CASE STUDY #2

The patient is a 68-year-old male who has recently undergone a below-knee amputation (BKA). The patient is waiting in the lobby of an outpatient clinic, sitting in a normal-height chair with his wife. As the patient initiates a sit-tostand, he struggles. He uses a walker to hop through the lobby, and his wife follows him with a wheelchair. The patient loses his balance on two occasions while walking 10 feet to the therapy gym. The patient is able to self-correct with no assistance from their spouse. When the patient arrives in the therapy gym, he is short of breath and reports his arms are tired.



Challenges

- Patient lost his balance two times when walking
- He had difficulty with sit to stand transfer
- He easily fatigued after 10 feet of walking

Oppertunities

- Able to use walker for short distances
- Determined to get back to prior function



CONSIDERATIONS

It is important to consider why a patient completes a functional task the way they are. In this scenario, the first impression may be that the patient does not want to use a wheelchair. He is pushing himself and has a backup plan if needed. This is shown by his wife following with the wheelchair. Another thing to consider is the abilities of the patient. The patient presented with loss of balance two times within 10 feet. He also stated that his arms were fatigued. He may be passionate about returning to his previous functional level, but is the way he pushes himself a potential fall risk? These are all things that a therapist can start assessing at the evaluation.

INTERVENTIONS

To begin, figure out why the patient has chosen to use the walker instead of the wheelchair. Is there discomfort when using the wheelchair? Does he perceive a social stigma when using a wheelchair? Does the patient feel he needs to push himself to walk in order to get back to his prior level of function? All these reasons are valid and should be considered when discussing safety while using the walker. Next, discuss balance and fatigue when using the walker. Use a cooperative approach with the patient to find a solution to the patient's challenges. Interventions can include endurance training with sit-to-stands and functional mobility while completing tasks. It is important to include the patients wife in the session as she may be able to give valuable information on the patient's function.