

## OTA 233: Common Conditions of Physical Dysfunction

This course is presented in the third semester and builds on the student's foundation in movement in human performance, performance skills, performance patterns, activity demands, contexts, and client factors. Students learn to apply this knowledge to problem solve various therapeutic interventions for specific, commonly referred conditions affecting adults. The COTA role in the occupational therapy process is emphasized. Prerequisites: OTA 121, 125, and 127. Three lecture hours and two laboratory hours per week. Instructional Support Fee applies.

### Course Student Learning Outcomes

Upon successful completion of the lecture portion of this course, the student will know or be able to: 1. Demonstrate knowledge and appreciation of the role of sociocultural, socioeconomic, and diversity factors and lifestyle choices in contemporary society through analysis of the effects of disability, culture, gender, race, age, lifestyle choice, environment, and socioeconomic status on the occupational therapy process (B.1.2). 2. Discuss the importance of evaluation tests and measurements in the intervention planning process. Articulate the importance of using statistics, tests, and measurements for the purpose of delivering evidence-based practice (B.1.4). 3. Explain the effects of genetic conditions, chronic disease processes, and traumatic injuries on the occupational performance of individuals (B.3.5). 4. Describe the clinical presentation and functional impact of the conditions of physical dysfunction commonly referred to OT (B.3.5). 5. Identify specific areas of evaluation appropriate for each diagnosis (B.4.4). 6. Articulate the role of the occupational therapy assistant and occupational therapist in the screening and evaluation process along with the importance of and rationale for supervision and collaborative work between the occupational therapy assistant and occupational therapist in that process (B.4.24). 7. Identify when to recommend to the occupational therapist the need for referring clients for additional evaluation (B.4.26). 8. Analyze case studies to develop an occupational profile and appropriate OT interventions for depicted clients based upon client factors, performance skills, performance patterns, and context and environments (B.4.0). 9. Describe specific therapeutic interventions for each diagnosis to enhance independence and safety in occupational performance, participation and wellbeing (B.4.10). 10. Develop therapeutic use of self and clinical reasoning skills as evidenced in various intervention planning classroom scenarios (B.4.1). 11. Utilizing a case study format, identify appropriate home and community programs to enhance patient's safety and independence in performance of occupations in the contexts most relevant to the client (B.4.27). 12. Use the teaching-learning process with the client, family, significant others, colleagues, other health providers, and the public. Collaborate with the occupational therapist and learner to identify appropriate educational methods (B.4.21). 13. Develop educational materials for client, family, and caregivers for specific populations to enhance performance and safety (B.4.23). 14. Effectively communicate and work inter professionally with those who provide services to individuals and groups in order to clarify each member's responsibility in executing an intervention plan (B.4.23). 15. Recognize and communicate the need to refer to specialists (both internal and external to the profession) for consultation and intervention (B.4.10). 16. Demonstrate ability to grade and/or adapt selected interventions to reflect changing needs of clients and/or contexts (B.4.18, B.4.22). 17. Discuss the collaborative COTA/OTR role in the OT process of treatment, documentation, and discharge planning with common physical conditions (B.4.24). 18. Recommend to the occupational therapist the need for termination of occupational therapy services when stated outcomes have been achieved or it has been determined that they cannot be achieved. Assist with developing a summary of occupational therapy outcomes, recommendations, and referrals (B.4.28). 19. Articulate the importance of evidenced based practice in clinical decision-making. Identify how scholarly activities can be used to evaluate professional practice, service delivery, and/or professional issues (B.6.1). 20. Discuss ethical considerations in the occupational therapy process. Demonstrate knowledge and understanding of the American Occupational Therapy Association (AOTA) Occupational Therapy Code of Ethics and Ethics Standards and AOTA Standards of Practice and use them as a guide for ethical decision making in professional interactions, client interventions, and employment settings (B.7.1). Upon successful completion of the lab portion of this course, the student will know or be able to: 1. Use sound judgment in regard to safety of self and others and adhere to safety regulations throughout the occupational therapy process as

appropriate to the setting and scope of practice (B.3.7). 2. Assist with the development of occupation-based intervention plans and strategies (including goals and methods to achieve them) on the basis of the stated needs of the client as well as data gathered during the evaluation process in collaboration with the client and others. Intervention plans and strategies must be culturally relevant, reflective of current occupational therapy practice, and based on available evidence. Interventions address the following components: • The occupational profile, including participation in activities that are meaningful and necessary for the client to carry out roles in home, work, and community environments. • Client factors, including values, beliefs, spirituality, body functions (e.g., neuromuscular, sensory and pain, visual, perceptual, cognitive, mental) and body structures (e.g., cardiovascular, digestive, nervous, genitourinary, integumentary systems). • Performance patterns (e.g., habits, routines, rituals, roles). • Context (e.g., cultural, personal, temporal, virtual) and environment (e.g., physical, social). • Performance skills, including motor and praxis skills, sensory-perceptual skills, emotional regulation skills, cognitive skills, and communication and social skills (B.4.0). 3. Select and provide direct occupational therapy interventions and procedures to enhance safety, health and wellness, and performance in ADLs, IADLs, education, work, play, rest, sleep, leisure, and social participation (B.4.10). 4. Identify a need and perform education in energy conservation, work simplification, joint protection techniques, and relaxation and breathing techniques to enhance performance in ADLs, IADLs, education, work, play, rest, sleep, leisure, and social participation. (B.5.2). 5. Provide therapeutic use of occupation, exercises, and activities (e.g., occupation-based intervention, purposeful activity, preparatory methods) (B.4.10). 6. Identify need and implement strategies for fine and gross motor coordination, balance, and posture (B.4.10). 7. Evaluate and intervene for edema and scar hypersensitivity for individuals with orthopedic impairments including patients with peripheral nerve injuries (B.4.10). 8. Incorporate weight bearing and movement precautions for patients with lower extremity total joint replacements (B.4.10). 9. Perform and educate in residual limb/foot care for individuals with lower extremity amputations and prevention of decubitus ulcers for individuals at high risk for skin breakdown (B.4.21). 10. Perform, grade, and educate in therapeutic activities and exercise for patients with neuro-musculoskeletal, orthopedic, respiratory, and/or cardiovascular impairments (B.4.9). 11. Implement adaptive equipment / techniques, assistive technology, and modifications to enhance occupational performance for physical, cognitive, perceptual, and/or process skills deficits (B.4.9). 12. Understand bed positioning, bed mobility and proper seating for patients with orthopedic conditions of the spine, lower extremity joint replacements, lower extremity amputations, and neuro-musculoskeletal performance impairments (B.4.13).

**Credits:** 4

**Program:** Occupational Therapy