Gait Training and Progression: Parallel Bar Activities, Functional Gait Assessment, Assistive Devices for Ambulation

Rehab 537 – Week 5 July 21, 2008

Mat/bed mobility for non-ambulatory patients

- □ Rolling without LE assistance
- □ Supine \rightarrow prone
- □ Prone on elbows
- \square Supine \rightarrow long sitting
- □ Long sitting with and without UE support
- $\ensuremath{\blacksquare}$ Long sitting push-ups and scooting
- □ Short sitting (edge of mat or EOB)

When last we met...

- Pre-ambulation mat program/progression
- □ Took a quiz and performed a skill check
- Any questions about the w/c reflection paper or quiz?
- □ Time to move on to....

Gait Training



Objectives

■ Be able to identify the goals of gait training

Goals: Gait training

- □ Increase endurance
- Increase postural stability
- Increase control during transitional movements
- □ Increase dynamic balance

Parallel Bar Activities

- □ Sit \leftrightarrow stand
- □ Static standing balance
- Weight shifting activities limits of stability
- □ Hip hiking
- □ Standing push-ups
- One leg forward/backward step (prep for swing phase)

Parallel Bar Activities (cont.)

- □ Practice patient's gait pattern
- Turning
- Sidestepping
- Backward walking
- Resisted walking
- Braiding

Goals: Indoor Progression with Assistive Device

- □ Optimal fit of appropriate assistive device
- □ Increase distance able to walk
- Increase balance, ⊥ LOB
- □ I and safe ambulation on indoor surfaces
- Review of guarding techniques **ALWAYS** use a safety belt!!!!!!

Indoor activities

- Ambulation on level surfaces
 - hard surfaces (wood, linoleum)
 - carpet (different piles), rugs
 - transitions between surfaces
- Progression of distance
- Elevation activities
 - Stairs
 - Ramps
 - Curbs

Indoor activities (cont.)

- □ Opening doors
- □ Over thresholds
- **□** Elevators
- □ Walking in a busy environment
- □ Falling techniques
- What to do in case of a fall
- □ How to get up from a fall

Goals: Outdoor Progression with Assistive Devices

- $\ensuremath{\blacksquare}$ Increase distance able to walk
- Increase balance, ↓ LOB
- Independent and safe ambulation on outdoor surfaces
- Achieve functional speed for crossing streets
- □ Independent car transfers and/or public transportation (Metro/Access vans)

Outdoor Activities

- $\ensuremath{\mathbf{u}}$ Opening doors and passing through thresholds to the outdoors
- Ambulation on uneven terrain
- $\ensuremath{\text{\textbf{g}}}$ Elevation activities: stairs, ramps, curbs, curb cuts
- $\ensuremath{\text{\textbf{g}}}$ Crossing the street within time allocated by a traffic light
- □ Walking in a busy or crowded environment
- □ Car transfer and/or public transportation

Weight Bearing Status

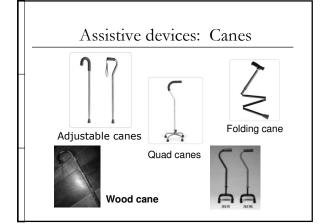
- □ Describes the amount of weight a person is allowed to place on their involved limb
- □ It is a precaution designated by the MD after a LE injury/medical condition and/or surgery
- Become very familiar with these terms and abbreviations!!!

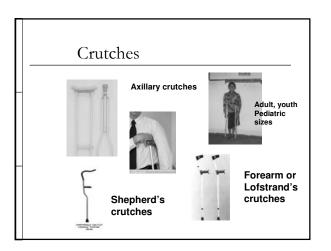
Examples of Weight Bearing Status

- □ Non-weight bearing (NWB)
- □ Partial weight bearing (PWB)
- □ Toe touch weight bearing (TTWB)
 - -the cracker test
- **□** 50% weight bearing
- Weight of leg weight bearing (WOLWB)
- Weight bearing as tolerated (WBAT)
- □ Full weight bearing (FWB)

Gait Patterns

- 2-point gait
- □ 3-point gait
- 4-point gait
- Swing-to gait
- □ Swing-through gait
- □ Full weight bearing gait
- □ Partial weight bearing gait
- f n Non-weight bearing gait



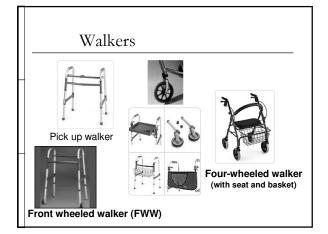


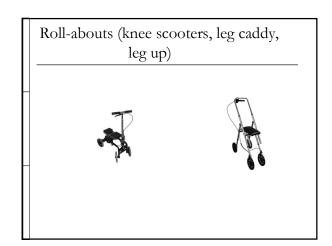
Remember...

- □ The cane is held in the hand opposite the affected extremity. There are exceptions...
- The function of the cane is to broaden the BOS
- A cane should not be used for PWB or NWB status

Crutches and measuring crutch height

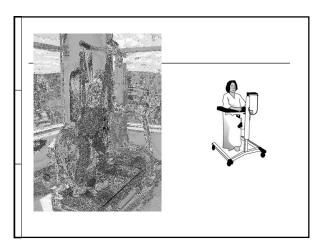
□ Please turn to page 22 in your course syllabus





Measuring walker height and gait patterns

□ Please turn to page 24 of your syllabus



Functional Gait Assessment

□ Terminology is key

Types of Gait Analyses

□ Kinematic

used to describe the movement patterns without describing the forces involved

□ Kinetion

Used to determine the forces involved in gait

Observational Gait Analysis (OGA)

- Is the most commonly used clinical method of performing a **kinematic** qualitative analysis. Doesn't take much equipment
- □ Takes practice
- □ Videography is helpful
- Let's take a look at some examples of gait...

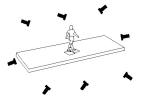
Quantitative Gait Analysis







Gait and Motion Analysis Laboratory
UVA Physical Medicine and Rehab
http://www.healthsystem.virginia.edu
/internet/pmr/GaitLab.cfm

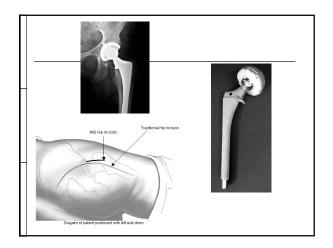


Case studies

- □ THR/TKA
- BKA (Below Knee Amputation)

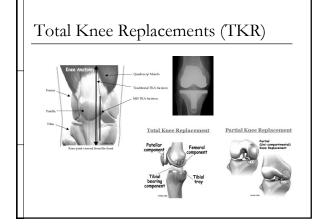
Total Hip Replacements (THR)

- □ Traditional hip replacement
- □ Minimally invasive hip surgery (MIHS)
- Most common reason for surgery?
- Hip precautions
 - Flexion greater than 90 deg
 - Hip adduction
 - Internal rotation
 - No twisting



Exercises

- □ Isometrics and ankle movements
- **□** Bridging
- Hip abduction
- TKEs
- □ Hip/knee flexion (heel slides)
- Ambulation goal 60-70 m on level surface,1 flight of stairs



■ Most common reason for surgery?

□ Also have minimally invasive knee surgery

□ Goal: 85 to 90 degrees of knee flexion

- Isometrics and ankle exercises
- Hip/knee flexion
- SLR (with assist)
- TKEs
- Seated knee ext/flexion

Other considerations

- □ Home set up
- □ Pre-op training?
- Ambulation goal: 60-70m with SBA using assistive device, up/down 1 flight of stairs

Below knee amputation (BKA)

- **□** Isometrics
- □ UE/LE strengthening
- □ Pronelying (2x/day)
- □ Gait progression

Next week:

- □ Skill Check #2, on gait training.
- □ No quiz as you have your take-home finals!
- Friday, August 1st at 5 pm! □ Don't forget, finals are due on



□ Wrap-up and evaluation second half of class!

Have a great week!	_