

**Salem State College
Schools of Human Services
Occupational Therapy Department**

**Pre-Competency Review Workbook
For the Salem State College Occupational Therapy Program**

COMPETENCIES FOR PHYSICAL DYSFUNCTION	STUDENT OBJECTIVES	REVIEW SOURCE
1. Medical and Professional Terminology: Uniform Terminology in OT Medical Terminology Prefixes and suffixes, abbreviations and acronyms	1. Students should be able to identify and utilize OT uniform terminology in oral and written communications 2. Students should be able to identify common medical terms by prefix and suffix	OT Student Primer, Chapter 16 Sladyk,k. (1997), Slack Medical Terminology review software in computer lab
2. Identify the components of the skeletal system, types of joints, joint movements. 3. Measurement of joint motion 4. Therapeutic Exercises for ROM and joint flexibility 5. Identify the types of muscle, basic kinesiology, skeletal muscle, prime movers, muscle innervations, and identify the terminology used in muscle strength and motor function assessment. 6. Identify the components of the nervous system and neuromuscular function	1. Locate the bones of the body and identify the body joints 2. Identify the types of joints 3. Identify and demonstrate the movements of all UE and LE joints presented. 4. Demonstrate the movements (ROM) of all joints presented 5. Goniometry: identify the purposes and terminology used in measurement: a. Define active, passive, and active-assisted movement b. Demonstrate procedure of goniometer use 6. Demonstrate PROM, AAROM, and AROM exercises 7. Identify the UE agonist and antagonist by muscle group 8. Distinguish between isolated muscle control and substitution 9. Identify the principle actions of muscles a. Flexor b. Extensor c. Abductor d. Adductor e. Levator f. Depressor g. Supinator h. Pronator i. Rotator	Pedretti, L. and Early, M. (2001),Occupational therapy practice skills for physical dysfunction. Mosby

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COMPETENCIES	STUDENT OBJECTIVES	REVIEW SOURCES
<p>7. Describe normal neuromuscular function and discuss factors that contribute to dysfunction.</p> <p>8. Define the purpose and terminology associated with Manual Muscle Testing</p> <p>9. Task Analysis</p> <p>10. Reflexes and Reactions</p> <p>11. Postural Control and Balance</p> <p>12. Soft tissue integrity- Edema</p>	<p>1. Explain muscle tone and describe characteristics of normal and abnormal muscle tone</p> <p>2. Define gross motor control and fine motor control</p> <p>3. Identify motor dysfunction caused by CNS deficits and PNS deficits</p> <p>4. Identify the purpose of MMT</p> <p>5. Identify the grades of Muscle strength</p> <p>6. Analyze motions in a selected ADL task.</p> <p>7. Identify the joint motions, grasps and prehension patterns used for each step of the task</p> <p>8. Identify and define reflexes</p> <p>9. Define postural control</p> <p>10. Define static and dynamic balance</p>	<p>Pedretti, Chapter 22, and 31</p>
<p>Theoretical Foundations for OT Treatment- Occupational</p> <p>10. Therapy's Domain of Concern</p> <p> A. Performance Areas</p> <p> B. Performance Components</p> <p> C. Performance Context</p> <p>11. Frames of References vs. Practice Models</p> <p> A. Human Occupation</p> <p> B. Practice Models</p> <p> C. Treatment Continuum</p>	<p>11. Define occupational performance</p> <p>12. Identify the 3 major performance areas</p> <p>13. Identify the 3 major performance components</p> <p>14. Identify the 2 aspects of performance context.</p> <p>15. Define Frames of Reference</p> <p>16. Define Human Occupation and Identify the major concepts of this model</p> <p>17. Define practice models</p> <p> a. Biomechanical Approach</p> <p> b. Sensorimotor</p> <p> c. Rehabilitative</p> <p>18. Define the 4 stages of treatment continuum</p>	
<p>12. Identify and demonstrate an understanding of the OT assessment, evaluation, treatment planning and documentation</p>	<p>19. Identify these 8 steps</p> <p> a. Referral</p> <p> b. Screening</p> <p> c. Evaluation</p> <p> d. Tx Planning</p> <p> e. Tx Implementation</p> <p> f. Re-evaluation</p> <p> g. Discharge planning</p> <p> h. Termination of Services</p>	

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COMPETENCIES- PHYSICAL DYSFUNCTION	STUDENT OBJECTIVES	REVIEW SOURCE
<p>13. Define and contrast the role of the OTR and the OTA in the 8 step OT process</p> <p>14. Differentiate between Evaluation and Assessment</p> <p>15. Documentation</p> <p>16. Describe the Treatment Planning Process</p>	<p>20. Describe and contrast the roles of the OTR and the OTA with regards to each stage in the process.</p> <p>21. Demonstrate an understanding of the following terms:</p> <ul style="list-style-type: none"> a. Chart Review b. Interview c. Observation d. Standardized Tests e. Non-Standardized Tests f. SOAP notes <p>22. Describe the purpose of documentation and the legal aspects.</p> <p>23. Discuss the following therapeutic Mechanisms</p> <ul style="list-style-type: none"> a. Purposeful Activity b. Development c. Therapeutic Rapport d. Teaching/Learning Process e. Individual lifestyle Consideration 	
<p>17. Describe the causes, disease process, clinical picture, and treatment of the major selected medical conditions.</p>	<p>24. Cardiovascular Disease</p> <ul style="list-style-type: none"> a. Angina b. ASHD c. MI d. CHF <p>25. Infectious Diseases</p> <ul style="list-style-type: none"> a. Meningitis b. Encephalitis c. Tuberculosis d. HIV/AIDS <p>26. Respiratory Conditions</p> <ul style="list-style-type: none"> a. Asthma b. Emphysema c. Chronic Bronchitis d. COPD <p>27. Burns</p> <ul style="list-style-type: none"> a. Degree of burn b. Role of OT <p>28. Diabetes Mellitus</p>	

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COMPETENCIES- PHYSICAL DYSFUNCTION	STUDENT OBJECTIVES	REVIEW SOURCE
<p>17. (Continued) Describe the causes, disease process, clinical picture, and treatment of major selected medical conditions</p>	<p>29. Cancer</p> <p>30. Neurological Disabilities</p> <ul style="list-style-type: none"> a. Cerebral Palsy b. C.V.A. (left vs. right) c. Head Trauma d. Peripheral Nerve Injury e. Muscular Atrophy & Dystrophy f. Multiple Sclerosis g. Amylotrophic Lateral Sclerosis h. Spinal Cord Injuries i. Spina Bifida j. Poliomyelitis k. Guillain Barre Syndrome l. Parkinson’s Disease m. Alzheimer’s Disease <p>31. Orthopedic Conditions</p> <ul style="list-style-type: none"> a. Fractures (types of UE) <p>32. UE Orthopedics</p> <ul style="list-style-type: none"> a. Cumulative Trauma disorder b. Dupytrene’s c. Reflex Sympathetic Dystrophy <p>33. Spinal Deformities</p> <ul style="list-style-type: none"> a. Lordosis b. Kyphosis c. Scoliosis <p>34. Amputations</p> <ul style="list-style-type: none"> a. UE vs. LE b. Congenital vs. acquired <p>35. Arthritis</p> <ul style="list-style-type: none"> a. Osteo b. Rhuematoid 	

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COMPETENCIES- MENTAL HEALTH	STUDENT OBJECTIVES	REVIEW SOURCE
1. Define the role Occupational therapy practice has had in the evolution of humane treatment in psychiatry. 2. Define the Scope of OT Tx Settings	3. Identify the role occupational therapy in mental health treatment from the late 1800's to the present 4. Acknowledge and understand the importance of the history and philosophical base of OT. 5. Define each treatment setting, type of clients served, services provided, and OT role for the following <ul style="list-style-type: none"> a. Inpatient Psychiatric Units. b. Day Programs c. Residential Setting d. Partial Hospitalization 	Early, M.B. (2000) Mental Health Concepts and Techniques for the OTA, Lippincott Williams and Wilkins. Early, Chapter 1 Early, Chapter 7
3. Identify the major theories currently guiding OT practice in mental health treatment	6. Define each major theory, and relevance to occupational therapy. <ul style="list-style-type: none"> a. Object relations b. Defense mechanisms c. Developmental theory d. Client centered therapy e. Behavioral theories f. Neuroscientific theories 	Early, Chapters 2 & 6
4. Occupational Therapy Models.	7. Compare and Contrast the Occupational therapy models. <ul style="list-style-type: none"> a. Human Occupation b. Cognitive Disability c. Sensory Integrative d. Adaptive skills e. Role acquisition and social skills training 	Early, Chapters 3 & 4
8. Treatment Interventions	8. Define and give examples of each. <ul style="list-style-type: none"> a. Use of Self b. Milieu Therapy c. Group Therapy 9. List types of groups an OTA might lead in a psychiatric setting	Early, Chapter 10

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COMPETENCIES- MENTAL HEALTH	STUDENT OBJECTIVES	REVIEW SOURCE
<p>10. Describe the clinical course, etiology and treatment of the major psychiatric disorders.</p> <p>11. Describe how the mental status examination (MSE) is used in making psychiatric diagnoses.</p> <p>12. Describe the usage of the DSM IV</p>	<p>10. Define the following Thought, Affective, Character, Anxiety, and Addiction disorders:</p> <ul style="list-style-type: none"> a. Psychosis b. Schizophrenia c. Depression d. Bi-polar e. Cluster A, B, C disorders f. Anxiety disorders g. Addiction disorders <p>11. Name and define the categories assessed on the MSE.</p> <p>12. List the 5 axes of the DSM IV diagnosis</p>	<p>Early, Chapter 5-11</p>
<p>13. Identify and understand the effects of human behavior in group environments.</p>	<p>13. Describe the basic group concepts and discuss how these concepts are applied in field experiences.</p> <ul style="list-style-type: none"> a. Group Dynamics b. Group Interactions c. Group Models 	<p>Cole, Theories of Group Dynamics</p>

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COMPETENCIES- PEDIATRICS	STUDENT OBJECTIVES	REVIEW SOURCE
<ol style="list-style-type: none"> 1. Identify stages and patterns of normal growth and development. 2. Demonstrate reflexive responses as seen in CNS maturation. Identify motor sensory and perceptual dysfunction. 3. Reflex development and the development of postural control 4. Define Motor Skills 5. Define Perceptual Skills 	<ol style="list-style-type: none"> 1. Identify the major stages of development to the neonatal. <ol style="list-style-type: none"> a. Normal development of the infant, b. Embryo c. Fetus d. Neonate 2. Demonstrate normal reflexes seen in infancy <ol style="list-style-type: none"> a. Explain the purpose of reflexive activity. b. Identify the sequential development of the CNS and the associated level of performance 3. Explain tonicities and types seen in Cerebral Palsy. <ol style="list-style-type: none"> a. Identify conditions that affect coordination b. Identify positions that may be used to normalize tone 4. Define the following <ol style="list-style-type: none"> a. Fine b. Gross c. Oral Motor d. Identify the sequential development of grasp e. Identify problems that interfere with feeding and speech 5. Identify major visual perceptual skills. 	<p>Case-Smith, Jane; Allen; Anne; & Pratt, P. (1996). Occupational Therapy for Children, Mosby.</p> <p>Dacey & Travers, Human Development, Across the Lifespan. (1996). Slack</p> <p>Dacey & Travers, pages 3- 11, 12-24, 79-98</p> <p>Case-Smith, Chapter 4</p> <p>Case- Smith Chapter 11</p> <p>Case- Smith Chapter 6-7</p> <p>Case- Smith Chapter 12, 19</p> <p>Case- Smith Chapter 14</p>
<ol style="list-style-type: none"> 6. Understanding and knowledge of sensory integration and neurodevelopmental treatment techniques for a variety of diagnoses. 	<ol style="list-style-type: none"> 6. Define SI and body scheme <ol style="list-style-type: none"> a. Define areas of SI dysfunction and appropriate treatment modalities b. Discuss effects of sensory motor deficits on occupational performance c. Demonstrate basic knowledge of normal movement and postural development. d. Identify and demonstrate appropriate treatment techniques 	<p>Solomon, J.W. (2000). Pediatric skills for occupational therapy assistants (3rd) Mosby</p> <p>Solomon, Chapter 15-17</p>

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COMPETENCIES- PEDIATRICS	STUDENT OBJECTIVES	REVIEW SOURCE
7. Identify major diagnostic groups and the common areas of deficit-cognitive, sensory, motor, perceptual, and social-emotional.	7. Developmental Disabilities a. Learning disabilities b. Autism c. MR d. Emotional Dysfunction e. Other syndromes	Case-Smith, Chapter 6 Salem State Video Library- Film- “I’m Not Stupid” (dyslexia)
8. Discuss the settings that pediatric occupational therapy would apply	8. Identify 10 service settings and indicate the nature of the method of service delivery.	Case-Smith, Section IV, Chapters 21-31.

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COMPETENCIES-GERIATRICS	STUDENT OBJECTIVES	REVIEW SOURCE
<ol style="list-style-type: none"> 1. Students will identify issues in aging and factors that affect an individual's experience of growing old. 2. Students will be familiar with current biological and social theories of aging 	<ol style="list-style-type: none"> 1. Define the following terms, gerontology, geriatrics and cohort <ol style="list-style-type: none"> a. Discuss the difficulties in defining old age b. Discuss the ways in which cultural, economic, demographic gender and individual personality factors to health care providers working with the elderly. c. Define ageism 2. Describe the characteristics of each of the theories listed <ol style="list-style-type: none"> a. Biological theories b. Social theories c. Disengagement Theory d. Activity Theory e. Continuity Theory f. Life Span Theories g. Erikson's Theories h. Peck's Theories i. Exchange Theories 	<p>Lohman, H.; Padilla, R.L. & Byers-Connon, S. (1998). Occupational Therapy with Elders: Strategies for the COTA. Mosby</p> <p>Sladyk, K. & Ryan, S. (2000). Ryan's Occupational Therapy Assistant: Principles, practice issues and techniques. Slack</p> <p>Lohman, Chapters 1, 12</p> <p>Lohman, Chapters 2</p> <p>Sladyk: Chapter 4</p>
<ol style="list-style-type: none"> 3. Identify the physical, biological and functional changes that occur with aging. 4. Identify the chronic conditions commonly seen in the elderly 	<ol style="list-style-type: none"> 3. Identify the primary and secondary aging changes in each of the major systems listed. <p>Biophysical Aging</p> <ol style="list-style-type: none"> a. Cognition b. Integumentary System c. Cardiopulmonary System d. Skeletal System e. Muscular System f. Neurological System g. Sensory System <p>Psychological Aspects of Aging</p> <ol style="list-style-type: none"> a. Stressors b. Losses c. Emotions 4. Chronic Conditions and factors contributing to dysfunction <ol style="list-style-type: none"> a. Dementia b. Depression d. Anxiety Disorders e. Schizophrenia f. Falls 	<p>Lohman, Chapters 3, 17, 18</p> <p>Lohman, Chapter 4</p> <p>Lohman, Chapter 16, 22, 23</p> <p>Sladyk, Chapter 25, 29</p>