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Intro to PT – Portfolio Project

Goal Worksheet

Please complete this worksheet after online lectures under Module 6

1. **Your patient is having trouble walking after having a stroke with residual hemiplegia and foot drop on the right side. The patient currently requires moderate assistance to ambulate 10 feet with a rolling walker. As the therapist, you are having to hold his right hand on the walker, assist with controlled weight shifting, and advance/ place the right lower extremity. Write an impairment-based goal and a function-based goal for this patient.**

   An impairment is a result of pathology or disease state and includes any loss or abnormality of physiologic, anatomic, or psychologic structure or function. What impairments might this patient have? (Example: Decreased strength in the right leg.)
   possible impairments: decreased sitting and standing balance (statically and dynamically), decreased right UE strength including grip strength, deceased right LE strength, decreased AROM of right UE and LE, decreased PROM of right UE and LE secondary to increased tone, decreased sensation in right foot or hand

   A functional limitation is the inability to perform a physical action, task or activity in an efficient, safe or competent manner. What are the impairments this patient may exhibit? (Ex: Inability to walk independently.)
   Possible functional limitations: difficulty w/ rolling side to side and scooting in bed, especially to left side, difficulty w/ obtaining/maintaining upright sitting balance while dressing or feeding self, difficulty w/ sit <> stand transfer from mult surface heights to mimic home and community environments, difficulty maintaining standing balance unassisted to perform standing ADLs and IADLS (bathing, cooking, cleaning, etc), difficulty ambulating on level surfaces (I), difficulty negotiating multiple steps with use of hand railing(s)

   Impairment-based goal:
   - **Pt will improve strength of right UE depressors to 4/5 to properly facilitate sit <> stand transfer mechanics w/n 4 weeks.**
   - **Pt will improve AROM of right ankle to 0-15 deg to facilitate proper sit <> stand transfer as well to prevent foot drop during swing phase of gait w/n 4 weeks.**

   Function-based goal:
   - **Pt will amb on level surfaces for > or equal to 150' w/ LRAD (least resistive assistive device) at a CGA level to facilitate safe home amb distances w/n 4 weeks.**
   - **Pt will perform sit <> stand transfer from standard chair height at CGA level to prepare for home environment w/n 4 weeks.**

2. **Re-write the following impairment-based goals as functional goals:**

a. Pt will improve R shoulder ER ROM to 0-90 degrees to facilitate styling hair as part of grooming routine within 6 weeks. (focus on styling hair instead of ROM)

   i. **Pt will perform task of straightening hair with hair straightener continuously for 3 min at a CGA level w/ min cueing to facilitate improvement of (I) ADLs w/n 6 wks.**

b. Pt will improve L knee extension strength to 4/5 to facilitate climbing stairs to access 3rd floor apartment safely and independently within 8 weeks.

   i. **Pt will (I) ascend and descend 24 steps in a reciprocal pattern w/ or w/o use of hand railing to safely and efficiently access 3rd floor apartment w/n 8 weeks.**

c. Pt will decrease pain to 2/10 during sitting to facilitate driving to work each day within 2 weeks.

   i. **Pt will perform sustained sitting activities w/o rest while maintaining good posture for greater than or equal to 30 min to prepare for daily driving commute with in 2 weeks.**

3. **Your patient is recovering from a right total knee replacement. She has residual right leg weakness, decreased R knee flexion ROM (0-80 degrees) and extension ROM (-7 degrees). She required minimal assistance (needs therapist to manage R LE for her) to transition to short sitting on the edge of the bed by performing supine to sit. All movement is very slow and inefficient. She is able to stand with minimal assistance using a rolling walker and take 3 very slow steps forward and backward. She needs assistance advancing her right lower extremity during swing and cuing for WBAT on the right lower extremity during stance.**

   If you were writing a goal for your patient, how would you measure her….

   Ex: **Lower extremity management?** → Trials (quality of movement) example is pt will self place LE 4 out of trials – looking for consistency of movement…   or Level of assistance (independence) or time (efficiency); - pt will perform gait training w/ RW req mod A w/n 1 min (efficiency)

   a. **Transition to sitting? Assistance level required, TUG**
   b. **R knee ROM? Goniometry measurement**
   c. **Transition to standing? Assistance level required, sit to stand test**
   d. **Gait progress? Gait speed, TUG, assistance needed for gait cycle progression**
   e. **Gait quality? Noting deviations; measure step length, width, or stride length; assistive device needed; DGI, TUG**

   Now write one goal for each of the tasks.
Ex: (Independence) Pt will reposition R LE during transition to sitting EOB for 3/4 trials.
(Efficiency) Pt will reposition R LE within 10 seconds without assitance during transition to sitting.

a. **Transition to sitting – Pt will perform stand to sit transfer to standard height surface w/ or w/o use of UEs at a Supervision level within 4 weeks.**
b. **R knee ROM – Pt will improve ext/flex knee AROM to 0-100 deg to facilitate sit <> stand transfers and safe stair negotiation within 4 weeks.**
c. **Transition to standing – Pt will improve 5X sit to stand test by 5 seconds at a CGA level to facilitate safe and efficient transfers from mult surfaces in home within 8 weeks.**
d. **Gait progress – Pt will improve TUG score by 4 points w/ LRAD at a CGA level to facilitate safety and efficiency w/ gait to further reduce risk of falling within 8 weeks.**
e. **Gait quality – Pt will improve DGI score by 4 points using LRAD at a supervision level to facilitate gait quality improvement to further reduce risk of falls within 8 weeks.**