



1. TOMASZ

Lead therapist Danuta Smolağ



EPIKRIZE

Status post craniocerebral injury
S06.2 with subsequent spastic quadriplegic paralysis
G82, subdural hematoma
S.06.5 and supratentorial S06.4 of the right
cerebral hemisphere, evacuated by right-sided
craniotomy; history of abscess and meningitis
G.003; status post ventriculo-peritoneal valve
placement; neglect syndrome



hemiplegia.

Comorbidities: bronchial asthma J45, hepatitis C
B17.1, involuntary urinary incontinence R32, fecal
incontinence R15.

Therapy goals:

- Short-term: increase patient's capacity, increase active uprighting time, regulate muscle tone, improve head and trunk control
- Long-term: gait re-education, increased independence in activities of daily living

Recommended and performed procedures:

Functional testing 93.01 (including 93.0103, 93.0104, 93.0105, 93.0701, 93.0401, 93.1133)

- o Passive active exercises 93.1131
- o Assisted Exercise 93.1132
- o Free active exercises 93.1202
- o Individual general fitness exercises 93.1909
- o Active verticalization 93.2202
- o Exercises using the PNF method 93.3808
- o NDT exercises 93.3807
- o Breathing exercises 93.1812
- o Relaxation exercises 93.1902
- o PIR 93.1912
- o Gait re-education with assistive device 93.592
- o Laser therapy 93.3940
- o High frequency electromagnetic field SIS 93.3982

Therapeutic units within 1 day include the use of:

- Upper and lower limb therapy robot - ReoGO and Reoambulator from Motorika; the first device of its kind in Poland - gait re-education
- Rehabilitation using virtual reality (VR) - Reoambulator Motorika, ReoGo Motorika, C-eye PRO
- SIS deep electromagnetic stimulation
- Rehabilitation with laser devices - unique laser wavelength of 1064nm, previously available only for Nd:YAG
- individual work according to PNF concept , which consists of performing natural movements, running in three planes, similar to the activities of everyday life, learning rotations and transfers, performing functional tasks, that is, in accordance with the movement needs reported by the patient and modeled on the natural movements of a healthy person; therapy through tasks-restoration of motor activity, use of the mechanism of irradiation, that is, transfer of arousal from healthy parts of the body to damaged ones, improvement of motor control by developing trunk stability for limb mobility taking into account the conditions of gravity, therapy on the mat - increasing the ranges of motion in the joints through the use of techniques: hold-relax, tension-relax, strengthening muscles through the use of techniques : dynamic continuous agility, stretch repeated during movement, stretch at the beginning of movement, combination of isotonic contractions

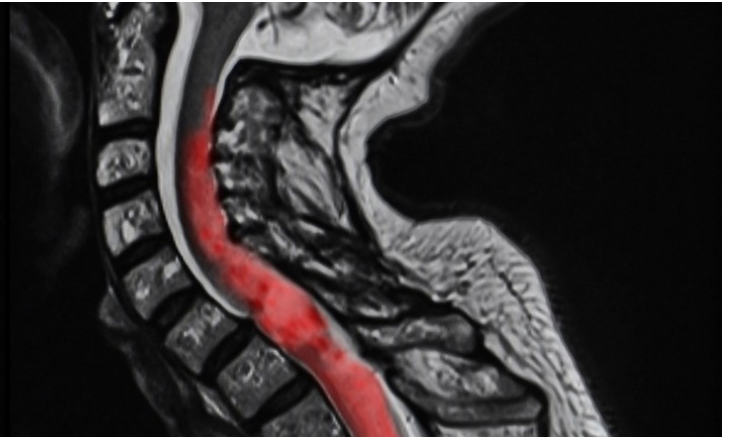
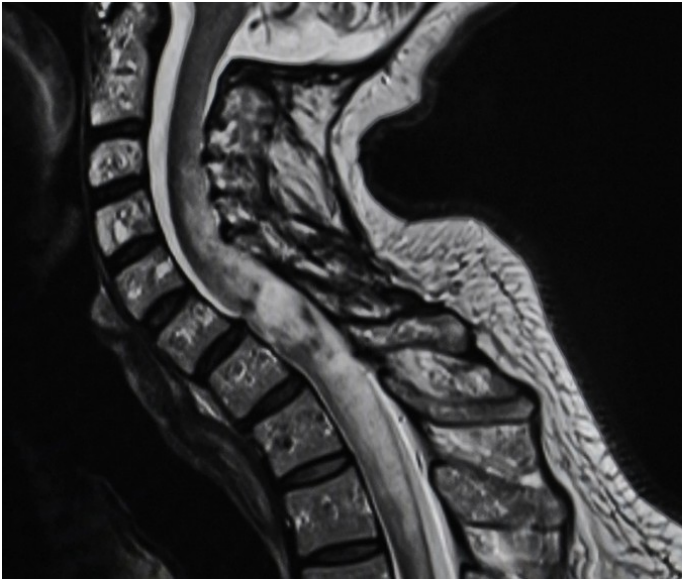
The "end "effect of the therapy:
patient has achieved full independence





2. DIANA

Lead therapists Danuta Smolağ and Kinga Stopka



EPIKRIZE

S12.01,S12.1 condition after the bad arch of C1 and C2, 13.12 dislocation C2 vertebra condition after decompression of the cervical spinal canal,, G82 quadriplegia
On the day of admission, the patient breathing
With the help of a ventilator.



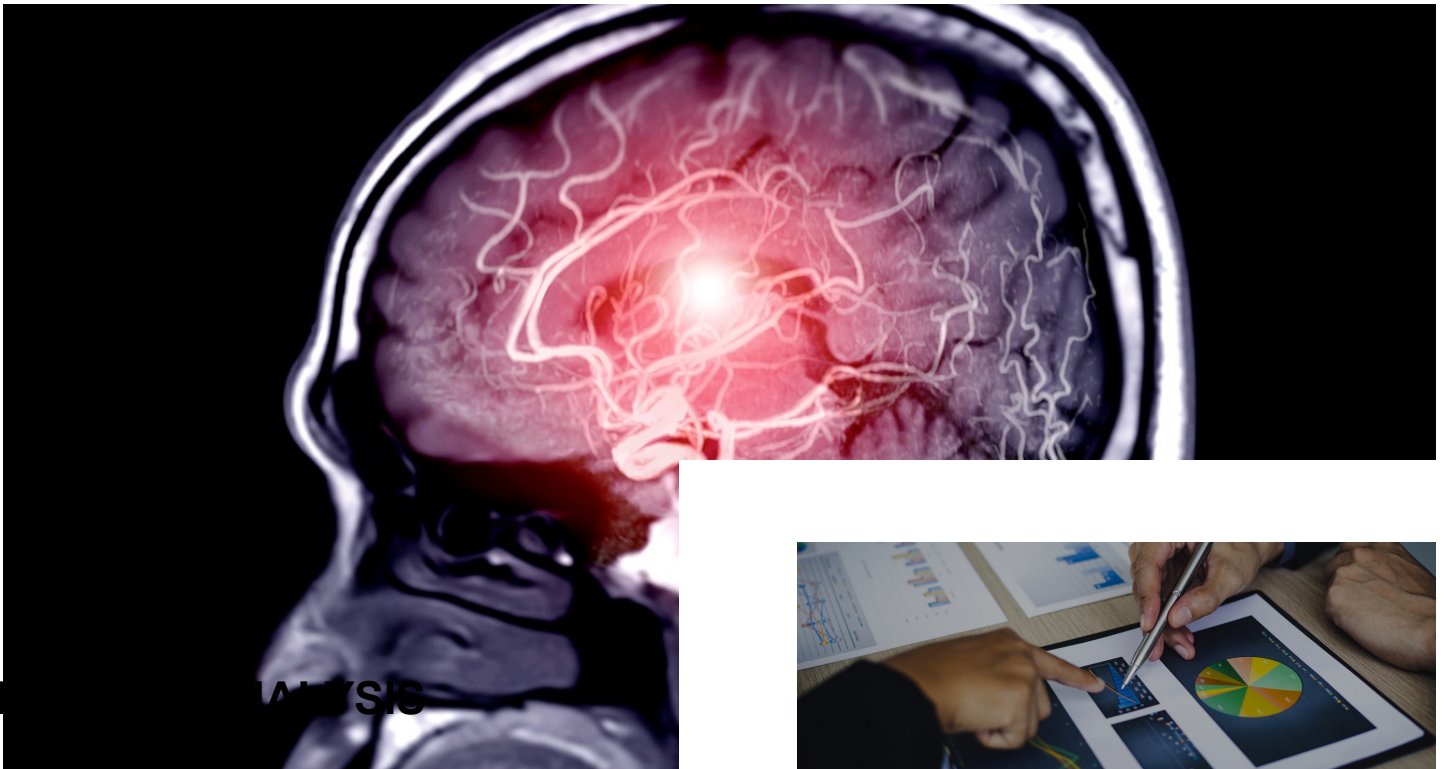
Among other things, the patient benefited from robotic gait re-education using the Reoambulator and exoskeleton.





3. WIOLETTA

Lead therapist Danuta Smolağ



EPICRISIS

I 69.0, I69.1 - Condition after subarachnoid hemorrhage and into the left cerebral hemisphere with puncture into the ventricular system from a ruptured aneurysm of the left middle cerebral artery - condition after craniotomy and clipping of the aneurysm and removal of the intracerebral hematoma on 5.10.2019.

Status after cranioplasty of the left frontal-temporal-parietal region 07/10/2020.

Status after anterior communicating artery aneurysm clipping in 2016.

Status after cervical disc surgery in 2018.

G82., G83. - Profound paresis of the right limbs R47

-Global aphasia.

I10. - History of hypertension.

Condition after a urinary tract infection during hospitalization. Symptom of hemiplegia on the right side.

Condition on the day of admission: on admission, the patient conscious, in eye contact with full aphasia, adapted to a wheelchair, having her own wheelchair; the patient dependent on the caregiver in all activities, paralysis of the right upper limb, paresis of the right lower limb of a large degree, lack of stabilization of the trunk in the vertical position without support .Paresis of the right upper limb , asymmetry of muscle tone L>P, muscle strength kg left 4/5 on the Lovett scale, right - does not generate movement, range of motion kgl full, on the right side, restriction of passive motion in the shoulder joint (abduction, extension above 90 degrees) and elbow joint (up to 90 degrees), tension mm 2 on the Ashworth scale,lkd strength 3/5 on the Lovett scale , range of motion normal, pkd - paresis, restriction of passive mobility of the ankle joint, foot drooping; reduced strength mm. trunk; increased tension of MOS on the left side, symptom of hemiplegia on the right side



Therapy goals:

- Short-term: regulate tension of mm pkg, increase trunk stabilization improve head control and alignment, reduce pathological tension of temporomandibular joint area
- Long-term: ability to maintain an active sitting position without support, gait re-education, increased mobility in the right shoulder joint, gaining grasping function of the right hand, increasing the range of mobility of the temporomandibular joints and changing occlusion conditions to allow for prosthetic oral supplies, increasing independence in performing simple self-care activities (eating meals, simple hygiene activities - washing hands, face, teeth)

Recommended and performed procedures:

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- o Active verticalization 93.2202
- o Exercises using the PNF method 93.3808
- o NDT exercises 93.3807
- o Relaxation exercises 93.1902
- o Gait re-education with assistive device 93.592
- o Laser therapy 93.3940
- o Dynamic Plastering (Kinesiology Taping) 93.3812
- o Muscle electrostimulation 93.3988
- o Physiotherapy treatments - other - myofunctional therapy SSZ 93.3999





ORIGIN
— KRAKÓW —