

Occupational therapy analysis



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The patient was attending treatment sessions in order to obtain full range of motion in the wrist and get back to normal ways of living. The activities elected for rehabilitation were isometric strengthening with therapy and a wooden suck. The first exercise was chosen to help build strength by applying pressure onto an object, which helped in activating the wrist.

Repetition of this exercise would eventually assist patient in getting back to simple daily stateless such as gardening or hammering a picture to the wall. The next exercise was the wrist bar suppuration/probation.

This exercise was to help the patient build endurance in a different angle holding a wrist bar. The wrist bar is an object that has 2 portions, one on the top and one on the bottom, both can move laterally and contra laterally depending on the exercise chosen. The exercise I viewed using the wrist bar was turning the injured wrist while stabilizing the top portion of the bar with the strong wrist. Another exercise given to the patient was using a flex bar for strengthening grip, probation, and lateral activity.

The flex bar is a rigid green rubber bar with a circular circumference.

The patient was told to hold the bar and flex it both upwards and downwards and asked to let the therapist know if any pain occurred. This was mother actively given to the patient to help with grip and strength in the wrist. The patient had no complaints while doing this exercise.

This exercise was beneficial to patient's request to resume simple daily activities of gardening, as it was the same movement if patient had to break

big twigs or pull weeds. Being the patient did not have any complaints after exercise it showed progress on the injured wrist.

The last therapeutic activity was putting blocks into a bowl, which worked on enhancing grip and probation. This exercise was also used to also help with stabilization and build endurance, so if the patient were to be using the wrist for extended periods of time, the wrist would take longer to fatigue.

The areas addressed were oaf biomedical approach. The therapist prescribed supuration/probation exercises to help with strengthening, endurance, and increasing range of motion. The purpose of increasing range of motion was to help the patient establish Independent dally living.

The patient wanted to be able to put clothes on by themselves, cook, and do outdoor activities. The focus the therapist had was on improving limitations on activities. The clothing as well as trouble with other daily activities such as cooking, cleaning, driving and other outdoor activities.

The therapist's technique was to engage the patient in exercises and activities that would gradually implement improvement that the patient was able to see and feel. The therapist gave the patient homework assignments with therapy to help with grip, strengthening, and range of motion.

The patient was also shown different ways of doing daily habits such as putting on clothing with out Jeopardizing improvement on the injury. The therapist also revied the patient with a list of foods to purchase, which would help conserve energy on the injured wrist. The therapist used the " Create/Promote" as well as the " Remediation" treatment approach. The "

Create/Promote” approach was used because the therapist did not assume a disability was present, and needed to enhance her performance, as well as re-design her current lifestyle.

The “ Remediation” approach was used in the exercises as the patient fine-tuned their motor skills, with suppuration/probation of the wrist. The approach given to the patient was to help restore range of motion. During my time in the facility I noticed many of the other staff using the same approaches and witnessed a strong bond between the staff and patients. At Holy Name Medical Center the Occupational Therapy and Physical Therapy departments share the same wing.

There was a lot of interaction between the Occupational Therapy Department and Physical Therapy Department.

The staffs from both departments knew all patients by name and seem to have built strong personal relationships. All the patients looked very comfortable being there to receive their treatment. The patient I observed looked very happy during the therapy session and showed gratitude towards the therapist. The patient was especially pleased that the therapist would explain why they were doing the exercises that were chosen.

The Occupational Therapist was very verbal with the patient explaining what to do, how to do it and why.

The therapist would demonstrate the exercises to ensure the patient knew how to perform it which made motivating the client very easy. The patient seemed pleased with the treatment and was asked frequently if anything

was hurting during the activities. If the patient did complain the therapist would alter the exercises.

If the patient was gripping the flex bar and complained, the therapist would adjust the patients elbow tighter to the body or just verbally cue the patient to pull or push a little harder.

The patient's responses were all smiles and knew that the pushes put forth by the therapist would ensure being back to normal sooner than later. From my observation and based off the slides from week 1 "Occupation" related to the activities of everyday life that had meaning and value to the patient. It helped to ensure a meaning and purpose in the patient's life that was having difficulties due to an injury. Listening to the patient talk about doing the things that they enjoyed and not being able to do them really helped me to understand the role of an Occupational Therapist and the importance they can have on one's self-esteem.

In the article *Defining Occupational Therapy*, the author states "Occupational Therapy is the purposeful activity or interventions designed to achieve functional outcomes which promote health, prevent injury or disability and which develop improve, sustain, or restore the highest possible level of independence of any individual who has an injury, illness, cognitive impairment, psychological dysfunction, mental illness, (Edition) page 5)". The author went on to discuss benefits of occupational therapy services, the types of services that may be provided, and the goals of occupational therapy prevention.

The author helps others realize what occupational therapists really do and the importance of their work. This article relates to my experience at Holy Name Hospital by the help they gave to their patients.

The interventions viewed were very helpful for the patients to improve their injuries. The skill the patient wanted to restore was putting on articles of clothing; the patient was given tips to help putting on clothing easier. The patient's wrist was hindered so to restore it the patient was given numerous activities during the session and therapy exercises for homework.

The role of an Occupational Therapist in the Holy Name setting is to help the patients feel comfortable with the treatment and give them an understanding of what they are going to do, why they are going to do it and the importance of the exercises. The patients that come into the facility vary from breaks in bones to strokes.

The therapeutic approaches vary according to both the therapists and their choices of activities. The therapist I observed gave the patient a thorough understanding and demonstration of the exercises being asked.

The Occupational Therapist chose certain exercises to help with the patient's grip, strength, and range of motion. The therapist gave tips on self-care skills to help the patient with putting on articles of clothing and also helped to keep the patient's morale high. With the therapist's calming approach and easy to talk to attitude it was an obvious choice of why the patient requested to work with the therapist.

During the observation I had learned about a new piece of equipment, the Flex Bar, along with an exercise that can be used with it.

The Flex-Bar is a piece of equipment used to help improve range of motion in the wrist (flexing, extension, supination, pronation). The exercises observed during rehabilitation were used to help the patient improve their supination and pronation in the wrist. I feel that the exercise can definitely help with the patient's daily living and definitely will improve the overall well-being.

When I volunteered at Holy Name Hospital the therapists explained how great of a career Occupational Therapy can be and how in an economy like we have today, I will always find employment.

In the article *The Turnaround is Here*, the author writes, " Attracting people to this field is a real gift not only to the profession but to society. It's a wonderful field for people to combine their altruism with professional knowledge and skills to make a real difference in others lives (Brainteasers, 2005 pag. 16)". The article spoke a lot about the history of occupational therapy and the trends or the future, the signs of improvement, and the different societal markets where occupational therapy is needed.

A career in this field is something that I have always wanted and will not only benefit my family but others as well. In the article *TO Settings*, the author writes, " One of the enduring attractions of Occupational therapy as a career has been the wealth of practice options it offers (Schultz, 1997 pag. 10)".

The author talks about the continual changes pertaining to the field. She also describes the benefits an Occupational Therapist can bring to the different settings.

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The author helped give me an understanding that although it is an education that provides a stable future and a comfortable income, there are many settings in which an TO student must try to envision himself applying practice in. To name a few, there the only setting Vive observed it always seemed to be busy and the workers all seem to get along and enjoy their work. I have predominantly shadowed outpatients and have seen only one in-patient. I thought the in-patient experience was surreal.

It was very fast paced and I can definitely see myself eventually working in that type of setting.