School of Rehabilitation Science
MSc(PT) Program

Paul W. Stratford Research & Evidence Based Practice (REBP) Day

ABSTRACTS

2018
# MSc Physiotherapy Program
## Presentation Schedule for REBP Symposium
### McMaster University, MIP Room 1, Tuesday July 24, 2018

## AGENDA

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<td>The role of transfer equipment in patient safety in the hospital and community: A scoping review Students: Javier Diaz, Orson Lui, Lucas Proulx, Kent Tang Supervisors: Elisa Galle and Dr. Tara Packham</td>
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<td>Patient Decision Making Aids in Hip and Knee Osteoarthritis: A Scoping Review Students: Connor Balzer, Connor Caba, Lorenzo Rosas, Reuben Thomas Supervisors: Angela Accettura, Stephen Patton and Dr. Pat Miller</td>
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Exercises for Mechanical Neck Disorders: A Cochrane Review Update

Students: Nathan Centritto, DJ Nedelko, Christopher Sarro, Jake Ruehlicke, DJ Nedelko
Supervisor: Anita Gross

ABSTRACT

Introduction: Neck pain is a common and disabling pathology that can lead to increased pain, decreased function and lower quality of life (QoL). Previous Cochrane Systematic Reviews have proven that exercise is beneficial for neck disorders. The purpose of this review was to update the current evidence for exercises for pain, function, and QoL for adults with neck pain.

Methods: MEDLINE, CINAHL, EMBASE, ICL, CENTRAL, ClinicalTrials.gov, WHO app up to March 2018, plus additional sources were searched.

Results: Fifty-nine trials (5171 participants) compared exercise against a control or as an adjuvant. For chronic mechanical neck disorder (MND) evidence shows pain reduction at immediate-term (moderate quality) and short-term follow-up (moderate quality) and improved function at immediate-term (high quality). No benefit was shown for function or QoL at short and long term follow up (moderate to high quality). For cervicogenic headache (CGH), stretching exercise helped with pain intensity (low quality), and strength-endurance exercise improved function and QoL (moderate quality).

Conclusion: High to moderate quality evidence supports the use of exercises in the management of chronic MND; moderate to low quality evidence supports exercise application for those with acute or chronic CGH. Future evidence should focus on detailing exercise dosage.
Botox Injections for Neck Pain: A Cochrane Review Update

Students: Travis Pavey, Mario Wadie, Mike Wadie, Marie Youssef
Supervisor: Anita Gross

ABSTRACT

Introduction: Botulinum toxin type A (BoNT-A) intramuscular injections are often used with the intention of treating non-specific neck pain.

Purpose: The purpose of this review is to assess the effects of BoNT-A in patients with subacute or chronic neck pain with or without associated cervicogenic headache or whiplash on primary outcomes: pain, function, and disability, and secondary outcomes: quality of life, global perceived effect and adverse events.

Methods: We searched CENTRAL, MEDLINE, EMBASE, AMED, Index to Chiropractic Literature, CINAHL from their origin to March 2018 for randomised and quasi-randomised controlled trials where BoNT-A injections were used to treat subacute or chronic non-specific neck pain. We selected 18 trials with 1062 participants aged 20-75, from various settings.

Results: Low quality evidence indicated greater short-term reduction of subacute or chronic neck pain favouring BoNT-A over saline. Low quality evidence indicated that BoNT-A did not show significant benefit for the reduction of disability or quality of life. One study reported a significant improvement in global perceived effect.

Clinical Utility: Overall, there is low quality evidence indicating that BoNT-A is beneficial for pain relief and may be of clinical utility in the management of chronic neck pain with or without cervicogenic headache.
Pelvic Health Physiotherapy: Students Interprofessional Perspectives

Students: Helena Dackovic, Margot Dods, Matthew Mascola, Karen Moreira
Supervisor: Grecia Alaniz and Dr. Sinéad Dufour

ABSTRACT

Purpose: To determine the knowledge level regarding pelvic health physiotherapy amongst pre-licensure health science students.

Method: Using a modified Dillman approach, a cross-sectional survey was conducted with medicine, nursing, physician assistant, and midwifery students at McMaster University.

Results: Forty participants completed the survey. Participants had the greatest difficulty answering questions related to pelvic health physiotherapy scope of practice, as 50% incorrectly believed that all patients with pelvic floor dysfunction can benefit from Kegel exercises and less than half of participants (41%) correctly answered that pelvic health physiotherapists are unable to prescribe medication. Most participants answered the vignette correctly (92.5%), whereas 27.5% of participants were unable to identify the specific condition, placenta previa, as a contraindication for a pelvic health physiotherapy internal examination.

Conclusion: This small study demonstrated some pre-licensure interprofessional knowledge gaps related to the emerging area of pelvic health physiotherapy. Given the growing nature of this practice area, interprofessional education related to pelvic health physiotherapy requires consideration for more optimal integration within relevant health science curriculums.
Effect of exercise on physical activity levels in individuals following stroke

Students: Kristen Dickhout, Thomas Lawrance, Natasha Loewen, Jennifer Mutrie
Supervisors: Vivek Sharma and Dr. Ada Tang

ABSTRACT

Objectives: The objective of this systematic review was to determine the effects of exercise interventions on physical activity levels in individual’s post-stroke.

Data sources: The following databases were searched on May 17th, 2018: MEDLINE, EMBASE, Cochrane Library, PsycINFO, CINAHL, and PEDro.

Methods: Randomized and non-randomized controlled trials were included. Eligibility criteria included participants over 18 years old diagnosed with stroke of any type or severity, physical activity or exercise interventions, and outcome measures (self-reported and sensor-based devices) that assessed physical activity levels. Methodological quality was assessed using the Cochrane Risk of Bias tool. A meta-analysis was performed using Review Manager (version 5.3).

Results: Eighteen studies were included in the qualitative synthesis, 12 of which were included for meta-analysis. There was no effect of interventions on increasing physical activity levels [minutes of activity per day (n studies = 3, n participants = 99, p=0.92) and self-report measures (n studies = 6, n participants = 322, p=0.48)]. There was a positive effect of exercise on increasing number of steps taken per day (n studies = 6, n participants = 325, p<0.00001), but the effect was not maintained after removal of poor quality studies (n studies = 3, n participants = 219, p = 0.07).

Conclusion: Exercise and physical activity interventions had no significant change in physical activity levels post-stroke. More high quality research is required to support these findings.
A Systematic Review of the Role of Inflammatory Biomarkers in Acute/Subacute/and Chronic Non-specific Low Back Pain

Students: Kareem Ali, Mackenzie Merritt, Pat Morris, Joey Pelletier
Supervisor: Dr. Luciana Macedo

ABSTRACT

Objective: To review available evidence on the relationship between inflammatory biomarkers, clinical presentation, and outcomes in patients with acute, subacute and chronic non-specific low back pain (NSLBP).

Summary of Background Data: Low back pain (LBP) is one of the greatest contributors to disability in the world and there is growing evidence of the role of biomarkers in LBP.

Methods: A search was performed in Medline, Embase, Cinahl and Amed databases. Observational studies which measured levels of inflammatory biomarkers in participants with NSLBP were included. Two reviewers independently screened titles, abstracts, full-texts, and extracted data from included studies. Methodological quality was assessed using two versions of the Newcastle Ottawa Quality Assessment Scale.

Results: Seven primary studies were included in this review. Three studies examined c-reactive protein (CRP), one of which found significantly higher CRP levels in an acute NSLBP group than in controls and an association between high pain intensity and elevated CRP. Three studies examined tumor necrosis factor alpha (TNF-α), two of which found elevated TNF-α in chronic NSLBP participants compared to controls. Two studies examined interleukin 6 (IL-6), none of which found a significant difference in IL-6 levels between NSLBP groups and controls. Two studies examined interleukin 1 beta (IL-8), none of which found a significant difference in IL-8 levels between NSLBP groups and controls.

Conclusions: This review found some evidence of elevated CPR in individuals with acute NSLBP and elevated TNF-α in individuals with chronic NSLBP. Associations may exist between CRP and pain intensity as well as CRP and TNF-α concentrations and recovery potential in individuals with acute NSLBP, based on evidence from a single study. No further relationships could be established between inflammatory biomarkers and NSLBP, due to conflicting evidence and a limited number of included studies.
Optimizing Birth: Empowering Women Through Pain Education

Students: Suzanne Dickie, Rebecca Grubb, Tori Jelilyan, Alex Young
Supervisors: Dr. Sinéad Dufour and Jennifer Spreckerly

ABSTRACT

Purpose: This study explores how a one-time workshop, aimed to empower women throughout their birth experience through education on physiologic birth principles, pain neuroscience and recent best practice guidelines can impact a woman’s knowledge and self-efficacy related to physiologic birth practices. Additionally, this study observes the use of strategies and interventions related to labour experiences and birth outcomes.

Methods: A pre-post cohort study design involving a 90-minute workshop with pregnant women in their third trimester. Outcomes were measured immediately pre-post workshop. Participants were contacted 2 weeks after their due date to track birth outcomes and assess workshop utility.

Results: Significant improvements for self-efficacy were found post-workshop. During labour, all participants (n=12) used pain modulating techniques introduced in the workshop, including central nervous system control (53%), gate-control (42%) and diffuse noxious inhibitory stimulus (5%) mechanisms. 11 participants (92%) reported that they would recommend the workshop.

Conclusion: Pain neuroscience education and awareness of best practice guidelines related to optimizing physiologic birth have the potential to improve birth outcomes through improving self-efficacy and coping strategies related to pain and suffering throughout the birth process. Future research is needed in the direct measurement of workshop outcomes on birth experiences and practices.
Identifying barriers and facilitators amongst community-based physiotherapists and kinesiologists with respect to implanting resistance training programs for older adults into their daily practice

Students: Christina Haavisto, Sharon Li, Emily Minten, Nisha Patel
Supervisors: Christina Prevett and Dr. Ada Tang

ABSTRACT

Purpose: Determine content validity of an online survey to explore barriers, facilitators, preferred methods, and perceived roles of clinicians in the implementation of resistance training (RT) in the pre-frail population. Initial findings will be explored.

Methods: Subjects: Expert panel of six physiotherapists and two kinesiologists with at least three years of clinical experience and knowledge of older adults. Design: Cross-sectional survey. Procedure: Completion of an online survey, during which all questions were rated for relevancy (Yes/No) to determine content validity.

Results: All questions received a content validity index of greater than 0.75. The main barrier perceived by participants was a lack of time to analyze research and critically appraise evidence. The main facilitator was having a clearly designed exercise program.

Conclusion: This study established the content validity of an online survey to explore barriers and facilitators of clinicians regarding the implementation of RT in the pre-frail population.
An Environmental Scan of Physiotherapy Services for MS in Canada: Survey

Students: Lily Cao, Karen Essah, Diana Liu, Shanna Wilson
Supervisors: Dr. Vanina Dal Bello-Haas and Dr. Ayse Kuspinar

ABSTRACT

Purpose: Currently, there is a lack of research on physiotherapy services for individuals with Multiple Sclerosis (MS) in Canada. This study aimed to develop a survey that examines physiotherapy practice patterns for MS in Canada using a qualitative research approach.

Methods: The survey development process was conducted through a review of current literature and using Participatory Action Research (PAR) methods with expertise from physiotherapists and individuals with MS. Semi-structured interviews were conducted with 7 participants for their input on survey development. Interviews were then transcribed verbatim and analyzed thematically.

Results: Five key themes emerged from the thematic analysis: a) need for additional of answer options, b) need for question reformatting or rewording question, c) appropriate questions or options, d) good readability and flow, and e) appropriate survey length. After final revision, the survey consisted of 24 items from the following domains: demographics, MS program and patient population, interdisciplinary care, program/service barriers.

Conclusion: This survey is the first one of its kind created in Canada and is the first step to informing health quality improvement and effectiveness of current physiotherapy practices for MS.
Bridging the Gap: A group-based intervention implementing best practice guidelines in pregnancy-related diastasis rectus abdominis (DRA)

Students: Abby Hurd, Emma Lis, Anne Stotesbury, Ciara Wright
Supervisors: Dr. Sinéad Dufour and Jennifer Spreckley

ABSTRACT

Purpose: To explore the feasibility and potential effectiveness of a group-based intervention for diastasis rectus abdominis (DRA) with both education and exercise components.

Methods: Participants with clinically diagnosed DRA and minimum 8 weeks postpartum participated in a pre-post cohort pilot study. Subjects participated in a group workshop consisting of education and four exercises. They were assessed before the workshop and 8 weeks later with a booster session at 4 weeks. The following assessments were used: active straight leg raise (ASLR), Pelvic Floor Distress Inventory (PFDI-20), global rating of change (GRC), DRA integrity, DRA width, and tension generation with transversus abdominis activation.

Results: 30 subjects were invited to participate and 16 completed both pre and post measurements (53.3%). Following intervention, the average GRC score was 1.7. Responses to survey questions indicated that the majority of subjects followed the workshop advice and performed the exercises, demonstrating the potential feasibility of this intervention. With the exception of PFDI-20, all measures trended towards improvement with statistically significant changes in DRA width, DRA integrity, and tension generation.

Conclusions: The findings indicate that a one-time group workshop based on self-management principles and specific exercises improved pregnancy-related DRA outcomes. Future studies must be designed to negate the loss to follow-up demonstrated in this trial.
What are the Most Effective Educational Interventions to Teach Health Professional Students Safe Patient Handling Techniques?
A Scoping Review

Students: Devin Brooks, Nick Guiler, Bahar Hashemi, Erin O’Henly, Bhawandeep Sekhon
Supervisors: Dr. Patricia Miller and Nick Millar

ABSTRACT

Background: Safe patient handling (SPH) skills are a recommended competency for all health care professional (HCP) students (CPSI, 2008).

Objectives: To conduct a scoping review of educational interventions teaching HCP students SPH skills; to identify what outcomes were used to evaluate SPH educational interventions; to determine the effectiveness of SPH educational interventions.

Methods: A scoping review of SPH educational interventions was performed on literature published between 1996-2018 using three electronic databases. Data was extracted on intervention content, teaching strategies used (eg. active vs passive), profession of teachers and students, outcomes used, and program effectiveness. Article screening and data extraction were performed by authors in pairs.

Results: 22 articles were identified for data extraction. The majority of interventions: i) used both active and passive learning strategies (n=18); ii) included nursing students (n=16), iii) used subjective outcomes to assess effectiveness (eg. feedback, confidence, and student perspectives) (n=19). Seven studies evaluated objective performance outcomes. No studies objectively evaluated student performance in a clinical setting. Seven studies included some form of interprofessional practice.

Conclusion: The authors’ recommendations for HCP SPH educational interventions can be used to inform the design, practice and evaluation of these programs.
How do physiotherapists use mental health interventions to treat individuals with chronic conditions?

Students: Amanda Gavin, Nicole Germaine, Lisa Guidoni, Meghan Schnurr
Supervisor: Dr. Elizabeth Alvarez

ABSTRACT

Purpose: This scoping review addressed the research question: How do physiotherapists use mental health-based interventions to treat individuals with chronic conditions?

Methods: The researchers conducted a search of peer-reviewed journals from the Embase, Medline, PsychINFO and CINAHL databases. Articles had to include a physiotherapist incorporating a mental health intervention into their treatment. The researchers used coding and constant comparison to identify themes.

Results: Data was extracted from 103 articles. Only six of the 103 articles were published before the year 2000. Low back pain (n=43, 42%) and chronic pain (n=16, 16%) were the most commonly researched chronic conditions. Outpatient facilities were the most common setting for intervention (n=70, 68%). Thirty-eight (37%) of the articles included graded exercise or graded activity as a mental health intervention and 33 articles (32%) employed cognitive behavioural techniques (CBT). Ninety-four articles (91%) used exercise as a physiotherapy intervention.

Conclusions: Physiotherapists commonly use graded activity and/or CBT combined with exercise to treat individuals with chronic low back pain and chronic pain. Physiotherapists require more detailed descriptions of treatment and training protocols before implementing these techniques into clinical practice.
Development of the Physical Activity Enjoyment Rating Scale: An Objective Assessment of Body Language and Behaviours in Children with Autism Spectrum Disorder

Students: Jennifer Cheng, Chenoa Koke, Olivia Noonan, Fiona Wilson
Supervisors: Ilana Naiman and Dr. Virginia Wright

ABSTRACT

Purpose: To develop a prototype measure to assess body language and behaviours in children with high functioning autism that can be used in the interpretation of enjoyment or disinterest during physical activities.

Methods: The measure item pool was synthesized through clinical reasoning, literature review, and video analysis of body language and behaviours in healthy children and those with cerebral palsy, acquired brain injury, and autism.

Results: A 35 item body language and behaviours checklist that is scored by tallying items as indicators of enjoyment or disinterest.

Conclusion: The Physical Activity Enjoyment Rating Scale (PAERS-ASD) was created for use by healthcare professionals and physical educators. Pilot testing is required to assess the content validity and reliability of the measure.
The role of transfer equipment in patient safety in the hospital and community: A scoping review

Students: Javier Diaz, Orson Lui, Lucas Proulx, Kent Tang
Supervisors: Elisa Galle and Dr. Tara Packham

ABSTRACT

Purpose: To perform a scoping review of AATDs and their different types, cost-effectiveness, utilization, and roles in hospital and community settings. Patient and caregiver outcomes including safety, satisfaction, and discharge times were also investigated in these same settings. This scoping review was performed to help inform resource allocation of such transfer devices in these settings, including in LHINs.

Methods: Conducted a search of the scope and nature of the evidence, extracting data for the role of AATD in specific categories.

Results: Our search yielded 41 articles that provided evidence, sorted into 4 categories: (1) Patient outcomes in hospital (n= 18), (2) HCW outcomes in hospital (n= 24), (3) Patient outcomes in community (n= 7), (4) HCW outcomes in community (n= 11). Some articles had evidence for multiple categories. Quality of the evidence was predominantly low, with 29 published articles and 12 grey literature sources.

Conclusions: The existing literature exploring the role of AATDs needs further analysis to identify outcomes and generate recommendations, as it was comprised mainly of low quality evidence. However, evidence trends supported the use of AATDs, suggesting benefits to patients and caregivers in the hospital and community settings.
Patient Decision Making Aids in Hip and Knee Osteoarthritis: A Scoping Review

Students: Connor Balzer, Connor Caba, Lorenzo Rosas, Reuben Thomas
Supervisors: Angela Accettura, Stephen Patton and Dr. Pat Miller

ABSTRACT

Background: Knee and hip osteoarthritis (OA) are common conditions with multiple treatment options. Decision making aids (DMAs) are used collaboratively by clinicians and patients to help them inform treatment decisions.

Purpose: This scoping review was conducted to identify the common components in hip and knee OA DMAs, how they are developed as well as clinician and patient views regarding their utility.

Methods: Three databases (EMBASE, CINAHL, MEDLINE) and Google were searched. After title/abstract and full text screening, data was extracted. Themes were identified using content analysis.

Results: 22 unique full-text DMAs were identified. 12/22 were specific to knee OA, 7/22 hip and 3/22 were both. 16/22 and 14/22 DMAs provided risks and benefits of conservative and surgical treatment options respectfully. 8/9 studies reporting development of DMAs utilized patient input and best evidence. Both patients and clinicians reported recognizing the potential educational benefits of DMAs with some concerns regarding their impact on timely practice.

Conclusions: DMAs provide an avenue for shared decision-making through education of patients regarding various treatment options. Further research is required to understand the effectiveness of DMAs and the ideal components to be incorporated.
Abstract

Purpose: To gather information on point-of-care ultrasound (POC-US) education available for physiotherapists in Canada, describe how it is conducted and examine how physiotherapists’ POC-US competency is assessed as of 2018. Additionally, to investigate provincial professional and regulatory legislation related to physiotherapists’ POC-US use in practice.

Method: A scoping review methodology based on the Arksey and O’Malley Framework with the Levac et al. extensions was used. Electronic databases, grey literature and questionnaires were used to collect data.

Results: Two published articles, three physiotherapy program websites and four physiotherapy program faculty commented on POC-US education and competency assessment. All physiotherapy colleges and associations, manufacturers and key stakeholders stated there is no continuing education for registered physiotherapists. Seven physiotherapy colleges state that POC-US for diagnostic purposes is not within physiotherapists’ scope of practice. There is variation in provincial legislation for POC-US use as a biofeedback tool and the need for a medical directive.

Conclusions: The literature on POC-US education and competency assessment for Canadian physiotherapists is scarce. There is no clear legislation supporting the use of POC-US in physiotherapy. Greater education opportunities with appropriate competency assessment are needed and a national consensus on POC-US use by physiotherapists should be established in the legislation.