

Interactive Case Study #2



PTA 102: Physical Therapist Assistant 1 Spring 2012

Start

Introduction



Hello, SPTA -

I'm Dave Thomas, MGA, PT – your supervising PT. I think your second week in your clinical rotation is going very well.

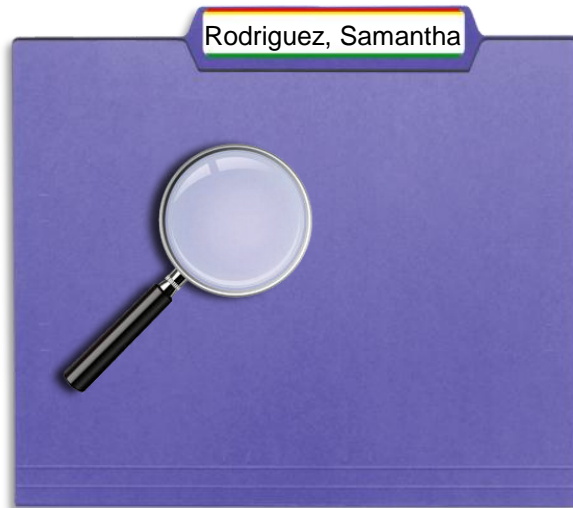
I would like to assign another patient to you... this time the case is a little more complex.

Click **Continue** to read the instructions.

Continue



Instructions



Working with your team, explore the patient's file. Anywhere you see a magnifying glass, click on it to get more details and access some additional notes and some questions I've added for you to discuss with your team.

When you're finished exploring the file, I've prepared some questions I'd like you answer. Go ahead and refer to your text books and course readings to create your report answering the questions.

Click **Continue** to access the file.

Continue



Case 2: Samantha Rodriguez



Measuring Blood Pressure
& Heart Rate



Measuring Aerobic
Capacity



PHYSICAL THERAPY EVALUATION

PATIENT NAME: Samantha Rodriguez DATE: March 1, 2012
 AGE: 48 SEX: Female OCCUPATION: Cashier at Giant
 ADMITTING DATE: ER admission on Feb 15, 2012 DATE OF ONSET: Feb 15, 2012
 DIAGNOSIS: Impaired aerobic capacity/endurance associated with deconditioning. MI was ruled out.

MEDICAL HX: Mild obesity, hypercholesterolemia PVD and bouts of elevated BP. On Feb 15, 2012, while attending a family picnic, pt. experienced syncope and reported difficulty breathing. Family members brought her to the ER and ECG was performed which was normal. Further tests ruled out an MI. At the time of admission, her vital signs were elevated: HR = 88 BP= 135/87 RR = 14bpm Pain Scale = 0/10 in all extremities, denying any chest discomfort or HX of angina. She was D/C'd from the ER and followed up with her regular MD who completed a thorough physical exam and blood work. She is currently not taking any medication and she smokes 2 packs of cigarettes per day.

PT ORDER:
 DATE _____ ORDER _____ PHYSICIAN _____
2/16/12 Physical Therapy (PT) for Aerobic Conditioning and instruction in cardiac risk reduction and healthy lifestyle.

GENERAL OBSERVATIONS/PRECAUTIONS: Periods of elevated BP, hypercholesterolemia, mild obesity, decreased aerobic capacity/endurance, PVD (generalized), smokes. Pt only speaks Spanish.

Place Initials on Date Treatment is Given

Yr.	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31
Mo																															

Name _____

PHYSICAL THERAPY NOTES
 PLEASE DO NOT REMOVE FROM CHART

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Rodriguez, Samantha



Case 2: Samantha Rodriguez

PATIENT NAME: Samantha Rodriguez

DATE: March 1, 2012

AGE: 48 SEX: Female OCCUPATION: Cashier at Giant

ADMITTING DATE: ER admission on Feb 15, 2012 DATE OF ONSET: Feb 15, 2012

DIAGNOSIS: Impaired aerobic capacity/endurance associated with deconditioning. MI was ruled out.

PVD = Peripheral
Vascular Disease

MEDICAL HX: Mild obesity, hypercholesterolemia, PVD and bouts of elevated BP. On Feb 15, 2012, while attending a family picnic, pt. experienced syncope and reported difficulty breathing. Family members brought her to the ER and ECG was performed which was normal. Further tests ruled out an MI. At the time of admission, her vital signs were elevated: HR = 88 BP = 135/87 RR = 14bpm Pain Scale = 0/10 in all extremities, denying any chest discomfort or HX of angina. She was DC'd from the ER and followed up with her regular MD who completed a thorough physical exam and blood work. She is currently not taking any medication and she smokes 2 packs of cigarettes per day.

Sounds scary -
you should look
this up!

How do these
compare to what's
in your Dreesen
text - pg. 271?

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Case 2: Samantha Rodriguez



PHYSICAL THERAPY EVALUATION

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PT ORDER:

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GENERAL OBSERVATIONS/PRECAUTIONS: Periods of elevated BP, hypercholesterolemia, mild obesity, decreased aerobic capacity/endurance, PVD (generalized), smokes. Pt only speaks Spanish.

Can you identify what puts patients at risk for cardiovascular disease?

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Case 2: Samantha Rodriguez



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SUBJECTIVE: Patient speaks Spanish only, daughter was able to translate. States she works long hours as a cashier in a food store. She is on her feet most of the day. She denies any pain at this time. She is upset about her recent visit to the ER and is very worried that she may have had a heart attack. She currently does not do any form of exercise, drives to and from work and baby sits her 6 grandchildren on the weekends. She lives alone, but her daughter 2 sons live close to her. Pt smokes up to 2 packs of cigarettes per day.

Pain: Pain Scale: 0/10 – no reports of angina

Social Environment: Lives: ☒ Alone ☐ Spouse ☐ Other ☐ Home ☐ Apt ☐ ECF

Stairs: Inside 5 Rails Yes, on right side

Outside: 1 Rails No

Adaptive Equipment: None

Prior Level of Function: Independent in all ADLs and IADLs. Performs no regular exercise.

1. Gait (Asst. Device): WNL

2. Transfers: WNL

3. Functional Status: I

4. Present Functional Limitations: None

OBJECTIVE:

Orientation: A and O x 3. Daughter interprets information on examination

Vital Signs: Resting: HR = 82 BP = 135/87 RR = 14bpm Pulse O₂ = 92%

ROM/Strength: Gross MMT of all 4 extremities reveals 4/5 generalized weakness

ROM = WNL without limitations

Sensation/Proprioception/Tone: WNL

Coordination: WNL

Posture: Slight forward head posture with exaggerated lordosis, but otherwise WNL

Balance: WNL

Bed Mobility: I

Transfers: I

Gait: Asst. Device: N/A WB Status: FWB without restrictions

A 6 minute walk test was conducted. Pt achieved 1,200' and required 3 rest breaks during exam.

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Rodriguez, Samantha



Case 2: Samantha Rodriguez

SUBJECTIVE: Patient speaks Spanish only, daughter was able to translate. States she works long hours as a cashier in a food store. She is on her feet most of the day. She denies any pain at this time. She is upset about her recent visit to the ER and is very worried that she may have had a heart attack. She currently does not do any form of exercise, drives to and from work and baby sits her 6 grandchildren on the weekends. She lives alone, but her daughter 2 sons live close to her. Pt smokes up to 2 packs of cigarettes per day.

Pain: Pain Scale: 0/10 – no reports of angina

Social Environment: Lives: ☒ Alone ☐ Spouse ☐ Other ☐ Home ☐ Apt

Stairs: Inside 5 Rails Yes, on right side

Outside: 1 Rails No

Adaptive Equipment: None

Prior Level of Function: Independent in all ADLs and IADLs. Performs no regular exercise.

1. Gait (Asst. Device): WNL
2. Transfers: WNL
3. Functional Status: I
4. Present Functional Limitations: None

Do you think this may have an impact on her compliance with exercises you will do?

Gait: Asst. Device: N/A WB Status: FWB without restrictions
A 6 minute walk test was conducted. Pt achieved 1,200' and required 3 rest breaks during exam.

ROCKY MOUNTAIN ALCHEMY HEALTHCARE COMMUNICATIONS, FROM Physical Therapy Exam SGA.doc

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Case 2: Samantha Rodriguez

OBJECTIVE:

Orientation: A and O x 3. Daughter interprets information on examination

Vital Signs: Resting: HR = 82 BP= 135/87 RR = 14bpm Pulse Ox = 92%

ROM/Strength: Gross MMT of all 4 extremities reveals 4/5 generalized weakness

ROM = WNL without limitations

Sensation/Proprioception/Tone: WNL.

Coordination: WNL

Posture: Slight forward head posture with exaggerated lordosis, but otherwise WNL

Balance: WNL

Bed Mobility: I

Transfers: I

Gait: Asst. Device: N/A WB Status: FWB without restrictions

A 6 minute walk test was conducted. Pt achieved 1,200' and required 3 rest breaks during exam.

This is a standard test for aerobic capacity. Measure the distance the patient can ambulate in 6 minutes (timed).

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Case 2: Samantha Rodriguez



Measuring Blood Pressure
& Heart Rate



Measuring Aerobic
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TREATMENT: Evaluation completed. Patient given instruction on risk factor reduction (clinic packet distributed)
Pt had some minor fatigue following 6 minute walk test, so further treatment deferred for the day.

Instructions to: ☒ Patient ☒ Family ☐ Other

Patient able to demonstrate skills learned ☒ YES ☐ NO

If no, why _____

Additional Tests/Comments: _____

ASSESSMENT: Impaired aerobic capacity/endurance associated with deconditioning

Rehab Potential: ☒ GOOD ☐ FAIR ☐ POOR ☐ OTHER

Problem List:

1. Decreased aerobic capacity/endurance 3. _____
2. Elevated cholesterol and BP 4. _____

SHORT TERM GOALS	FUNCTIONAL RELATIONSHIP	TIME FRAME
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1. <u>Increase awareness of cardiac risk factors to improve general health</u>		<u>2 weeks</u>
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2. <u>Increase aerobic capacity</u>		<u>2 weeks</u>
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3. <u>Increase strength in extremities to 5/5 for improved function</u>		<u>2 weeks</u>
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LONG TERM GOALS	FUNCTIONAL RELATIONSHIP	TIME FRAME
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1. <u>Increase performance on 6 min walk test by 100% to increase aerobic capacity</u>		<u>4 weeks</u>
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2. _____		_____
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3. _____		_____
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4. _____		_____
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Patient/Family participated in goal setting: ☒ YES ☐ NO

PLAN OF CARE: Pt education on risk factor reduction, aerobic conditioning, instruction in Target HR and safe exercise ranges of HR, progressive ther-ex for generalized strengthening of all extremities. Incorporate appropriate stretching activities based on mode of aerobic exercise.

PATIENT WOULD BENEFIT FROM:

☐ OT

☐ SPEECH

☒ OTHER: Referral to a dietician was made.

David C. Thomas, PT MD # 000010

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Rodriguez, Samantha

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Rodriguez, Samantha

Pt had some minor fatigue following 6 minute walk test, so further treatment deferred for the day.

☐ Other

If no, why _____

Additional Tests/Comments: _____

had no major fatigue wall to treatment

Patient/Family participated in goal setting: ☒ YES ☐ NO

PLAN OF CARE: Pt education on risk factor reduction, aerobic conditioning, instruction in Target HR and safe exercise ranges of HR, progressive ther-ex for generalized strengthening of all extremities. Incorporate appropriate stretching activities based on mode of aerobic exercise.

PATIENT WOULD BENEFIT FROM:

☐ OT

☐ SPEECH

David C. Thomas, PT MD # 000010

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Case 2: Samantha Rodriguez

ASSESSMENT: Impaired aerobic capacity/endurance associated with deconditioning

Rehab Potential: ☒GOOD ☐FAIR ☐POOR ☐OTHER

Problem List:

1. Decreased aerobic capacity/endurance 3. _____
2. Elevated cholesterol and BP 4. _____

SHORT TERM GOALS	FUNCTIONAL RELATIONSHIP	TIME FRAME
1. <u>Increase awareness of cardiac risk factors to improve general health</u>		<u>2 weeks</u>
2. <u>Increase aerobic capacity</u>		<u>2 weeks</u>
3. <u>Increase strength in extremities to 5/5 for improved function</u>		<u>2 weeks</u>
4. _____		_____

LONG TERM GOALS	FUNCTIONAL RELATIONSHIP	TIME FRAME
1. <u>Increase performance on 6 min walk test by 100% to increase aerobic capacity</u>		<u>4 weeks</u>
2. _____		_____
3. _____		_____
4. _____		_____

Patient/Family participated in goal setting: ☒YES ☐ NO

David C. Thomas, PT MD # 000010

ROCKY MOUNTAIN ALCHEMY, INC. 10000 ALHEALTH DR. SUITE 1000, DENVER, CO 80231

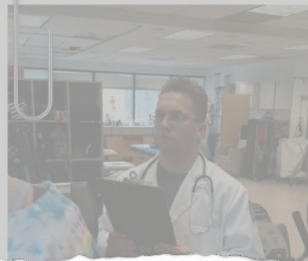
Rodriguez, Samantha

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Rodriguez, Samantha



Additional Tests/Comments:



Case 2 Questions (*page 1 of 2*)

Write a report answering the following questions (include your team members' names). When you're finished, print out your report and turn it in to Dave by the due date.

1. Upon admission to the ER, the patient received an electrocardiogram. What is this test and what information does it provide?
2. Ms. Rodriguez has hypercholesterolemia. Describe this disease and what causes it.
3. Her blood pressure reading at the time of the initial PT Evaluation would fall under the category of which of the following (*see Dreeben, page 217*):
 - a. Healthy (normal)
 - b. Prehypertension
 - c. Stage I Hypertension
 - d. Stage II Hypertension
 - e. Stage III Hypertension
4. Complete the following Chart related to Adult Blood Pressures:

Classification	Blood Pressure
Healthy (normal)	
Prehypertension	
Stage I Hypertension	
Stage II Hypertension	
Stage III Hypertension	

[More Questions](#)

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Case 2 Questions (*page 2 of 2*)

Write a report answering the following questions (include your team members' names). When you're finished, print out your report and turn it in to Dave by the due date.

5. As you begin to plan your treatment session based on the PT Plan of Care:
 - a. Describe how you will determine your exercise prescription related to:
 - Intensity
 - Duration
 - Frequency
 - Strength Training
 - b. Describe your specific exercises within your first treatment session with respect to warm up, aerobic conditioning, and cool down.
6. Describe the elements of “healthy lifestyle” you will educate the patient about.
7. Describe how you will be able to determine if she is progressing toward her PT goals in 3 weeks.
8. Read the following article and write a brief reflect on the cultural competence required in this case. How will you manage the necessary patient education, instruction, and follow up required for this patient?
 - Wojciechowski, Michele. *Cultural Competence and the Changing Patient/Client Population*. PT in Motion, November, 2011 Vol 3 No 10. APTA, Alexandria VA.

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