

OCCUPATIONAL THERAPY PRACTICE DEFINITIONS

1. Sensory

- a. Sensory Awareness – Receiving and differentiating sensory stimuli.
- b. Sensory Processing – Interpreting sensory stimuli.
 1. Tactile – Pertaining to the sense of touch on the skin. Knowing what is me; what is not me.
Functional example: *Being able to feel clothing, temperature, and touch.*
 2. Proprioception – Sensations from the muscles and joints. Proprioceptive input tells the brain when and how the muscles are contracting or stretching, and when and how the joints are bending, extending, or being pulled or compressed. This information lets the brain know where the body parts are and how they are moving.
Functional example: *If the proprioception from your hands were not sufficient to tell you what your hands were doing, it would be difficult to button clothes, take something out of a pocket or screw a lid on a jar.*
 3. Vestibular – Interpreting stimuli from the inner ear receptors regarding head position and movement as well as gravity.
Functional example: *Two young children are walking on the narrow curb of a sidewalk. The first child walks gracefully along the curb two or three times and enjoys doing so. The second child has a hard time keeping his balance and repeatedly steps off the curb. The second child is displaying difficulty with his/her vestibular system.*
 4. Visual – Interpreting stimuli through the eyes, including peripheral vision and acuity, awareness of color and pattern.
Functional example: *Being able to see what you are doing.*
 5. Auditory – Interpreting and localizing sounds and discriminating background sounds.
Functional example: *Being able to hear what is being said and the sounds within the environment. You are able to hear the instructions from a teacher and know there is a conversation going on in the hall outside the door and the bell has rung.*
 6. Gustatory – Interpreting tastes.
Functional example: *Being able to taste sweet, sour, salt, and bitter and distinguish these tastes. When taking a bite of dill pickle, you can distinguish that it is sour.*
 7. Olfactory – Interpreting odors.
Functional example: *You are sitting in a classroom and you can smell that someone is making popcorn in the microwave in the student lounge.*
- c. Perceptual Processing – Organizing sensory input into meaningful patterns.
 1. Stereognosis - Identifying objects through the sense of touch.
Functional example: *You are in a room and the lights go out and you can find the flashlight in the toolbox by the sense of touch.*
 2. Kinesthesia – Movement sense.
Functional example: *A person is able to state which direction his/her body part is moving.*

NORTHWOOD TECHNICAL COLLEGE
OCCUPATIONAL THERAPY ASSISTANT
STUDENT POLICIES

3. Pain Response – Interpreting noxious stimuli.
Functional example: *You have touched a hot stove; you feel the pain and respond by pulling your hand away.*
4. Body Scheme – The visual and mental memory image of one’s body.
Functional example: *You draw a picture of a person and can place and label body parts appropriately.*
5. Right-Left Discrimination – Differentiating one side of the body from the other.
Functional example: *When putting on shoes you can put the right shoe on the right foot and the left shoe on the left foot.*
6. Form Constancy – Recognizing forms and objects as the same in various environments, positions, and sizes.
Functional example: *Being able to recognize that a circle is a pizza, a wheel, or a Frisbee. A person will recognize a letter if it is printed, written in cursive and in upper or lower case.*
7. Position in Space – Determining the spatial relationship of figures and objects to self or other forms and objects.
Functional example: *Knowing if an object is on top-under, in-out, beside, up-down etc. You know you set the paper on top of the desk.*
8. Visual-Closure – Identifying forms or objects from incomplete presentations.
Functional example: *The ability to distinguish a pencil from a pen even though both are half covered by a piece of paper.*
9. Figure Ground – Differentiating between foreground and background forms and objects.
Functional example: *Ability to find a white washcloth on a white sheet.*
10. Depth Perception – Determining the relative distance between objects, figures, or landmarks and the observer, and changes in planes of surfaces.
Functional example: *Being able to judge how far away something is. When backing up a car you are aware how far away the car behind you is.*
11. Spatial Relations – Determining the position of objects relative to each other.
Functional example: *Being able to visually locate the bread on the kitchen countertop.*
12. Topographical Orientation – Determining the location of objects and settings and the route to the location.
Functional example: *You are able to get from the classroom to the student lounge without difficulty.*

2. Neuromusculoskeletal

- a. Range of Motion: The extent of movement that occurs at a joint.
 1. AROM: Active Range of Motion. Movement that occurs when a client moves on his/her own power. Muscles are actively contracting.

NORTHWOOD TECHNICAL COLLEGE
OCCUPATIONAL THERAPY ASSISTANT
STUDENT POLICIES

2. PROM: Passive Range of Motion. Movement that occurs when the joint is moved by an external/outside force. A therapist or caregiver. The client is not actively contracting the muscles.
 3. A/AROM: Active Assisted Range of Motion: Movement that occurs as a combination of the client actively moving the joint and an outside force assisting with the movement.
- b. Muscle Tone: Demonstrating a degree of tension or resistance in a muscle at rest and in response to stretch.
1. Hypotonicity or Flaccidity: Decreased muscle tone. Muscle feels soft and offers no resistance to movement.
 2. Hypertonicity or spasticity: Increased muscle tone. Tightness in the muscle and increased resistance to movement.
 3. Rigidity: Increase in muscle tone in both the agonist and antagonist muscles simultaneously.
 - i. Lead pipe rigidity: Constant resistance throughout the joint ROM when a joint is passively moved.
 - ii. Cogwheel rigidity: Rhythmic “give” occurs in the resistance throughout the ROM.
 4. Strength: The maximal contraction of a muscle. The degree of muscle power.
 5. Endurance: Sustaining cardiac, pulmonary, and musculoskeletal exertion over time.
Example: Not becoming short of breath or fatigued with a functional task. A client has functional endurance to complete the activity.
 6. Postural Control: Using righting and equilibrium adjustments to maintain balance during functional movement.
Example: Having good postural control to be able to bend forward from sitting to tie your shoes, and not fall over.
 7. Postural Alignment: Maintaining good posture/alignment among body parts. Includes standing and sitting.

3. Motor

- a. Gross Coordination: Using large muscle groups for controlled, goal-directed movements.
Example: Playing catch with a large ball, playing kick ball, gymnastics.
- b. Fine Motor Coordination: Using small muscle groups for controlled movements, particularly in object manipulation.
Example: Threading a needle, picking up small pegs/objects, buttoning.
- c. Crossing Midline: moving limbs and eyes across the midsagittal plane of the body.
Example: Reaching with your right arm across your body to pick something out of the cupboard on the left side of your body.
- d. Bilateral Integration: Coordinating body sides during activity.
Example: Using both of your hands to complete a craft project.

NORTHWOOD TECHNICAL COLLEGE
OCCUPATIONAL THERAPY ASSISTANT
STUDENT POLICIES

e. Motor Control: Using the body in functional and versatile movement patterns.

Example: *It takes motor control to be able to complete dressing tasks independently.*

f. Praxis: conceiving and planning a new motor act in response to an environmental demand. Also called Motor Planning.

Example: *Skiing for the first time. Going to tennis lessons or golf lessons to work on your swings.*

4. Cognitive Integration and Cognitive Components: The conscious process of awareness and knowledge through perception, memory, and reasoning; mental process of knowing and understanding (thinking).

a. Orientation: The ability to identify person, place, time, and situation.

Example: *The client is oriented to self, hospital he/she is in, the day and time, and the reason he/she is being treated in the hospital.*

b. Attention Span: The ability to focus or attend to a task for a period of time.

Example: *The client is able to attend to meal for 5 minutes without being redirected.*

c. Initiation of Activity: The ability to start a task either physical or mental.

Example: *The client is able to initiate dressing without cues.*

d. Termination of Activity: The ability to end a task either physical or mental at an appropriate time.

Example: *The client is able to terminate stirring the cake batter when it is completely mixed without cues.*

e. Memory: The ability to recall information. Memory is typically categorized as “short term”, “long term”, and “immediate”.

Examples: Short Term Memory: *The client at noon is able to recall what was for breakfast.*

Long Term Memory: *The client is able to recall his/her wedding day which was 30 years ago.*

Immediate Memory: *The client is able to recall directions just given for a task.*

f. Sequencing: The ability to place information and actions in order.

Example: *The client is able to sequence macaroni and cheese (boil water, add noodles, cook, etc.) to complete the task.*

g. Concept Formation: The ability to organize information to form thoughts and ideas.

Example: *The client is able to gather information on gardening and plan the best method of planting and harvesting.*

h. Problem Solving: The ability to recognize and define a problem and the solution for a desired outcome.

Example: *The client is unable to bend to tie his/her shoes –solution is slip on shoes and a long handle shoehorn.*

i. Learning: The ability to acquire new concepts and behaviors.

Example: *The client has learned that a red stop light means “stop”.*

j. Generalization: The ability to apply previously learned concepts and behaviors to new situations.

Example: *The client learned that eating fire is hot because of being burned. When lighting a match, the client recognized the flame was hot without touching it.*