Helping the brain and body get back in sync: Jorden and IM-Home

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&
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“Jorden” is a 13 year-old boy who was born with agenesis of the Corpus Callosum, Lissencephaly, seizures, CP, developmental delays and Cortical Blindness. He has been receiving services for Occupational Therapy (OT) at the Shandy Clinic several years ago. Jorden receives Speech Therapy and Physical Therapy in his home and within the school district. Jorden enjoys going to school and is in a full day school program with an IEP for his educational needs. At his initial OT evaluation, Jorden was dependent and needed “max assist” with all basic Activities of Daily Living Skills (ADL’s), and was very neglectful of Right Upper Extremity.

Jorden started using IM Home approximately 7 months ago. Before he started the full program at home, Stephen Bigler, his COTA at the Shandy Clinic, began training him with a metronome beat during clinic sessions. Jorden required some hand over hand assist to clap with a tempo of 54 beats per minute, but caught on very quickly with simple clapping tasks.

Home programming included having Jorden listen to a Metronome Beat during wakeful hours to get used to the idea of a tempo. When Jorden received his IM Home unit, Stephen did some training with mom during Jorden’s OT sessions so that she was comfortable with the set up and use of the unit. Jorden’s IM Home program recommendations included training 2-3 times per week, including within his weekly OT sessions with Stephen. In a short period of time, Jorden has averaged below 100 ms on both Short Form Assessments, and is doing well with both the upper and lower extremity exercises.

Mom has noticed big changes in Jorden at home in every day life as well.

He is becoming more independent in ADL tasks, with better coordination of both sets of limbs and is being more spontaneous with his speech as well. Jorden is now deciding independently between two different choices of meals. He has gained much better use of his right arm and has increased his bilateral coordination with dressing tasks. Stephen has now started to have Jorden try to use what vision he has to clap along with beat using the visual and some tactile cues. Jorden initially demonstrated some difficulty with task, but ms timing averages are steadily improving. Both Stephen and Mom are hopeful that within the next 6 months Jorden with increase his ADL independence to caregiver “minimal assist” and better adaption to dressing skills overall.

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