

Electrical Stimulation- User Protocols **Rehab Medical**

What is the physiological goal of your treatment?

Physiological Goal	Protocol	Target Tissue	Accompanying Activities
Decrease Pain			
reduce nociception with activity	IFC ACUTE (large area), PREMOD ACUTE (small area)	area of complaint	ROM, strengthening of supporting structures
reduce muscle spasms	IFC CHRONIC (large area), PREMOD CHRONIC (small area)	area of complaint	ROM, stretching, corrective exercises
nerve block	IFC NERVE BLOCK (large area), PREMOD NERVE BLOCK (small area)	area of complaint	ROM, stretching, manual techniques
Increase Circulation			
	HIGH VOLT EDEMA	red lead distal to edema, black lead proximal	muscle pumping activity, elevate extremity, manual techniques
	VMS STRENGTH – co-contract	Agonist and antagonist to facilitate muscle pumping effect	muscle pumping activity, elevate extremity, therapeutic activities
Motor Activation			
build strength	VMS STRENGTH	muscle, muscle group impacting function	graded therapeutic exercise, activities to improve functional performance
build endurance	VMS ENDURANCE	muscle, muscle group impacting function	continuous, reciprocal activities i.e. bike, sci-fit, etc
motor control	VMSFR STRENGTH	muscle, muscle group impacting function, adjust phase duration to 300 if over large muscle/muscle group, and 400 if over flaccid muscle/muscle group	weight bearing, volitional activation of target muscle
spasticity reduction	VMSFR SPASTICITY	muscle, muscle group impacting function, adjust phase duration to 300 if over large muscle/muscle group, and 400 if over flaccid muscle/muscle group	weight bearing, volitional activation of target muscle, stretching of spastic muscle impairing function
Tissue Healing			
wound care	HIGH VOLT WOUND	outside wound margins	functional activities to address baseline causes of wound development if applicable