Leading the Way in Early Mobility and Rehabilitation in the ICU

EarlyMobility.com is honored to feature one of the Early Mobility Industry’s leading clinicians and accomplished author, Mrs. Christiane Perme. The most effective early mobility programs fully embrace the multidisciplinary approach. Physical therapists play a vital role in patient assessment and maximizing mobility across the entire continuum of care, but particularly in acute care and ICU. As a leading physical therapist in Early Mobility, Mrs. Perme challenges physical therapists to take their practice to a new level in the treatment of critically ill patients.

Mrs. Perme has extensive experience in treating adult patients in Intensive Care Unit with special interest in patients requiring mechanical ventilation. She is an experienced speaker nationally and internationally, including Russia (2014), Brazil (2010, 2012, 2013, 2015), Nigeria (2011) and at the World Physical Therapy Congress in Spain (2003), Canada (2007), Netherlands (2011).

Christiane Perme, PT, CCS

Christiane Perme, PT CCS is a 1981 graduate from the Catholic University in Brazil where she received a Bachelor of Science degree in Physical Therapy. In 2005, she became a Board Certified Cardiovascular and Pulmonary Clinical Specialist by the American Physical Therapy Association. Mrs. Perme is currently a Level IV Physical Therapist at the Houston Methodist Hospital Texas Medical Center, where she has practiced for the past 28 years with a variety of complex acute care patients. She is also staff lecturer for Motivations, Inc. and Education Resources, Inc. Mrs. Perme has published 12 articles and is co-author in 9 book chapters.
The Role of PT in Early Mobility

Physical therapists face complex challenges as we provide care to patients in intensive care units (ICU) around the world. However, we also have amazing opportunities to influence outcomes and quality of life for acutely ill patients. Some of the challenges that physical therapists encounter in ICU are:

- Severity of illness in the ICU patient population
- Lack of complete understanding about skeletal muscle weakness in critical illness ICU culture that favors sedation and bed rest
- Unclear roles and responsibilities of physical therapy in ICU
- Need for additional specific physical therapy training for treatment of patients who are critically ill
- Inconsistent physical therapy practice in ICU
- Limited specialized physical therapy equipment and resources available for clinicians

As physical therapists, we must advance the profession and achieve excellence in the management of complex patients with rapidly changing medical status. In my view, any initiative to achieve excellence has to include outcomes and goals in the following areas: education, research, and delivery of physical therapy services.

Important quotes:

- “It should be clear to every physical therapist that, for clinical and research purposes, treating a patient in ICU can be quite different from treating a critically ill patient”.
- “The most important skill for a physical therapist practicing in ICU is to recognize when to initiate, delay, progress, and terminate treatment in patients with critical illness.”