

## **A Survey of Professionally Qualified Physiotherapist Working in Neonatal and Paediatric Intensive Care Units in Punjab**

**Kumar<sup>1</sup>, Ashok, Shergill<sup>2</sup>, Navkaran & Jairaman<sup>3</sup>**

<sup>1</sup>Assistant Professor, Department of Sports Science, Punjabi University Patiala (Punjab) India

<sup>2</sup>Ph.D. Student, Dept. Sports Science, Punjabi University Patiala (Punjab) India,  
mail:navkaran9999@gmail.com.

<sup>3</sup>Assistant Professor, Department of Physiotherapy, Punjabi University Patiala (Punjab) India

### **Abstract**

The purpose of this study was to observe the practice of physiotherapy in Neonatal and Paediatric Intensive Care Units (NICU and PICU) in Punjab state. The design of the study was exploratory cross sectional survey. Data was collected with the help of standardized questionnaire, which was sent to one hundred thirty therapists who worked in thirty eight different hospitals in Punjab and these hospitals have claimed physiotherapy facilities in their NICU and PICU premises. A period of two weeks was given to the therapists for the completion of questionnaire. If the therapists were not able to send the filled questionnaire within two weeks, then a reminder call was given to them for the next two consecutive weeks. It was found that only eighty-four (i.e. 64.61%) completed questionnaires was received from the twenty five hospitals. Results revealed that 60% of hospitals were having physiotherapists and out of which 51.2% therapists were graduate in nursing (B.Sc.), 41.7% graduate in physiotherapy (BPT) and 7.1% Master in Physiotherapy (MPT). It was concluded that not all of the patients get routine physiotherapy from the professionally qualified physiotherapists as part of their NICU and PICU stay in hospitals located in Punjab.

**Key words: ICU, Neonatal, Paediatric, Physiotherapy, Punjab**

### **Introduction**

Recent advances in medical care have improved the survival of newborn babies born with various problems. Despite this death in the neonatal intensive care unit (NICU) is an inevitable reality. In 1960, the idea of having a special intensive care unit for newborns, a neonatal intensive care unit represented a developmental milestone for the field of neonatology. Neonates as young as 25 weeks and as small as 750 g are routinely being saved. However, survivors often have significant physical and mental impairments, including cerebral palsy, blindness, and learning disabilities (*Manjiri et al., 2011*). The infant mortality rate (IMR) in India

has dropped from 144 per thousand live births to 84 per thousand live births in the past few decades. In Punjab according to the 2011 census infant mortality rate is 38 per thousand live births. The recommendation is for 30 Neonatal intensive care units beds per million population (*Fernandez and Mondkar, 1993*). Neonatal chest physiotherapy has become a routine method of care in neonatal intensive care units in western world (*Bruno & Claude, 2007*), while the same is less common in India, probably due to shortage of cardiopulmonary physiotherapy training in pediatrics and neonates. NICU is a unit that provides high quality skilled care to critically ill neonates