

McLAREN OAKLAND OUTPATIENT REHABILITATION LOCATIONS

McLaren Clarkston

Physical Therapy & Lymphedema

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Pontiac

Occupational & Speech Therapy

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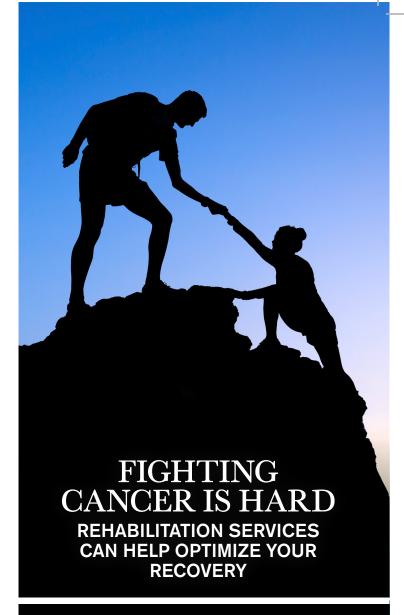
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MO-403 (12.19)





COMMON CONCERNS AND HOW THERAPY CAN HELP

As a cancer patient and survivor, you can have a positive impact on many concerns you may experience now and in the future. Physical, Occupational, and Speech Therapy can help you prevent, manage, and improve the common concerns listed below:

Weakness/Loss of Function – Restore function through strengthening exercises

Fatigue – Improve overall energy levels through exercise

Swelling/Lymphedema – Prevent and/or reduce swelling through manual techniques and compression

Loss of Balance/Falls – Balance and coordination exercises to improve stability and sensory awareness and reduce risk of falls

Decreased Flexibility – Loosen connective tissue, stiff joints, and tight muscles through stretching and manual techniques

Scar Tissue/Cording – Manual therapy techniques and stretching can improve scar mobility leading to improvement in functional movement

Incontinence – Pelvic floor muscles can be strengthened with exercise and manual techniques

Vaginal Tightness (with or without pain) – Pelvic floor muscles can be stretched through exercise with instruction in relaxation and behavior modification

Shortness of Breath/Decreased endurance – Graded aerobic exercises can be performed to improve endurance

Changes in Posture – Strength and weight bearing exercises can help build or maintain bone density and reduce risk of bone injury

Numbness/Tingling – Balance and coordination exercises improve stability and sensory awareness while reducing risk of falls

Difficulty opening mouth or moving head/ neck – Tight jaw and neck muscles can be elongated through manual techniques and exercise to restore function

ONCOLOGY FUNCTIONAL ASSESSMENT QUESTIONNAIRE

1.	My lifestyle before cancer diagnosis ☐ Active ☐ Sedentary	14.	I have difficulty dressing/undressing myself ☐ Yes ☐ No
2.	My lifestyle since cancer diagnosis ☐ Active ☐ Sedentary	15.	I have difficulty taking care of my own appearance (comb hair or shave) ☐ Yes ☐ No I have difficulty bathing or showering ☐ Yes ☐ No
3.	I have difficulty performing household chores as able prior to cancer diagnosis Yes No	16.	
4.	I have difficulty performing my job as I did prior to cancer diagnosis	17.	I have difficulty getting in/out of bed ☐ Yes ☐ No
5.	☐ Yes ☐ No I have difficulty exercising for at least 30 minutes, 5 times/week	18.	I have difficulty getting in/out of a chair or on/off the toilet ☐ Yes ☐ No
6.	☐ Yes ☐ No I have difficulty shopping for groceries/clothes (assuming transportation is available)	19.	The quality of my sleep is different from prior to cancer diagnosis ☐ Yes ☐ No
7. 8.	☐ Yes ☐ No I have difficulty driving a car ☐ Yes ☐ No I have difficulty or shortness of breath climbing	20.	Do you experience a persistent sense of tiredness that is not proportional to activity level, interferes with usual function, and is not relieved by rest?
9.	a flight of stairs at a normal pace ☐ Yes ☐ No I have difficulty lifting and carrying groceries	21.	☐ Yes ☐ No Do you experience problems with incontinence? ☐ Yes ☐ No
10.	☐ Yes ☐ No I have difficulty walking ☐ Yes ☐ No	22.	Do you experience a heavy sensation in your arm or leg; tight fitting clothes or jewelry or shoes? Tes In No
11.	I have difficulty preparing my own meals ☐ Yes ☐ No		
	I have difficulty feeding myself ☐ Yes ☐ No	23.	Do you have any swelling in your arm, leg, trunk, head, neck or genital areas? ☐ Yes ☐ No
13.	I have difficulty swallowing		

If you answered "yes" to any of these questions, you may be a candidate for therapy services. You can use this questionnaire to help guide your discussion with your health care provider.

If you have any questions about how therapy can help you get your life back,

call McLaren Clarkston Physical Therapy at (248) 922-6820.

☐ Yes ☐ No