

1. 名詞解釋 (每題 5 分, 共 40 分)

- (1) Post-traumatic amnesia
- (2) Dermatome
- (3) Soft end feel
- (4) Glasgow coma scale
- (5) Morning stiffness
- (6) Metabolic equivalent (MET)
- (7) Progressive resistive exercise
- (8) Deep partial-thickness burn

2. 試對下列病人擬定具體的治療目標, 設計治療計畫或功能性治療活動, 並說明所依據之理論或學理基礎。(每題 20 分, 共 40 分)

- (1) Mr. H is a 52-year-old man with a history of hypertension who was found unresponsive at home by his wife and diagnosed with a large right middle cerebral artery infarction. During his acute hospital stay, an occupational therapist evaluated Mr. H and reported inconsistent levels of awareness, no spontaneous movement on the left side, and signs of left spatial neglect. Ten days post stroke, Mr. H was able to sit in a wheelchair for 1-hour periods, follow one-step commands consistently, and perform simple grooming and bed mobility tasks with minimal assistance. He was referred to OT to address deficits in self-care, decreased awareness of left visual spatial field, and management of the left arm and to assist in determination of optimal discharge plans.
- (2) Ms. K, a 42-year-old housewife diagnosed with relapsing-remitting multiple sclerosis 5 years prior to her first visit to OT. She reported the following major problems: (a) severe fatigue, which had increased in the past year and resulted in her inability to do her normal household tasks, take care of her kids, and perform her ADL; (b) a marked increase in lower extremity weakness, with decreased ability to perform tasks requiring prolonged walking or standing; and (c) a feeling of heaviness and stiffness in upper extremities and decreased manual dexterity.

(背面仍有題目, 請繼續作答)

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3. 請閱讀下列文章摘要，並回答問題。(每題 10 分，共 20 分)

(1) Article 1:

Fasoli, S. E., Trombly, C. A., Tickle-Degnen, L., & Verfaellie, M. H. (2002). Effect of instructions on functional reach in persons with and without cerebrovascular accident. *American Journal of Occupational Therapy, 56*, 380-390.

OBJECTIVE. Verbal instructions comprise an important element of clinical practice. However, their effectiveness in promoting movement organization in persons with cerebrovascular accident (CVA) has not been well investigated.

METHOD. A counterbalanced, repeated-measures design was used to examine the effects of externally focused (task-related) versus internally focused (movement-related) instructions on movement kinematics during three functional reaching tasks. Participants included 16 persons with stroke who were able to perform the tasks with their affected arm and 17 age-matched adults without neurological impairments.

RESULTS. Significantly shorter movement time and greater peak velocity were evident when reaching under the external-focus condition of all tasks than for the internal-focus condition.

CONCLUSION. One clinical implication is that internally focused instructions can contribute to slower and less forceful reach in adults with and without CVA. This research reinforces the need for therapists to consider their use of instruction during the evaluation and treatment of movement disorders.

請舉例說明何為 externally focused instructions, internally focused instructions 及闡述根據此研究結果的可能的臨床建議 (clinical implications)。

(2) Article 2:

Case-Smith, J. (2003). Outcomes in hand rehabilitation using occupational therapy services. *American Journal of Occupational Therapy*, 57, 499-506.

OBJECTIVE. The purpose of this study was to measure functional outcomes after outpatient occupational therapy for clients who had upper-extremity injury and surgery or both.

METHODS. A sample of 33 clients referred to occupational therapy outpatient intervention was recruited from five clinics in Ohio. The Canadian Occupational Performance Measure (COPM) was used to guide the occupational therapy sessions and to measure outcomes. The Disability of Arm, Shoulder, and Hand (DASH) questionnaire and the Short Form 36 (SF-36) were also administered to the clients pre and post 6 to 8 weeks of hand rehabilitation services. Two to three months after discharge, the clients responded by the telephone to the Community Integration Questionnaire.

RESULTS. The clients received a mean of 13 hours of outpatient occupational therapy services and received no other rehabilitation service. Functional performance gains following 6 to 8 weeks of services were significant (COPM; $t(32) = -11.5, p < .001$; $t(32) = -11.31, p < .001$; DASH; $t(32) = 9.22, p < .001$; $t(32) = -9.02, p < .001$). Effect sizes on the COPM and DASH ranged between 1.43 and 2.52. Progress in the clients' goals was moderately correlated to progress in functional measures.

CONCLUSION. Clients with upper-extremity injury or surgery made strong, positive gains in functional measures following client-centered occupational therapy services. The COPM was the most sensitive to client change, followed by the DASH, and then the SF-36.

此實驗之研究結果可以讓我們下結論說「病人的進步是因為接受 OT 治療」嗎？原因為何？