



# Observation Skill Development Ambulation

This lesson plan is designed to develop observational skills to determine deficits in static standing and early ambulation in a stroke survivor.

## Learning Objectives

By the end of this activity, the successful student will:

1. Compare normal static standing to that of an individual with neurologic diagnosis.
2. Identify deficits in the swing and stance phases of the gait cycle in an individual with neurologic impairment.
3. Determine how verbal and tactile cueing and therapeutic alliance can influence task performance in the neurologically impaired individual.
4. Discuss what assistive and supportive devices are used to promote function and safety.

*This activity supports the requirements for:*

- *The Accreditation Council for Occupational Therapy (ACOTE) standards (2018):*
  - *OT: B.3.6., B.4.13.*
  - *OTA: B.3.6., B.4.13.*
- *The Commission on Education for Physical Therapy Education (CAPTE) standards:*
  - *PT: 7D7*
  - *PTA: 7D7*

# Observation Skill Development: Ambulation

## Watch

Assign the following video for students to watch:

- **Early Gait Training: Patient Observations Inside the Parallel Bars**

## Discuss

1. Observe static standing and the swing and stance phases of the gait cycle of two peers. Pay attention to their posture, alignment, and symmetry as you observe them.
2. View the video **Early Gait Training: Patient Observations Inside the Parallel Bars**. Starting with static standing, what do you observe regarding:
  - a. Trunk midline orientation
  - b. Head and neck orientation and posture
  - c. Posture and symmetry of the upper extremities
  - d. Posture and symmetry of the lower extremities
3. Does the individual require assistance or upper extremity support to stand statically?
4. What supportive devices is the therapist using during this intervention? Comment on pros and cons of using this type of upper extremity support for ambulation.
5. Begin observation of gait with the swing phase, comment on the following:
  - a. Swing starts with push off of the affected leg. Does there appear to be adequate push off with the left lower extremity?
  - b. Does the individual have more or less hip flexion and knee flexion on the left side than your peers during the swing phase?
  - c. What does the therapist do to promote swing phase with this individual?
6. Observe the stance phase of gait, comment on the following:
  - a. Comment on the position and alignment of the left hip during midstance. How does that differ from the peers you observed?
  - b. Comment on the position and alignment of the left knee during midstance. How does that differ from your peers?
  - c. What other alignment issues do you see in this patient during the stance phase?
7. What verbal cueing is provided to the patient during the activity? Do you think the patient has a good understanding of the task and is benefitting from the verbal cues?
8. What manual facilitation did the therapist provide to the patient during the task?
9. How does Henry's alignment change when the other therapist places his left hand on the parallel bar?

## Watch More

Suggested additional video:

- **Mobility: Ambulation in acute care (Ben)**