



NATIONAL HEMOPHILIA FOUNDATION
for all bleeding disorders

MASAC Document #238
(Replaces Document #222)

**MASAC RECOMMENDATIONS REGARDING PHYSICAL THERAPY GUIDELINES
IN PATIENTS WITH BLEEDING DISORDERS**

The following recommendation was approved by the Medical and Scientific Advisory Council (MASAC) on August 15, 2015, and adopted by the NHF Board of Directors on November 13, 2015.

Physical therapy is an important adjunct in the management of individuals with hemophilia and other inherited bleeding disorders. [1] Physical therapy is used to rehabilitate muscles and joints following acute soft tissue injuries and hemarthroses, chronic synovitis, and hemophilic arthritis. In addition, physical therapy is critical to pre- and post-operative management of individuals with bleeding disorders who have undergone either arthroscopic or open synovectomy or joint replacement.

Following joint or soft tissue injuries, individuals who require physical therapy intervention are at times seeking out these services in their local communities. As well, many of these individuals are having surgery and post-operative physical therapy in institutions that do not have a Hemophilia Treatment Center (HTC) comprehensive care team that includes a hematologist, nurse practitioner, and physical therapist who are experienced in the pre- and post-operative management of these patients. Thus there has arisen a need for standardized guidelines for management of these patients that can be followed by both HTC and non-HTC physical therapists.

Recognizing this need, the Physical Therapy Working Group (PTWG) of the National Hemophilia Foundation (NHF) has developed the following guidelines for use by physical therapy services in the management of patients with inherited bleeding disorders:

- Cryotherapy (2011)
- Iliopsoas Bleed (2011)
- Joint Bleed (2011)
- Muscle Bleed (2011)
- Surgical Synovectomy (2013)
- Total Knee Replacement (2015)

MASAC recommends adoption of these standardized guidelines by physical therapy services for management of individuals with bleeding disorders, either inpatient or outpatient, both in HTCs and in institutions not affiliated with an HTC. In the latter case, consultation with members of the HTC team is strongly encouraged.

Reference:

1. Medical and Scientific Advisory Committee. MASAC Document #132: Standards and Criteria for the Care of Persons with Congenital Bleeding Disorders Revised April 2002.

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