

Guidance offered for managing therapies in children with disability

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dose of therapy is mainly subjective. Before writing a therapy prescription, physicians should review past and current therapy reports, family-identified concerns, and additional findings. The provider should identify the therapy discipline, [medical condition](#) associated with the disability, and the goals of therapy. After evaluation by a therapist, the provider may be asked to revise the prescription. Providing a clear prescription to help guide therapy is important.

"Many general pediatric providers describe inadequate training to appropriately prescribe [therapy](#) in the various settings in which they may be available to [children](#) with disabilities," the authors write.

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(HealthDay)—In a clinical report published online March 25 in *Pediatrics*, guidance is provided for managing therapy services for children with disabilities.

Amy Houtrow, M.D., Ph.D., M.P.H., from the University of Pittsburgh, and colleagues offer information about how best to manage the therapeutic needs of children with temporary or permanent disabilities in the medical home.

According to the report, the goals for children with disabilities are to help the child achieve developmentally appropriate functional skills; prevent maladaptive consequences; mitigate the impact of impairments on the child's activities; and provide adaptive strategies to minimize the impacts of functional deficits. The report authors discuss [physical therapy](#), [occupational therapy](#), and speech and language therapy, which can be provided in four main settings: in the hospital, in the outpatient or community setting, in the child's home, and in school. Determining the appropriate

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