Review **basic safety and infection prevention**, including:

- Handwashing between patients
- Fall prevention, removing throw rugs, adequate lighting
- Patient identifiers
- Sensory deficit hand, risk of injury
- Electric razor for shaving when patient is taking an anticoagulant such as warfarin (Coumadin®)

Review **conditions** commonly encountered in practice, such as:

- Apraxia, assessment
- Arthritis, energy conservation to alleviate fatigue
- TBI, having mastered ADLs, living skills such as balancing a checkbook
- Post-CVA, decreased pinch and grip sensation evidenced by dropping items during cooking group
- Hip replacement, use of reacher, sock aid
- Parkinson’s disease, self-feeding using weighted utensils
- Psychiatric setting, calming angry patient. Ask patient to step away from group, help him calm down.

Review patient **assessment**, including:

- Apraxia, symptoms: attempting to put on socks before shoes
- Identifying pinch and grip difficulty when patient drops items during cooking group
- Pain assessment, patient who has dementia and long-term caregiver. Ask the caregiver how the patient indicates pain
- Numerical scale of muscle strength: trace = 1
- Testing sensation: validate normal sensation with patient prior to beginning testing

Review **treatments and procedures**, including:

- Post-cardiac surgery, short-term goal of standing at sink toward long-term goal of standing for a longer period in the shower
• Progression steps, immediately before transfers: maintain sitting posture
• Sequence for putting on shirt for patient with hemiplegia – affected arm first, then pull material over affected shoulder
• Relieve shoulder pain with patient who has hemiplegia – wheelchair tray with arm supports
• Optimal time to assess typical functional abilities of patient with arthritis, after morning stiffness has subsided and patient is rested
• Device to keep patient’s hand in neutral position or to prevent wrist flexion = resting hand splint
• On the Centers for Medicare & Medicaid Services Inpatient Rehabilitation Facility Patient Assessment Instrument (Functional Independent Measure) used in Inpatient Rehabilitation Facilities, patient who needs only verbal cuing to dress = Five (5) supervision or set-up

Review principles and content of patient communication and teaching, including

• Patient satisfaction, importance of communication
• Energy conservation in arthritis to alleviate fatigue
• Assessing patient learning with demonstration of exercises
• Hip replacement: use of reacher
• Sequence for putting on shirt for patient with hemiplegia – affected arm first, then pull material over affected shoulder
• Roles of COTA and OT. COTA does not direct the evaluation process or establish the plan of care
• Report to nurse re: patient who is febrile
• Psychiatric setting, calming angry patient. Ask patient to step away from group, help him calm down.
• Patient who takes an anticoagulant such as warfarin (Coumadin®), recommend electric razor
• Instructions to nurses, transfer of CVA patient with early signs of subluxation, avoid grasping or pulling affected arm

Review principles of healthcare team communication, including

• Hip replacement precautions
• Roles of COTA and OT
• Report patient who is febrile
• Instructions to nurses, transfer of CVA patient, avoid grasping or pulling affected arm
Review documentation, including:

- Legal importance of documentation