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	Provision of Care, Treatment and Services	Date Effective:	February 6, 2020
	Guideline: Therapeutic Massage	Date of Origin:	November 10, 2010
	Approved By: Pain Steering Committee, Clinical Council	Date Approved:	February 6, 2020

## I. Purpose

The purpose of this document is to provide guidelines for therapeutic massage as an intervention to promote healing and comfort and to reduce anxiety.

## II. Background Information

Massage therapy is a modality that complements a patient's individualized treatment plan and promotes healing and relaxation.

## III. Inclusion/Exclusion Criteria/Indications/Definitions

### A. Therapeutic Benefits

1. Relieve pain
2. Reduce anxiety
3. Improve circulation
4. Promote ease of movement
5. Relieve muscle stiffness
6. Promote comfort and a sense of well being
7. Support the body's natural healing process
8. Promote relaxation

### B. Areas to avoid

Do not perform massage therapy:

1. Over areas with acute inflammatory conditions
2. Over areas with open wounds, burns, deep vein thrombosis or embolism
3. Over bruises
4. Over fractures
5. Over tumors, unless ordered by Credentialed Practitioner


## IV. Guidelines

### A. Credentialing

1. Massage therapy may be performed by a Licensed Massage Therapist (LMT), a Certified Pediatric Massage Therapist (CPMT), an Occupational Therapist or a Physical Therapist.
2. The LMT, or CPMT shall be credentialed in accordance with the Medical Staff Bylaws and applicable credentialing policies. It is the Therapist's responsibility to provide personal and professional liability insurance.

### B. Therapist preparation for treatment

1. A Credentialed Practitioner's order is required for massage therapy.
2. Check in with patient's nurse prior to completing an initial evaluation and prior to subsequent massage therapy session(s) for patient-specific information that may impact the delivery of care. If the patient is in the NICU, consult the

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patient's nurse and developmental specialist before evaluating the patient and for subsequent therapy session(s).

3. Obtain consent from patient/parent/legal guardian. Consent form is located on Forms Manager. As indicated on the consent form, discuss the benefits of massage therapy and the techniques that will be used with the patient. File it in the patient's medical record. Once signed, each consent form is valid for 90 days unless a significant change occurs.

#### C. Providing massage therapy


1. Perform massage therapy in the patient's room where lighting, music and comfort objects can enhance the relaxation experience.
2. Observe all infection prevention and control measures per hospital policies/procedures
3. Observe all safety protocols regarding bed (e.g., siderails, height, etc).
4. Use oil or lotion for massage therapy based on the individual patient evaluation (assessment). Be sure to ask about allergies before using any oils/lotions. Natural food-based oils are recommended.
5. Use massage therapy technique that is physically and developmentally age appropriate.
6. Consider placing a Do Not Disturb sign on the patient's door to provide privacy and maximize therapeutic effects.

#### D. Document the following in the patient's medical record:

1. Patient or parent/legal guardian informed consent for the therapy
2. Evaluation time
3. Treatment time
4. Any pertinent observations of the patient
5. Patient response to the treatment

## V. References

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Kumar S, Beaton K, Hughes T. The effectiveness of **massage** therapy for the treatment of nonspecific low back pain: a systematic review of systematic reviews. *Int J Gen Med.* 2013 Sep 4;6:733-741

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Wilkinson S, Barnes K, Storey L. **Massage** for symptom relief in patients with cancer: systematic review. *J Adv Nurs.* 2008 Sep;63(5):430-9.

American Cancer Society:

<http://www.cancer.org/treatment/treatmentsandsideeffects/complementaryandalternativemedicine/manualhealingandphysicaltouch/massage>

Mosby's Nursing Consult: Evidence-Based Monographs link:

<http://mns.elsevierperformancemanager.com>

NIH NCCAM: <http://nccam.nih.gov/sites/nccam.nih>

Tracy Walton. Essential contraindications to Massage Therapy in Cancer Patients. <http://www.tracywalton.com>

## VI. Related Documents

Consent for Massage Therapy Form – Forms Manager