

Left Hemiplegia (Onset on January 26)

DATE	TREATMENT	TIME, MINUTES	SPECIFICATIONS
2-1	Passive exercise	10	Left upper and lower extremities through normal range, three to four times each joint (remove footdrop splint for treatment)
2-7	Re-education and coordination exercise Active exercise	20	Left upper and lower extremities Normal range, right upper and lower extremities (avoid fatigue; encourage use of normal extremities for activities of daily living)
2-16	Active and assistive exercise Resistive exercise		Left shoulder and elbow Left hip and knee Powder board with assistance for hip and knee flexion and extension, and hip abduction and adduction Right quadriceps— <i>isometric</i> (mild), 30 contractions daily—10 each of 1/2, 3/4, and full 10 repetitions maximum
2-18	Gait training	Twice a day (b.i.d.)	Parallel bars with knee splint and foot support Sling left arm 1. Standing balance 2. Walking
2-22	Gait training	b.i.d.	Start on glider cane with assistance (cane in right hand)
3-2	Gait training	b.i.d.	Walk with regular cane and ankle-foot orthosis
3-6	Gait training	b.i.d.	Climb stairs, ramp Getting in and out of chairs Getting in and out of car
2-3	Occupational therapy (OT)		Orientation assessment Begin perceptual assessment Passive range of motion of left upper extremity Proper position to avoid edema; Jobst's glove
2-8	OT		Activities to increase function of left upper extremity Re-education for neglect of paretic side
2-10	OT		Start assessment of patient's performance of activities of daily living and begin training Recommend adaptive equipment as necessary
2-22	OT		Start home assessment for necessary modification and progressive program instruction
2-1	Treat once daily in patient's room.		
	Physician check every three to four days.		
2-7	Treat in physical medicine and rehabilitation department twice daily.		
3-4	Instruct in normal range of motion exercises for home use.		