## SCI Lab Skills By Karl Lutschewitz, SPT

Motor learning principles that can be applied to all skills:

- Practice:
  - Skills can take months to learn
  - Breakdown the skills into parts
  - Practice, practice, practice...
  - Motor learning more effective when practice is specific and goal directed, not just repetitions
- Feedback:
  - Important to help motivate the patient
  - Visual, demonstrative, verbal, tactile
  - Use clear and concise cues
- Motivation:
  - $\circ \ \ \, \text{Assess readiness}$
- Stage of Learning:
  - Consider the patient's stage, preferred learning style, and impairments
- Environment
  - Create conditions that optimize processes of motor learning

Applicable to all transfers for patients with a SCI at C5-C7:

- Keep fingers flexed during transfers in order to avoid stretching out finger flexors and thereby risking a reduction of tenodesis grasp.
- Maintain patient safety through guarding and use of a gait belt
- 1) Dependent transfers
  - a) High low table
  - b) "airlift" method'
    - *i)* Use when the patient is unable to bear weight through lower extremities because of increased spasticity, which would make the transfer unsafe.
  - c) Using a chair/stool
    - *i)* Use method that fits your anthropometrics and comfort.
- 2) Scooting forward in chair 3 ways (C6)
  - a) Hooking arm and using head/hips, neck extension/posterior deltoids, wrist extensors
- 3) Supine to long sitting (C5-C6)
  - a)  $1^{st}$  step rolling onto prone on elbows
  - b) 2<sup>nd</sup> step 1) walking upper body around (need hamstring length) or 2) balancing on one arm and throwing other arm over (need adequate shoulder extension as well as good balance and shoulder stability)
  - c) Break up movement into parts
  - d) Offer resistance during movements to increase strength

- 4) Short sitting at edge of mat to long sitting (lifting legs) (C5-C6)
  - a) Takes a lot of UE strength, balance, and LE flexibility
  - b) Shoes can cause resistance on mat
- 5) Independent transfer from wheelchair to mat (C6)
  - a) Sliding board may not be feasible for everyday use, but if using a sliding board make sure there is a cutout.
  - b) Use scapular depression for transfer
- 6) Tub transfers (C7-C8)
  - a) Home visit would be appropriate to work on transfer in home environment
  - b) Order proper equipment for patient
- 7) Teaching wheelies
  - a) Use neck extension during 'pop-up'
  - b) Use head to balance
  - c) After achieving wheelie skills, progression may involve going over door transitions, going up and down curbs, and descending ramps (advanced)
- 1) Floor to chair (T12)
  - a) Start with a block to make transition easier
  - b) Facing the chair, with arms crossed method
  - c) Back to chair method requires adequate shoulder extension and strength (more advanced)
- 2) Sit to stand with long leg braces and lofstrands (T12)
- 3) Ambulation with long leg braces and lofstrands (T12)
- 4) Ascending and descending the stairs (T12)
  - a) Adjust loftstrands and leg braces properly
  - b) Educate the patient on the importance of parastance position