**Definitions** 

chievements

# it's out of your scope I can't pay for this! The prosthetic socket is causing me pain!

Better communication between the patient and the clinicians lead to effective care of the patient.

**Prosthesis** – Artificial replacement of a missing body part

Orthosis – A device to correct improper anatomy

ADL – Activities of Daily living

**QOL** – Quality of Life

Transtibial – Below knee amputation

Transfemoral – Above knee amputation

#### > Investigate the scope of practice of each relevant clinical profession involve with rehabilitation.

- > Create case studies to illustrate a patient's experience, the treatment process, and realistic results.
- > Create handouts, brochures, and presentations.
- >Translate all developed materials to Spanish

## **Educational Support for Orthotic and Prosthetic Training Programs in Latin America and United States**

Spring 2006 Fall 2006 Spring 2007 Fall 2007 Spring 2008 Fall 2008 **Pathology Biomechanics Anatomy Pathology** Age relations **Fabrication** 

## What does it take to regain a normal life?



I can perform the surgery and recommend a prosthetic device



O&P Technician

I can fabricate the recommended device for you



**Therapist** 

I can help reduce the pain and get you back to your activity level

I can help you find



funding for your device **Financial** 

Representative

Please ease my pain

Please help me restore my daily activities

How can I pay for these devices?



# Approacht

#### Research / presentation:

Patient	Physicians	Physical Therapist	O & P Professional	Business
Personal Responsibility		Assist determine the direction	Fabrication	Justification statement, medicare etc
Physical limitations	Understand pt. expectations	Patient education	Patient education ( with Physical Therapist)	Financial for O&P devices based on ADL
Good working relationship	What devices are available	Planning rehab schedule	Repair and modify	Maintenance and upkeep

### Field Trip / Device Fabrication



## Case Studies—Cooperation between specialists for treating:

## Pediatric

Name: Miguel Alejandro Torres.

Age/ethinity 7yrs old, Colombian

Medical History: Congenital transfemoral amputation congenital heart defect

Family Background: Native speaker of Spanish, parents have limited time to attend to child's needs

Life Expectation: wants to attend school and start playing soccer again.

## Adult

Name: Leslie Johnson

Age: 30 yrs old

Medical History: IED caused a trans femoral amputation in the left leg and a trans tibial in the right.

Family Background: Lt. In the US army), married, expecting children, addicted to pain medication, PTSD, possibly suicidal

Life Expectation: capable of running, rock climbing, football, work, and go to school

## Geriatric

Name: Gertrude

Age/ethinity: 75 yr old, polish descendent from Germany

Medical History: Diabetes caused trans-tibial amputation in left leg, obesity, high BP osteoporosis, bilateral knee replacements.

Family Background: a widow with 1 daughter and 4 uncooperative sons

Life Expectation: Live the rest of her life being independent, have a high OOL, and write a cook book

### **Spring 2009:**

### **Teamwork Approach to** Rehabilitation

The case studies will foster understandings of:

- 1. Paying for the prosthesis.
- 2. Capability and limitations of each clinical professional involved.
- 3. The patient is often plagued by multiple ailments.
- 4. Complications will go untreated if one clinician fails to notice, acknowledge, and communicate it to the proper clinician.
- >Assess the costs, procurements, and insurance reimbursements of implementing prosthetic and orthotic devices.
- Design a business plan to sustain educational programs at Centro Don Bosco, Bogota and Joliet Junior College, IL, USA.







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