Bailly 1

Celeste Bailly

Independent Study and Mentorship

Mr. Speice

April 26, 2018

**Type of Observation:** Home Health OT

**Professional Observed:** Alice Petranek

**Date of Observation:** April 25, 2018

**Time:** 9:00 AM - 10:15 AM

## Diverse Needs

## Observation Assessment 3

People often overestimate the differences between Occupational Therapy practices used on children and on older patients. The exercises and techniques used are really not that different; The main point of contrast is that Pediatric OT is aimed more at the full body while OT with older patients is aimed more at specific problem-areas of the body. This observation of my mentor was a great example of how the exercises OTs assign to their patients differ between age groups.

When I observed Elissa Cashman working with younger children, the children used objects that engaged the entire body such as swings, trampolines, and yoga balls. However, my previous observation of Alice Petranek working with an older woman revealed to me the trend of focusing on more specific parts of the body, especially while using resistance bands. These bands are often used for both exercise and physical therapy/rehabilitation. The woman being treated had broken both of her shoulders, so one of the main goals of the

therapy was to bring back the strength and coordination in her arms and shoulders. Mrs. Petranek had the woman use minimum resistance bands to repeatedly work the triceps and biceps in both arms. While doing so, Mrs. Petranek pointed out to me that it would be incredibly helpful to my OT education if I were to study anatomy because I would be able to better understand the exercises performed to heal specific areas of the body.

Another major focus of the therapy was the severe swelling of the woman's feet. The problem was traced back to the woman's history of cancer, which presumably led to lymph node issues. The swelling of the feet is likely due to swollen lymph nodes in the lower leg. The woman showed my mentor and I several pictures of what her feet looked like after several hours at a time wearing socks, and the pictures revealed that the part covered by the sock had been compressed back to normal size while the uncovered part of the foot remained swollen. This led Mrs. Petranek to conclude that compression bandages may be helpful to the woman's condition, so she recommended that she see a specialist in that field.

The final significant thing brought up in the therapy session was the modification of the woman's home so that she will be able to practice these exercises independently in the future. Mrs. Petranek repeatedly recommended that the woman place several bars on the walls of her bathroom to help her maintain balance. The woman has also already modified her closet by placing her most-used items on a lower shelf for easier access. During the session, Mrs. Petranek and the woman worked out ways to attach pulleys and resistance bands to different parts of the room so that the woman will be able to perform the exercises *safely* on her own. Safety of the woman was a major concern, so Mrs. Petranek stressed the importance of minimizing the amount of lower-body movement

required to perform the tasks and reducing any risk of falls since the woman already suffers from two broken shoulders and multiple sclerosis. By the end of the session, the woman had made significant progress and gained great strength in her arms from the exercises with the resistance bands.

Since this particular session was with an older woman and not a small child, not many of the activities can be transferred into use with my final product. However, the concept of the resistance band is incredibly inspiring because there are ways to make it seem equally appealing to people of all ages. Even if I choose not to include one in my final product, I will likely mention it in the informational brochure because it would be an excellent addition to any sensory room. Mrs. Petranek's focus on safety-proofing the woman's house also reiterated the notion that all components of my structure must be designed to minimize the risk of falls or injuries to the user. I have already extended the floor padding to the entire floor for this purpose, but I may also need to sand some of the final surfaces to smooth them out and prevent hypothetical splinters. After this observation, I am inspired to improve the safety aspects as well as the usefulness of my product in order to cater to the diverse needs of patients.

PDF of Notes:

https://drive.google.com/file/d/0B62xocLIKBkga3ExdTBPYTZsYlNxTXVIcHVseDN2Y

VhYRnFF/view?usp=sharing