

How Bond University Doctor of Physiotherapy Students have been prepared for their Neurorehabilitation Clinical Placement

Previous learning: In addition to completing previous coursework in the core areas of Cardiorespiratory and Musculoskeletal physiotherapy, students have also completed the following coursework subject:

• Physiotherapy: Neurological and Rehabilitation (PHTY71-405)

The main knowledge and skills covered in this subject are outlined below.

The main knowledge areas covered	The main practical skills covered
 Common neurological disorders, with particular focus on: Stroke Traumatic brain injury Parkinson's disease Spinal cord injury Multiple sclerosis Vestibular disorders Polyneuropathy (GBS and CIPD) Functional Neurological disorder Non-neurological disorders that are often encountered within the rehabilitation setting, including: Amputees Older adults with / without vestibular disorders Falls Symptomatology and neurological impairments following CNS disorders and their clinical implications inclusive of: 	 Identification of key information within the client's medical files and history taking Physical examination for a client with a neurological disorder, including utilisation of appropriate outcome measures (impairment, function and condition based). Application of clinical reasoning including formulating a prioritised problem list and identifying goals of treatment with the client. Recording patient specific information and planning treatment using the ICF framework Observation and analysis of functional movement, with emphasis on the identification of abnormal movement patterns, in clients with acquired brain injury / disease, spinal cord injury, neuropathies and lower limb amputations. Retraining and facilitation of functional movements including: Bridging / rolling Side-lying to sitting
Muscle weakness and motor fatigueTone / Spasticity	 Sitting alignment / balance Standing-up and sitting down
 Visual, sensory and vestibular deficits 	 Standing alignment & balance

- Unilateral Spatial Neglect
- Lateropulsion
- Cerebellar Ataxia
- Motor Apraxia
- Secondary complications
- Foundational principles underlying neurological and rehabilitative physiotherapy including:
 - Neuroanatomy / neurophysiology
 - Recovery mechanisms following damage to the CNS
 - Neuroplasticity and an understanding of how physiotherapists can influence it
 - o Motor control, motor learning and motor skill acquisition
- Normal components of functional movement
- Two-dimensional gait analysis and disordered gait
- The evidence base for treatment selection including knowledge of relevant Clinical Practice Guidelines. Common outcome measures used within rehabilitation settings for neurological and aged clients
- Basic wheelchair prescription
- Role of the multi-disciplinary team in the management of neurological and rehabilitative clients

- Walking and gait re-education
- High level mobility including running
- Upper limb function
- Transfers
- Methods and techniques to elicit muscle activity, facilitate movement return and prescribe therapeutic exercise.
- Retraining movement with the use of task and context specific practice, applying knowledge of the principles of motor learning.
- Formulating appropriate and thorough exercise programs for neurological, aged and amputee clients, facilitating independent practice, self-management, physical activity and health promotion.
- Examination and management of a patient with a vestibular disorder with particular focus on management of BBPV and unilateral vestibular hypofunction.
- Examination and management of patient with a lower limb amputation.