**Provide two clinical case descriptions from clinical experiences with this population (20 pts)**

*A description of at least 2 patient cases, showing/describing where they fit into the spectrum of various developmental areas. Provide Examples of treatment that has or could be done with these patients that would be appropriately tailored to their unique place in the developmental spectrum. Emphasis should be placed on noting the ways therapy interventions, data collection, and communication have been modified to fit each patient case.*

*\*Document any additional learning opportunities experienced in the clinic for this age group. (Observe surgery, give in-service, attend in-service or training, aquatic therapy, etc)*

The first clinical case description is a surgery I observed at the beginning of my third clinical at the VA in Green Bay. There was a 74 year old woman who was having rotator cuff surgery. She had two full tears and two partial tears. The doctor did on open rotator cuff surgery, so I was able to see the head of the humerus, the muscles and the tendons. I was a little surprised that they did this type of surgery with a woman who was this old just because this is a tough recovery. But then we saw her in therapy and she did really well. She was able to push through the pain and she was compliant with her home exercise program. The first part of therapy was focused on manual therapy to stretch those muscles out. It was interesting to see what they do during surgery because now I understand more on why everything is so tight and why they are in so much pain. Then we progressed to AROM and strengthening. I liked being able to see the surgery and see her being discharged from the surgery department and then seeing her in therapy and how she progressed.

The next patient that I worked with from this population was a 77 year old with Parkinson’s who was in therapy to work on balance, gait, and strengthening. We worked on getting the patient to take bigger steps and we did this by putting tap on the ground so she had a visual cue on where she should put her feet. Then we worked on balance exercises and strengthening exercises such as sit to stand. We also did band work to do both strengthening and stretching. The therapist also talked about doing LSVT BIG because he got certified on it and thinks that the patient would benefit from it. I left my clinical before I could observe this but it would have been very interesting to see.