



Observation Skill Development

Sit to Stand

Instructions

View the video **Sit to Stand: Observation of Normal Movement**. Try the movement yourself several times and observe the movement in several classmates. Note your observations below - remember to think kinematics of movement with attention to specific degrees of motion, and the typical muscle activity you would expect to see.

View the video **Early Gait Training: Difficulties with Sit to Stand and Stand to Sit**. Take note of his kinematics during the sit to stand transition. Compare this to the typical individual. You will need to start and stop the video several times in order to complete the chart in sufficient detail.

Watch

Watch the following videos:

- **Sit to Stand: Observation of Normal Movement**
- **Early Gait Training: Difficulties with Sit to Stand and Stand to Sit**

Observation Skill Development: Sit to Stand

1. Observation of typical sit to stand in the video: Sit to Stand: Observation of Normal Movement

Alignment Symmetry Muscle recruitment	Prepares to stand	Leans upper body forward	Lifts buttocks	Assumes upright posture
Ankle/foot				
Knee				
Hip				
Trunk				
Head/neck				

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2. Observation of sit to stand in the video: **Early Gait Training: Difficulties with Sit to Stand and Stand to Sit**

Alignment Symmetry Muscle recruitment	Prepares to stand (freeze frame at 00:09)	Leans upper body forward (freeze frame at 00:12)	Lifts buttocks (freeze frame at 00:13)	Assumes upright posture (freeze frame at 00:16)
Ankle/foot				
Knee				
Hip				
Trunk				
Head/neck				
Left Upper Extremity				

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3. What are your observations on patient/therapist relationship/therapeutic alliance?
Comment on verbal cues, body language, and confirmation of patient understanding of the task.

4. What could the therapist have done differently to promote better alignment and symmetry before the patient moved from sit to stand?

5. What could the therapist have done to promote muscle activation during the sit to stand transition?
Comment on verbal, tactile or other strategies to promote motor learning and recovery of function.

6. What challenges exist when guarding a patient who is moving from sit to stand? Do you think the therapist over-guarded this patient? What is the impact of allowing the patient to pull themselves up on the parallel bar?

7. Comment on the use of a gait belt for patients with neurologic impairments. From a brief review of the literature, are gait belts proven to prevent falls? Are there draw backs to the use of gait belts?

8. Comment on any safety concerns you see in the video. As the therapist, what could you do differently?

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9. What is the level of assist for the sit to stand transition? How are you determining this?

10. What participation activities incorporate sit to stand as a major component?

11. Where on the mobility>stability>controlled (dynamic) stability>skill continuum does sit to stand fall? How does that influence your critical thinking regarding treatment planning?

12. List all possible impairments that you think may be contributing to the functional limitation of decreased ability to move from supine to sit. Use professional terms and be specific.