

Frequently Asked Questions?

1. Do I need a physician's referral?

No, in most cases patients can self-refer to physiotherapy. However, it is important if you have third party insurance coverage that you check your policy to see if they require a physician referral prior to reimbursement.

2. Does health insurance cover physiotherapy?

Many Extended Health Benefits (EHB) Plans do provide cost coverage for physiotherapy assessment and treatment services. Check with your EHB plan carrier or your Employee Health Handbook to determine what your annual coverage is for physiotherapy services. If it is a workplace injury or an injury sustained in an automobile accident, you may have access to coverage under the WSIB or SABS.

3. Who benefits from physiotherapy?

- Up and coming athletes who want to avoid problems associated with chronic injuries
- Injured athletes who want to resume their training
- Athletes plagued by overuse training injuries
- Weekend athletes who happened to just "over do it"
- Persons who want to get back in shape and not injure themselves while doing so
- Persons who want to restore and increase range of motion in joints
- People wanting to alleviate pain
- People who have sustained a work-related injury

4. What kinds of conditions can be treated?

Injuries that can benefit from physiotherapy intervention can include:

- Rotator cuff tendonitis
- Knee ligament or meniscus injury
- Tennis elbow
- Plantar fasciitis

- Ankle sprains
- Shin splints
- Patellar tendonitis or patella femoral syndrome
- Achilles tendonitis
- Neck or low back pain
- SI joint injuries

5. What types of physiotherapy treatment might I receive?

- Assessment of movement, strength, endurance,
- Manual therapy (spinal and extremity)
- Modalities i.e. ultrasound
- Exercise therapy
- Education