

※ 考生請注意：本試題不可使用計算機。請於答案卷(卡)作答，於本試題紙上作答者，不予計分。

1. 解釋名詞：(每題 5%，共 25%)

- (1). closed task
- (2). contextual interference
- (3). traumatic axonal injury
- (4). part-whole practice
- (5). place-and-hold exercise

2. 試述頭部外傷個案可能遭遇之注意力問題，並分別說明職能治療師如何進行相關的評估與介入。
(15%)

3. 針對罹患類風濕性關節炎 (Rheumatoid arthritis) 之輕度認知功能障礙 (mild cognitive impairment) 的個案，試述社區職能治療介入的重點。(15%)

4. 針對上肢近端及遠端之布朗斯壯運動恢復期 (Brunnstrom stage of motor recovery) 皆為第五期的 55 歲男性小腦中風個案，試述職能治療師如何協助促進其居家職能活動的表現，需至少列舉三項活動並具體說明。(15%)


5. Mrs. V is a 36-year-old right dominant female who sustained a right distal humerus fracture and underwent a delayed open reduction internal fixation with plating. ROM limitations and strength limiting ability to use the right upper extremity in self-care were identified. Mrs. V worked as a hair stylist and was very concerned about being able to return to her work.

依據以上描述之個案情況，職能治療師如何運用臨床推理擬定兩項需優先處置的治療目標和介入計畫；並說明所依據的理論或參考架構。(15%)

6. 請閱讀下列研究摘要，並回答問題。(15%)

Original Research Articles

An RCT to Treat Learning Impairment in Traumatic Brain Injury: The TBI-MEM Trial

Neurorehabilitation and
Neural Repair
1-12
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DOI: 10.1177/1545968315604395
nrr.sagepub.com


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Abstract

Objective. To examine the efficacy of the modified Story Memory Technique (mSMT) to improve learning (ie. acquisition) and memory in participants with TBI. The mSMT is a behavioral intervention that teaches context and imagery to facilitate learning within 10 sessions over 5 weeks. **Methods.** A total of 69 participants with moderate-severe Traumatic Brain Injury (TBI), 35 in the treatment group and 34 in the placebo control group, completed this double-blind, placebo-controlled randomized clinical trial. A baseline neuropsychological assessment was administered, including questionnaires assessing everyday memory. Repeat assessments were conducted immediately posttreatment and 6 months following treatment. Participants in the treatment group were randomly assigned to a booster session or a non-booster session group after completion of treatment with the mSMT to examine the efficacy of monthly booster sessions in facilitating the treatment effect over time. **Results.** The treatment group demonstrated significant improvement on a prose memory task relative to the placebo group posttreatment ($\eta^2 = 0.064$ medium effect). Similar results were noted on objective measures of everyday memory, specifically prospective memory (Cohen's $w = 0.43$, medium effect), and family report of disinhibition in daily life ($\eta^2 = 0.046$, medium effect). **Conclusion.** The mSMT is effective for improving learning and memory in TBI. **Classification of evidence.** Based on widely accepted classification systems for treatment study design, this study provides class I evidence that the mSMT behavioral intervention improves both objective memory and everyday memory in persons with TBI over 5 weeks. Thus, this study extends the evidence for efficacy of the treatment protocol to a sample of persons with TBI.

- (1). 簡述本研究的實驗設計和研究證據等級 (level of evidence)。(5%)
- (2). 試述本研究之訓練方式屬於何種職能治療的介入模式，並說明理由。(5%)
- (3). 試述本研究的主要結果，以及其臨床應用價值與建議。(5%)