

## **Additional Information for Physical Therapy:**

### **Physical Therapy:**

On Day 2, when testing her lower extremity strength sitting at the edge of the bed prior to attempting ambulation, she developed shortness of breath and RT was called to assist. Throughout the day, the patient made steady progress and was able to go from sitting to standing with moderate assistance. However, static standing balance was only fair. Today, the patient needed only minimal assistance with bed mobility and sit to stand, but required moderate assistance and verbal cues during ambulation (< 20 feet). During ambulation, the patient used a right AFO and rolling walker. The patient demonstrates mild ataxia during ambulation. Due to a few episodes of postural hypotension, significant transition time has been allowed between supine to sit and sit to stand. The patient has high fall risk and has fair safety awareness. She has expressed concern about “getting around” at home, and is hopeful that her time at the skilled nursing facility will get her stronger so she can manage on her own at home and get back to church. She is also concerned about falling at home. The patient understands that she may need to use an assistive device for a while, but wants to be able to “walk without a cane” as soon as possible. She is highly motivated. We have discussed the importance of “safety first” and she seems to be receptive to this. We’ve had some initial discussion about her home environment, and some modifications may be necessary.

### Questions:

- 1) Do you need any additional information to better understand her clinical and/or home picture? What other professions or people would you like to consult with?
- 2) Considering the information from her recent hospital stay and her past medical history, what PT recommendations would you make to ensure quality care and appropriate preparation for returning home in a couple weeks (after the SNF facility)?
- 3) What patient education will be needed related to her current functional status and/or returning home? With which other professions should you coordinate your patient education?