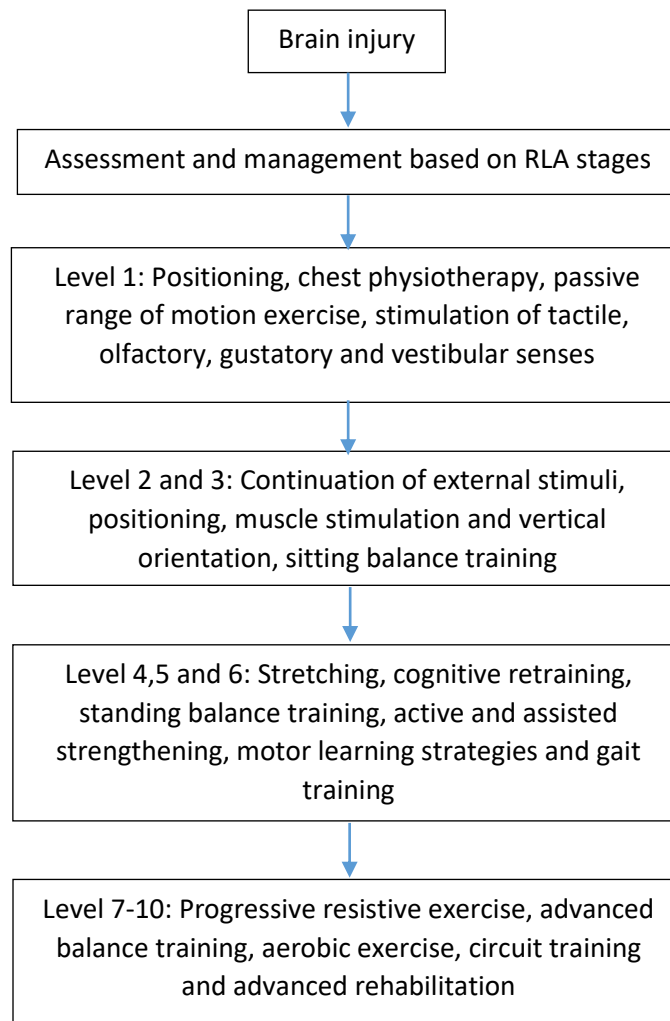


BRAIN INJURY PROTOCOL



Management based on RLA scale

Level I: No Response: Total Assistance

- Presentation of meaningful external stimuli like tactile, visual, olfactory, gustatory, proprioception, vestibular, sound stimuli to improve responsiveness
- Positioning, splinting and stretching to maintain joint, muscle and skin integrity
- Passive range of motion exercises
- Chest physiotherapy

Level II: Generalized Response: Total Assistance

- Continued use of meaningful external stimuli
- Electrical muscle stimulation
- Involvement of family, relatives and friends (familiar people) in therapy
- Positioning, splinting and stretching to maintain joint, muscle and skin integrity
- Vertical orientation in tilt table
- Early mobilisation to sitting position

Level III: Localized Response: Total Assistance

- Continued use of meaningful external stimuli
- Involvement of family, relatives and friends (familiar people) in therapy
- Positioning, splinting and stretching to maintain joint, muscle and skin integrity
- Vertical orientation in tilt table and standing frame
- Sitting balance training

Level IV: Confused/Agitated: Maximal Assistance

- Same as level III
- Therapy should be scheduled during a time of the day when maximal cooperation would be expected out of patient
- The room where patient will be treated should not have unnecessary noise and crowd that may increase patient's agitation
- Splinting and stretching
- Standing in parallel bars
- Assisted walking based on progression
- Therapy should involve simple commands
- Use visual, verbal, tactile cues
- Balance training – static sitting and standing

Level V: Confused, Inappropriate Non-Agitated: Maximal Assistance

- Same as level IV
- Patient should be given simple commands to accomplish familiar, simple tasks (brushing teeth, washing face)
- Use of visual, verbal, tactile cues along with feedback on performance
- Balance training – dynamic
- Progressive strengthening for muscle groups

Level VI: Confused, Appropriate: Moderate Assistance

- Use of visual, verbal, tactile cues and feedbacks
- New tasks should be added to the session in addition to the familiar tasks
- Progressive strengthening
- Gait and balance training

Level VII: Automatic, Appropriate: Minimal Assistance for Daily Living Skills

- Addition of complex tasks in changing environment
- Introduction of obstacles in the environment
- Progressive resistive exercises
- Aerobic training

Level VIII: Purposeful, Appropriate: Stand by Assistance

- Obstacle training with minimal assistance

- Advanced balance and strength training

Level IX: Purposeful, Appropriate: Stand by Assistance on Request

- Obstacle training with minimal assistance
- Advanced balance and strength training
- Circuit training

Level X: Purposeful, Appropriate: Modified Independent

- Advanced rehabilitation