

Physical and Occupational Therapy Strategies with Transverse Myelitis

PT/OT Role at
Johns Hopkins Hospital

OT/PT Intervention Overview

- 1) Recommendations for local OT/PT - Many of our clients already receiving OP.
- 2) Consultation - Recreational Therapist, aquatherapist, physiatrist, orthotist, equip. dealer for standing frame, or wheelchair.
- 3) Instruction in Home Program - ROM, positioning, pressure relief, aerobic conditioning.

PT Evaluation at JHH

- Review of all past medical history including the history of TM
- Medications

Subjective Evaluation

- Pain and spasticity levels
- Functional mobility, endurance issues
- Daily activity level - physical work demands, self-care
- Rehabilitation program, previous
- Support - family, support group, etc
- Home Environment
- Other problems per client
- Client's goals

Objective Evaluation Range of Motion and Strength

- ROM
 - Spine, shoulder, elbow, hip, knee, ankle.
 - Heterotopic ossification*
- Manual Muscle Testing - Strength testing throughout
- Tone/spasticity - Ashworth scale

*(Taly et al)

Objective Evaluation Functional Mobility

- Transfers - bed mobility, transfers
- Mobility - ambulation Vs wheelchair, stairs, curbs, ramps. Community Vs home. LE orthoses, standing frame usage, assistive device usage. 📄
- Ergonomics - joint protection, body mechanics

Objective Evaluation

- Reflexes
- Balance
- Endurance - Muscular and cardiovascular
- Other - Sensation, skin integrity

Physical Therapy Intervention

- Aquatherapy
- Standing Frame
- Home Exercise Program

PT/OT Utilization

- Appropriate PT/OT referral
 - Consider inpatient rehab*/OP referral
 - Continue to study outcomes Vs Rx**
- Consider long term PT/OT involvement

(*Kovacs et al) (**Chan&Boey)

OT Evaluation at JHH

- Review of all past medical history including the history of TM
- Medications
- Level of functioning prior to onset of TM

Social History

- Marital status and family/support system
- Home environment
- Work history
- Leisure Interests

Subjective Evaluation

- Current and previous rehab programs
- Client's goals
- Any other subjective reports from the patient regarding their condition

Objective Evaluation

- Upper extremity range of motion
- Upper extremity strength
- Sensation testing*
- Balance
- Functional transfers
- Activities of daily living

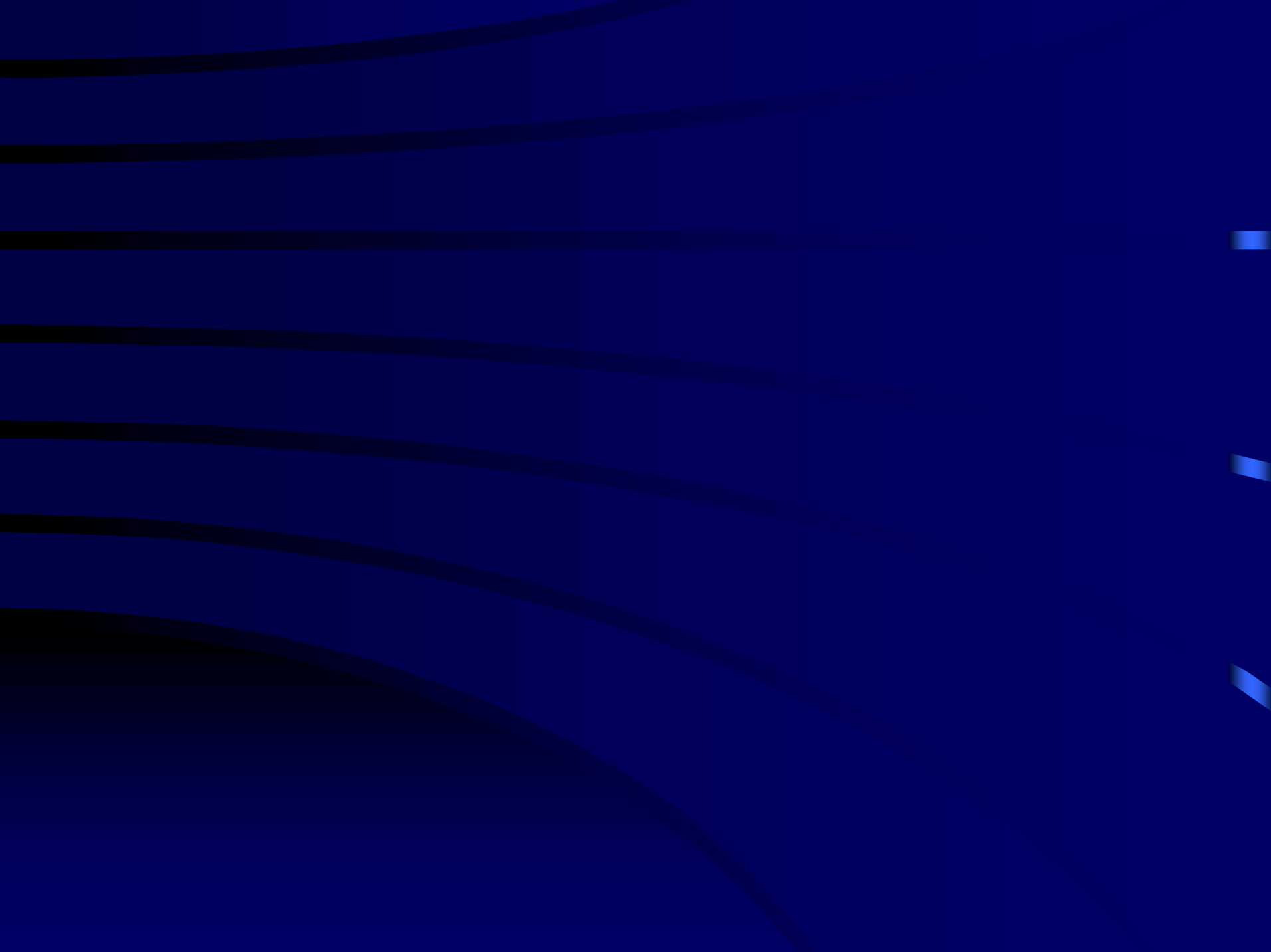
Wheelchair Evaluation

- Appropriateness of current wheelchair:
 - style
 - size
 - accessories
- Wheelchair management
- Overall level of comfort with current wheelchair

Treatment Strategies

- Home exercise programs
- Adaptive equipment
- Adapted “ADL” techniques
- Wheelchair recommendations

Therapy Trends/Conclusion



Functional Activities

	Bed Mobility	Wheelchair Transfer	Ambulation
C 5	Assist.	Assist.	---
C 7	Indep.	Indep.	---
C 8	Indep.	Indep.	Assist. (NF)
T 7	Indep.	Indep.	Swing to
S1	Indep.	Indep.	Indep.(-dev)