

# 노인 재활

## Rehabilitation of the Geriatric Patients

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### Abstract

Aging, an integral part of living, is typically accompanied by gradual but progressive physiologic changes and an increased susceptibility to various acute and chronic illnesses. The roles of geriatric rehabilitation should include, accordingly, not only the intervention to reverse disability caused by specific diseases or injuries, but also the contribution to preventive gerontology by virtue of promoting structured programs for physical fitness and early rehabilitation for common musculoskeletal disorders to avoid progression to disability. The demographic changes occurring in Korea transcend the capabilities of any specific medical specialty to provide optimum care for the elderly. Determination of an appropriate goal is critical to the success of rehabilitation program for the elderly and should be based on a careful assessment of current functional capacities and limitations of the patient. Physicians with various specialties can provide differing perspectives on their respective roles in geriatrics. Physiatrist can play a variety of roles related to geriatrics by comprehensive team approach. Contributions of rehabilitation to elderly patients include functional assessment (including the evaluation of underlying impairments contributing to disability) based on realistic goals, interdisciplinary team care, and efficacious adjustment of therapeutic interventions.

**Keywords :** Geriatrics; Geriatric rehabilitation; Aging; Rehabilitation

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<p>Ascertain level of function(functional assessment)</p> <p>Ascertain available resources and options</p> <p>Avoid immobilization</p> <p>Be aware of altered physiological reactions</p> <p>Determine patient's significant goals, motivation</p> <p>Determine family expectations(psychological issues)</p> <p>Emphasize function; management not diagnosis; cure</p> <p>Emphasize task - specific exercise; simplify program</p> <p>Encourage socialization and stimulation</p> <p>Minimize medications</p> <p>Realize that function may not be regained</p> <p>Recognize that patients have multiple interacting impairments</p> <p>Understand that improvement occurs in slow increments</p>	<p>Physiatrist(as a team leader)</p> <p>Physical therapist</p> <p>Occupational therapist</p> <p>Speech therapist</p> <p>Rehabilitation Nurse</p> <p>Clinical psychologist</p> <p>Social worker</p> <p>Vocational Counselor</p> <p>Prosthetist / Orthotist</p> <p>Recreation therapist</p> <p>Dance / Music therapist</p>

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Katz ADL index, Functional independence measure(FIM) instrument,

Up and Go test, Berg Balance test(BBS),

가 Mini - Mental Status Examination(MMSE),

Geriatric depression scale(GDS), The Domain Management Model

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