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Maximizing Educational Support and Independence: A Case Study of Bhavesh with a Spinal Cord Injury

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Introduction:

Bhavesh, a 12-year-old student, has normal cognitive function but experiences challenges due to a midthoracic spinal cord injury since the age of 4. Despite his injury, Bhavesh demonstrates independence in mobility using a manual wheelchair within various school environments, including the classroom, hallways, playground, cafeteria, special classes, and curbs. He is transported to and from school on a lift bus and utilizes a stander daily, transferring into and out of it independently. Additionally, Bhavesh participates in physical education class with minimal adaptations, although functional independent ambulation is not feasible given his diagnosis and prognosis.

Qualification for Physical Therapy Services:

Given Bhavesh's independence and performance in the educational environment, the IEP team may not recommend physical therapy as a related service, potentially considering services under a 504 Plan.

Primary Focus of Physical Therapy Intervention under 504 Plan:

Under a Section 504 agreement, physical therapy services for Bhavesh would likely focus on emergency evacuations, assistance with and access to catheterization, utilization of the stander, and adaptations for physical education class.

Model of Service Delivery:

Physical therapy services for Bhavesh would involve monitoring by the physical therapist to ensure proper fit of his stander and wheelchair, maximal participation in physical education class, addressing questions or concerns of the PE teacher, and compliance with emergency evacuation procedures.

Additional Outpatient Services:

Bhavesh may receive outpatient physical therapy services to intensify interventions for specific functional skills or post-medical interventions. This may include neuromuscular electrical stimulation for leg strength maintenance and development of a comprehensive home program to prevent contractures.

Changing Focus of Services:

As Bhavesh progresses through middle and high school, transition planning becomes crucial, focusing on vocational interests, physical abilities, potential living arrangements, community agency involvement, and recreational options to facilitate his transition to adulthood.

Case Description:

A 12-year-old student named Bhavesh has normal cognitive function and a midthoracic spinal cord injury (since 4 years of age). He is independent with mobility using a manual wheelchair throughout the school environment: the classroom, hallways, playground, cafeteria, special classes, and curbs. Bhavesh is transported to/from school on a lift bus. Bhavesh has a stander that he uses on a daily basis at school and he transfers into/out of the stander independently. Bhavesh participates in physical education class with minimal adaptations.

Given his diagnosis and prognosis, Bhavesh is not a candidate for functional independent ambulation. • Would Bhavesh likely qualify for physical therapy services? Since Bhavesh's disability does not affect his independence and performance in the educational environment, the IEP team may not recommend physical therapy as a related service. Bhavesh may receive services under a 504 Plan. • What would likely be the primary focus of physical therapy intervention for Bhavesh under the 504 Plan agreement? The focus of the services under the Section 504 agreement would likely be to address emergency evacuations, assistance with and access to catheterization, use of the stander, and adaptations for physical education class. • What model of service delivery would be utilized? Bhavesh would likely be monitored by the physical therapist to ensure that his stander and wheelchair are properly fitted, he continues to participate to the maximum extent possible in his physical education class, to address any questions or concerns of the PE teacher,

and to ensure that Bhavesh complies with emergency evacuation procedures. • Do you expect that Bhavesh would receive additional physical therapy services on an outpatient basis (i.e., outside the educational environment)? If so, what would be the primary focus of Bhavesh's outpatient services? Outpatient services for Bhavesh might be recommended to intensify intervention when working on a particular functional skill or following a medical intervention. For example, Bhavesh might benefit from a neuromuscular electrical stimulation program established and monitored on an outpatient basis to maintain leg strength. The outpatient physical therapist might also assume a more active role in developing and monitoring a comprehensive home program for prevention of contractures that would involve adaptive equipment for the home environment and night splinting81. Regardless of the circumstances, Bhavesh's parents, physician, and therapists should all work collaboratively to comprehensively address his needs. • How might the focus of Bhavesh's services change as he progresses through middle school and high school? As Bhavesh approaches middle school and high school, planning for the school-to-adulthood transition will play a larger role in his educational programming. Exploring Bhavesh's vocational interests and linking them to his physical abilities will become increasingly important. Investigating potential living arrangements, identifying community agencies, and examining recreational options should be addressed via transition planning.

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