Treatment Guides - Section 1

ADLs and IADLs

Activities of Daily Living

Bathing and Showering

Clothing Care

Community Mobility

Dressing

Driving

Feeding, Eating, and Swallowing

Financial and Mail Management

Functional Communication

Functional Mobility

Grooming and Oral Hygiene

Health Management

Home and Yard Maintenance

Leisure and Social Activities

Meal Preparation

Medication Management

Rest and Sleep

Sexual Expression and Activity

Shopping

Toileting

Interventions

Apraxia

Balance

Cognition

Fall Risk Assessment and Prevention

Handwriting

Home Safety and Modification

Therapeutic Exercise

Visual Perception

Conditions and Diseases

Action Tremor

Adhesive Capsulitis

Alzheimer's Disease and Related Dementias - Early Stage

Alzheimer's Disease and Related Dementias - Mid Stage

Alzheimer's Disease and Related Dementias - Late Stage

Amputation of the Lower Limb

Amputation of the Upper Limb

Amyotrophic Lateral Sclerosis

Ankylosing Spondylitis

Biceps Tendinitis

Breast Cancer - Pre and Postoperative Management

Treatment Guides - Section 1

Conditions and Diseases

Burn Injury

Cancer

Cardiac Disease

Cardiac Surgery

Carpal Tunnel Syndrome - Conservative Management

Carpal Tunnel Syndrome - Postoperative Management

Cervical Stenosis, Myelopathy, and Radiculopathy

Cervical Spine Surgery

Chronic Obstructive Pulmonary Disease

Chronic/Persistent Pain Syndrome

Complex Regional Pain Syndrome Type I

Congestive Heart Failure (see Cardiac Disease)

Cubital Tunnel Syndrome - Conservative Management

Cubital Tunnel Syndrome - Postoperative Management

Depression

De Quervain's Syndrome - Conservative Management

De Quervain's Syndrome - Postoperative Management

Diabetes - Type 2

Dizziness

Emphysema (see Chronic Obstructive Pulmonary Disease)

Epicondylitis - Conservative Management

Fibromyalgia (see Chronic/Persistent Pain Syndrome)

Fracture of the Elbow (Radial Head/Olecranon/Distal Humerus)

Fracture of the Hip (Proximal Femur)

Fracture of the Shoulder (Proximal Humerus)

Fracture of the Wrist (Distal Radius)

Frailty and Debility

Generalized Anxiety Disorder

Guillain-Barré Syndrome

Huntington's Disease

Joint Contractures

Kidnev Disease

Low Back Pain (see Chronic/Persistent Pain Syndrome)

Low Vision and Blindness

Lumbar Stenosis

Lumbar Spine Surgery

Mild Cognitive Impairment

Morbid Obesity - Person of Size

Multiple Sclerosis

Myasthenia Gravis - Generalized

Myocardial Infarction

Treatment Guides - Section 1

Conditions and Diseases

Osteoarthritis - Conservative Management

Osteoporosis

Palliative Care and Hospice

Parkinson's Disease - Early Stage

Parkinson's Disease - Mid Stage

Parkinson's Disease - Late Stage

Peripheral Neuropathy

Post-Poliomyelitis Syndrome

Pressure Ulcers

Rheumatoid Arthritis - Conservative Management

Rotator Cuff Pathology - Conservative Management

Rotator Cuff Pathology - Postoperative Management

Scleroderma/Systemic Sclerosis

Spinal Cord Injury - Paraplegia T1-S5

Spinal Cord Injury - Tetraplegia/Quadriplegia C1-8

Stroke

Total Hip Replacement (Arthoplasty)

Total Knee Replacement (Arthoplasty)

Total Shoulder Replacement (Arthoplasty)

Urinary Incontinence

Vertebral Compression Fracture

ADL and Mobility Handouts - Section 2

Adaptive Equipment

Adaptive Equipment for Bathing

Adaptive Equipment for Dressing

Adaptive Equipment for Eating

Adaptive Equipment for Grooming and Mouth Care

Adaptive Equipment for Meal Prep

Adaptive Equipment for Mobility

Adaptive Equipment for Moving in Bed

Adaptive Equipment for Transfers

Adaptive Equipment for Using the Bathroom

Adaptive Equipment for Walking

Ambulation

Walk with a Cane on the Stronger, Left Side

Walk with a Cane on the Stronger, Right Side

Walk with a Standard Walker - Full Weight Bearing

Walk with a Standard Walker - Non-Weight Bearing

Walk with a Standard Walker - Partial Weight Bearing

Walk with a Standard Walker - Toe-Touch Weight Bearing

Walk with a Standard Walker - Weight Bearing as Tolerated

Walk with a Wheeled Walker - Full Weight Bearing

Walk with a Wheeled Walker - Weight Bearing as Tolerated

Bathing and Showering

Bathing Tips

How to Install Grab Bars - Left

How to Install Grab Bars - Right

Bath Transfers

Transfer to Shower Chair (back up, turn left)

Transfer to Shower Chair (back up, turn right)

Transfer to Shower Chair (left leg, right leg, sit)

Transfer to Shower Chair (right leg, left leg, sit)

Transfer to Shower Chair (left leg, sit, right leg)

Transfer to Shower Chair (right leg, sit, left leg)

Transfer to Tub Bench - After Hip Surgery (back up, turn left)

Transfer to Tub Bench - After Hip Surgery (back up, turn right)

Transfer to Tub Bench (back up, turn left)

Transfer to Tub Bench (back up, turn right)

Transfer Wheelchair to Tub Bench - Move to the Left

Transfer Wheelchair to Tub Bench - Move to the Right

Bed Mobility

Bridging

In and Out of Bed - Toward Your Left Side

In and Out of Bed - Toward Your Right Side

ADL and Mobility Handouts - Section 2

Bed Mobility

In and Out of Bed - Toward Your Left Side After Hip Surgery

In and Out of Bed - Toward Your Right Side After Hip Surgery

In and Out of Bed - Toward Your Left Side Log Rolling

In and Out of Bed - Toward Your Right Side Log Rolling

In and Out of Bed - Toward Your Weaker Left Side

In and Out of Bed - Toward Your Weaker Right Side

In and Out of Bed with Help - Toward Their Left Side

In and Out of Bed with Help - Toward Their Right Side

Move From One Side of the Bed to the Other

Move Up in Bed

Roll onto Your Left Side

Roll onto Your Right Side

Dressing

Dressing Tips

Put On and Take Off a T-shirt - Arm-Head-Arm

Put On and Take Off a T-shirt - Head-Arm-Arm

Put On and Take Off a T-shirt Using a Dressing Stick

Put On and Take Off an Ankle-Foot Brace - Method 1 - Left Leg

Put On and Take Off an Ankle-Foot Brace - Method 1 - Right Leg

Put On and Take Off an Ankle-Foot Brace - Method 2 - Left Leg

Put On and Take Off an Ankle-Foot Brace - Method 2 - Right Leg

Put On and Take Off an Open Front Shirt - One Shoulder Drape

Put On and Take Off an Open Front Shirt - Two Shoulder Drape

Put On and Take Off an Open Front Shirt Using a Dressing Stick

Put On and Take Off Pants - Method 1

Put On and Take Off Pants - Method 2

Put On and Take Off Pants, Socks, and Shoes Lying Down

Put On and Take Off Pants, Socks, and Shoes Using a Stool

Put On and Take Off Pants Using a Dressing Stick or Reacher

Put On and Take Off Socks and Shoes Using Dressing Tools

Put On and Take Off Support Stockings

Using a Buttonhook

Dressing with One Hand

Put On a T-shirt with One Hand - Left Side Weakness

Put On a T-shirt with One Hand - Right Side Weakness

Put On an Open Front Shirt with One Hand - Left Side Weakness

Put On an Open Front Shirt with One Hand - Right Side Weakness

Put On and Take Off a Bra with One Hand - Left Side Weakness

Put On and Take Off a Bra with One Hand - Right Side Weakness

Put On Pants with One Hand - Left Side Weakness

Put On Pants with One Hand - Right Side Weakness

ADL and Mobility Handouts - Section 2

Dressing with One Hand

Put On Socks and Shoes with One Hand - Left Side Weakness

Put On Socks and Shoes with One Hand - Right Side Weakness

Take Off a T-shirt with One Hand - Left Side Weakness

Take Off a T-shirt with One Hand - Right Side Weakness

Take Off an Open Front Shirt One Hand - Left Side Weakness

Take Off an Open Front Shirt One Hand - Right Side Weakness

Take Off Pants with One Hand - Left Side Weakness

Take Off Pants with One Hand - Right Side Weakness

Tie Shoes with One Hand - Left Side Weakness

Tie Shoes with One Hand - Right Side Weakness

Health Management

Health Care Team

Tips for Making and Keeping Health Care Visits

Meal Prep and Clean Up

Manage Kitchen Tasks with a Walker

Manage Kitchen Tasks with a Wheelchair

Meal Prep with One Hand

Stairs

Down a Curb or Single Step Using a Walker

Down Steps with a Rail Using a Cane

Down Steps with a Rail Using a Closed Walker

Down Steps with a Rail Using an Open Walker

Down Steps without a Rail Using a Cane

Up a Curb or Single Step Using a Walker

Up Steps with a Rail Using a Cane

Up Steps with a Rail Using a Closed Walker

Up Steps with a Rail Using an Open Walker

Up Steps without a Rail Using a Cane

Toileting

Tips for Using the Bathroom

Toileting Options - Therapist Resource

Transfers

Car Transfer

Get Down On the Floor

Get Up From the Floor

Sit-Pivot Transfer - Move to the Left

Sit-Pivot Transfer - Move to the Right

Sit-Pivot Transfer with Help - Move to Their Left

Sit-Pivot Transfer with Help - Move to Their Right

Sitting Down

Sitting Down - After Hip Surgery

ADL and Mobility Handouts - Section 2

Transfers

Standing Up Standing Up - After Hip Surgery

Standing Up with Help

Stand-Pivot Transfer with Help - Move to Their Left

Stand-Pivot Transfer with Help - Move to Their Right Transfer Board - Move to the Left

Transfer Board - Move to the Right

Wheelchair Mobility

Wheelchair Mobility

Educational Handouts - Section 3

Amputation

Care of the Prosthesis and Lower Limb Coverings

Care of the Prosthesis and Upper Limb Coverings

Care of Your Residual Limb

Phantom Limb Pain

Position Your Residual Limb - AKA

Position Your Residual Limb - BKA

Cardiopulmonary

Breathing Distress - Causes and Tips to Prevent

Breathing Distress Control

Cardiac Precautions for Exercise - Therapist Resource

Controlled Cough

Daily Tasks after Open Heart Surgery

Deep (Diaphragmatic) Breathing

Fatigue Journal

How to Check Your Heart Rate

Postural Drainage Positions

Pursed Lip Breathing

Sternal (Breastbone) Precautions

Tips to Conserve Energy

Tips to Conserve Energy with Meal and Home Management

Tips to Conserve Energy with Self Care Activities

Cognition and Visual Perception

Daily Journal

Functional Cognitive Activities - Therapist Resource

Tips to Improve Attention

Tips to Improve Figure Ground

Tips to Improve Form Constancy

Tips to Improve Left Side Awareness

Tips to Improve Memory

Tips to Improve Memory - External Memory Aids

Tips to Improve Memory - Internal Memory Aids

Tips to Improve Motor-Planning

Tips to Improve Right Side Awareness

Tips to Improve Thinking Skills

Tips to Improve Vision

Tips to Improve Visual-Motor Integration

Tips to Improve Visual Spatial Relations

Low Vision

Eating

Functional Reading - Therapist Resource

Functional Vision - Therapist Resource

Educational Handouts - Section 3

Low Vision

Improve Your Other Senses

Kitchen Tasks

Label and Mark Items

Leisure

Lighting

Medication

Money

Moving Around

Reading, Writing, Phone Use

Reduce Glare

Safety

Use Contrast

Neurological

Cognitive Strategies to Improve Movement

Handwriting - Component Exercises

Handwriting - Cursive Exercises

Handwriting - Pangrams

Position in Bed - Left Side Weakness

Position in Bed - Right Side Weakness

Position Your Arm - Left Side Weakness

Position Your Arm - Right Side Weakness

Protect the Arm - Left Side Weakness

Protect the Arm - Right Side Weakness

Tips to Manage Action Tremors

Writing Tips for Parkinson's

Other

Anxiety Journal

Arm Measurement

Checking Your Skin

Good Sleep Habits

Leg Measurement

Leisure Activities

Pain Journal

Position in Bed to Reduce Pressure

Pressure Relief

SMART Goals

SMART Goals - Action Plan

Stress Management

Stress Management - Relaxation Tools

Stress Management - Stress Journal

Tips to Prevent Lower Body Lymphedema

Educational Handouts - Section 3

Other

Tips to Prevent Upper Body Lymphedema

Orthopedic

Arthritic Joint Changes and Deformities - Therapist Resource

Body Mechanics

Daily Tasks after Back (Lumbar) Surgery

Daily Tasks after Neck (Cervical) Surgery

Daily Tasks after Shoulder Surgery

Desensitization

Edema (Swelling) Control of the Arm(s)

Edema (Swelling) Control of the Leg(s)

Good Posture

Hip Dislocation Precautions - Posterior Approach

Joint Protection and Energy Conservation for Wheelchair Users

Joint Protection for Arthritis

Scar Massage

Spinal Surgery Precautions

Splint/Brace Instructions

Superficial Cold

Superficial Heat

Safety

Don't Let a Fall Get You Down - Booklet

Don't Let a Fall Get You Down - Post-Fall Survey

Fall Triggers and Tips to Prevent Falls - Therapist Resource

Foot Care and Foot Safety

Home Safety and Performance Assessment - Therapist Resource

Using a Front Wheel Walker (2 wheels)

Using a Rollator (3 or 4 wheels)

Using a Standard Walker (no wheels)

Using a Wheelchair

Therapeutic Exercise Handouts - Section 4

Balance

Balance Exercise Guidelines

Balance Exercises - Sitting

Balance Exercises - Standing

Core Exercise Guidelines

Core Exercises - Back Muscles

Core Exercises - Pelvic Muscles

Core Exercises - Stomach Muscles

Exercise Ball Guidelines

Exercise Ball - Back Muscles

Exercise Ball - Pelvic Muscles

Exercise Ball - Stomach Muscles

Condition Specific

Burn Injury Stretches - Guidelines

Burn Injury Stretches - Face

Burn Injury Stretches - Neck

Burn Injury Stretches - Trunk

Burn Injury Stretches - Shoulder

Burn Injury Stretches - Elbow, Forearm, Wrist

Burn Injury Stretches - Left Hand

Burn Injury Stretches - Right Hand

Burn Injury Stretches - Hip and Knee

Burn Injury Stretches - Ankle and Toes

Elbow Stretches for Below Elbow Amputation

Exercise Tips for Amyotrophic Lateral Sclerosis

Exercise Tips for Arthritis

Exercise Tips for Diabetes

Exercise Tips for Guillain-Barré Syndrome

Exercise Tips for Multiple Sclerosis

Exercise Tips for Myasthenia Gravis

Exercise Tips for Orthopedic Conditions

Exercise Tips for Post-Poliomyelitis Syndrome

Exercise Tips for Renal Conditions

Mastectomy Exercises

Osteoporosis Extension Exercises

Parkinson's Disease Exercises

Pulmonary Exercises

Elbow, Forearm, Wrist

Elbow, Forearm and Wrist Active Range of Motion

Elbow, Forearm and Wrist Strength Exercises

Elbow, Forearm and Wrist Stretches

Elbow, Wrist and Hand Active Exercises

Therapeutic Exercise Handouts - Section 4

Elbow, Forearm, Wrist

Forearm and Wrist Active Range of Motion Forearm and Wrist Strength Exercises

Forearm and Wrist Stretches

Hand

Fine Motor Activities

Finger and Thumb Strength Exercises - Left

Finger and Thumb Strength Exercises - Right

Finger and Thumb Stretches and Active Range of Motion - Left

Finger and Thumb Stretches and Active Range of Motion - Right

Flexor Tendon Glides

Median Nerve Glides

Putty Exercises

Lower Body

Ankle and Foot Active Range of Motion

Ankle and Foot Isometric Exercises

Ankle and Foot Strength Exercises

Ankle and Foot Stretches

Hip and Knee Exercises - Lying

Hip and Knee Exercises - Seated

Hip and Knee Exercises - Standing

Low Back Stretches

Stretch Band Exercises - Legs

Thigh Stretches

Miscellaneous

Face and Neck Active Range of Motion

General Exercise Tips

Passive Range of Motion

Pelvic Floor (Kegel) Exercise

Physical Activity Plan

Walking Guidelines

Neck

Neck Active Range of Motion

Neck Isometric Exercises

Neck Strength Exercises

Neck Stretches

Shoulder

Dowel Exercises - Supine

Dowel Exercises - Upright

Pendulum Exercises - Left

Pendulum Exercises - Right

Shoulder Active Range of Motion

Therapeutic Exercise Handouts - Section 4

Shoulder

Shoulder and Hand Active Exercises

Shoulder and Rotator Cuff Active Exercises - Left

Shoulder and Rotator Cuff Active Exercises - Right

Shoulder and Rotator Cuff Exercises Free Weight - Left

Shoulder and Rotator Cuff Exercises Free Weight - Right

Shoulder and Rotator Cuff Exercises Stretch Band - Left

Shoulder and Rotator Cuff Exercises Stretch Band - Right

Shoulder Blade Exercises

Shoulder, Elbow, and Hand Active Exercises

Shoulder Isometric Left - Seated

Shoulder Isometric Left - Standing

Shoulder Isometric Right - Seated

Shoulder Isometric Right - Standing

Shoulder Passive and Active-Assisted Range of Motion - Left

Shoulder Passive and Active-Assisted Range of Motion - Right

Shoulder Pulley Exercises - Left

Shoulder Pulley Exercises - Right

Shoulder Stretches - Left

Shoulder Stretches - Right

Stroke

Level 1 Activities - Help Your Weaker Arm Move

Level 2 Activities - Use Your Weaker Arm to Passively Hold

Level 3 Activities - Use Your Weaker Arm to Actively Move & Hold

Level 4 Activities - Use Your Weaker Arm with Gross Motor

Level 5 Activities - Use Your Weaker Arm with Fine Motor

Passive Range of Motion - Left Side Weakness

Passive Range of Motion - Right Side Weakness

Scapular Mobility and Strength Exercises - Left Side Weakness

Scapular Mobility and Strength Exercises - Right Side Weakness

Self Range of Motion - Left Side Weakness

Self Range of Motion - Right Side Weakness

Use Your Left Arm to Actively Move and Hold

Use Your Left Arm to Passively Hold

Use Your Left Arm with Assisted Guiding

Use Your Left Arm with Gross Motor Activities

Use Your Left Arm with Self-Guiding

Use Your Right Arm to Actively Move and Hold

Use Your Right Arm to Passively Hold

Use Your Right Arm with Assisted Guiding

Use Your Right Arm with Gross Motor Activities

Use Your Right Arm with Self-Guiding

Therapeutic Exercise Handouts - Section 4

Stroke

Weight Bearing Exercises - Left Side Weakness Weight Bearing Exercises - Right Side Weakness

Upper Body

Arm Cycle

Cool-Down Stretches

Gross Motor Tasks

Nerve Flossing - Median

Nerve Flossing - Radial

Nerve Flossing - Ulnar

Posture Exercises

Stretch Band Exercises - Arms

Upper Body Active Range of Motion

Upper Body Exercises - Hand Weights

Upper Body Exercises - Using a Ball

Upper Body Strength Activities

Warm-Up Exercises

Breast Cancer - Pre and Postoperative Management

Surgical procedures include radical, modified or simple mastectomies, lymph node dissection, and breast reconstruction.

Impairments and Functional Limitations:

ADL, IADL, productivity and leisure impairment Impaired ROM and strength of trunk and upper extremity Post-op pain and edema Potential secondary complications - nerve damage, lymphedema

Occupational Therapy Preoperative Intervention:

- Baseline measurements (ROM, strength, sensation, and limb measurements)
- Provide education about post-operative activity limitations, precautions and exercise.
- Instruct in good posture during activities.
- Educate about lymphedema prevention or risk factor reduction.
- Teach strategies to incorporate wellness and health management routines into daily activities.
- Educate about breast cancer and the availability of community resources. Encourage participation in support groups.

Occupational Therapy Postoperative Intervention:

ADL, IADL, productivity and leisure training

- Treat underlying limitations to safety and independence.
- Recommend and/or provide adaptive equipment as needed. Train in lower body ADL equipment following reconstructive surgery involving abdominal muscles.
- Instruct in good posture during activities.
- Instruct in protective use of affected arm for the first 2 weeks. Avoid overuse, avoid sleeping on the same side as the surgery, avoid lifting more than 5 pounds, keep tasks below 90-degrees of shoulder motion. Instruct to elevate arm several times a day to manage post-op edema. *Unless otherwise instructed by surgeon*.

Train in safe and efficient functional mobility (sit to stand, bed mobility skills, transfers, ambulation and wheelchair mobility) during ADL and IADL tasks.

Pain self-management

- Coordinate medication peak with exercise and activity.
- Teach stress management and relaxation techniques.
- Use pillows to help arm and shoulder relax in sitting and lying down.
- Instruct in good posture during activities.

Breast Cancer - Pre and Postoperative Management

Occupational Therapy Postoperative Intervention:

Provide graded UE activities and exercises. *Follow the referring surgeon's specific quidelines for ROM and progression of exercises.*

- AROM exercises starting 2-3 days after surgery. Progress exercises until full ROM restored. Begin strengthening 4-6 weeks after surgery.
- Instruct in deep (diaphragmatic) breathing exercises and lateral expansion.
- Instruct in a walking program.

Provide surgical scar management at 3-4 weeks post surgery (mobilization, massage, desensitization, stretching exercises).

Provide education about lymphedema prevention and risk factor reduction.

Patient and Caregiver Handouts:

Arm Measurement
Deep (Diaphragmatic) Breathing
Edema (Swelling) Control of the Arm(s)
Good Posture
Mastectomy Exercises
Scar Massage
Tips to Prevent Lower Body Lymphedema
Walking Guidelines

Additional Treatment Guides:

Cancer Health Management

Occupational Therapy TOOLKIT Dressing

Dressing includes selecting appropriate clothing for the time of day, weather, and occasion. Obtain clothing from closets and drawers. Dress and undress using open-front garments (shirt/blouse, robe, sweater, jacket, winter coat), pullover garments (sweatshirt, t-shirt, sweater), bra, pants, skirts, suspenders, necktie, scarf, gloves, underwear, socks, pantyhose, nylons, shoes, boots, slippers, support and anti-embolism stockings. Open and close fasteners, (snaps, buttons, hooks, zippers, Velcro). Managing personal devices (hearing aids, eyeglasses, contacts, AFO, hand splint, back brace, slings, and prosthetics).

Impairments and Functional Limitations:

Impaired shoulder strength and/or ROM
Impaired hand strength, ROM, sensation and/or coordination
Impaired LE function
Limited activity tolerance and endurance
Impaired sitting balance
Impaired standing balance
Pain
Visual perceptual impairment
Cognitive impairment

Occupational Therapy Intervention:

Apply different approaches for solving difficulties with dressing.

- Remediate underlying limitations to safety and independence. Physical impairments (muscle weakness, impaired hand function, limited ROM, paralysis, incoordination, impaired balance, fatigue, dyspnea, abnormal tone, tremor), sensory impairment (impaired sensation, low vision, hard of hearing, vestibular, pain), behavioral, cognition, perception.
- Train in compensatory techniques (safety techniques, one-handed techniques, pacing, energy conservation, joint protection, body mechanics, breathing techniques, low vision techniques, cognitive/perceptual compensation, step-by-step instructions, task segmentation, task sequencing, backward chaining, verbal and physical cueing, hand-over-hand guiding).
- Train in the use of adaptive equipment and assistive devices (buttonhook, Velcro closures on shoes, elastic shoelaces, long handled shoehorn, dressing stick, reacher, sock aid, zipper pull, loops on pants, loops on socks, labeling system for identifying clothes, and specialized clothing).
- Provide environmental modifications and adaptations (avoid storing items on the floor, lower closet poles, organize clothes within easy reach, and label drawers using picture or words).

Dressing

Occupational Therapy Intervention:

Apply different approaches for solving difficulties with dressing (continued)..

- Instruct in activity modification.
 - o Change the task (place the weaker extremity into the garment first, dress in a supine position).
 - Eliminate part or all of the task (choose garments that are easy to put on and remove such as: elastic waist pants, loose fitting tops, pullover tops, suspenders instead of a belt, Velcro shoes, slip on shoes, front hook bra, sports bra, camisole).
 - Have someone else do part or the entire task.

Train in safe and efficient functional mobility (sit to stand, bed mobility skills, transfers, standing, ambulation, and wheelchair mobility) during dressing tasks.

Provide caregiver/family education and training.

Patient and Caregiver Handouts:

Adaptive Equipment for Dressing

Dressing Tips

Tips to Conserve Energy with Self Care Tasks

Dressing Techniques - Lower Body

Put On and Take Off an Ankle-Foot Brace - Method 1 - Left Leg

Put On and Take Off an Ankle-Foot Brace - Method 1 - Right Leg

Put On and Take Off an Ankle-Foot Brace - Method 2 - Left Leg

Put On and Take Off an Ankle-Foot Brace - Method 2 - Right Leg

Put On and Take Off Pants - Method 1

Put On and Take Off Pants - Method 2

Put On and Take Off Pants, Socks, and Shoes Lying Down

Put On and Take Off Pants, Socks, and Shoes Using a Stool

Put On and Take Off Pants Using a Dressing Stick or Reacher

Put On and Take Off Socks and Shoes Using Dressing Tools

Put On and Take Off Support Stockings

Dressing Techniques - One Handed

Put On a T-shirt with One Hand - Left Side Weakness

Put On a T-shirt with One Hand - Right Side Weakness

Put On an Open Front Shirt with One Hand - Left Side Weakness

Put On an Open Front Shirt with One Hand - Right Side Weakness

Put On and Take Off a Bra with One Hand - Left Side Weakness

Put On and Take Off a Bra with One Hand - Right Side Weakness

Put On Pants with One Hand - Left Side Weakness

Put On Pants with One Hand - Right Side Weakness

Put On Socks and Shoes with One Hand - Left Side Weakness

Occupational Therapy TOOLKIT Dressing

Patient and Caregiver Handouts:

Dressing Techniques - One Handed

Put On Socks and Shoes with One Hand - Right Side Weakness

Take Off a T-shirt with One Hand - Left Side Weakness

Take Off a T-shirt with One Hand - Right Side Weakness

Take Off an Open Front Shirt One Hand - Left Side Weakness

Take Off an Open Front Shirt One Hand - Right Side Weakness

Take Off Pants with One Hand - Left Side Weakness

Take Off Pants with One Hand - Right Side Weakness

Tie Shoes with One Hand - Left Side Weakness

Tie Shoes with One Hand - Right Side Weakness

Dressing Techniques - Upper Body

Put On and Take Off a T-shirt - Arm-Head-Arm

Put On and Take Off a T-shirt - Head-Arm-Arm

Put On and Take Off a T-shirt Using a Dressing Stick

Put On and Take Off an Open Front Shirt - One Shoulder Drape

Put On and Take Off an Open Front Shirt - Two Shoulder Drape

Put On and Take Off an Open Front Shirt Using a Dressing Stick

Using a Buttonhook

Occupational Therapy TOOLKIT Frailty and Debility

Impairments and Functional Limitations:

ADL, IADL, productivity and leisure impairment Functional mobility impairment Slow walking speed Muscle weakness Limited activity tolerance and endurance Impaired balance Impaired vision and hearing Chronic pain Advanced age, 80+

Co-occurring conditions - functional decline, falls, fear of falling, delirium, dementia, dizziness, depression, incontinence, sleep disorders, malnutrition, dehydration, pressure ulcers, sarcopenia, hypothermia, and hyperthermia

Assessments:

6 Minute Walk Test (Enright et al., 1998) Berg Balance Scale (Berg 1989) Geriatric Depression Scale (Parmelee & Katz 1990) Mini Mental State Exam MMSE (Folstein 1975) Nutrition Screening Initiative (White et al., 1992) Physical Performance Test (Lusardi et al., 2004) Timed 10-Meter Walk Test (Bohannon et al., 1996)

Occupational Therapy Intervention:

ADL, IADL, productivity and leisure training

- Treat underlying limitations to safety and independence physical (strength, hand function, ROM, coordination, balance, endurance, abnormal tone), sensory (tactile, vision, hearing, vestibular, pain), behavioral, cognition and/or perceptual.
- Address nutritional health oral health, ability to feed self, ability to shop, access kitchen, prepare nutritious meals and get adequate hydration. Encourage to eat with others.
- Address ability to drive safely. Provide referral to driving rehab specialist and/or explore alternative transportation options.

Train in safe and efficient functional mobility (sit to stand, bed mobility skills, transfers, standing, ambulation and wheelchair mobility) during ADL and IADL tasks.

 Train in the safe and correct use of assistive devices and adaptive equipment (walkers, canes, sliding boards, bed transfer handles, leg lifters, wheelchairs) as appropriate.

Occupational Therapy TOOLKIT Frailty and Debility

Occupational Therapy Intervention:

Provide an individualized exercise program that includes progressive endurance, strengthening and flexibility activities.

Recommend the use of an activity tracker.

Instruct patient and caregiver in a written home exercise program.

Provide functional balance activities to increase balance confidence with ADL tasks.

Provide pain management.

Provide a fall prevention program that includes balance, coordination and agility training and education about fall risk and prevention strategies.

Complete a comprehensive, performance-based home assessment. Recommend and/or provide modifications, adaptive equipment and/or assistive technology.

Educate about the negative effects of prolonged sitting and bed rest. Educate regarding hypothermia and hyperthermia prevention.

Patient and Caregiver Handouts:

Balance Exercise Guidelines
Balance Exercises - Sitting
Balance Exercises - Standing
Hip and Knee Exercises - Seated
Putty Exercises
Stretch Band Exercises - Arms
Upper Body Exercises - Hand Weights
Walking Guidelines

Additional Treatment Guides:

Activities of Daily Living
Balance
Chronic/Persistent Pain Syndrome
Fall Risk Assessment and Prevention
Functional Mobility
Home Safety and Modification
Pressure Ulcers
Rest and Sleep
Therapeutic Exercise
Urinary Incontinence

Osteoarthritis - Conservative Management

Impairments and Functional Limitations:

ADL, IADL, productivity and leisure impairment
Functional mobility impairment
Limited UE and LE ROM
Impaired hand function
Muscle weakness
Limited activity tolerance and endurance
Joint pain, stiffness and inflammation that increase with activity
Postural changes
Impaired balance
Co-occurring conditions - joint replacements, joint contractures, fall risk

Assessments:

Manual Ability Measure (MAM) (Chen & Bode 2010)

Occupational Therapy Intervention:

ADL, IADL, productivity and leisure training

- Train in the use of adaptive equipment to improve grasp (built-ups), improve ease of performance (electric can opener), compensate for range of motion loss (dress stick), compensate for weak/absent muscle (universal cuff, jar opener), prevent stress on joints (lever door handle), prevent prolonged grasp (book holder, Dycem), prevent accidents (bath seat, nonskid rugs).
- Instruct in pacing, energy conservation, joint protection, good posture and body mechanics.
- Instruct in balancing self-care, productivity, play and rest.

Train in safe and efficient functional mobility (sit to stand, bed mobility skills, transfers, standing, ambulation and wheelchair mobility) during ADL and IADL tasks.

Provide an individualized exercise program that includes low-impact, low-intensity endurance, strengthening, and flexibility activities. Goal is to maintain strength and joint mobility. Use yoga blocks, wrap foam around weights, use weight lifting gloves to improve grip.

- Acute flare-ups instruct in performing gentle passive or active ROM exercises 3-4 times daily followed by icing for 15 minutes.
- Non-acute joints instruct in the use of superficial heat, gentle isometric strengthening in pain free range.

Provide splints to rest inflamed joints, maintain correct joint alignment, improve functional control and support weak or painful joints.

Osteoarthritis - Conservative Management

Occupational Therapy Intervention:

Instruct in pain self-management strategies.

- Coordinate medication peak with exercise and activity.
- Apply superficial heat and cold.
- Practice deep (diaphragmatic) breathing and other relaxation techniques.
- Use self-massage techniques (foam rollers, tennis ball, rolling massage stick).
- Use positioning devices (seat cushions, back supports, pillows, splints).
- Instruct in using a pain journal.
- Utilize the problem solving process to identify ways to manage pain.

Provide pain management.

- Transcutaneous electrical nerve stimulation (TENS)
- Manual therapy techniques (massage, myofascial and soft tissue mobilization)
- Elastic therapeutic tape

Complete a comprehensive, performance-based home assessment. Recommend and/or provide modifications, adaptive equipment and/or assistive technology.

Provide education about fall risk and prevention strategies.

Teach strategies to incorporate wellness and health management routines into daily activities.

Educate patient and caregivers about arthritis and the availability of community resources. Encourage participation in support groups. Encourage participation in community, evidence-based exercise programs: (Active Living Every Day, Arthritis Foundation Aquatic Program, Arthritis Foundation Exercise Program, Enhance Fitness, Fit and Strong, Walk with Ease).

Patient and Caregiver Handouts:

Deep (Diaphragmatic) Breathing
Exercise Tips for Arthritis
Joint Protection for Arthritis
Pain Journal
Splint/Brace Instructions
Superficial Cold & Heat
Tips to Conserve Energy
Upper Body Active Range of Motion

Additional Treatment Guides:

Health Management

Impairments and Functional Limitations:

ADL, IADL, productivity and leisure impairment

Impaired functional mobility

Hemiparesis or hemiplegia of the upper and lower extremities

Spasticity

Impaired postural control and balance

Impaired coordination

Limited activity tolerance and endurance

Impaired sensation

Central post-stroke pain

Language disorders (aphasia, dysarthria, dyspraxia)

Dysphasia

Visual and perceptual impairment

Cognitive impairment

Behavioral disorders (depression, lability, low frustration tolerance, impulsivity)

Bladder and bowel dysfunction

Potential secondary complications - biomechanical shoulder pain (biceps tendonitis, rotator cuff pathology, adhesive capsulitis, complex regional pain syndrome), edema (upper and lower extremity), pressure ulcers, joint contractures, depression, DVT's, aspiration pneumonia, seizures, fall risk

Assessments and Rating Scales:

Arnadottir OT-ADL Neurobehavioral Evaluation (A-ONE) (Arnadottir 1990)

Assessment of Motor and Process Skills (AMPS) (Fisher et al., 1993)

Chedoke-McMaster Stroke Assessment Scale (Gowland et al., 1993)

Canadian Occupational Performance Measure (Law et al., 2014)

Modified Ashworth Scale (Bohannon & Smith 1987)

Stroke Impact Scale (Duncan et al., 1999)

Occupational Therapy Intervention:

ADL, IADL, productivity and leisure training

- Safely incorporate affected extremity with all activities.
- Use compensatory techniques (task modification, one-handed techniques, handover-hand guiding, task segmentation, end chaining).
- Recommend and/or provide adaptive equipment: Rocker knife, inner lip plates, holders for books or playing cards, stabilizing devices for activities that traditionally require two-handed performance (e.g., cutting vegetables, cleaning dentures), and keyboards adapted for one-handed computer use.
- Instruct in pacing and energy conservation strategies.

Train in safe and efficient functional mobility (sit to stand, bed mobility skills, transfers, standing, ambulation and wheelchair mobility) during ADL and IADL tasks.

Occupational Therapy Intervention:

Provide functional posture and balance activities.

- Focus on stability, weight shifting, body awareness, trunk rotation & elongation.
- Have patient turn toward affected side when reaching.
- Set up room so the patient must physically move to their affected side.
- Provide reach-grasp-hold-release activities, in standing and sitting, with and without support.

Provide activities and exercises to uninvolved side to prevent loss of ROM and strength.

Restore function of the upper extremity. Use a variety of remedial approaches according to the needs of the patient.

- Provide early mobilization and positioning.
- Incorporate task-oriented/task specific training.
- Provide opportunities to use and move the arm throughout the day (use of ball bearing feeder, mobile arm support, overhead suspension sling, functional splinting such as wrist cock-up and dynamic finger extension splints).
- Provide modified constraint-induced movement therapy (mCIT) or constraint-induced movement therapy (CIMT).
- Instruct an arm and hand strengthening exercise program.
- Provide functional electrical stimulation (FES) for wrist extensors during functional tasks and/or shoulder subluxation.
- Instruct in a functional dynamic orthoses (SaeboFlex, SaeboReach).
- Use cognitive strategies (mirror therapy, mental imagery/practice, action observation).
- Provide sensory re-education intervention.
 - Avoid increasing spasticity.
 - Encourage use of extremity in functional tasks.
 - o Provide weight-bearing activities.
 - Provide sensory stimulation activities.
 - Teach compensatory techniques and safety measures for sensory deficits. Test bath/dish water temperature using the intact extremity or a thermometer. Lower the water heater temperature to 120°F (48°C). Avoid cuts and burns in kitchen. Avoid using heating pads on impaired extremities. Wear gloves to prevent frostbite. Avoid going barefoot. Wear sunscreen to prevent sunburn. Use intact hand to handle sharp kitchen utensils. Use vision to compensate to sensory loss. Perform skin checks.

Occupational Therapy Intervention:

Restore function of the upper extremity. Use a variety of remedial approaches according to the needs of the patient (continued).

- Prevent or manage hand edema.
 - o Teach active self-range of motion exercises in elevation.
 - Position hand in elevation
 - o Use retrograde massage.
 - Use gentle grade 1-2 mobilizations for the hand and fingers.
 - o Provide a compression garment.
- Manage spasticity.
 - o Prevent contractures.
 - o Provide PROM, SROM and stretching exercises.
 - o Instruct in positioning in bed, chair and during mobility.
 - Select use of splinting to protect hand/wrist: resting hand splint for flaccid to mild tone, spasticity splint for moderate to high tone.
 - Post-Botox injections, provide strengthening/FES to antagonists, stretching and splinting
- Prevent or manage shoulder pain.
 - o Avoid overaggressive therapy and overhead pulleys.
 - o Mobilize and strengthen the scapula.
 - Position arm with cubital fossa facing up, 45° shoulder abduction and comfortable shoulder external rotation.
 - o Provide firm support devices such as lap trays and arm troughs.
 - Range of motion exercises should not move the shoulder beyond 90degrees of flexion and abduction unless there is upward rotation of the scapula and external rotation of the humeral head.
 - o Manage acquired orthopedic conditions (biceps tendonitis, impingement syndrome, adhesive capsulitis, rotator cuff pathologies, CRPS-1).
 - Use functional electrical stimulation (FES) for shoulder subluxation.

Instruct patient and caregivers in care of the affected extremity.

- Prevent and control of edema.
- Teach passive ROM exercises.
- Teach self-ROM exercises.
- Protect and support the affected arm during bed mobility, transfers and ambulation using slings, a pocket, or hand hold and during wheelchair use by using a hemi tray or arm trough.
- Teach proper positioning in bed, chair and wheelchair.
- Instruct in care and use of positioning splints.

Teach compensatory strategies for perceptual deficits.

Occupational Therapy Intervention:

Provide cognitive retraining and train in the use of compensatory strategies.

Provide education about fall risk and prevention strategies.

Community reintegration:

- Complete a comprehensive, performance-based home assessment. Recommend and/or provide modifications, adaptive equipment and/or assistive technology.
- Encourage leisure and social participation.
- Address ability to drive safely. Provide referral to driving rehab specialist and/or explore alternative transportation options.
- Recommend vocational rehabilitation strategies to assist with return to work if appropriate.

Teach strategies to incorporate wellness and health management routines into daily activities.

Educate patient and caregivers about stroke, availability of community resources. Encourage participation in support groups.

Patient and Caregiver Education Handouts:

Edema (Swelling) Control of the Arm(s)

Edema (Swelling) Control of the Leg(s)

In and Out of Bed - Toward Your Weaker Left Side

In and Out of Bed - Toward Your Weaker Right Side

Position in Bed - Left Side Weakness

Position in Bed - Right Side Weakness

Position Your Arm - Left Side Weakness

Position Your Arm - Right Side Weakness

Protect the Arm - Left Side Weakness

Protect the Arm - Right Side Weakness

Splint/Brace Instructions

Stress Management

Tips to Conserve Energy

Using a Front Wheel Walker (2 wheels)

Using a Wheelchair

Patient and Caregiver Exercise Handouts:

Balance Exercise Guidelines

Balance Exercises - Sitting

Balance Exercises - Standing

Fine Motor Activities

Patient and Caregiver Exercise Handouts:

Gross Motor Tasks

Level 1 Activities - Help Your Weaker Arm Move

Level 2 Activities - Use Your Weaker Arm to Passively Hold

Level 3 Activities - Use Your Weaker Arm to Actively Move and Hold

Level 4 Activities - Use Your Weaker Arm with Gross Motor

Level 5 Activities - Use Your Weaker Arm with Fine Motor

Passive Range of Motion - One Side Weakness

Posture Exercises

Putty Exercises

Scapular Mobility and Strength Exercises

Self Range of Motion

Stretch Band Exercises - Arms

Upper Body Active Range of Motion

Upper Body Exercises - Hand Weights

Upper Body Exercises - Using a Ball

Upper Body Strength Activities

Use Your Arm to Actively Move and Hold

Use Your Arm to Passively Hold

Use Your Arm with Assisted Guiding

Use Your Arm with Gross Motor Activities

Use Your Arm with Self-Guiding

Weight Bearing Exercises

Additional Treatment Guides:

Activities of Daily Living

Apraxia

Balance

Chronic/Persistent Pain Syndrome

Cognition

Depression

Fall Risk Assessment and Prevention

Functional Mobility

Handwriting

Health Management

Home Safety and Modification

Therapeutic Exercise

Visual Perception

Occupational Therapy TOOLKIT Put On a T-shirt with One Hand

Left Side Weakness



1. Place the shirt face down on your lap with the collar at your knees.



2. Gather the hole of the left sleeve and place on your lap.



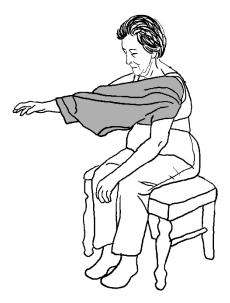
3. Lean forward and place your left arm into the sleeve hole.



4. Pull the sleeve up your arm and over your elbow.

1 of 2

Put On a T-shirt with One Hand Left Side Weakness





5. Place your right arm into the right sleeve hole.

6. Grasp the shirt and pull it over your head.



7. Push the shirt over your left shoulder.



8. Adjust the shirt, by pulling it down in the front and the back.

2 of 2

Occupational Therapy TOOLKIT Putty Exercises

Do	the checked exercises	times per day,	days a week.
	Shape the putty into a ball putty with all your fingers. Do sets of		
	Shape the putty into a ball putty in your hand. Press y into the putty. Do sets of		
	Shape the putty into a ball putty between your thumb of your index finger. Do sets of	. Pinch the and the side	
	Shape the putty into a ball fingers straight and your k Squeeze the putty between and thumb. Do sets of	nuckles bent.	

Occupational Therapy TOOLKIT Putty Exercises

Do the checked exercises times per day,		_ times per day,	_ days a week.
	Flatten the putty into a pane your fingers into the center and spread the putty outward. Do sets of	of the putty	
	Flatten the putty into a pane the putty apart using two fir time. Do sets of		
	Shape the putty into a sausa the putty between your fing. Do sets of		
	Shape the putty into a sausa putty between your thumb a finger. Do sets of		

Tips to Conserve Energy with Self Care Tasks

Pace yourself and rest often.

Eating

- Eat slowly and fully chew food.
- Eat six small meals a day instead of three big meals.
- Do not eat gas-forming food. They can bloat your stomach and make it harder to breathe. These include peas, melons, turnips, onions, cauliflower, apples, corn, broccoli, cucumbers, cabbage, beans, and Brussels sprouts.

Grooming

- Sit to shave, comb your hair and brush your teeth.
- Support your elbows on the counter while grooming or shaving.
- Use an electric toothbrush and an electric razor.
- Wash your hair in the shower. Keep your elbows low and your chin tucked.

Bathing and Showering

- If you use oxygen during exercise, then use it when you take a shower.
- Allow plenty of time.
- Gather all the items you will need.
- Sit to bathe and dry. Use a bath chair in the shower.
- Limit bending. Use a long brush to wash your back and feet. Use a hand-held shower to rinse.
- Use a shower caddy and soap on a rope. Place soap in a nylon stocking tied to the shower seat or soap dish.
- Have a towel or robe nearby. Use hand towels because they are not as heavy. Put on a terry cloth robe to dry off.

Dressing

- Allow plenty of time.
- Gather all the items you will need.
- Sit to dress and undress.
- Limit bending. Put your foot on your other knee or use long-handled tools to put on pants, shoes and socks.
- Wear clothes that are easy to put on. Try slip-on shoes, stretch waistbands, and one size larger.
- Do not wear tight clothes like belts, ties, tight socks, girdles and bras.

Transfer to Shower Chair (left leg, right leg, sit)





1. Face the wall and hold onto the grab bar. 2. Step into the tub with your left leg.



3. Lift your right leg into the tub.



4. Sit down on the shower chair. Reverse the steps to get out.

Use Your Left Arm to Passively Hold

Use your left arm as much as you can during the day. Here are a few ideas.



Use your left hand to hold your plate while eating.



Hold a sheet of paper with your left hand while writing with your right hand.



Hold a washcloth with your left hand and apply soap with your right hand.



Hold your toothbrush with your left hand and apply toothpaste with your right hand.

Ponerse una Prenda de Vestir Sin Botones Usando el Método de Una Mano - Lado Izquierdo Afectado



1. Posicione su camiseta boca abajo en su regazo con el cuello de la camisa en las rodillas.



2. Agarre la apertura de la manga izquierda y colóquela en su regazo.



3. Inclínese hacia adelante y coloque el brazo izquierdo en la apertura de la manga.



4. Suba la manga sobre el brazo y sobre el codo.

1 de 2

Ponerse una Prenda de Vestir Sin Botones Usando el Método de Una Mano - Lado Izquierdo Afectado



5. Coloque el brazo derecho en la apertura de la manga derecha.



6. Agarre el tejido y tire de la camiseta sobre su cabeza.



7. Empuje el tejido de la camiseta sobre el hombro izquierdo.



8. Ajuste la camiseta, tirando de ella hacia abajo por delante y por detrás.

2 de 2

Occupational Therapy TOOLKIT Ejercicios de Masilla Terapéutica

на	ga los ejercicios marcados veces al	dia, dias a la semana.
	Flexión de los Dedos Moldee la masilla en forma de pelota. Apriete la masilla con su mano completa. Complete series de	
	Flexión del Pulgar Moldee la masilla en forma de pelota. Agarre la masilla con la mano. Presione con el pulgar hacia el interior de la masilla. Complete series de	
	Pinza Lateral Es la que emplearía para usar una llave. Moldee la masilla en forma de pelota. Pellizque la masilla entre el pulgar y el lateral del dedo índice. Complete series de	
	Pinza Lumbrical Moldee la masilla en forma de pelota. Estire los dedos y doble los nudillos. Apriete la masilla entre sus dedos y pulgar. Complete series de	

Ejercicios de Masilla Terapéutica

Haga los ejercicios marcados veces al dia, _		dias a la semana.
	Extensión de los Dedos Aplane la masilla en forma de tortita. Coloque la punta de los dedos juntos en la masilla, y expanda la masilla hacia fuera. Complete series de	
	Abducción de los Dedos Aplane la masilla en forma de tortita. Expanda la masilla usando dos dedos a la vez. Complete series de	
	Aducción de los Dedos Moldee la masilla en forma de salchicha. Apriete la masilla entre los dedos. Complete series de	
	Pinza por Oposición Terminal (punta con punta) Moldee la masilla en forma de salchicha. Pellizque la masilla entre el pulgar y cada uno de los dedos individualmente. Complete series de	

Conservación de Energía en Actividades de Autocuidado

Comer

- Coma seis comidas pequeñas al día en lugar de tres comidas grandes. Esto disminuye la energía necesaria para comer y digerir la comida.
- Coma lentamente y mastique completamente la comida.
- Evite comidas que produzcan gases, lo que puede hinchar el abdomen y dificultar la respiración, como guisantes, melones, nabos, cebollas, coliflores, manzanas, maíz, brócoli, pepinos, repollos, judías, y coles de Bruselas.

Aseo

- Siéntese para afeitarse, peinarse y lavarse los dientes
- Apoyo sus codos en una superficie mientras se arregla o se afeita.
- Use un cepillo de dientes eléctrico y una máquina de afeitar eléctrica.
- Lávese el pelo en la ducha. Mantenga los codos bajos y la barbilla hacia abajo.

Bañarse y Darse una Ducha

- Si su doctor le ha prescrito oxígeno para usarlo durante el ejercicio, úselo cuando se dé una ducha.
- Reúna todos los artículos que necesitará, incluyendo la ropa.
- Siéntese para quitarse la ropa, bañarse, secarse y vestirse. Use una silla de baño en la ducha.
- Evite estirarse demasiado. Use una esponja con mango largo para lavarse la espalda y los pies. Use una alcachofa de ducha de mano para enjuagarse.
- Use una estantería para la ducha y una pastilla de jabón con cuerda, o coloque el jabón en una media de nylon y átela a la silla de ducha o jabonera.
- Tenga una toalla o albornoz cerca. Considere usar toallas de mano pues no son tan pesadas. Póngase una bata de felpa para evitar la necesidad de secarse.

Vestirse

- Antes de comenzar, reúna toda la ropa, zapatos, etc.
- Siéntese para vestirse.
- Evite inclinarse cruzando una pierna sobre la otra, use un taburete o equipo adaptado con mangos alargados para ponerse pantalones, zapatos y calcetines.
- Lleve calzado fácil de poner, cómodo y sin cordones; use un calzador de mango alargado. Use cinturas elásticas y camisas una talla más grande.
- Evite la ropa restrictiva, como las medias apretadas, las fajas, y sujetadores. Use tirantes si los cinturones son demasiado restrictivos.

Transferirse a la Bañera Usando un Asiento de Bañera (pierna izquierda, derecha, sentarse)



1. Mirando a la pared, agarre el asidero.



3. Levante su pierna derecha hasta entrar en la bañera.



2. Entre en la bañera con su pierna izquierda.



4. Siéntese en la silla de ducha. Invierta los pasos para salir de la bañera.

Uso del Brazo Izquierdo como Estabilizador Pasivo

Es muy importante que utilice el brazo afectado todo lo posible durante las actividades diarias. Aquí hay algunos ejemplos sobre cómo puede hacerlo.





Use la mano izquierda para estabilizar el plato mientras come.

Estabilice una hoja de papel con la mano izquierda mientras escribe con la derecha.



Estabilice el paño con la mano izquierda mientras aplica jabón con la mano derecha.



Estabilice el cepillo de dientes con la mano izquierda mientras usa la derecha para aplicar pasta de dientes.