

## **MT1 LIASON WITH THE MEDICAL PROFESSION**

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### **1. Principles and Responsibility**

Students and practitioners of Massage Therapy should note that at all times they hold clinical, ethical and legal responsibility for the effects of their treatments on clients. Massage practitioners should therefore have information about common medical conditions, underlying causes, signs and symptoms and indications and contra-indications for massage. This will help them make good choices about how to adapt their skills safely for their clients, including deciding when not to treat or when to refer to other practitioners.

In line with good professional practice expected by insurance companies, this means a massage practitioner may well need to lease with the client's medical practitioner before coming to a judgement in a particular case.

### **2. Liaison with the medical profession**

There are good reasons for practitioner's liaising with the medical profession:

- a. Courtesy – especially when the client has a long-standing relationship with his/her doctor.
- b. To foster good relations between professions.
- c. To work as a team for the client's best interests.
- d. For Insurance purposes – although it should be noted that litigation in the field of massage therapy is extremely rare.
- e. To request information both before and during treatment.
- f. For the practitioner's own peace of mind.

### **3. When to liaise**

There are 3 main categories of condition here -

1. When consent is not required
2. When to inform the medical practitioner
3. When input, guidance and/or advice is required

The individual practitioner should be guided by their level of experience and qualifications; professional organisation or training college; an experienced colleague such as a supervisor and should always seek the client's consent. The GCMT recommend the following guidelines:

### **1. When consent is not required**

Common complaints for which the client is not receiving medical treatment including upper respiratory infections such as colds, coughs, sinusitis, common allergies such as hay fever, jet lag, constipation/diarrhoea (unless part of an underlying condition).

- Localised skin conditions unless they are severe or undiagnosed.
- Visual and hearing impairment.
- Conditions that have resolved or are in remission and there is no ongoing medical treatment.
- Common menstrual or menopausal symptoms.
- Pregnancy, unless there is a history of miscarriage.

### **2. Informing the Medical Practitioner**

- Unhealed fractures,
- All types of arthritis and osteoporosis.
- Repetitive Strain Injury, Muscular Dystrophy, Fibromyalgia.
- Severe or widespread skin disorders, for which the client is receiving medical treatment.
- Severe respiratory conditions, such as emphysema, chronic bronchitis and pneumonia.
- Most nervous system disorders affecting motor and/or sensory function if the client has ongoing medical treatment.
- Clients who are emotionally vulnerable and taking medication – sensitivity to the client's wishes is required.
- Cancer – if in remission.
- Diabetes, Thyroid and other Endocrine disorders.
- Disorders of the large intestine, such as Crohn's disease or Irritable Bowel Syndrome.

### **3. Medical Input, Guidance/Advice and advisability of massage therapy**

- Recent major surgery
- Cancer, if in treatment stage.
- HIV/AIDS, if the person is currently unwell

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- Most cardiovascular conditions.
- Conditions that are infectious for a certain period, during the acute phase, such as pulmonary TB.
- Hepatitis and Cirrhosis
- Further details on this guidance are given under Cautions and Contra Indications.

#### **How to Liaise**

- a. the client may inform the doctor verbally at his/her next appointment, that he/she has started to have massage treatment/would like massage treatment. This very informal approach means there is no evidence apart from the client's word, as to the medical practitioner's response to their patient's information/request. The client's signature regarding informing their GP must be obtained at all times.
- b. the practitioner could write to the doctor explaining that he/she is currently seeing a patient for massage and to request that if there are any observations or reservations, to let them know. This correspondence should be kept on file with the client's records.
- c. the practitioner could write a more detailed letter requesting information about the advisability of massage from the doctor. If, for example, a client has had a stroke, the practitioner may wish input from the doctor as to whether or not it would be safe for the patient/client to receive massage therapy.

#### **If a client refuses permission to liaise there are two choices:**

1. Practitioners who have serious doubts about the advisability of massage for a particular medical condition or about their own experience and competence to massage safely, should refuse to treat.
2. Ask the client to sign a medical disclaimer, to the effect that he refused permission to consult with his/her doctor and take full responsibility for his/her medical condition and any changes that arise as a result of having massage. However being a professional, the practitioner still has total responsibility for the treatment, including anything detrimental that could happen and a written disclaimer holds no legal weight were a malpractice case to be brought by the client.