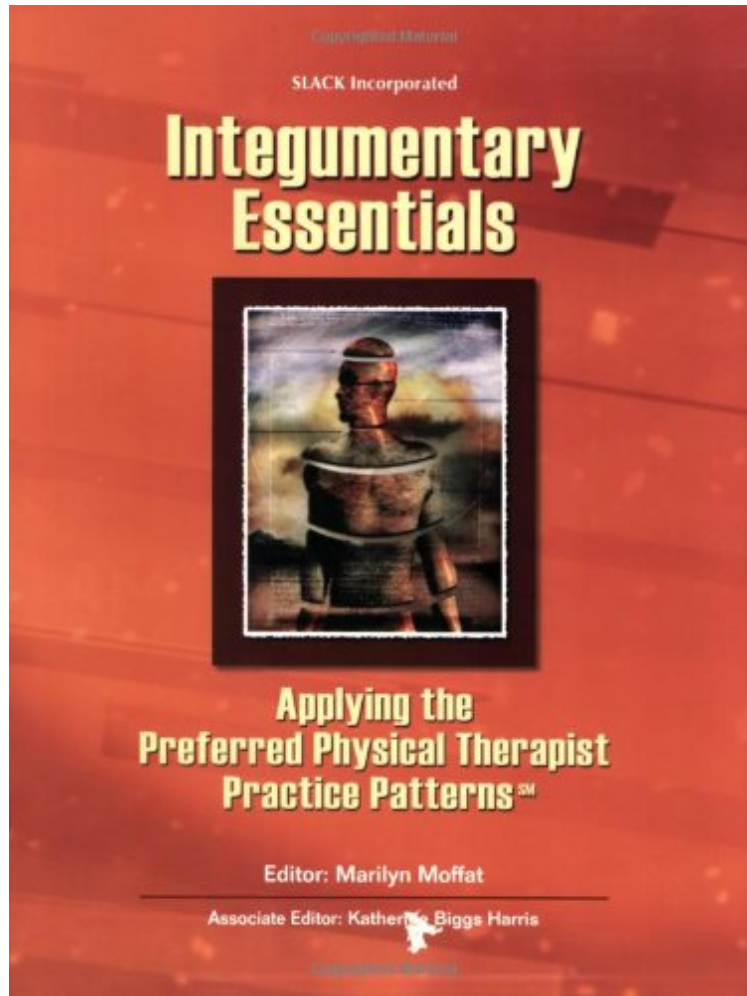


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(Essentials in Physical Therapy)

## **Integumentary Essentials: Applying the Preferred Physical Therapist Patterns(SM) (Essentials in Physical Therapy)**

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Integumentary Essentials: Applying the Preferred Physical Therapist Practice PatternsSM answers the call to what

today's physical therapy students and clinicians are looking for when integrating the Guide to Physical Therapist Practice as it relates to the integumentary system in clinical care. As a part of Essentials in Physical Therapy led by Series Editor Dr. Marilyn Moffat, *Integumentary Essentials: Applying the Preferred Physical Therapist Practice Patterns*<sup>SM</sup> is edited by Katherine Biggs Harris in a user-friendly format that not only brings together the conceptual frameworks of the Guide language, but also parallels the patterns of the Guide. In each case, where appropriate, a brief review of the pertinent anatomy, physiology, pathophysiology, imaging, and pharmacology is provided. Each pattern then details three diversified case studies coinciding with the Guide format. The physical therapist examination, including history, systems review, and specific tests and measures for each case, as well as evaluation, diagnosis, prognosis, plan of care, and evidence-based interventions are also addressed. Sample Cases in Some of the Practice Patterns Include:

- Primary Prevention/Risk Reduction for Integumentary Disorders: A patient with multiple sclerosis; an octogenarian in skeletal traction; a patient with rheumatoid arthritis
- Impaired Integumentary Integrity Associated With Superficial Skin Involvement: A patient burned from a splash injury; a patient with a CVA and a pressure area; a patient with a deep vein thrombosis, cellulitis and edema
- Impaired Integumentary Integrity Associated With Partial-Thickness Skin Involvement and Scar Formation: A patient with a vascular ulcer; a patient with mixed vascular disease and pressure ulcer; a patient with a superficial partial-thickness burn
- Impaired Integumentary Integrity Associated With Full-Thickness Skin Involvement and Scar Formation: A patient with a neuropathic wound; a patient with a full-thickness traumatic, arterial insufficient wound; a patient with a full-thickness infected wound
- Impaired Integumentary Integrity Associated With Skin Involvement Extending Into Fascia, Muscle, Bone, and Scar Formation: A patient with infection in a post-traumatic wound extending to the bone; a patient pre-operative for free flap surgical coverage of a sacral pressure ulcer; a patient post free flap reconstruction of an electrical wound