

Instructions

- 1. View videos in small groups and go over the questions related to each video
- 2. Work independently to answer questions
- 3. Return to your group and discuss case
- 4. Individually write SOAPE note for case

Watch

Watch all assigned videos:

- Acute Care Part 1: Bed Mobility Scooting Up in Bed
- Acute Care Part 4: Dizziness while Standing
- Mobility: Ambulation in Acute Care
- Mobility: Transfer from chair to bed in Acute Care
- Upper Extremity Assessment: Acute Care
- Upper Extremity ROM: Family Teaching

Questions

1. What are the precautions you need to consider when working with this patient? Consider all the lines and leads and surgical precautions you need to be aware of and follow.

List of Precautions	Plan to Maintain Precautions

2. Complete a movement analysis of his bed to chair transfer.

	Initial Condition Posture assessment of the initial starting position prior to the initiation of the activity	Preparation Postural set up and adjustment prior to the task. Remember this is mostly an internal process that may not be evident.	Initiation The first thing that moves as a part of the actual task	Execution Progression of the movement with description of changes in alignment, BOS with a description of movement.	Termination The final position at the end of the task.
Head and Neck		,			
Upper Trunk					
Lower Trunk					
Pelvis					
Upper Extremities					
Lower Extremities					



3. Fill out the table below to predict impairments you saw during your movement analysis for bed mobility. What objectives measures would you complete to assess the impairments? What would you predict to be the outcome of the impairment testing? How would you intervene to reduce or address the impairment (within session)?

Predicted Impairment (based on movement analysis)	Objective Measure	Outcome	Within Session Intervention

- 4. View the patient videos:
 - Acute Care Part 1: Bed Mobility Scooting Up in Bed
 - Acute Care Part 4: Dizziness while Standing

OPTIONAL PRACTICE (additional practice for you to help prepare for final lab practical exam)

Select one of the movement sequences in the above two patient videos. Complete a movement analysis of his ______.

	Initial Condition	Preparation Postural	Initiation The first thing	Execution Progression	Termination The final
	Posture assessment of	set up and adjustment	that moves as a part of	of the movement with	position at the end of
	the initial starting	prior to the task.	the actual task	description of changes	the task.
	position prior to the	Remember this is mostly		in alignment, BOS with	
	initiation of the activity	an internal process that		a description of	
		may not be evident.		movement.	
Head and Neck					
Upper Trunk					
Lower Trunk					
Pelvis					
r eivis					
Upper					
Extremities					
Lower					
Extremities					



OPTIONAL PRACTICE (additional practice for you to help prepare for final lab practical exam)
Fill out the table below to predict impairments you saw during your movement analysis for
What objectives measures would you complete to assess the impairments?
What would you predict to be the outcome of the impairment testing? How would you intervene
to reduce or address the impairment (within session)?

Predicted Impairment (based on movement analysis)	Objective Measure	Outcome	Within Session Intervention

- 5. View the next patient video:
 - Mobility: Ambulation in Acute Care

Using Rancho Gait Full Body Gait Form (next page), complete a gait analysis of this patient.

GAIT ANALYSIS: FULL BODY



Reference Limb:				XV	, //k ,	Rancho Los Amigos
L			- <u> </u>			National Rehabilitation Center
Major Deviation	WA	SLS		SLA		
Minor Deviation	IC LR	MSt TSt	PSw		ISw TSw	Major
Trunk Lean: B/F Lateral Lean: R/L						Problems:
Rotates: B/F						(WA) Weight
Pelvis Hikes Tilt: P/A Lacks Forward Rotation						Accéptanče
Lacks Backward Rotation Excess Forward Rotation						
Excess Backward Rotation Ipsilateral Drop						(2, 2, 2, .
Contralateral Drop						(SLS) Single Limb Support
Hip Flexion: Limited						Zimo Gapport
Excess Past Retract						
Rotation: IR/ER						
AD/ABduction: AD/AB						
Knee Flexion: Limited						
Excess Wobbles						(SLA) Swing Limb Advancement
Hyperextends						Advancement
Extension Thrust						
Varus/Valgus: Vr/VI Excess Contralateral Flex						
Ankle Forefoot Contact						
Foot Flat Contact						
Foot Slap						
Excess Plantar Flexion Excess Dorsiflexion						
Inversion/Eversion: Iv/Ev						Excessive UE Weight Bearing
Heel Off						Weight beaming
No Heel Off						
Drag Contralateral Vaulting						Name
Toes Up						Patient #
Inadequate Extension Clawed/Hammered: Cl/Ha						Diamaria
© 2001 LAPEL Pancho		s National E	obobilit	ation Can	tor Downs	Diagnosis

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6.	View the next patient video:
	Mobility: Transfer and Bed Mobility in Acute Care
	Compare how he transfers back into the bed as compared to the start of the session.
	What are the movement differences you now see and what are the probable causes for
	these changes?
7.	View the next two patient videos:
	Upper Extremity Assessment: Acute Care
	Upper Extremity ROM: Family Teaching
	a. What other family training do you think is needed for this patient?
	, o ,
	b. How would you prioritize the family training?
	c. Think about the important factors you would need to include during this family training
	session.
	d. Haw would you analyze the family member understood your instructions?
	d. How would you ensure the family member understood your instructions?

8. Write SOAPE Note for this case.