

## ❖ Worksheet Assignment 2

### Patient #1: Mary

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Name

Date

#### Health condition

1. **Describe Mary's medical history.**

84 year old married woman in good health prior to admission 2 days ago for a stroke of the right middle cerebral artery

#### Observe the patient and the environment

2. **Name 2 pieces of equipment used during intervention.**

- Gait/safety belt
- Commode chair for sitting

#### Observations of body functions and structures

3. **Describe your observations related to ROM and motor function of the left upper extremity.**

Full passive ROM of the shoulder, elbow, hand and wrist.

No voluntary movement of the left upper extremity. Increase in tone noted in elbow flexion with change in temperature (cold washcloth).

4. **Describe your observations of ROM and motor function of the left lower extremity.**

No obvious ROM deficits; within functional limits.

Motor function is difficult to assess due to lack of participation and the patient's inability to understand cues.

Strength is less than fair throughout.

In sitting, the patient begins to initiate hip abduction and adduction with facilitation.

**Observations of functional activities****5. Which of the following activities were observed? How much assistance was required for each activity?**

- **Rolling:** not observed
  
- **Sidelying to sitting:** maximum assist required
  
- **Sit to stand:** 2 person maximum assist required
  
- **Transfer from bed to chair:** 2 person maximum assist required

**6. What 2 goals were stated for Mary's treatment session?**

The therapists stated that they wanted to attempt sit to stand and bed to chair transfer.

**7. Name 2 key problem areas for Mary.**

1. Decreased awareness of the left upper extremity
2. Weakness throughout the left upper and lower extremities
3. Left sided disregard (doesn't turn her head past midline)
4. For decreased mobility; maximum assistance required for bed mobility, transfers and sitting.

**8. How were these problems addressed during her treatment session?**

1. Decreased awareness of the left upper extremity  
The therapist has Mary find her left upper extremity.
2. Weakness throughout the left upper and lower extremities  
The therapist worked on lower extremity facilitation while Mary was sitting on the commode chair.
3. Left sided disregard (doesn't turn her head past midline)  
The therapist turns Mary's head gently but firmly to the left.
4. Decreased mobility  
The therapists worked on bed mobility, sit to stand and transfers.