Clinical Reasoning with Clint

W6 Clinical Reasoning Form: Clint

I narrate during this video segment in order to help the student sharpen their observation skills and learn to identify problem areas.

- 1. Which two key problem areas, that left untreated, could limit Clint's future function gains?
 - Shoulder pain
 - · Edema of the left hand

What could be possible underlying factors:

- · Traumatic impingement (he fell on it)
- non-use from upper extremity weakness
- 2. Describe the asymmetry noted while Clint moved from standing to sitting.

Clint avoided putting weight through his left lower and upper extremities. He shifted his weight to his right leg and as he sat down he put all of his weight through his right hand.

- 3. List Clint's 5 problem areas identified during Clinical Reasoning:
 - 1. shoulder pain
 - 2. decreased proximal control, scapular weakness
 - 3. decreased grasp
 - 4. edema of the hand
 - **5.** assistance needed with ADLs (button pants, tie shoes)
 - 6. unequal weight bearing through lower extremities sit-stand and stand-sit.
- 4. How would you prioritize Clint's problem areas if he were your patient?

Edema of the hand and shoulder pain.

5. Which would you treat first? Why?

Reducing the edema of the hand is first priority. If left untreated, there is high potential for long term functional loss of the hand. Next, treatment of shoulder pain to prevent loss of ROM and function.