ADLs and IADLs
Activities of Daily Living
Bathing and Showering
Clothing Care
Community Mobility
Dressing
Driving
Feeding, Eating, and Swallowing
Financial and Mail Management
Functional Communication
Functional Mobility
Grooming and Oral Hygiene
Health Management
Home and Yard Maintenance
Leisure and Social Activities
Meal Preparation
Medication Management
Rest and Sleep
Sexual Expression and Activity
Shopping
Toileting

Interventions
Apraxia
Balance
Cognition
Fall Risk Assessment and Prevention
Handwriting
Home Safety and Modification
Therapeutic Exercise
Visual Perception

Conditions and Diseases
Action Tremor
Adhesive Capsulitis
Alzheimer’s Disease and Related Dementias - Early Stage
Alzheimer’s Disease and Related Dementias - Mid Stage
Alzheimer’s Disease and Related Dementias - Late Stage
Amputation of the Lower Limb
Amputation of the Upper Limb
Amyotrophic Lateral Sclerosis
Ankylosing Spondylitis
Biceps Tendinitis
Breast Cancer - Pre and Postoperative Management
Occupational Therapy Toolkit
Treatment Guides - Section 1

Conditions and Diseases
Burn Injury
Cancer
Cardiac Disease
Cardiac Surgery
Carpal Tunnel Syndrome - Conservative Management
Carpal Tunnel Syndrome - Postoperative Management
Cervical Stenosis, Myelopathy, and Radiculopathy
Cervical Spine Surgery
Chronic Obstructive Pulmonary Disease
Chronic/Persistent Pain Syndrome
Complex Regional Pain Syndrome Type I
Congestive Heart Failure (see Cardiac Disease)
Cubital Tunnel Syndrome - Conservative Management
Cubital Tunnel Syndrome - Postoperative Management
Depression
De Quervain's Syndrome - Conservative Management
De Quervain's Syndrome - Postoperative Management
Diabetes - Type 2
Dizziness
Emphysema (see Chronic Obstructive Pulmonary Disease)
Epicondylitis - Conservative Management
Fibromyalgia (see Chronic/Persistent Pain Syndrome)
Fracture of the Elbow (Radial Head/Olecranon/Distal Humerus)
Fracture of the Hip (Proximal Femur)
Fracture of the Shoulder (Proximal Humerus)
Fracture of the Wrist (Distal Radius)
Frailty and Debility
Generalized Anxiety Disorder
Guillain-Barré Syndrome
Huntington's Disease
Joint Contractures
Kidney Disease
Low Back Pain (see Chronic/Persistent Pain Syndrome)
Low Vision and Blindness
Lumbar Stenosis
Lumbar Spine Surgery
Mild Cognitive Impairment
Morbid Obesity - Person of Size
Multiple Sclerosis
Myasthenia Gravis - Generalized
Myocardial Infarction
Conditions and Diseases

Osteoarthritis - Conservative Management
Osteoporosis
Palliative Care and Hospice
Parkinson's Disease - Early Stage
Parkinson's Disease - Mid Stage
Parkinson's Disease - Late Stage
Peripheral Neuropathy
Post-Poliomyelitis Syndrome
Pressure Ulcers
Rheumatoid Arthritis - Conservative Management
Rotator Cuff Pathology - Conservative Management
Rotator Cuff Pathology - Postoperative Management
Scleroderma/Systemic Sclerosis
Spinal Cord Injury - Paraplegia T1-S5
Spinal Cord Injury - Tetraplegia/Quadriplegia C1-8
Stroke
Total Hip Replacement (Arthroplasty)
Total Knee Replacement (Arthroplasty)
Total Shoulder Replacement (Arthroplasty)
Urinary Incontinence
Vertebral Compression Fracture
Adaptive Equipment
Adaptive Equipment for Bathing
Adaptive Equipment for Dressing
Adaptive Equipment for Eating
Adaptive Equipment for Grooming and Mouth Care
Adaptive Equipment for Meal Prep
Adaptive Equipment for Mobility
Adaptive Equipment for Moving in Bed
Adaptive Equipment for Transfers
Adaptive Equipment for Using the Bathroom
Adaptive Equipment for Walking

Ambulation
Walk with a Cane on the Stronger, Left Side
Walk with a Cane on the Stronger, Right Side
Walk with a Standard Walker - Full Weight Bearing
Walk with a Standard Walker - Non-Weight Bearing
Walk with a Standard Walker - Partial Weight Bearing
Walk with a Standard Walker - Toe-Touch Weight Bearing
Walk with a Standard Walker - Weight Bearing as Tolerated
Walk with a Wheeled Walker - Full Weight Bearing
Walk with a Wheeled Walker - Weight Bearing as Tolerated

Bathing and Showering
Bathing Tips
How to Install Grab Bars - Left
How to Install Grab Bars - Right

Bath Transfers
Transfer to Shower Chair (back up, turn left)
Transfer to Shower Chair (back up, turn right)
Transfer to Shower Chair (left leg, right leg, sit)
Transfer to Shower Chair (right leg, left leg, sit)
Transfer to Shower Chair (left leg, sit, right leg)
Transfer to Shower Chair (right leg, sit, left leg)
Transfer to Tub Bench - After Hip Surgery (back up, turn left)
Transfer to Tub Bench - After Hip Surgery (back up, turn right)
Transfer to Tub Bench (back up, turn left)
Transfer to Tub Bench (back up, turn right)
Transfer Wheelchair to Tub Bench - Move to the Left
Transfer Wheelchair to Tub Bench - Move to the Right

Bed Mobility
Bridging
In and Out of Bed - Toward Your Left Side
In and Out of Bed - Toward Your Right Side
Bed Mobility
In and Out of Bed - Toward Your Left Side After Hip Surgery
In and Out of Bed - Toward Your Right Side After Hip Surgery
In and Out of Bed - Toward Your Left Side Log Rolling
In and Out of Bed - Toward Your Right Side Log Rolling
In and Out of Bed - Toward Your Weaker Left Side
In and Out of Bed - Toward Your Weaker Right Side
In and Out of Bed with Help - Toward Their Left Side
In and Out of Bed with Help - Toward Their Right Side
Move From One Side of the Bed to the Other
Move Up in Bed
Roll onto Your Left Side
Roll onto Your Right Side

Dressing
Dressing Tips
Put On and Take Off a T-shirt - Arm-Head-Arm
Put On and Take Off a T-shirt - Head-Arm-Arm
Put On and Take Off a T-shirt Using a Dressing Stick
Put On and Take Off an Ankle-Foot Brace - Method 1 - Left Leg
Put On and Take Off an Ankle-Foot Brace - Method 1 - Right Leg
Put On and Take Off an Ankle-Foot Brace - Method 2 - Left Leg
Put On and Take Off an Ankle-Foot Brace - Method 2 - Right Leg
Put On and Take Off an Open Front Shirt - One Shoulder Drape
Put On and Take Off an Open Front Shirt - Two Shoulder Drape
Put On and Take Off an Open Front Shirt Using a Dressing Stick
Put On and Take Off Pants - Method 1
Put On and Take Off Pants - Method 2
Put On and Take Off Pants, Socks, and Shoes Lying Down
Put On and Take Off Pants, Socks, and Shoes Using a Stool
Put On and Take Off Pants Using a Dressing Stick or Reacher
Put On and Take Off Socks and Shoes Using Dressing Tools
Put On and Take Off Support Stockings Using a Buttonhook

Dressing with One Hand
Put On a T-shirt with One Hand - Left Side Weakness
Put On a T-shirt with One Hand - Right Side Weakness
Put On an Open Front Shirt with One Hand - Left Side Weakness
Put On an Open Front Shirt with One Hand - Right Side Weakness
Put On and Take Off a Bra with One Hand - Left Side Weakness
Put On and Take Off a Bra with One Hand - Right Side Weakness
Put On Pants with One Hand - Left Side Weakness
Put On Pants with One Hand - Right Side Weakness
Occupational Therapy Toolkit
ADL and Mobility Handouts - Section 2

Dressing with One Hand
- Put On Socks and Shoes with One Hand - Left Side Weakness
- Put On Socks and Shoes with One Hand - Right Side Weakness
- Take Off a T-shirt with One Hand - Left Side Weakness
- Take Off a T-shirt with One Hand - Right Side Weakness
- Take Off an Open Front Shirt One Hand - Left Side Weakness
- Take Off an Open Front Shirt One Hand - Right Side Weakness
- Take Off Pants with One Hand - Left Side Weakness
- Take Off Pants with One Hand - Right Side Weakness
- Tie Shoes with One Hand - Left Side Weakness
- Tie Shoes with One Hand - Right Side Weakness

Health Management
- Health Care Team
- Tips for Making and Keeping Health Care Visits

Meal Prep and Clean Up
- Manage Kitchen Tasks with a Walker
- Manage Kitchen Tasks with a Wheelchair
- Meal Prep with One Hand

Stairs
- Down a Curb or Single Step Using a Walker
- Down Steps with a Rail Using a Cane
- Down Steps with a Rail Using a Closed Walker
- Down Steps with a Rail Using an Open Walker
- Down Steps without a Rail Using a Cane
- Up a Curb or Single Step Using a Walker
- Up Steps with a Rail Using a Cane
- Up Steps with a Rail Using a Closed Walker
- Up Steps with a Rail Using an Open Walker
- Up Steps without a Rail Using a Cane

Toileting
- Tips for Using the Bathroom
- Toileting Options - Therapist Resource

Transfers
- Car Transfer
- Get Down On the Floor
- Get Up From the Floor
- Sit-Pivot Transfer - Move to the Left
- Sit-Pivot Transfer - Move to the Right
- Sit-Pivot Transfer with Help - Move to Their Left
- Sit-Pivot Transfer with Help - Move to Their Right
- Sitting Down
- Sitting Down - After Hip Surgery
Transfers
Standing Up
Standing Up - After Hip Surgery
Standing Up with Help
Stand-Pivot Transfer with Help - Move to Their Left
Stand-Pivot Transfer with Help - Move to Their Right
Transfer Board - Move to the Left
Transfer Board - Move to the Right

Wheelchair Mobility
Wheelchair Mobility
Amputation
Care of the Prosthesis and Lower Limb Coverings
Care of the Prosthesis and Upper Limb Coverings
Care of Your Residual Limb
Phantom Limb Pain
Position Your Residual Limb - AKA
Position Your Residual Limb - BKA

Cardiopulmonary
Breathing Distress - Causes and Tips to Prevent
Breathing Distress Control
Cardiac Precautions for Exercise - Therapist Resource
Controlled Cough
Daily Tasks after Open Heart Surgery
Deep (Diaphragmatic) Breathing
Fatigue Journal
How to Check Your Heart Rate
Postural Drainage Positions
Pursed Lip Breathing
Sternal (Breastbone) Precautions
Tips to Conserve Energy
Tips to Conserve Energy with Meal and Home Management
Tips to Conserve Energy with Self Care Activities

Cognition and Visual Perception
Daily Journal
Functional Cognitive Activities - Therapist Resource
Tips to Improve Attention
Tips to Improve Figure Ground
Tips to Improve Form Constancy
Tips to Improve Left Side Awareness
Tips to Improve Memory
Tips to Improve Memory - External Memory Aids
Tips to Improve Memory - Internal Memory Aids
Tips to Improve Motor-Planning
Tips to Improve Right Side Awareness
Tips to Improve Thinking Skills
Tips to Improve Vision
Tips to Improve Visual-Motor Integration
Tips to Improve Visual Spatial Relations

Low Vision
Eating
Functional Reading - Therapist Resource
Functional Vision - Therapist Resource
Low Vision
- Improve Your Other Senses
- Kitchen Tasks
- Label and Mark Items
- Leisure
- Lighting
- Medication
- Money
- Moving Around
- Reading, Writing, Phone Use
- Reduce Glare
- Safety
- Use Contrast

Neurological
- Cognitive Strategies to Improve Movement
- Handwriting - Component Exercises
- Handwriting - Cursive Exercises
- Handwriting - Pangrams
- Position in Bed - Left Side Weakness
- Position in Bed - Right Side Weakness
- Position Your Arm - Left Side Weakness
- Position Your Arm - Right Side Weakness
- Protect the Arm - Left Side Weakness
- Protect the Arm - Right Side Weakness
- Tips to Manage Action Tremors
- Writing Tips for Parkinson’s

Other
- Anxiety Journal
- Arm Measurement
- Checking Your Skin
- Good Sleep Habits
- Leg Measurement
- Leisure Activities
- Pain Journal
- Position in Bed to Reduce Pressure
- Pressure Relief
- SMART Goals
- SMART Goals - Action Plan
- Stress Management
- Stress Management - Relaxation Tools
- Stress Management - Stress Journal
- Tips to Prevent Lower Body Lymphedema
Other
Tips to Prevent Upper Body Lymphedema

Orthopedic
Arthritic Joint Changes and Deformities - Therapist Resource
Body Mechanics
Daily Tasks after Back (Lumbar) Surgery
Daily Tasks after Neck (Cervical) Surgery
Daily Tasks after Shoulder Surgery
Desensitization
Edema (Swelling) Control of the Arm(s)
Edema (Swelling) Control of the Leg(s)
Good Posture
Hip Dislocation Precautions - Posterior Approach
Joint Protection and Energy Conservation for Wheelchair Users
Joint Protection for Arthritis
Scar Massage
Spinal Surgery Precautions
Splint/Brace Instructions
Superficial Cold
Superficial Heat

Safety
Don’t Let a Fall Get You Down - Booklet
Don’t Let a Fall Get You Down - Post-Fall Survey
Fall Triggers and Tips to Prevent Falls - Therapist Resource
Foot Care and Foot Safety
Home Safety and Performance Assessment - Therapist Resource
Using a Front Wheel Walker (2 wheels)
Using a Rollator (3 or 4 wheels)
Using a Standard Walker (no wheels)
Using a Wheelchair
OCCUPATIONAL THERAPY TOOLKIT

Therapeutic Exercise Handouts - Section 4

Balance
- Balance Exercise Guidelines
- Balance Exercises - Sitting
- Balance Exercises - Standing
- Core Exercise Guidelines
- Core Exercises - Back Muscles
- Core Exercises - Pelvic Muscles
- Core Exercises - Stomach Muscles
- Exercise Ball Guidelines
- Exercise Ball - Back Muscles
- Exercise Ball - Pelvic Muscles
- Exercise Ball - Stomach Muscles

Condition Specific
- Burn Injury Stretches - Guidelines
- Burn Injury Stretches - Face
- Burn Injury Stretches - Neck
- Burn Injury Stretches - Trunk
- Burn Injury Stretches - Shoulder
- Burn Injury Stretches - Elbow, Forearm, Wrist
- Burn Injury Stretches - Left Hand
- Burn Injury Stretches - Right Hand
- Burn Injury Stretches - Hip and Knee
- Burn Injury Stretches - Ankle and Toes
- Elbow Stretches for Below Elbow Amputation
- Exercise Tips for Amyotrophic Lateral Sclerosis
- Exercise Tips for Arthritis
- Exercise Tips for Diabetes
- Exercise Tips for Guillain-Barré Syndrome
- Exercise Tips for Multiple Sclerosis
- Exercise Tips for Myasthenia Gravis
- Exercise Tips for Orthopedic Conditions
- Exercise Tips for Post-Polio Myelitis Syndrome
- Exercise Tips for Renal Conditions
- Mastectomy Exercises
- Osteoporosis Extension Exercises
- Parkinson’s Disease Exercises
- Pulmonary Exercises

Elbow, Forearm, Wrist
- Elbow, Forearm and Wrist Active Range of Motion
- Elbow, Forearm and Wrist Strength Exercises
- Elbow, Forearm and Wrist Stretches
- Elbow, Wrist and Hand Active Exercises
Elbow, Forearm, Wrist
- Forearm and Wrist Active Range of Motion
- Forearm and Wrist Strength Exercises
- Forearm and Wrist Stretches

Hand
- Fine Motor Activities
- Finger and Thumb Strength Exercises - Left
- Finger and Thumb Strength Exercises - Right
- Finger and Thumb Stretches and Active Range of Motion - Left
- Finger and Thumb Stretches and Active Range of Motion - Right
- Flexor Tendon Glides
- Median Nerve Glides
- Putty Exercises

Lower Body
- Ankle and Foot Active Range of Motion
- Ankle and Foot Isometric Exercises
- Ankle and Foot Strength Exercises
- Ankle and Foot Stretches
- Hip and Knee Exercises - Lying
- Hip and Knee Exercises - Seated
- Hip and Knee Exercises - Standing
- Low Back Stretches
- Stretch Band Exercises - Legs
- Thigh Stretches

Miscellaneous
- Face and Neck Active Range of Motion
- General Exercise Tips
- Passive Range of Motion
- Pelvic Floor (Kegel) Exercise
- Physical Activity Plan
- Walking Guidelines

Neck
- Neck Active Range of Motion
- Neck Isometric Exercises
- Neck Strength Exercises
- Neck Stretches

Shoulder
- Dowel Exercises - Supine
- Dowel Exercises - Upright
- Pendulum Exercises - Left
- Pendulum Exercises - Right
- Shoulder Active Range of Motion
Shoulder
- Shoulder and Hand Active Exercises
- Shoulder and Rotator Cuff Active Exercises - Left
- Shoulder and Rotator Cuff Active Exercises - Right
- Shoulder and Rotator Cuff Exercises Free Weight - Left
- Shoulder and Rotator Cuff Exercises Free Weight - Right
- Shoulder and Rotator Cuff Exercises Stretch Band - Left
- Shoulder and Rotator Cuff Exercises Stretch Band - Right
- Shoulder Blade Exercises
- Shoulder, Elbow, and Hand Active Exercises
- Shoulder Isometric Left - Seated
- Shoulder Isometric Left - Standing
- Shoulder Isometric Right - Seated
- Shoulder Isometric Right - Standing
- Shoulder Passive and Active-Assisted Range of Motion - Left
- Shoulder Passive and Active-Assisted Range of Motion - Right
- Shoulder Pulley Exercises - Left
- Shoulder Pulley Exercises - Right
- Shoulder Stretches - Left
- Shoulder Stretches - Right

Stroke
- Level 1 Activities - Help Your Weaker Arm Move
- Level 2 Activities - Use Your Weaker Arm to Passively Hold
- Level 3 Activities - Use Your Weaker Arm to Actively Move & Hold
- Level 4 Activities - Use Your Weaker Arm with Gross Motor
- Level 5 Activities - Use Your Weaker Arm with Fine Motor
- Passive Range of Motion - Left Side Weakness
- Passive Range of Motion - Right Side Weakness
- Scapular Mobility and Strength Exercises - Left Side Weakness
- Scapular Mobility and Strength Exercises - Right Side Weakness
- Self Range of Motion - Left Side Weakness
- Self Range of Motion - Right Side Weakness
- Use Your Left Arm to Actively Move and Hold
- Use Your Left Arm to Passively Hold
- Use Your Left Arm with Assisted Guiding
- Use Your Left Arm with Gross Motor Activities
- Use Your Left Arm with Self-Guiding
- Use Your Right Arm to Actively Move and Hold
- Use Your Right Arm to Passively Hold
- Use Your Right Arm with Assisted Guiding
- Use Your Right Arm with Gross Motor Activities
- Use Your Right Arm with Self-Guiding
Stroke
  Weight Bearing Exercises - Left Side Weakness
  Weight Bearing Exercises - Right Side Weakness

Upper Body
  Arm Cycle
  Cool-Down Stretches
  Gross Motor Tasks
  Nerve Flossing - Median
  Nerve Flossing - Radial
  Nerve Flossing - Ulnar
  Posture Exercises
  Stretch Band Exercises - Arms
  Upper Body Active Range of Motion
  Upper Body Exercises - Hand Weights
  Upper Body Exercises - Using a Ball
  Upper Body Strength Activities
  Warm-Up Exercises
Surgical procedures include radical, modified or simple mastectomies, lymph node dissection, and breast reconstruction.

**Impairments and Functional Limitations:**
ADL, IADL, productivity and leisure impairment
Impaired ROM and strength of trunk and upper extremity
Post-op pain and edema
Potential secondary complications - nerve damage, lymphedema

**Occupational Therapy Preoperative Intervention:**
- Baseline measurements (ROM, strength, sensation, and limb measurements)
- Provide education about post-operative activity limitations, precautions and exercise.
- Instruct in good posture during activities.
- Educate about lymphedema prevention or risk factor reduction.
- Teach strategies to incorporate wellness and health management routines into daily activities.
- Educate about breast cancer and the availability of community resources. Encourage participation in support groups.

**Occupational Therapy Postoperative Intervention:**
ADL, IADL, productivity and leisure training
- Treat underlying limitations to safety and independence.
- Recommend and/or provide adaptive equipment as needed. Train in lower body ADL equipment following reconstructive surgery involving abdominal muscles.
- Instruct in good posture during activities.
- Instruct in protective use of affected arm for the first 2 weeks. Avoid overuse, avoid sleeping on the same side as the surgery, avoid lifting more than 5 pounds, keep tasks below 90-degrees of shoulder motion. Instruct to elevate arm several times a day to manage post-op edema. *Unless otherwise instructed by surgeon.*

Train in safe and efficient functional mobility (sit to stand, bed mobility skills, transfers, ambulation and wheelchair mobility) during ADL and IADL tasks.

**Pain self-management**
- Coordinate medication peak with exercise and activity.
- Teach stress management and relaxation techniques.
- Use pillows to help arm and shoulder relax in sitting and lying down.
- Instruct in good posture during activities.
Occupational Therapy Toolkit

Breast Cancer - Pre and Postoperative Management

**Occupational Therapy Postoperative Intervention:**
Provide graded UE activities and exercises. *Follow the referring surgeon’s specific guidelines for ROM and progression of exercises.*
- AROM exercises starting 2-3 days after surgery. Progress exercises until full ROM restored. Begin strengthening 4-6 weeks after surgery.
- Instruct in deep (diaphragmatic) breathing exercises and lateral expansion.
- Instruct in a walking program.

Provide surgical scar management at 3-4 weeks post surgery (mobilization, massage, desensitization, stretching exercises).

Provide education about lymphedema prevention and risk factor reduction.

**Patient and Caregiver Handouts:**
Arm Measurement
Deep (Diaphragmatic) Breathing
Edema (Swelling) Control of the Arm(s)
Good Posture
Mastectomy Exercises
Scar Massage
Tips to Prevent Lower Body Lymphedema
Walking Guidelines

**Additional Treatment Guides:**
Cancer
Health Management
Dressing includes selecting appropriate clothing for the time of day, weather, and occasion. Obtain clothing from closets and drawers. Dress and undress using open-front garments (shirt/blouse, robe, sweater, jacket, winter coat), pullover garments (sweatshirt, t-shirt, sweater), bra, pants, skirts, suspenders, necktie, scarf, gloves, underwear, socks, pantyhose, nylons, shoes, boots, slippers, support and anti-embolism stockings. Open and close fasteners, (snaps, buttons, hooks, zippers, Velcro). Managing personal devices (hearing aids, eyeglasses, contacts, AFO, hand splint, back brace, slings, and prosthetics).

Impairments and Functional Limitations:
- Impaired shoulder strength and/or ROM
- Impaired hand strength, ROM, sensation and/or coordination
- Impaired LE function
- Limited activity tolerance and endurance
- Impaired sitting balance
- Impaired standing balance
- Pain
- Visual perceptual impairment
- Cognitive impairment

Occupational Therapy Intervention:
Apply different approaches for solving difficulties with dressing.
- Remediate underlying limitations to safety and independence. Physical impairments (muscle weakness, impaired hand function, limited ROM, paralysis, incoordination, impaired balance, fatigue, dyspnea, abnormal tone, tremor), sensory impairment (impaired sensation, low vision, hard of hearing, vestibular, pain), behavioral, cognition, perception.
- Train in compensatory techniques (safety techniques, one-handed techniques, pacing, energy conservation, joint protection, body mechanics, breathing techniques, low vision techniques, cognitive/perceptual compensation, step-by-step instructions, task segmentation, task sequencing, backward chaining, verbal and physical cueing, hand-over-hand guiding).
- Train in the use of adaptive equipment and assistive devices (buttonhook, Velcro closures on shoes, elastic shoelaces, long handled shoehorn, dressing stick, reacher, sock aid, zipper pull, loops on pants, loops on socks, labeling system for identifying clothes, and specialized clothing).
- Provide environmental modifications and adaptations (avoid storing items on the floor, lower closet poles, organize clothes within easy reach, and label drawers using picture or words).
Occupational Therapy Intervention:
Apply different approaches for solving difficulties with dressing (continued).

- Instruct in activity modification.
  - Change the task (place the weaker extremity into the garment first, dress in a supine position).
  - Eliminate part or all of the task (choose garments that are easy to put on and remove such as: elastic waist pants, loose fitting tops, pullover tops, suspenders instead of a belt, Velcro shoes, slip on shoes, front hook bra, sports bra, camisole).
  - Have someone else do part or the entire task.

Train in safe and efficient functional mobility (sit to stand, bed mobility skills, transfers, standing, ambulation, and wheelchair mobility) during dressing tasks.

Provide caregiver/family education and training.

Patient and Caregiver Handouts:
Adaptive Equipment for Dressing
Dressing Tips
Tips to Conserve Energy with Self Care Tasks
Dressing Techniques - Lower Body
  - Put On and Take Off an Ankle-Foot Brace - Method 1 - Left Leg
  - Put On and Take Off an Ankle-Foot Brace - Method 1 - Right Leg
  - Put On and Take Off an Ankle-Foot Brace - Method 2 - Left Leg
  - Put On and Take Off an Ankle-Foot Brace - Method 2 - Right Leg
  - Put On and Take Off Pants - Method 1
  - Put On and Take Off Pants - Method 2
  - Put On and Take Off Pants, Socks, and Shoes Lying Down
  - Put On and Take Off Pants, Socks, and Shoes Using a Stool
  - Put On and Take Off Pants Using a Dressing Stick or Reacher
  - Put On and Take Off Socks and Shoes Using Dressing Tools
  - Put On and Take Off Support Stockings
Dressing Techniques - One Handed
  - Put On a T-shirt with One Hand - Left Side Weakness
  - Put On a T-shirt with One Hand - Right Side Weakness
  - Put On an Open Front Shirt with One Hand - Left Side Weakness
  - Put On an Open Front Shirt with One Hand - Right Side Weakness
  - Put On and Take Off a Bra with One Hand - Left Side Weakness
  - Put On and Take Off a Bra with One Hand - Right Side Weakness
  - Put On Pants with One Hand - Left Side Weakness
  - Put On Pants with One Hand - Right Side Weakness
  - Put On Socks and Shoes with One Hand - Left Side Weakness
  - Put On Socks and Shoes with One Hand - Right Side Weakness
Patient and Caregiver Handouts:
Dressing Techniques - One Handed
  - Put On Socks and Shoes with One Hand - Right Side Weakness
  - Take Off a T-shirt with One Hand - Left Side Weakness
  - Take Off a T-shirt with One Hand - Right Side Weakness
  - Take Off an Open Front Shirt One Hand - Left Side Weakness
  - Take Off an Open Front Shirt One Hand - Right Side Weakness
  - Take Off Pants with One Hand - Left Side Weakness
  - Take Off Pants with One Hand - Right Side Weakness
  - Tie Shoes with One Hand - Left Side Weakness
  - Tie Shoes with One Hand - Right Side Weakness
Dressing Techniques - Upper Body
  - Put On and Take Off a T-shirt - Arm-Head-Arm
  - Put On and Take Off a T-shirt - Head-Arm-Arm
  - Put On and Take Off a T-shirt Using a Dressing Stick
  - Put On and Take Off an Open Front Shirt - One Shoulder Drape
  - Put On and Take Off an Open Front Shirt - Two Shoulder Drape
  - Put On and Take Off an Open Front Shirt Using a Dressing Stick
  - Using a Buttonhook
Impairments and Functional Limitations:
ADL, IADL, productivity and leisure impairment
Functional mobility impairment
Slow walking speed
Muscle weakness
Limited activity tolerance and endurance
Impaired balance
Impaired vision and hearing
Chronic pain
Advanced age, 80+
Co-occurring conditions - functional decline, falls, fear of falling, delirium, dementia, dizziness, depression, incontinence, sleep disorders, malnutrition, dehydration, pressure ulcers, sarcopenia, hypothermia, and hyperthermia

Assessments:
6 Minute Walk Test (Enright et al., 1998)
Berg Balance Scale (Berg 1989)
Geriatric Depression Scale (Parmelee & Katz 1990)
Mini Mental State Exam MMSE (Folstein 1975)
Nutrition Screening Initiative (White et al., 1992)
Physical Performance Test (Lusardi et al., 2004)
Timed 10-Meter Walk Test (Bohannon et al., 1996)

Occupational Therapy Intervention:
ADL, IADL, productivity and leisure training
- Treat underlying limitations to safety and independence - physical (strength, hand function, ROM, coordination, balance, endurance, abnormal tone), sensory (tactile, vision, hearing, vestibular, pain), behavioral, cognition and/or perceptual.
- Address nutritional health - oral health, ability to feed self, ability to shop, access kitchen, prepare nutritious meals and get adequate hydration. Encourage to eat with others.
- Address ability to drive safely. Provide referral to driving rehab specialist and/or explore alternative transportation options.

Train in safe and efficient functional mobility (sit to stand, bed mobility skills, transfers, standing, ambulation and wheelchair mobility) during ADL and IADL tasks.
- Train in the safe and correct use of assistive devices and adaptive equipment (walkers, canes, sliding boards, bed transfer handles, leg lifters, wheelchairs) as appropriate.
Occupational Therapy Toolkit
Frailty and Debility

Occupational Therapy Intervention:
Provide an individualized exercise program that includes progressive endurance, strengthening and flexibility activities.
   Recommend the use of an activity tracker.
   Instruct patient and caregiver in a written home exercise program.

Provide functional balance activities to increase balance confidence with ADL tasks.

Provide pain management.

Provide a fall prevention program that includes balance, coordination and agility training and education about fall risk and prevention strategies.

Complete a comprehensive, performance-based home assessment. Recommend and/or provide modifications, adaptive equipment and/or assistive technology.

Educate about the negative effects of prolonged sitting and bed rest. Educate regarding hypothermia and hyperthermia prevention.

Patient and Caregiver Handouts:
Balance Exercise Guidelines
Balance Exercises - Sitting
Balance Exercises - Standing
Hip and Knee Exercises - Seated
Putty Exercises
Stretch Band Exercises - Arms
Upper Body Exercises - Hand Weights
Walking Guidelines

Additional Treatment Guides:
Activities of Daily Living
Balance
Chronic/Persistent Pain Syndrome
Fall Risk Assessment and Prevention
Functional Mobility
Home Safety and Modification
Pressure Ulcers
Rest and Sleep
Therapeutic Exercise
Urinary Incontinence

© 2018 Cheryl Hall | www.ottoolkit.com
Impairments and Functional Limitations:
ADL, IADL, productivity and leisure impairment
Functional mobility impairment
Limited UE and LE ROM
Impaired hand function
Muscle weakness
Limited activity tolerance and endurance
Joint pain, stiffness and inflammation that increase with activity
Postural changes
Impaired balance
Co-occurring conditions - joint replacements, joint contractures, fall risk

Assessments:
Manual Ability Measure (MAM) (Chen & Bode 2010)

Occupational Therapy Intervention:
ADL, IADL, productivity and leisure training

- Train in the use of adaptive equipment to improve grasp (built-ups), improve ease of performance (electric can opener), compensate for range of motion loss (dress stick), compensate for weak/absent muscle (universal cuff, jar opener), prevent stress on joints (lever door handle), prevent prolonged grasp (book holder, Dycem), prevent accidents (bath seat, nonskid rugs).
- Instruct in pacing, energy conservation, joint protection, good posture and body mechanics.
- Instruct in balancing self-care, productivity, play and rest.

Train in safe and efficient functional mobility (sit to stand, bed mobility skills, transfers, standing, ambulation and wheelchair mobility) during ADL and IADL tasks.

Provide an individualized exercise program that includes low-impact, low-intensity endurance, strengthening, and flexibility activities. Goal is to maintain strength and joint mobility. Use yoga blocks, wrap foam around weights, use weight lifting gloves to improve grip.

- Acute flare-ups - instruct in performing gentle passive or active ROM exercises 3-4 times daily followed by icing for 15 minutes.
- Non-acute joints - instruct in the use of superficial heat, gentle isometric strengthening in pain free range.

Provide splints to rest inflamed joints, maintain correct joint alignment, improve functional control and support weak or painful joints.
Osteoarthritis - Conservative Management

**Occupational Therapy Intervention:**
Instruct in pain self-management strategies.
- Coordinate medication peak with exercise and activity.
- Apply superficial heat and cold.
- Practice deep (diaphragmatic) breathing and other relaxation techniques.
- Use self-massage techniques (foam rollers, tennis ball, rolling massage stick).
- Use positioning devices (seat cushions, back supports, pillows, splints).
- Instruct in using a pain journal.
- Utilize the problem solving process to identify ways to manage pain.

Provide pain management.
- Transcutaneous electrical nerve stimulation (TENS)
- Manual therapy techniques (massage, myofascial and soft tissue mobilization)
- Elastic therapeutic tape

Complete a comprehensive, performance-based home assessment. Recommend and/or provide modifications, adaptive equipment and/or assistive technology.

Provide education about fall risk and prevention strategies.

Teach strategies to incorporate wellness and health management routines into daily activities.

Educate patient and caregivers about arthritis and the availability of community resources. Encourage participation in support groups. Encourage participation in community, evidence-based exercise programs: (Active Living Every Day, Arthritis Foundation Aquatic Program, Arthritis Foundation Exercise Program, Enhance Fitness, Fit and Strong, Walk with Ease).

**Patient and Caregiver Handouts:**
Deep (Diaphragmatic) Breathing
Exercise Tips for Arthritis
Joint Protection for Arthritis
Pain Journal
Splint/Brace Instructions
Superficial Cold & Heat
Tips to Conserve Energy
Upper Body Active Range of Motion

**Additional Treatment Guides:**
Health Management
Impairments and Functional Limitations:
ADL, IADL, productivity and leisure impairment
Impaired functional mobility
Hemiparesis or hemiplegia of the upper and lower extremities
Spasticity
Impaired postural control and balance
Impaired coordination
Limited activity tolerance and endurance
Impaired sensation
Central post-stroke pain
Language disorders (aphasia, dysarthria, dyspraxia)
Dysphasia
Visual and perceptual impairment
Cognitive impairment
Behavioral disorders (depression, lability, low frustration tolerance, impulsivity)
Bladder and bowel dysfunction
Potential secondary complications - biomechanical shoulder pain (biceps tendonitis, rotator cuff pathology, adhesive capsulitis, complex regional pain syndrome), edema (upper and lower extremity), pressure ulcers, joint contractures, depression, DVT’s, aspiration pneumonia, seizures, fall risk

Assessments and Rating Scales:
Arnadottir OT-ADL Neurobehavioral Evaluation (A-ONE) (Arnadottir 1990)
Assessment of Motor and Process Skills (AMPS) (Fisher et al., 1993)
Chedoke-McMaster Stroke Assessment Scale (Gowlan et al., 1993)
Canadian Occupational Performance Measure (Law et al., 2014)
Modified Ashworth Scale (Bohannon & Smith 1987)
Stroke Impact Scale (Duncan et al., 1999)

Occupational Therapy Intervention:
ADL, IADL, productivity and leisure training

- Safely incorporate affected extremity with all activities.
- Use compensatory techniques (task modification, one-handed techniques, hand-over-hand guiding, task segmentation, end chaining).
- Recommend and/or provide adaptive equipment: Rocker knife, inner lip plates, holders for books or playing cards, stabilizing devices for activities that traditionally require two-handed performance (e.g., cutting vegetables, cleaning dentures), and keyboards adapted for one-handed computer use.
- Instruct in pacing and energy conservation strategies.

Train in safe and efficient functional mobility (sit to stand, bed mobility skills, transfers, standing, ambulation and wheelchair mobility) during ADL and IADL tasks.
Occupational Therapy Toolkit

Stroke

Occupational Therapy Intervention:
Provide functional posture and balance activities.
- Focus on stability, weight shifting, body awareness, trunk rotation & elongation.
- Have patient turn toward affected side when reaching.
- Set up room so the patient must physically move to their affected side.
- Provide reach-grasp-hold-release activities, in standing and sitting, with and without support.

Provide activities and exercises to uninvolved side to prevent loss of ROM and strength.

Restore function of the upper extremity. Use a variety of remedial approaches according to the needs of the patient.
- Provide early mobilization and positioning.
- Incorporate task-oriented/task specific training.
- Provide opportunities to use and move the arm throughout the day (use of ball bearing feeder, mobile arm support, overhead suspension sling, functional splinting such as wrist cock-up and dynamic finger extension splints).
- Provide modified constraint-induced movement therapy (mCIT) or constraint-induced movement therapy (CIMT).
- Instruct an arm and hand strengthening exercise program.
- Provide functional electrical stimulation (FES) for wrist extensors during functional tasks and/or shoulder subluxation.
- Instruct in a functional dynamic orthoses (SaeboFlex, SaeboReach).
- Use cognitive strategies (mirror therapy, mental imagery/practice, action observation).
- Provide sensory re-education intervention.
  - Avoid increasing spasticity.
  - Encourage use of extremity in functional tasks.
  - Provide weight-bearing activities.
  - Provide sensory stimulation activities.
  - Teach compensatory techniques and safety measures for sensory deficits.

Test bath/dish water temperature using the intact extremity or a thermometer. Lower the water heater temperature to 120°F (48°C). Avoid cuts and burns in kitchen. Avoid using heating pads on impaired extremities. Wear gloves to prevent frostbite. Avoid going barefoot. Wear sunscreen to prevent sunburn. Use intact hand to handle sharp kitchen utensils. Use vision to compensate to sensory loss. Perform skin checks.
Stroke

Occupational Therapy Intervention:
Restore function of the upper extremity. Use a variety of remedial approaches according to the needs of the patient (continued).

- Prevent or manage hand edema.
  - Teach active self-range of motion exercises in elevation.
  - Position hand in elevation
  - Use retrograde massage.
  - Use gentle grade 1-2 mobilizations for the hand and fingers.
  - Provide a compression garment.
- Manage spasticity.
  - Prevent contractures.
  - Provide PROM, SROM and stretching exercises.
  - Instruct in positioning in bed, chair and during mobility.
  - Select use of splinting to protect hand/wrist: resting hand splint for flaccid to mild tone, spasticity splint for moderate to high tone.
  - Post-Botox injections, provide strengthening/FES to antagonists, stretching and splinting
- Prevent or manage shoulder pain.
  - Avoid overaggressive therapy and overhead pulleys.
  - Mobilize and strengthen the scapula.
  - Position arm with cubital fossa facing up, 45° shoulder abduction and comfortable shoulder external rotation.
  - Provide firm support devices such as lap trays and arm troughs.
  - Range of motion exercises should not move the shoulder beyond 90-degrees of flexion and abduction unless there is upward rotation of the scapula and external rotation of the humeral head.
  - Manage acquired orthopedic conditions (biceps tendonitis, impingement syndrome, adhesive capsulitis, rotator cuff pathologies, CRPS-1).
  - Use functional electrical stimulation (FES) for shoulder subluxation.

Instruct patient and caregivers in care of the affected extremity.
- Prevent and control of edema.
- Teach passive ROM exercises.
- Teach self-ROM exercises.
- Protect and support the affected arm during bed mobility, transfers and ambulation using slings, a pocket, or hand hold and during wheelchair use by using a hemi tray or arm trough.
- Teach proper positioning in bed, chair and wheelchair.
- Instruct in care and use of positioning splints.

Teach compensatory strategies for perceptual deficits.
**Occupational Therapy Toolkit**

**Stroke**

**Occupational Therapy Intervention:**
Provide cognitive retraining and train in the use of compensatory strategies.

Provide education about fall risk and prevention strategies.

Community reintegration:
- Complete a comprehensive, performance-based home assessment. Recommend and/or provide modifications, adaptive equipment and/or assistive technology.
- Encourage leisure and social participation.
- Address ability to drive safely. Provide referral to driving rehab specialist and/or explore alternative transportation options.
- Recommend vocational rehabilitation strategies to assist with return to work if appropriate.

Teach strategies to incorporate wellness and health management routines into daily activities.

Educate patient and caregivers about stroke, availability of community resources. Encourage participation in support groups.

**Patient and Caregiver Education Handouts:**
- Edema (Swelling) Control of the Arm(s)
- Edema (Swelling) Control of the Leg(s)
- In and Out of Bed - Toward Your Weaker Left Side
- In and Out of Bed - Toward Your Weaker Right Side
- Position in Bed - Left Side Weakness
- Position in Bed - Right Side Weakness
- Position Your Arm - Left Side Weakness
- Position Your Arm - Right Side Weakness
- Protect the Arm - Left Side Weakness
- Protect the Arm - Right Side Weakness
- Splint/Brace Instructions
- Stress Management
- Tips to Conserve Energy
- Using a Front Wheel Walker (2 wheels)
- Using a Wheelchair

**Patient and Caregiver Exercise Handouts:**
- Balance Exercise Guidelines
- Balance Exercises - Sitting
- Balance Exercises - Standing
- Fine Motor Activities
Patient and Caregiver Exercise Handouts:
Gross Motor Tasks
Level 1 Activities - Help Your Weaker Arm Move
Level 2 Activities - Use Your Weaker Arm to Passively Hold
Level 3 Activities - Use Your Weaker Arm to Actively Move and Hold
Level 4 Activities - Use Your Weaker Arm with Gross Motor
Level 5 Activities - Use Your Weaker Arm with Fine Motor
Passive Range of Motion - One Side Weakness
Posture Exercises
Putty Exercises
Scapular Mobility and Strength Exercises
Self Range of Motion
Stretch Band Exercises - Arms
Upper Body Active Range of Motion
Upper Body Exercises - Hand Weights
Upper Body Exercises - Using a Ball
Upper Body Strength Activities
Use Your Arm to Actively Move and Hold
Use Your Arm to Passively Hold
Use Your Arm with Assisted Guiding
Use Your Arm with Gross Motor Activities
Use Your Arm with Self-Guiding
Weight Bearing Exercises

Additional Treatment Guides:
Activities of Daily Living
Apraxia
Balance
Chronic/Persistent Pain Syndrome
Cognition
Depression
Fall Risk Assessment and Prevention
Functional Mobility
Handwriting
Health Management
Home Safety and Modification
Therapeutic Exercise
Visual Perception
Put On a T-shirt with One Hand
Left Side Weakness

1. Place the shirt face down on your lap with the collar at your knees.

2. Gather the hole of the left sleeve and place on your lap.

3. Lean forward and place your left arm into the sleeve hole.

4. Pull the sleeve up your arm and over your elbow.
OCCUPATIONAL THERAPY TOOLKIT

Put On a T-shirt with One Hand
Left Side Weakness

5. Place your right arm into the right sleeve hole.

6. Grasp the shirt and pull it over your head.

7. Push the shirt over your left shoulder.

8. Adjust the shirt, by pulling it down in the front and the back.
Putty Exercises

Do the checked exercises ______ times per day, ______ days a week.

☐ Shape the putty into a ball. Squeeze the putty with all your fingers.
   Do ______ sets of ______.

☐ Shape the putty into a ball. Hold the putty in your hand. Press your thumb into the putty.
   Do ______ sets of ______.

☐ Shape the putty into a ball. Pinch the putty between your thumb and the side of your index finger.
   Do ______ sets of ______.

☐ Shape the putty into a ball. Hold your fingers straight and your knuckles bent. Squeeze the putty between your fingers and thumb.
   Do ______ sets of ______.
Putty Exercises

Do the checked exercises ______ times per day, ______ days a week.

☐ Flatten the putty into a pancake. Place your fingers into the center of the putty and spread the putty outward.

Do ______ sets of ______.

☐ Flatten the putty into a pancake. Spread the putty apart using two fingers at a time.

Do ______ sets of ______.

☐ Shape the putty into a sausage. Squeeze the putty between your fingers.

Do ______ sets of ______.

☐ Shape the putty into a sausage. Pinch the putty between your thumb and each finger.

Do ______ sets of ______.
Pace yourself and rest often.

**Eating**
- Eat slowly and fully chew food.
- Eat six small meals a day instead of three big meals.
- Do not eat gas-forming food. They can bloat your stomach and make it harder to breathe. These include peas, melons, turnips, onions, cauliflower, apples, corn, broccoli, cucumbers, cabbage, beans, and Brussels sprouts.

**Grooming**
- Sit to shave, comb your hair and brush your teeth.
- Support your elbows on the counter while grooming or shaving.
- Use an electric toothbrush and an electric razor.
- Wash your hair in the shower. Keep your elbows low and your chin tucked.

**Bathing and Showering**
- If you use oxygen during exercise, then use it when you take a shower.
- Allow plenty of time.
- Gather all the items you will need.
- Sit to bathe and dry. Use a bath chair in the shower.
- Limit bending. Use a long brush to wash your back and feet. Use a hand-held shower to rinse.
- Use a shower caddy and soap on a rope. Place soap in a nylon stocking tied to the shower seat or soap dish.
- Have a towel or robe nearby. Use hand towels because they are not as heavy. Put on a terry cloth robe to dry off.

**Dressing**
- Allow plenty of time.
- Gather all the items you will need.
- Sit to dress and undress.
- Limit bending. Put your foot on your other knee or use long-handled tools to put on pants, shoes and socks.
- Wear clothes that are easy to put on. Try slip-on shoes, stretch waistbands, and one size larger.
- Do not wear tight clothes like belts, ties, tight socks, girdles and bras.
1. Face the wall and hold onto the grab bar.  
2. Step into the tub with your left leg.  
3. Lift your right leg into the tub.  
4. Sit down on the shower chair. Reverse the steps to get out.
Use your left arm as much as you can during the day. Here are a few ideas.

- Use your left hand to hold your plate while eating.
- Hold a sheet of paper with your left hand while writing with your right hand.
- Hold a washcloth with your left hand and apply soap with your right hand.
- Hold your toothbrush with your left hand and apply toothpaste with your right hand.
1. Posicione su camiseta boca abajo en su regazo con el cuello de la camisa en las rodillas.

2. Agarre la apertura de la manga izquierda y colóquela en su regazo.

3. Inclínese hacia adelante y coloque el brazo izquierdo en la apertura de la manga.

4. Suba la manga sobre el brazo y sobre el codo.
5. Coloque el brazo derecho en la apertura de la manga derecha.
6. Agarre el tejido y tire de la camiseta sobre su cabeza.
7. Empuje el tejido de la camiseta sobre el hombro izquierdo.
8. Ajuste la camiseta, tirando de ella hacia abajo por delante y por detrás.
Ejercicios de Masilla Terapéutica

Haga los ejercicios marcados ______ veces al día, _____ días a la semana.

☐ Flexión de los Dedos
Moldee la masilla en forma de pelota.
Apriete la masilla con su mano completa.

Complete _____ series de ______.

☐ Flexión del Pulgar
Moldee la masilla en forma de pelota.
Agarre la masilla con la mano. Presione con el pulgar hacia el interior de la masilla.

Complete _____ series de ______.

☐ Pinza Lateral
Es la que emplearía para usar una llave.
Moldee la masilla en forma de pelota.
Pellizque la masilla entre el pulgar y el lateral del dedo índice.

Complete _____ series de ______.

☐ Pinza Lumbrical
Moldee la masilla en forma de pelota. Estire los dedos y doble los nudillos. Apriete la masilla entre sus dedos y pulgar.

Complete _____ series de ______.
Ejercicios de Masilla Terapéutica

Haga los ejercicios marcados _____ veces al día, _____ días a la semana.

☐ **Extensión de los Dedos**
Aplane la masilla en forma de tortita. Coloque la punta de los dedos juntos en la masilla, y expanda la masilla hacia fuera.

Complete _____ series de ______.

☐ **Abducción de los Dedos**
Aplane la masilla en forma de tortita. Expandca la masilla usando dos dedos a la vez.

Complete _____ series de ______.

☐ **Aducción de los Dedos**
Moldee la masilla en forma de salchicha. Apriete la masilla entre los dedos.

Complete _____ series de ______.

☐ **Pinza por Oposición Terminal** *(punta con punta)*
Moldee la masilla en forma de salchicha. Pellizque la masilla entre el pulgar y cada uno de los dedos individualmente.

Complete _____ series de ______.
Conservación de Energía en Actividades de Autocuidado

Comer
- Coma seis comidas pequeñas al día en lugar de tres comidas grandes. Esto disminuye la energía necesaria para comer y digerir la comida.
- Coma lentamente y mastique completamente la comida.
- Evite comidas que produzcan gases, lo que puede hinchar el abdomen y dificultar la respiración, como guisantes, melones, nabos, cebollas, coliflores, manzanas, maíz, brócoli, pepinos, repollos, judías, y coles de Bruselas.

Aseo
- Siéntese para afeitarse, peinarse y lavarse los dientes
- Apoyo sus codos en una superficie mientras se arregla o se afeita.
- Use un cepillo de dientes eléctrico y una máquina de afeitar eléctrica.
- Lávese el pelo en la ducha. Mantenga los codos bajos y la barbilla hacia abajo.

Bañarse y Darse una Ducha
- Si su doctor le ha prescrito oxígeno para usarlo durante el ejercicio, úselo cuando se dé una ducha.
- Reúna todos los artículos que necesitará, incluyendo la ropa.
- Siéntese para quitarse la ropa, bañarse, secarse y vestirse. Use una silla de baño en la ducha.
- Evite estirarse demasiado. Use una esponja con mango largo para lavarse la espalda y los pies. Use una alcachofa de ducha de mano para enjuagarse.
- Use una estantería para la ducha y una pastilla de jabón con cuerda, o coloque el jabón en una media de nylon y átela a la silla de ducha o jabonera.
- Tenga una toalla o albornoz cerca. Considere usar toallas de mano pues no son tan pesadas. Póngase una bata de felpa para evitar la necesidad de secarse.

Vestirse
- Antes de comenzar, reúna toda la ropa, zapatos, etc.
- Siéntese para vestirse.
- Evite inclinarse cruzando una pierna sobre la otra, use un taburete o equipo adaptado con mangos alargados para ponerse pantalones, zapatos y calcetines.
- Lleve calzado fácil de poner, cómodo y sin cordones; use un calzador de mango alargado. Use cinturas elásticas y camisas una talla más grande.
- Evite la ropa restrictiva, como las medias apretadas, las fajas, y sujetadores. Use tirantes si los cinturones son demasiado restrictivos.
Transferirse a la Bañera Usando un Asiento de Bañera (pierna izquierda, derecha, sentarse)

1. Mirando a la pared, agarre el asidero.
2. Entre en la bañera con su pierna izquierda.
3. Levante su pierna derecha hasta entrar en la bañera.
Es muy importante que utilice el brazo afectado todo lo posible durante las actividades diarias. Aquí hay algunos ejemplos sobre cómo puede hacerlo.

- Use la mano izquierda para estabilizar el plato mientras come.
- Estabilice una hoja de papel con la mano izquierda mientras escribe con la derecha.
- Estabilice el paño con la mano izquierda mientras aplica jabón con la mano derecha.
- Estabilice el cepillo de dientes con la mano izquierda mientras usa la derecha para aplicar pasta de dientes.