

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

What were the main knowledge areas covered?	What were the major practical skills covered?
<ul style="list-style-type: none"> • Knowledge of common neurological disorders, with particular focus on: <ul style="list-style-type: none"> ○ Cerebral Vascular Accident ○ Traumatic Brain Injury ○ Parkinson’s Disease ○ Spinal Cord Injury ○ Multiple Sclerosis ○ Vestibular Disorders • Knowledge of symptomatology following CNS disorders • Principles of recovery following damage to the CNS • Principles of neuroplasticity and an understanding of how physiotherapists can influence it • Principles of motor learning and motor skill acquisition • Knowledge of the normal components of functional movement • Two-dimensional gait analysis • Knowledge of the various impairments that can present in a neurological disorder and their clinical implications • The evidence base for treatment selection including knowledge of the National Stroke Foundation “Guidelines for Stroke Rehabilitation and Recovery” • Knowledge of common outcome measures used within rehabilitation settings for neurological and geriatric clients • Knowledge of basic wheelchair prescription • Knowledge of non-neurological disorders that are often encountered within the rehabilitation setting, including: <ul style="list-style-type: none"> ○ Amputees ○ Older adults with / without Vestibular disorders ○ The geriatric faller 	<ul style="list-style-type: none"> • History taking and physical examination for a client with a neurological disorder • Formulating a prioritised problem list and identifying goals of treatment • 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 • Retraining of functional movements including: <ul style="list-style-type: none"> ○ Bridging / Rolling ○ Side-lying to sitting ○ Sitting alignment / balance ○ Standing-up and sitting down ○ Standing alignment and balance ○ Walking ○ Upper limb function ○ Transfers • Methods and techniques to elicit muscle activity and facilitate movement return • Retraining movement with the use of task and context specific practice • Formulating appropriate and thorough exercise programs for neurological and geriatric clients and facilitating independent practice • Observation and analysis of the gait pattern of an amputee patient • Examination and management of a patient with a vestibular disorder with VOR dyscontrol and/or BPPV

