



PATIENT PROFILE

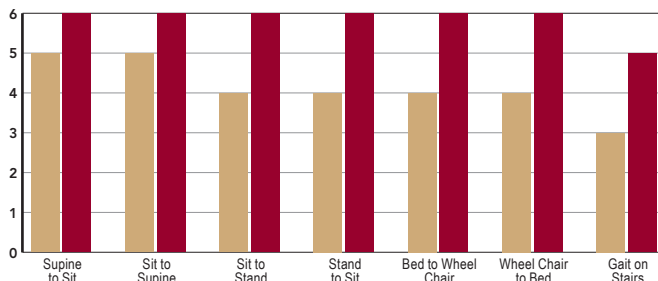
- 67 year old male
- Hospitalized for 9 days for Subdural Hemorrhage and Vertebral Fractures.
- Resident at ERCC for 20 Days
- Mr. P was independent with all aspects of daily living prior to his accident, and is self-employed as a truck driver for his own logging business.

Mr. P presented for rehabilitation following a fall from his logging truck in which he sustained vertebral fractures and a head injury. Upon admission he demonstrated weakness, unsteady gait, impaired balance, decreased independence with activities of daily living, and mild cognitive impairment. He also complained of shoulder pain.

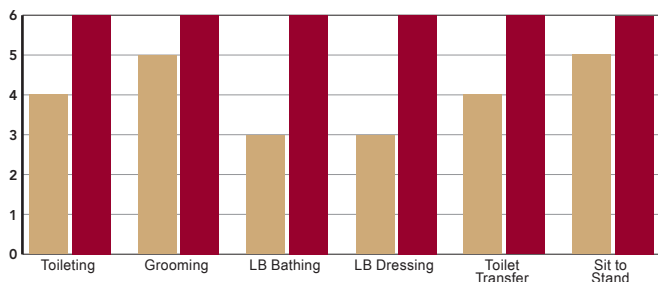
Mr. P was evaluated by Physical Therapy (PT), Occupational Therapy (OT), and Speech Language Pathology (SLP) at ERCC. PT focused on increasing ambulation distance and improving safety awareness for obstacle negotiation during ambulation, and improving standing balance. OT focused on increasing independence with activities of daily living, including education on application of TLSO brace, and addressing right shoulder pain. SLP focused on attention, problem solving and planning skills.

THERAPY OUTCOMES

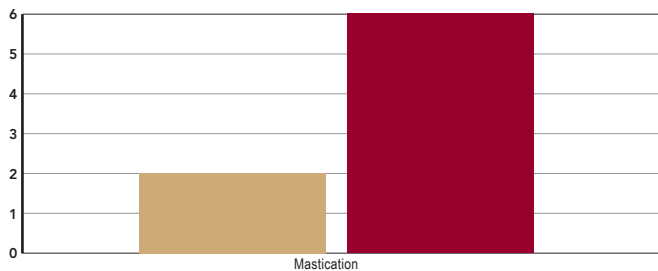
PHYSICAL THERAPY



OCCUPATIONAL THERAPY



SPEECH LANGUAGE PATHOLOGY



Scale

- 1 = Max Assist
- 2 = Mod Assist
- 3 = Min Assist
- 4 = CGA
- 5 = SBA
- 6 = Independ

Admission
Discharge

Outcome: Mr. P was very motivated to return home as soon as possible and participated well during his time at ERCC. Cognitively, he improved from a mild cognitive impairment (related to attention, planning and problem solving skills) to functioning within normal limits. He increased his ambulation distance from 250ft. with a front wheeled walker to 400+ feet without any assistive device, and improved his standing balance to within functional limits. For activities of daily living, he improved from requiring minimum assistance to completing dressing, bathing, and toileting tasks independently. He did continue to require some help with the TLSO (Back) brace, but his wife was trained and felt comfortable with assisting him with this at home. Mr. P was discharged back to his home at an independent level (with exception of brace), requiring no assistive devices or adaptive equipment. He did return to this facility for outpatient services to maximize his functional potential for ambulation and safety.